



Sr. No.: / 10242

अन्तर्राष्ट्रीय जनसंख्या विज्ञान संस्थान

(विश्वविद्यालय समतुल्य)*

आराम्य एवं हरिवार कल्याण संस्थान, भारत सरकार का स्वायत्त संगठन
गोवर्दी स्टेशन रोड, देणार, मुंबई - ४०० ०८८, भारत

(स्थापना / Established in 1956)

बेहतर भविष्य के लिए क्षमता निर्माण
Capacity Building for a Better Future

International Institute for Population Sciences (Deemed University)*

An Autonomous Organisation of Ministry of Health & Family Welfare, Govt. of India
Govardi Station Road, Deonar, Mumbai - 400 088, INDIA

Minutes of the meeting of the Internal Quality Assurance Cell (IQAC) of the Institute held on
Wednesday, February 01, 2023.

A meeting of the Internal Quality Assurance Cell (IQAC) of the Institute was held on **Wednesday, February 01, 2023 at 10.30 am** in the Seminar Hall of the Institute. The following members were present:

1	Prof. K.S. James	Chairperson
3	Prof. R. Nagarajan	Member
4	Dr. Harihar Sahoo	Member
5	Dr. T.R. Dilip	Member
6	Dr. Manas Pradhan	Member
7	Dr. Kaushalendra Kumar	Member
8	Dr. Preeti Dhillon	Member
9	Dr. Prashant Borde	Member
11	Mr. Sudarshan Bhadra	Member
12	Mr. Anjani Mishra	Member
13	Dr. Praveen Kumar	Member
14	Prof. Anil Kumar	Member
15	Mr. Priyajit Samaiyar	Member
16	Mr. Mayur Tanaji Narute	Member
17	Prof. Nandita Saikia	Co-ordinator

Prof. S.K. Singh and Mr. Aniket Chattopadhyay could not attend the meeting due to their prior engagement.

Prof. K.S. James, Director & Senior Professor welcomed all the members of the IQAC. As this is the first meeting after the completion of the tenure of the members of the first IQAC and the accreditation of IIPS by NAAC, Prof. James thanked all the outgoing members of the IQAC for their contribution to IQAC and in obtaining the NAAC accreditation to IIPS.

Agenda Item No. 1: Confirmation of the minutes of the meeting of the IQAC held on September 12, 2020.

The members of the IQAC confirmed the minutes of the previous meeting of the IQAC held on December 16, 2021 as circulated with the agenda papers.

Agenda Item No. 2: Presentation of Action Taken Report (ATR) on the minutes of the IQAC meeting held on September 12, 2020.

Prof. Nagarajan presented the Action Taken Report of the IQAC meeting held on December 16, 2021 and the members of the IQAC noted the ATR as circulated with the agenda papers.

Agenda Item No. 3: To note the Accreditation of IIPS by NAAC with A Grade.

Prof. Nagarajan explained to the members about the process followed by NAAC for assessment and accreditation and the role played by the IQAC for obtaining the accreditation to IIPS. The NAAC Peer Team visited the Institute during 02-04 February 2022. It assessed the Institute under seven major quality domains and interacted with all the stakeholders of the Institute (Members of the Executive Council, Director, IQAC, faculty, students, staff and alumni) to get their assessment and feedback about the Institute. Based on the SSR, DVV process and report of the Peer Team, the NAAC accredited the Institute with "A Grade" for the period 2022-2027. IQAC contributed for accreditation by (a) compiling the data for Self-Study Report (SSR) from all the stakeholders of the Institute, (b) uploading the data in NAAC portal; (c) completing the DVV process, and (d) coordinating the visit of NAAC Peer Team to the Institute. The new members of the IQAC appreciated the efforts of the IQAC and the authorities of the Institute for obtaining the NAAC accreditation to the Institute.

Agenda Item 4: To consider the strength and weaknesses of IIPS identified by the NAAC Peer Team.

The members of the IQAC deliberated the weaknesses identified by NAAC Peer Team in detail. The Director & Senior professor has explained to the members about the following steps taken jointly by the Institute and Ministry of Health and Family Welfare (Government of India) to overcome the weaknesses identified by NAAC: purchase of additional land for the Institute outside the Mumbai city; getting the sanction for 13 new faculty position from the Ministry; introduction of one new PG course and one new UG course; obtaining the feed-back on curriculum from students, faculty, alumni and employers; introduction of IT integration (ERP system) from admission to announcement of results.

Agenda Item 5: To note the Committees constituted by the Director for sustaining and improving the various quality measures as per the NAAC requirement.

The members of the IQAC noted the following committees constituted by the Director & Senior Professor towards the quality improvement in restructuring the syllabus, revision of syllabus, preparation of examination manual, and extension activities for the students: (a) Syllabus Restructuring Committee; (b) Extension Activities Committee; (c) Examination Manual Committee; (d) MPS Syllabus Revision Committee; (e) MA/MSc Syllabus Revision Committee; and (f) MBD Syllabus Revision Committee. These committees are expected to submit their report soon and the same will be placed in the forthcoming meeting of the Academic Council (April/May 2023) for its consideration and approval.

Agenda Item 6: To note the quality measures approved by the Academic Council in its meeting dated December 09, 2022.

The members of the IQAC noted the following quality measures approved by the Academic Council in its meeting dated Dec. 09, 2022

- (a) Introduction of four **new Optional Courses** from the Academic Year 2023-24 (NAAC Indicator 1.2.1)
- (b) Introduction of **Value-Added Courses** from the Academic Year 2023-24 (NAAC Indicator 1.3.2 & 1.3.3)

- (c) Introduction of **mandatory Internship** in the curriculum from the Academic Year 2023-24 (NAAC Indicator 1.3.4)
- (d) Strengthening the special **programmes for advanced learners and slow learners** from the Academic Year 2023-24 (NAAC Indicator 2.2.1)
- (e) Adoption of **student centric methods** (experiential learning, participative learning and problem-solving methodologies) for enhancing learning experiences from the academic year 2023-24 (NAAC Indicator 2.3.1).
- (f) Measures to be adopted for **Career Counselling Guidance** for competitive examination (NAAC Indicator 5.1.2)
- (g) **Adoption** of the Programme Outcomes (POs), Programme Specific Outcomes (PSOs) and Course Outcomes in the syllabus of all the masters programmes (NAAC Indicator 1.1.1 & 2.6.1)
- (h) Measures for **evaluating the attainment** of Programme Outcomes (POs) and Programme Specific Outcomes (PSOs) (NAAC Indicator 2.6.2)
- (i) **Extension activities** to be carried out in the neighbourhood community to sensitise the students to social issues and holistic development annually (NAAC Indicator 3.6.1)
- (j) **Extension and outreach programs** to be conducted by the Institute annually (NAAC Indicator 3.6.3)
- (k) Introduction students to **Field Projects/Research Projects** (NAAC Indicator 1.3.4)

Agenda item 7: To consider the quality measures to be initiated by the Institute in the Academic Year 2022-23.

The members of the IQAC noted the following initiatives taken by the Director & Senior Professor towards the quality improvement during the year 2022-23 as per the requirement of NAAC:

- (a) Revision of syllabus of all the masters programmes during the Academic Year 2022-23. Director & Senior Professor has constituted three different Committees for the preparation of revised syllabus. All the teachers of the Institute are involved in the revision of the syllabus. (NAAC Indicator 1.1.2)
- (b) Collection of feedback for design and review of syllabus from teachers, employers and alumni (NAAC Indicator 1.4.1)
- (c) Further reduction in number of days from the date of last semester-end/year-end examination till the declaration of results from the Academic Year 2022-23 (NAAC Indicator 2.5.1)
- (d) Introduction of ERP System from the Academic Year 2022-23 [IT integration and reforms in the examination procedures and processes (continuous internal assessment and end semester assessment) from admission of a student to the announcement of final results (NAAC Indicator 2.5.3)]
- (e) Completion of Examination Manual: Director & Senior Professor has already constituted a committee for the preparation of the Examination Manual. The manual will be placed before the Academic Council in its forthcoming meeting. (NAAC Indicator 2.5.4)

Agenda Item 8: To consider the quality measures to be adopted/strengthened by the Institute in line with the NAAC Indicators.

The members of the IQAC deliberated the following quality measures to be adopted / strengthened by the Institute in future in line with the NAAC requirements: (a) providing incentives to teachers who receive state, national and international recognitions/awards; (b) developing E-content for the students by the teachers; (c) expanding the extension activities for the students; (d) maintaining the footfalls and login data of library users; (e) tracking the progression of students in terms of their placement and higher studies; (f) engaging the alumni continuously in

academic activities of the Institute; (g) organising the professional development / administrative training programmes for faculty and staff; and (h) undertaking environment and energy audits in the Institute.

The members of the IQAC deliberated these issues in detail and noted the various suggestions given by the members. IQAC Co-ordinator was requested to take up the matters one by one with the Director & Sr. Professor and the Chief Administrative Officer-cum-Registrar for introducing the above measures in due course of time.

Agenda item 9: To note the AQAR submitted by the Institute to NAAC for the year 2021-22.

The members of the IQAC noted the AQAR (Annual Quality Assurance Report) submitted by the Institute to NAAC for the year academic year 2021-22. The NAAC Co-ordinator thanked the administration, faculty and staff and IQAC members for the support extended by them for the submission of the AQAR on NAAC portal without delay. IQAC co-ordinator also extended her special thanks Ms. Lavina Tauro and Mr. Amol Hase for compiling and uploading the data for AQAR.

Agenda item 10: To consider the results of the Student Satisfaction Survey 2021-22.

Prof. Nagarajan presented the results of the Student Satisfaction Survey (SSS). He explained that the SSS covered the following domains to assess their satisfaction levels: (a) curriculum and coverage of syllabus; (b) teachers' method and approach of teaching and internal evaluation process; (c) exposure and opportunities provided by the institute; (d) exposure to soft skills, life skills and employability skills; (e) student centric methods of learning, extracurricular activities and use of ICT in teaching; and (f) overall satisfaction about teaching-learning process. The members of IQAC noted the higher levels of satisfaction among MPS, MBD and Pre-PhD students compared to the MA/MSc students. The members of the IQAC suggested that the institute should take special initiatives to improve the satisfaction levels among the MA/MSc students by discussing the issue in faculty meeting.

Agenda Item 11: To consider the results of the Students' Feedback on Curriculum 2021-22.

With respect to students' feedback on curriculum, the members of IQAC noted that the majority of the students in all the programmes (MPS, MBD, MA/MSc & pre-PhD) were either strongly agreed or agreed on various aspects of curriculum, learning outcomes, prospects for employability, and various facilities in the Institute. However, it is also noted that the satisfaction level among MA/MSc students is observed to be relatively lower when compared with the students from MPS, MBD and Pre-PhD. The members of the IQAC suggested to discuss the issue with the faculty of the Institute to take the remedial measures to improve the satisfaction level among the MA/MSc students.

Agenda Item 12: To consider the Institutional Preparedness for National Educational Policy 2020.

The members of the IQAC deliberated the following aspects of the Institutional preparedness for NEP 2020: multidisciplinary/interdisciplinary approach, academic bank of credits (ABC), skill development, integration of Indian knowledge system, outcome-based education (OBE), and distance/online education. In this connection, the various steps taken by the Institute on the above issues were informed to the members of IQAC as given below:

Multidisciplinary/interdisciplinary approach: Prof. James (Director and Senior Processor) informed the members about the multidisciplinary approach suggested by the Committee constituted by the MoHEFW for implementing the NEP-2020 at IIPS. He informed that the Executive Council (EC) of IIPS in

its meeting held on January, 20, 2021 constituted a Committee to study the Short, Medium and Long-term implications of NEP-2020 on IIPS. The Committee submitted its report which was accepted by the EC. One of the recommendations is to make the institute a multidisciplinary/interdisciplinary university within the field of population and public health. The NEP Committee recommended the vision plan to transform IIPS into multidisciplinary institution starting from the academic session 2024-25 to 2029-30. The recommendations of IIPS-NEP Committee in this regard are given below: (a) curricula of teaching programmes are renewed to enable IIPS to become a multidisciplinary university which would enable a student to study one or more specialised areas of interest at a deep level while developing capabilities across a range of disciplines; (b) facilities and faculty are put in place for introducing multidisciplinary undergraduate and post-graduate education; (c) undergraduate programmes of 3 or 4-year duration, with possible exit options after each year of study, with appropriate certification, are introduced; and (d) opportunities for multidisciplinary work, including in academia, government, and research institutions, are provided to the students in Master's and doctoral programmes, while pursuing rigorous research-based specialisation.

ABC: With respect to ABC, Mr. Sudarshan Bhadra (Assistant Registrar, Academics) informed that the Institute has already completed the registration for ABC and most of our students are already registered in it.

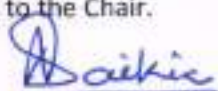
OBE: Prof. Nagarajan informed about the approval of the Academic Council in its meeting dated 09.12.2022 for Programme Outcomes (POs), Programme Specific Outcomes (PSOs), Course Outcomes (COs) and the strategies to evaluate the outcomes for the all the programmes offered in the Institute.

Skill Development: Prof. Nandita Saikia (IQAC Co-ordinator) informed the members that the Academic Council in its meeting dated 09.12.2022 approved the following measures towards the skill development of the students starting from the academic year 2023-24: (a) introduction of seven value added courses; (b) mandatory internship for the students; (c) career counselling guidance at the Institute; (d) extension activities in the neighbourhood communities; and (e) introduction of students to field projects/research projects.

Distance/online education: Prof. Nandita Saikia (Director, Centre for Distance and Online Education) informed the members about the steps taken by the Institute for obtaining the permission from the Distance Education Board of the UGC for continuing the distance education programme of the Institute. She informed that the Institute has completed all requirement for obtaining the permission from UGC and Institute may get its approval shortly.

With respect to integration of **Indian knowledge system** (teaching in Indian language) into the curriculum, Prof. Nandita Saikia informed that IQAC will identify the courses where the teaching in Indian language may be introduced from the next academic year. Members of IQAC suggested that the matter may be discussed in the teachers meeting to identify the courses and teachers for the same.

The meeting ended with a vote of thanks to the Chair.



(Prof. Nandita Saikia)
IQAC Co-ordinator



(Prof. K.S. James)
Director & Senior Professor

International Institute for Population Sciences

Students' Feedback on Curriculum

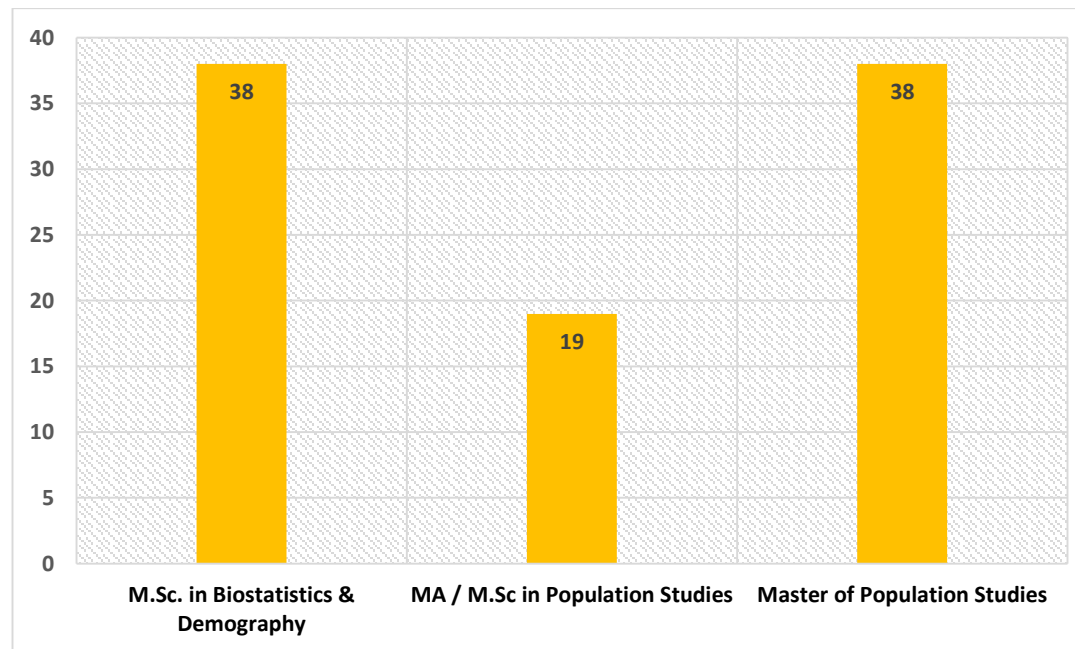
2022-23



Introduction

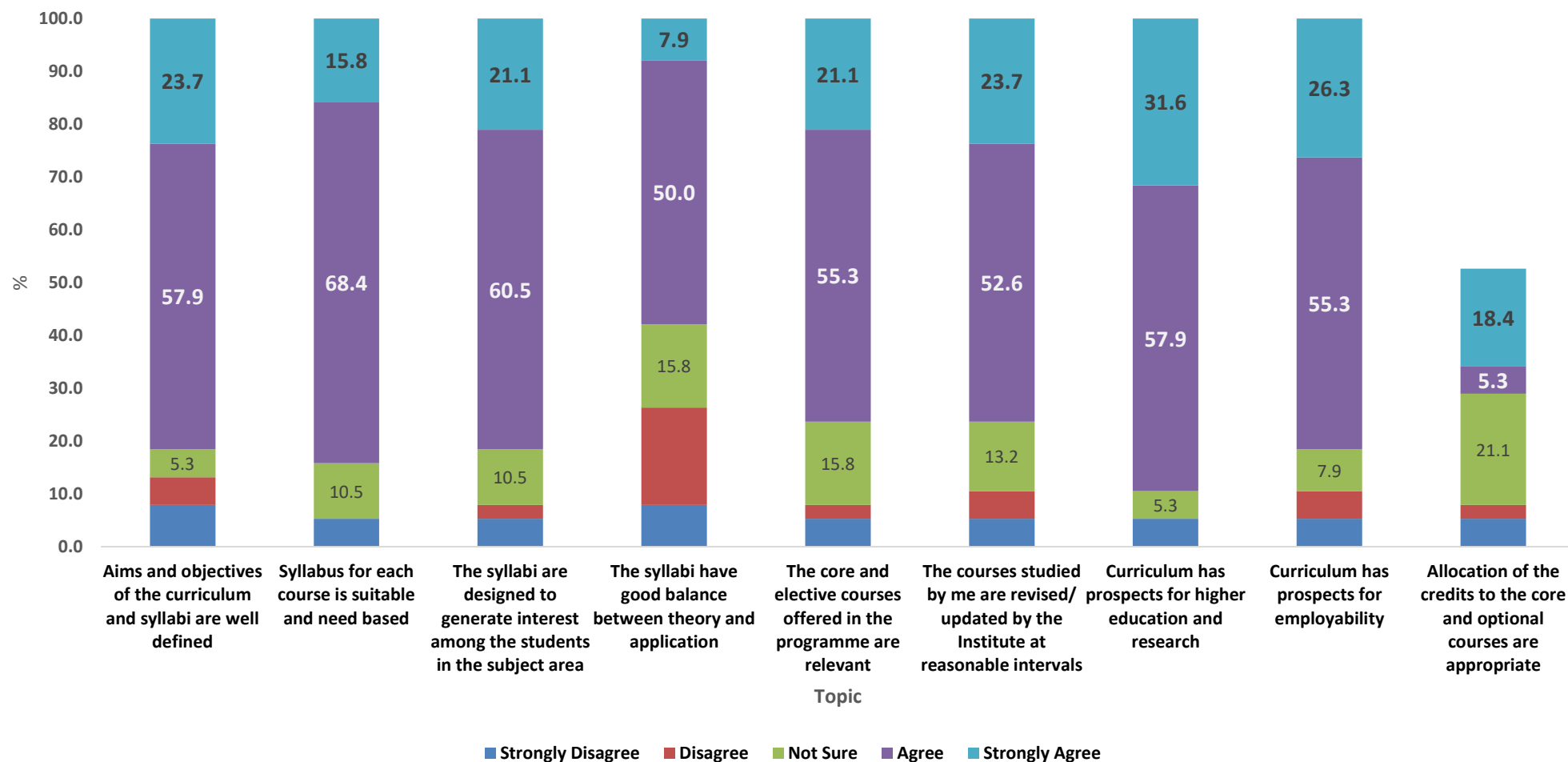
International Institute for Population Sciences, Mumbai has collected students' feedback on curriculum of Master of Population Studies (MPS), M.A./M.Sc in Population Studies and M.Sc. in Bio-statistics & Demography (MBD) course work. Students' feedback was collected in the months of April and May 2023. The questionnaire was administered online using google form. All the outgoing/graduating students during 2022-23 were emailed the feedback questionnaire. In total 105 students responded to the survey. The major components of the feedback were relating to:

- ☐ Feedback on curriculum
- ☐ Learning Outcomes
- ☐ Learning Assessment
- ☐ Overall rating of the programme and various facilities



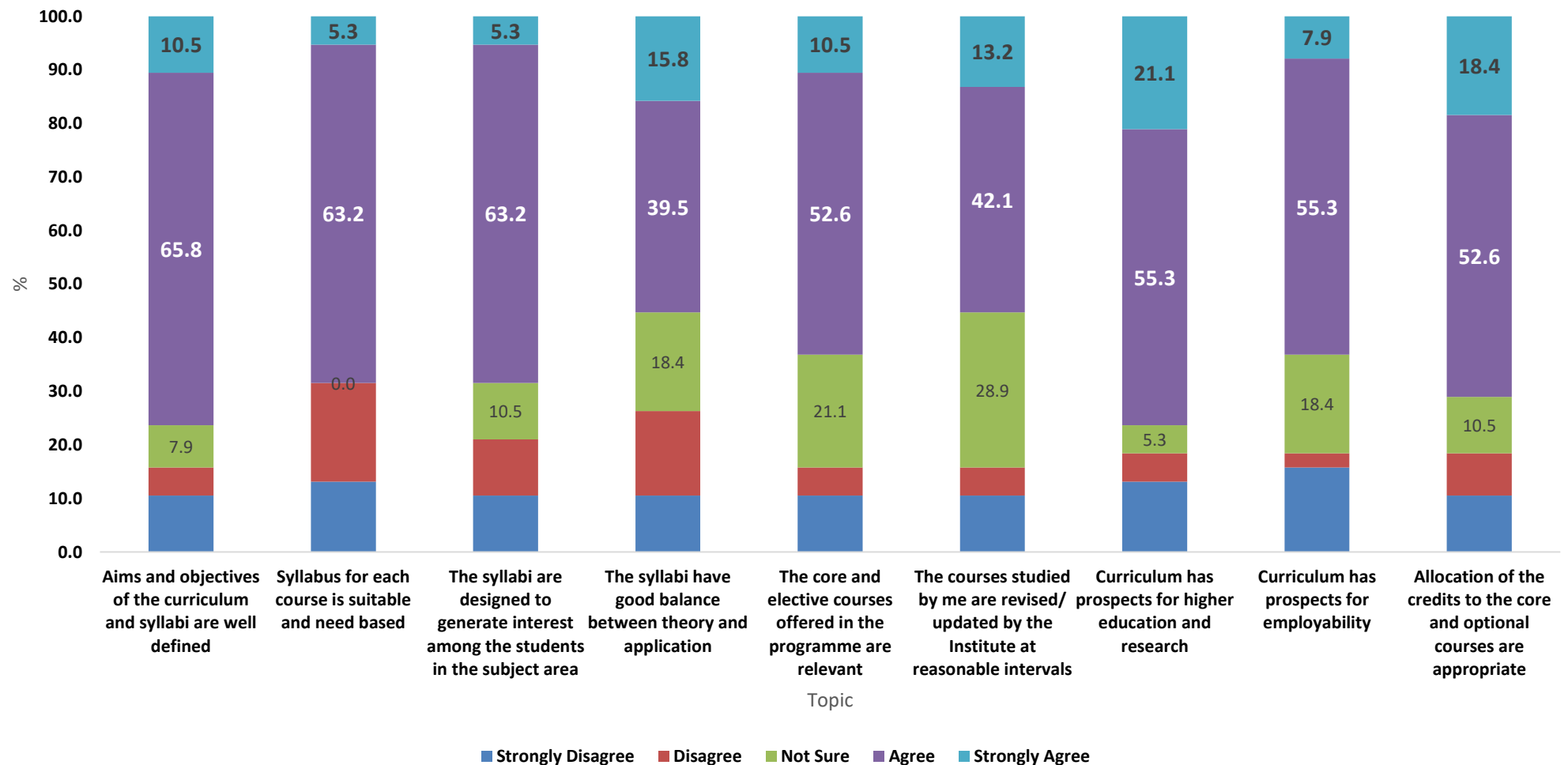
Number of students who responded to the feedback

Students' Feedback on Curriculum: MPS



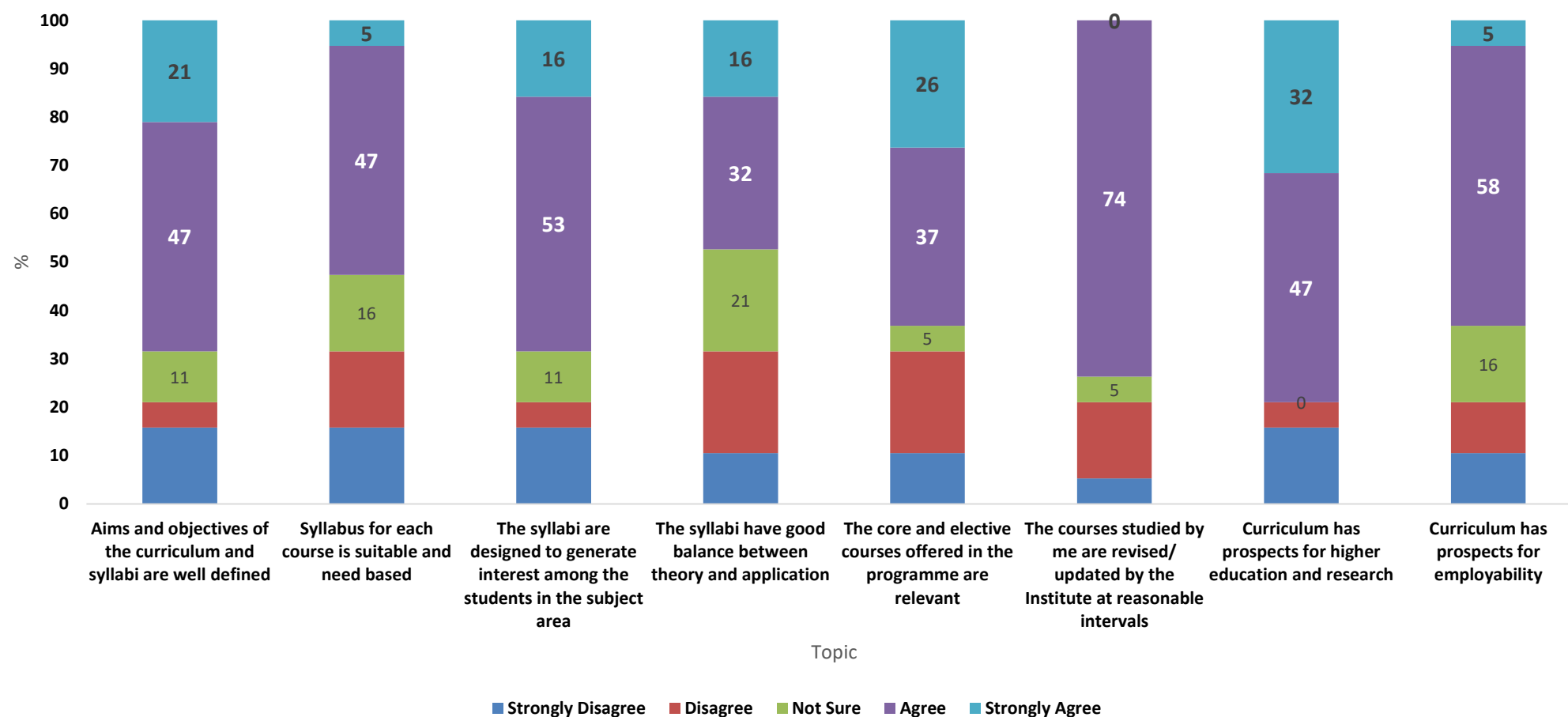
Almost more than 70% of the MPS students either agreed or strongly agreed that the various parameters of the curriculum fulfill the necessary criteria along with prospects for the employability.

Students' Feedback on Curriculum: MBD

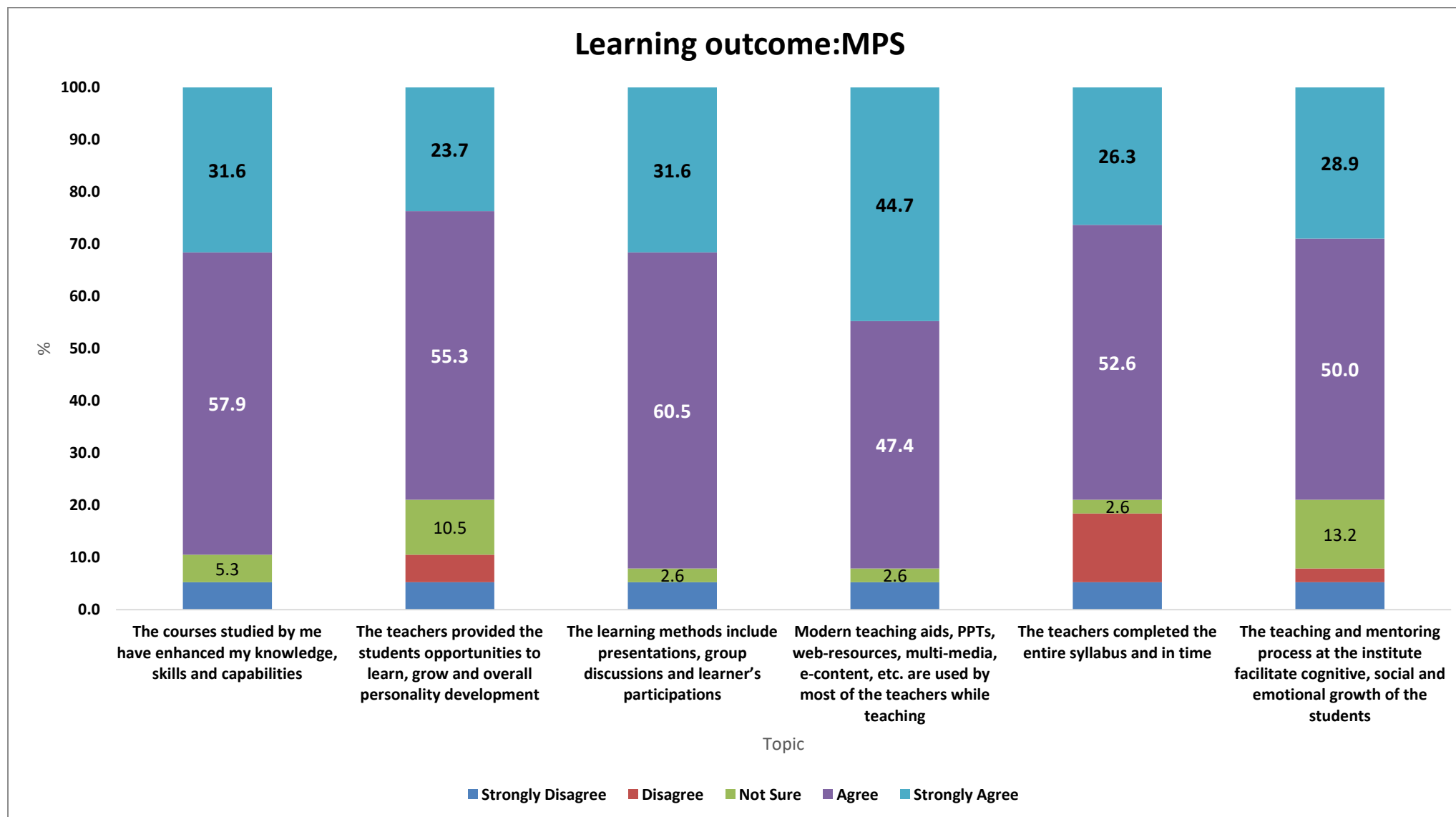


Approximately 60-70% of the MBD students agreed or strongly agreed to the various parameters of the curriculum while more than 40% of the students agreed or strongly agreed that the curriculum has the prospects for the employability.

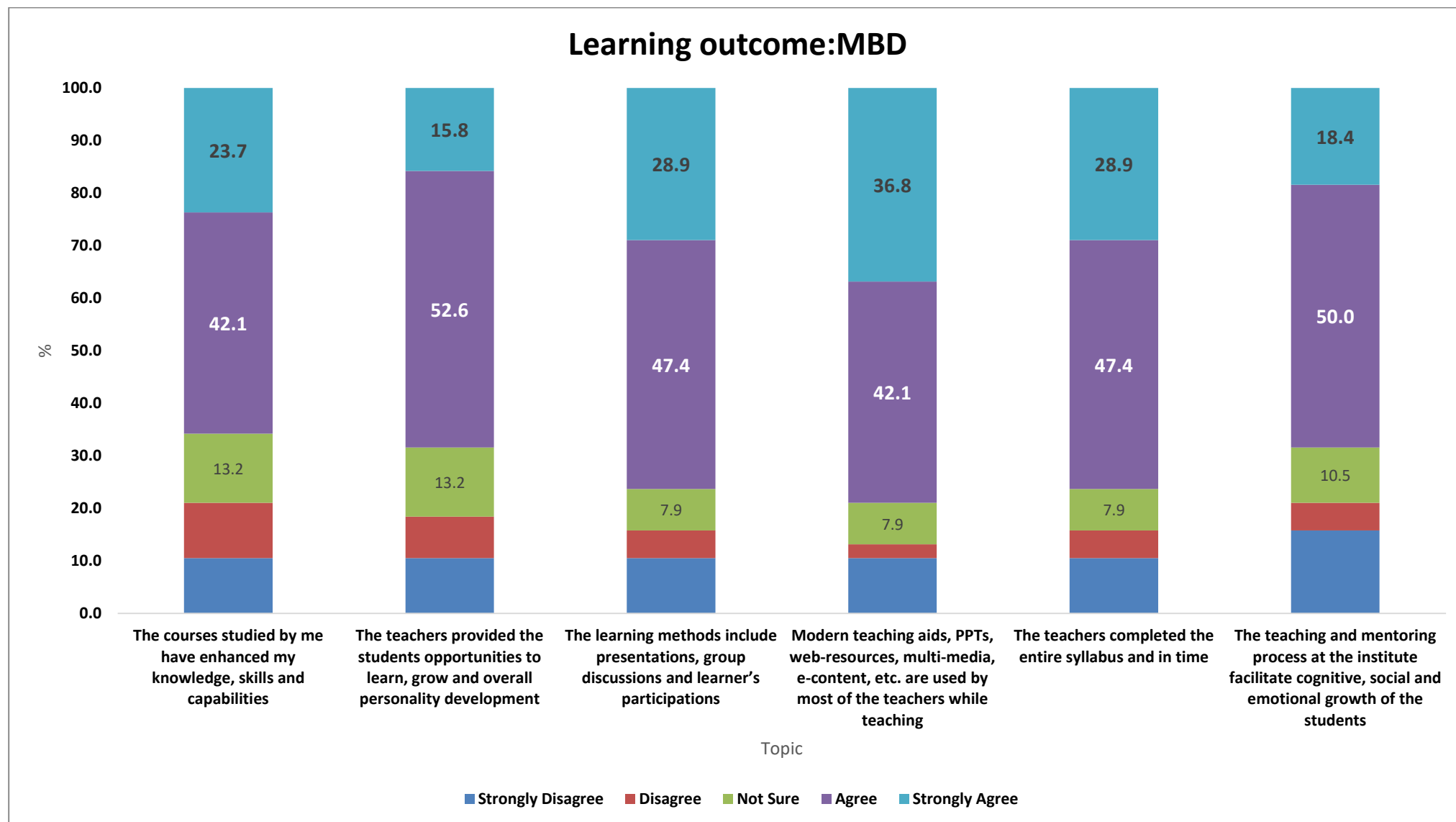
Students' Feedback on Curriculum: MA/MSC



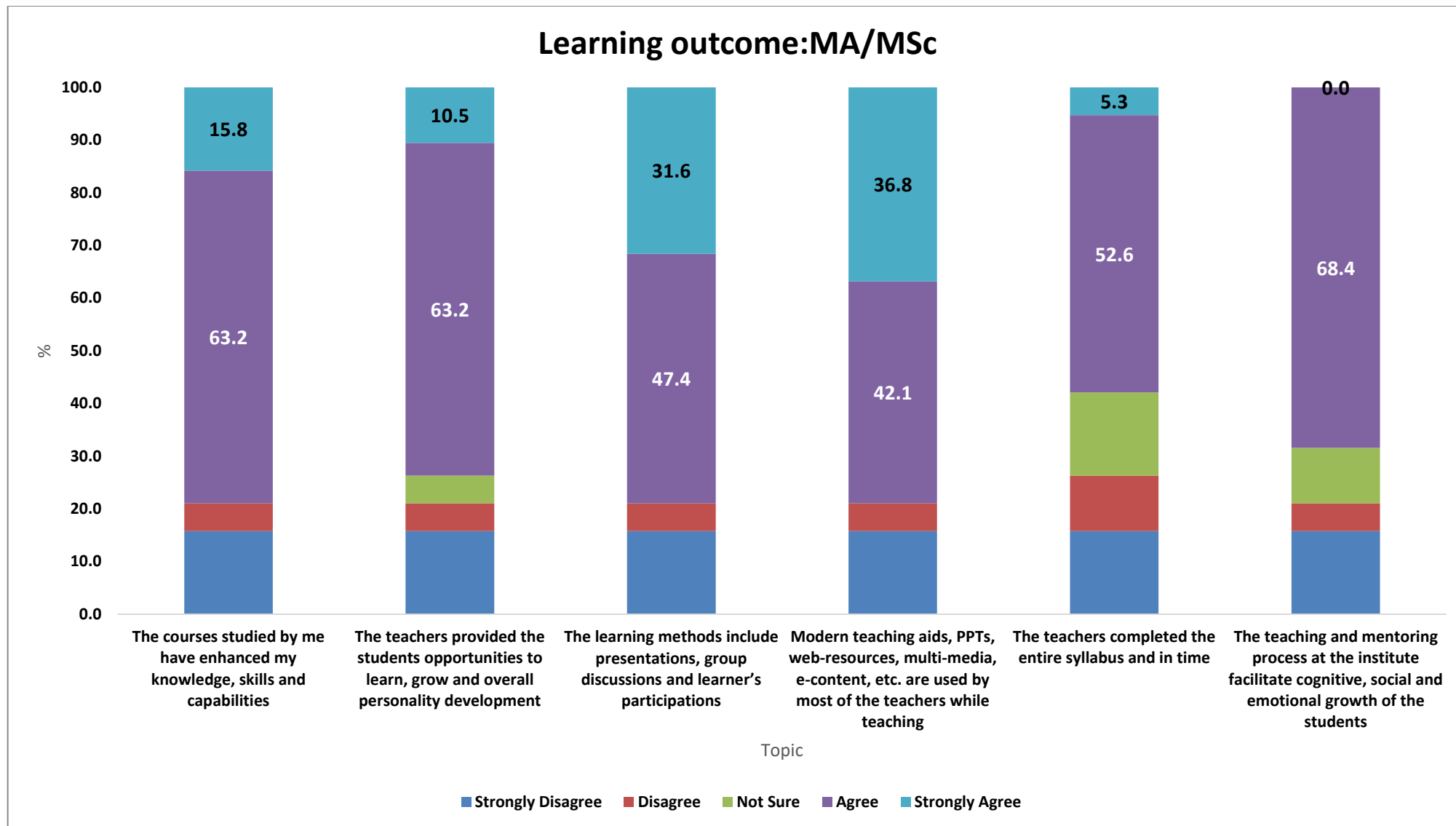
The satisfaction level among MA/MSc students on various aspects of curriculum is relatively less compared to the other two programmes (MPS, and MBD) at the Institute which needs attention.



With respect to the feedback on the learning outcomes of the course, on an average 80% of the MPS students agreed or strongly agreed for the various aspects of learning outcomes.

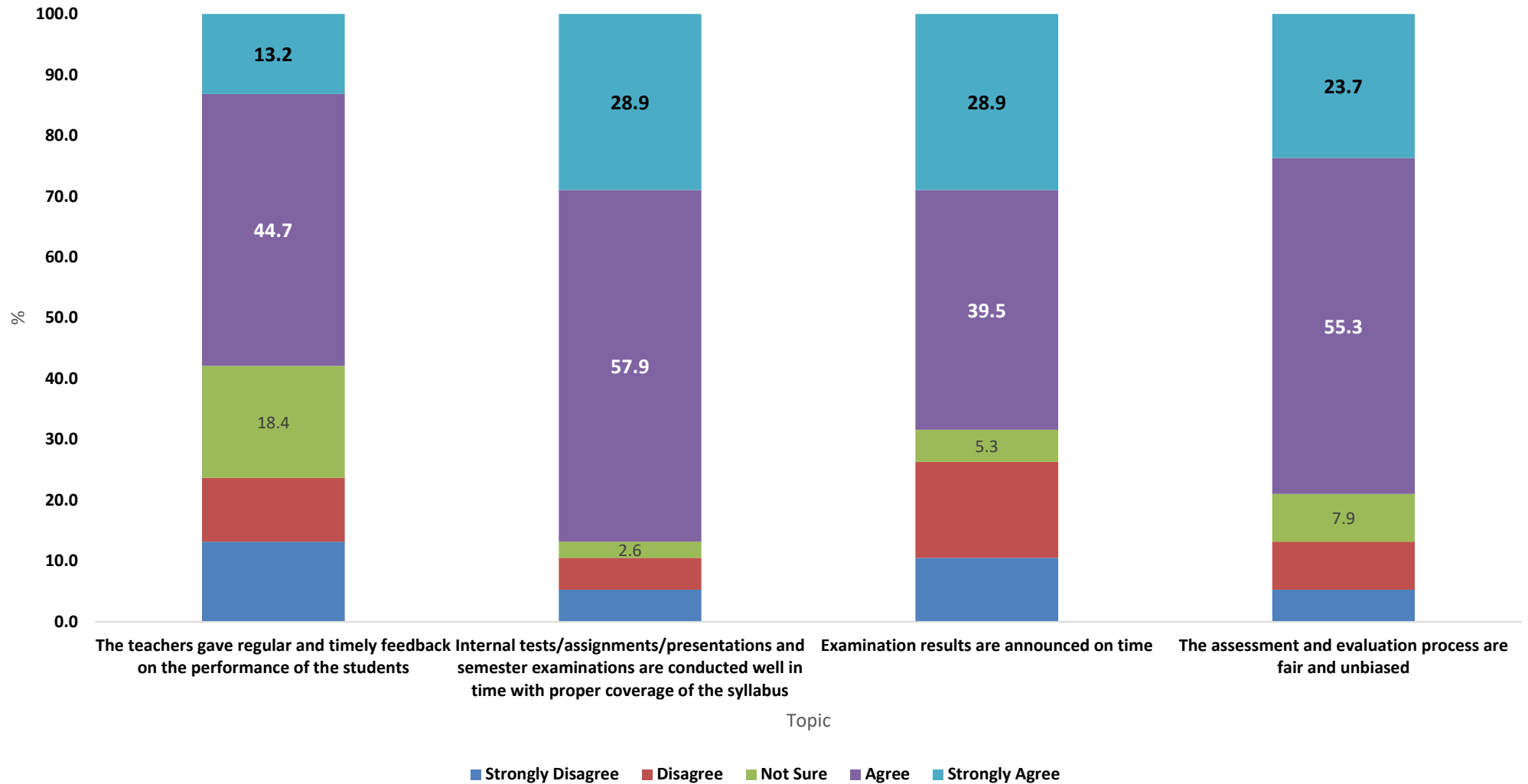


With respect to the feedback on the various aspects of learning outcomes of the course, majority of the MBD students agreed or strongly agreed for the learning outcomes.



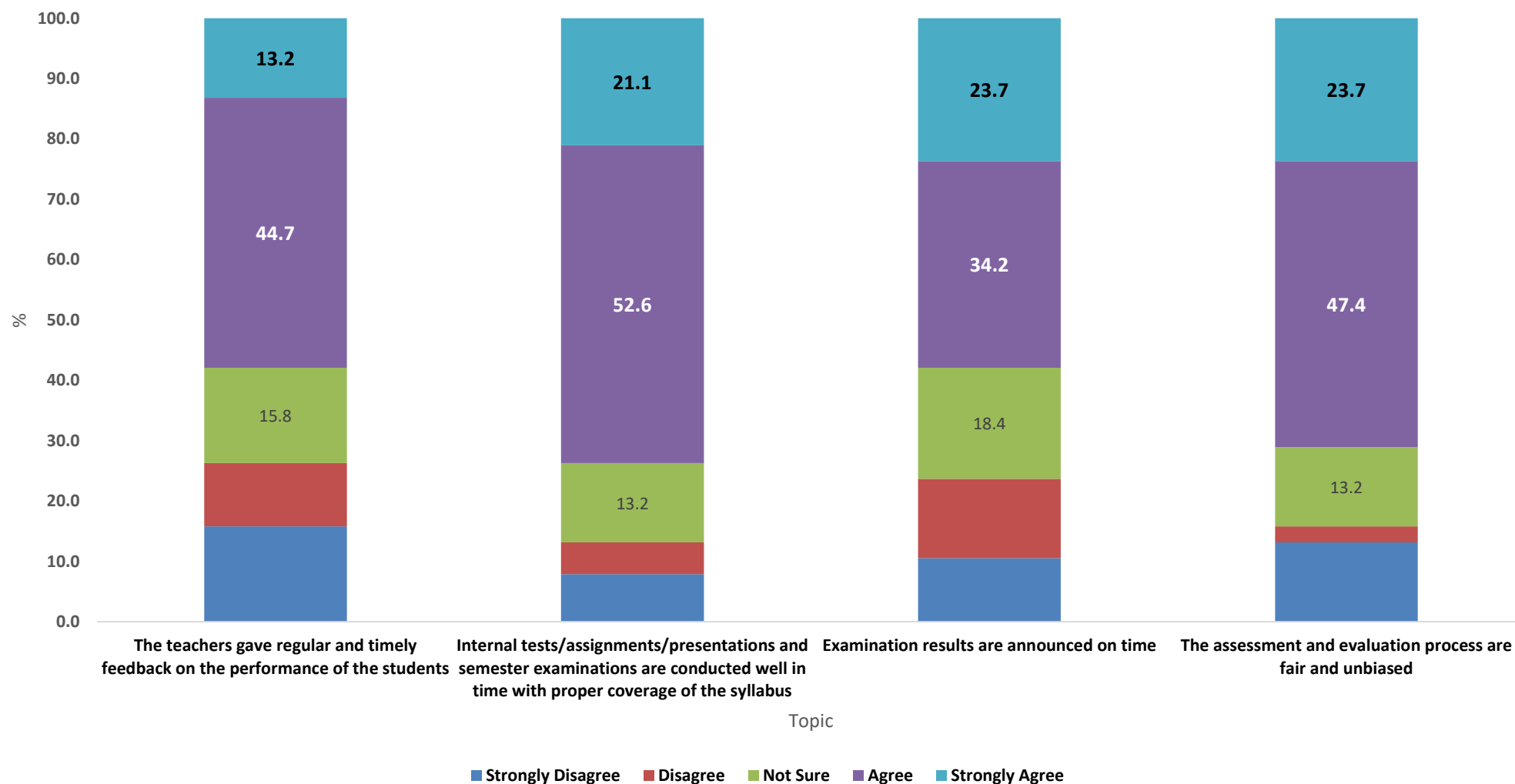
With respect to the feedback on the various learning outcomes of the course, the agreement level among the MA/MSc students are relatively less when compared to the students from other three programmes (MPS and MBD) at the Institute.

Learning Assessment:MA MSC

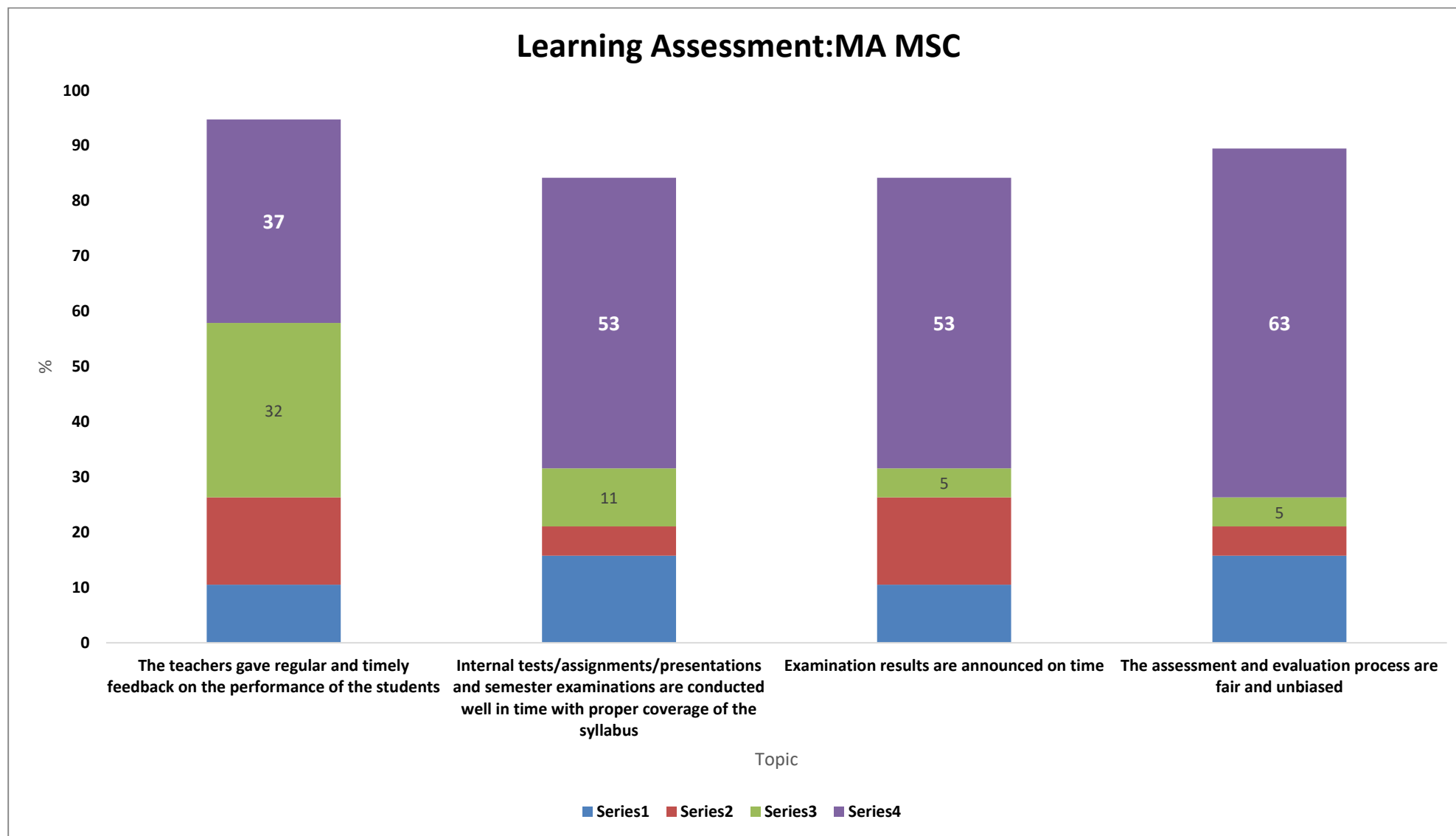


With respect to the feedback on the various aspects of learning assessment, on an average more than 80% of the students agreed with the learning assessment of the MPS programme.

Learning Assessment:MBD

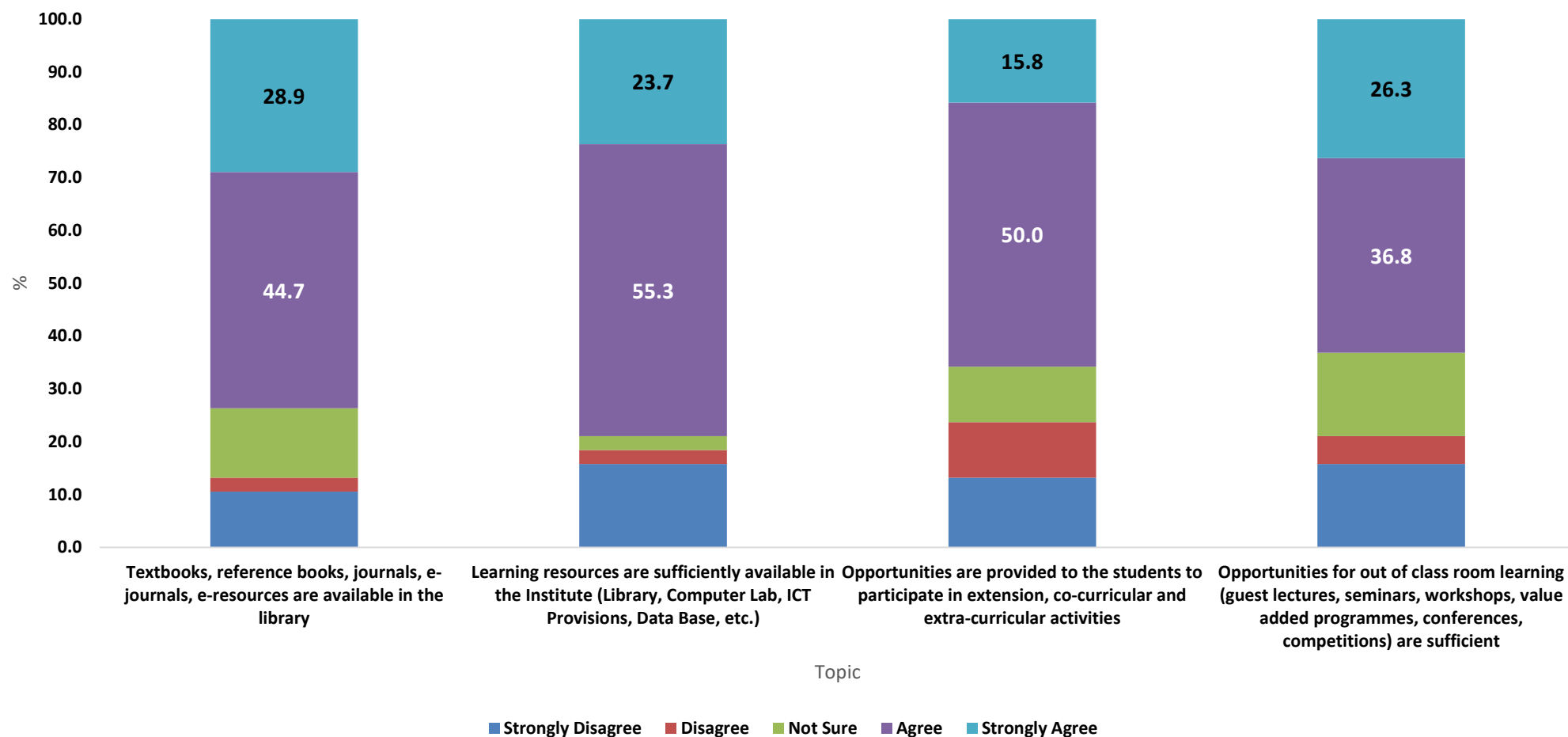


With respect to the feedback on the various learning assessment, on an average about three-fifths of the MBD students agreed or strongly agreed with the learning assessment of the programme.

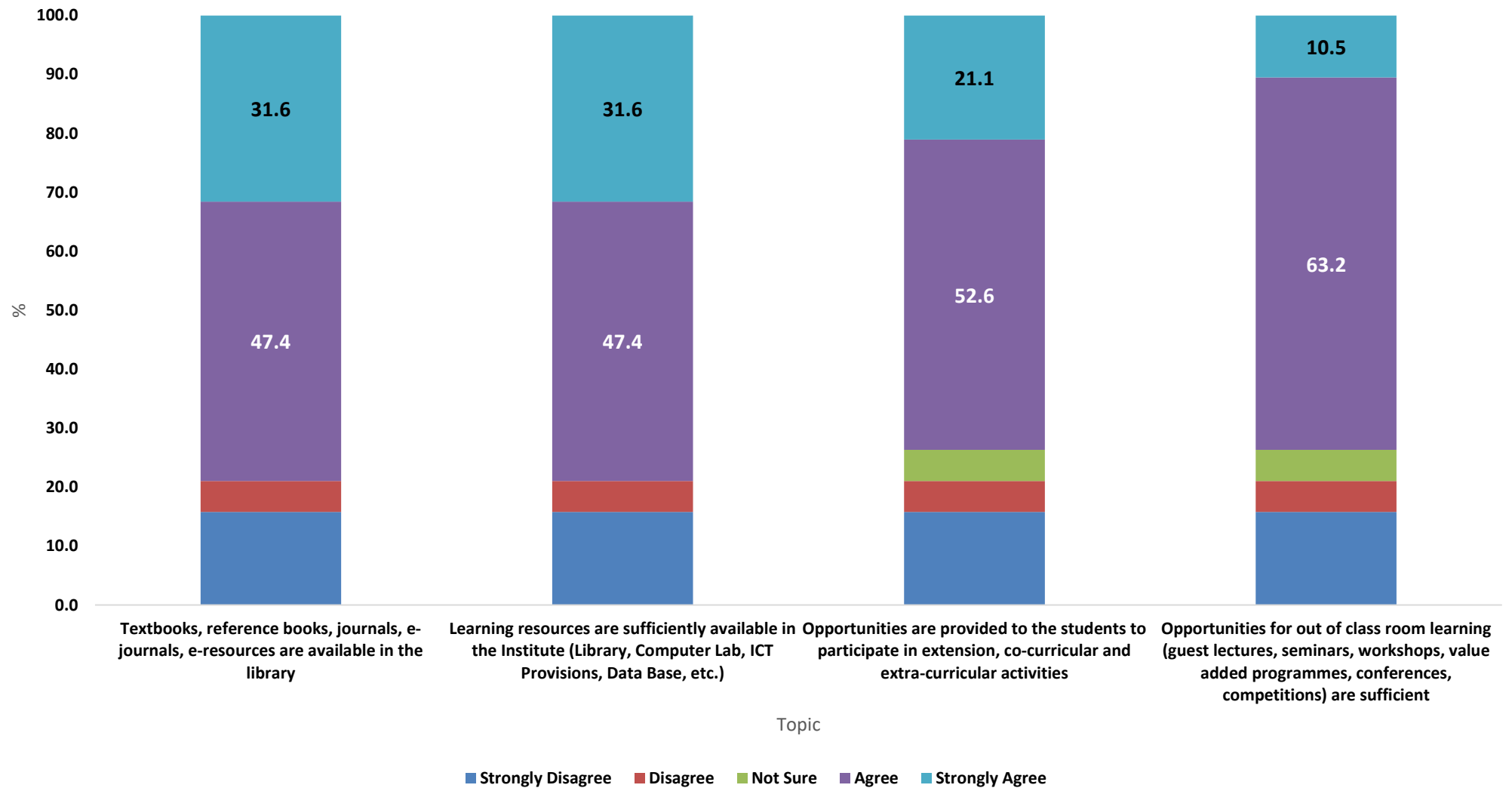


With respect to the feedback on the various parameters of learning assessment, the satisfaction level of the learning assessment is less among the MA/MSc students when compared to the other programmes offered at the Institute

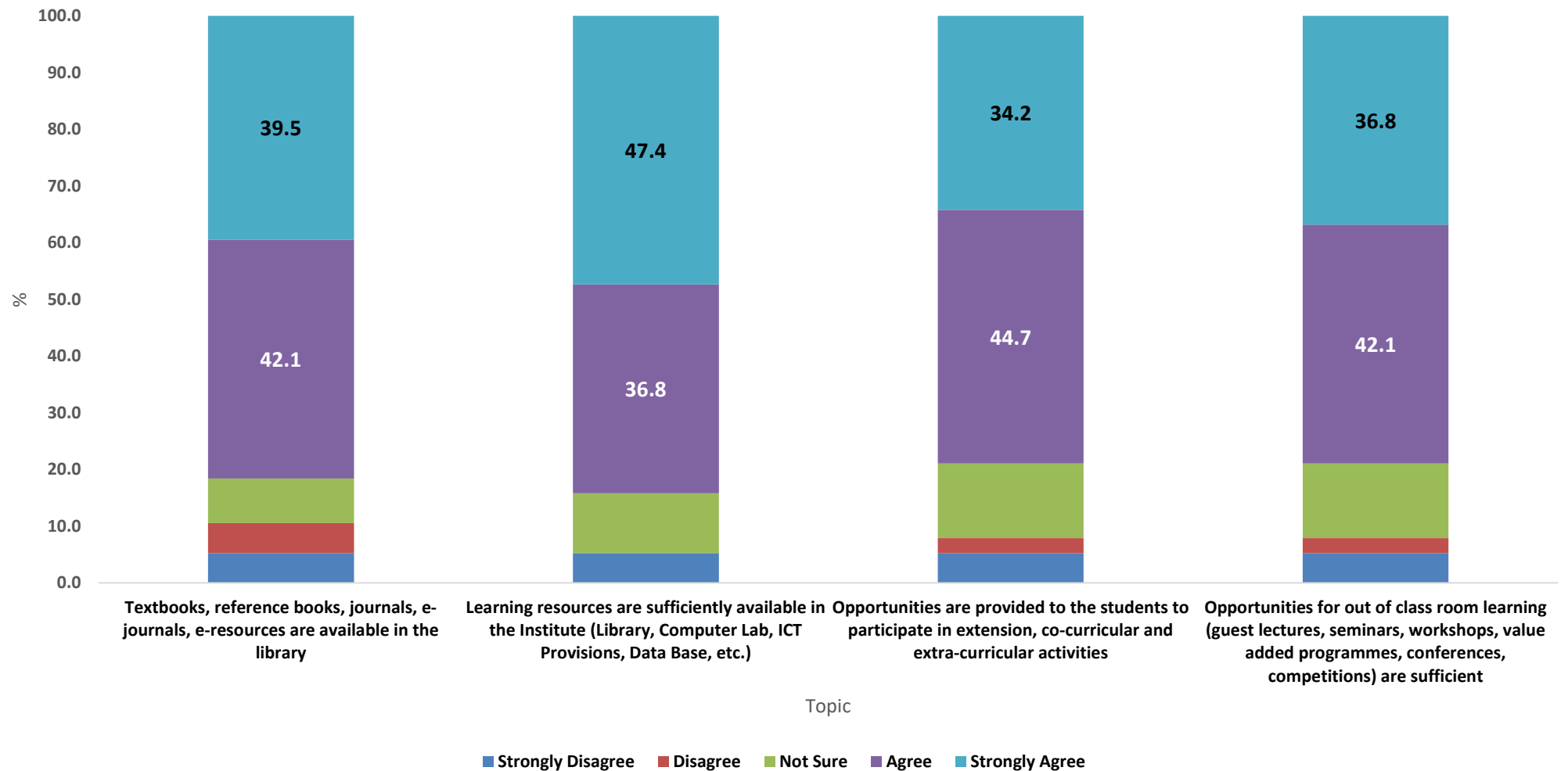
Other Aspects:MBD



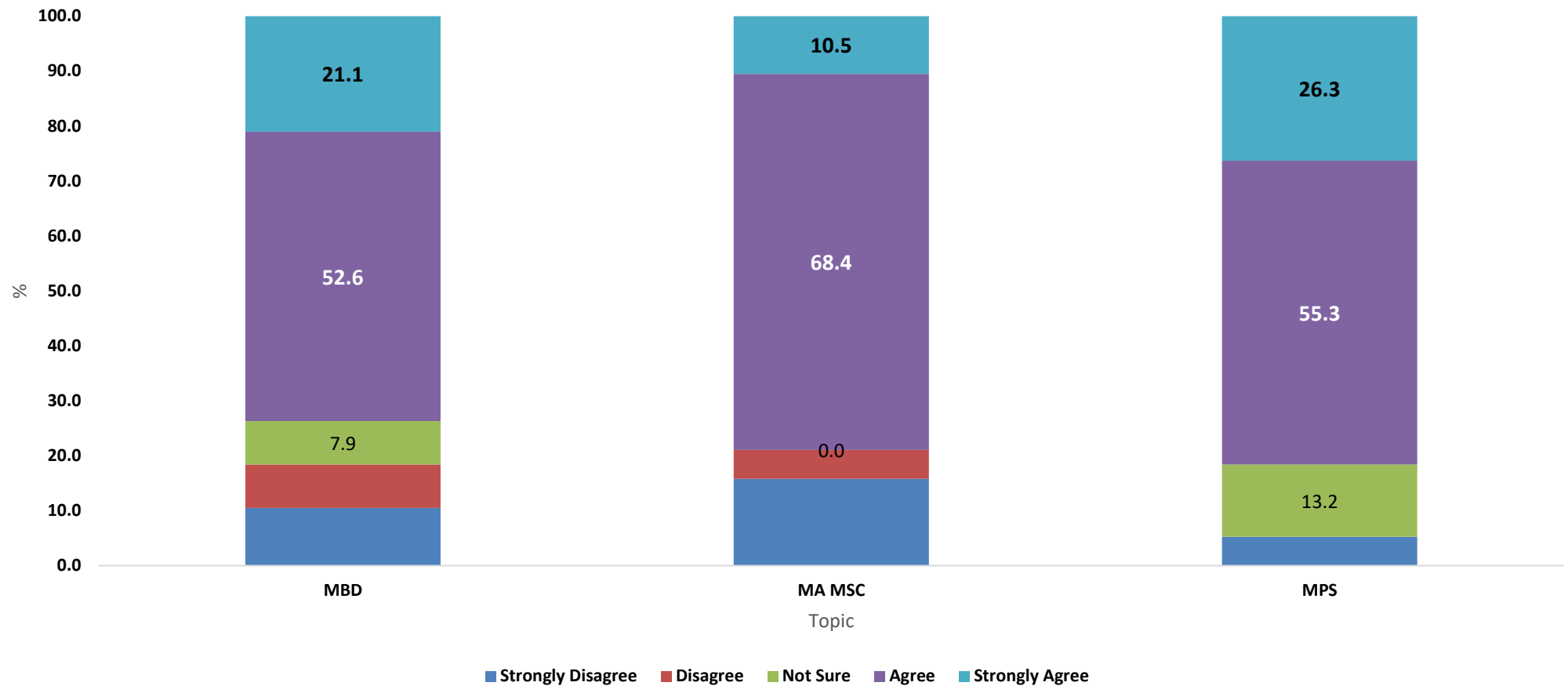
Other Aspects:MA MSC



Other Aspects:MPS



Overall rating of the programme and various facilities in the Institute



Majority of the students belonging to various courses (MPS, MBD and MA/MSc) agreed or strongly agreed that the programmes and facilities in the Institute are good.

Summary

- Majority of the MPS/MA MSc/MBD students agreed or strongly agreed positively with various parameters of the curriculum, assessment, outcome and employability.
- With respect to the feedback on the learning outcomes of the course, on an average 80% of the MPS students agreed or strongly agreed with the various aspects of learning outcomes.
- The satisfaction level among the MBD students is observed to be high on most of the aspects of the feedback (curriculum, assessment, outcome and employability) collected from them.
- The satisfaction level among the MA/MSc students on various aspects of curriculum, assessment, outcome and employability is relatively less as compared to the students from other programmes (MPS and MBD) at the Institute and this needs attention from the management.
- Majority of the students from different courses (MPS, MBD and MA/MSc) agreed or strongly agreed that the programmes and various facilities in the Institute are good.

International Institute for Population Sciences Students Feedback on Curriculum

This questionnaire intends to collect feedback relating to your satisfaction towards the curriculum, learning and evaluation. The feedback will be kept confidential and used for syllabus revision, restructuring of curriculum and quality improvement of the programme. Please indicate your level of satisfaction with the following statement by choosing between 1 and 5. You may provide your Observations and Suggestions in Sl. No. 26.

** Indicates required question*

1. Age *

2. Sex *

Mark only one oval.

☐ Male

☐ Female

3. Roll No. / Registration No. *

4. Batch *

Pre-PhD and MPS Students are required to select 2021-2022 Batch

Mark only one oval.

☐ 2021-2022 (MBD/MA-M.Sc.)

☐ 2022-2023 (MPS/Pre-Ph.D.)

5. Course *

Mark only one oval.

- ☐ MA / M.Sc in Population Studies
- ☐ M.Sc. in Biostatistics & Demography
- ☐ Master of Population Studies
- ☐ Pre-Ph.D.

6. Student Feedback on Curriculum : Kindly tick in the box that best corresponds to your opinion *

Mark only one oval per row.

	Strongly Disagree	Disagree	Not Sure	Agree	Strongly Agree
Aims and objectives of the curriculum and syllabi are well defined.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Syllabus for each course is suitable and need based.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The syllabi are designed to generate interest among the students in the subject area.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The syllabi have good balance between theory and application.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The core and elective courses offered in the programme are relevant.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Allocation of the credits to the core and optional courses are appropriate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The courses studied by me have enhanced my knowledge, skills and capabilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The teachers gave regular and timely feedback on the performance of the students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The teachers provided the students opportunities to learn, grow and overall personality development.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The learning methods include presentations, group discussions and learner's participations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Modern teaching aids, PPTs, web-resources, multi-media, e-content, etc. are used by most of the teachers while teaching.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The courses studied by me are revised/ updated by the Institute at reasonable intervals.

☐ ☐ ☐ ☐ ☐

Curriculum has prospects for higher education and research.

☐ ☐ ☐ ☐ ☐

Curriculum has prospects for employability

☐ ☐ ☐ ☐ ☐

The teachers completed the entire syllabus and in time.

☐ ☐ ☐ ☐ ☐

Internal tests/assignments/presentations and semester examinations are conducted well in time with proper coverage of the syllabus.

☐ ☐ ☐ ☐ ☐

Examination results are announced on time.

☐ ☐ ☐ ☐ ☐

The assessment and evaluation process are fair and unbiased.

☐ ☐ ☐ ☐ ☐

Textbooks, reference books, journals, e-journals, e-resources are available in the library.

☐ ☐ ☐ ☐ ☐

Learning resources are sufficiently available in the Institute (Library, Computer Lab, ICT Provisions, Data Base, etc.):

☐ ☐ ☐ ☐ ☐

Opportunities are provided to the students to participate in extension, co-curricular and extra-curricular activities.

☐ ☐ ☐ ☐ ☐

Opportunities for out of class room learning (guest lectures, seminars, workshops, value added programmes, conferences, competitions) are sufficient.

☐ ☐ ☐ ☐ ☐

The teaching and mentoring process at the institute facilitate cognitive, social and emotional growth of the students.

☐ ☐ ☐ ☐ ☐

Overall rating of the programme and various facilities in the

and various facilities in the
Institute.
Overall rating of the programme
and various facilities in the
Institute.

☐☐☐☐☐

7. 25. Give at least three observations/suggestions on curriculum, learning and evaluation. You may also give more than three observations / suggestions. *

Thank you very much for your participation in this feedback survey. We once again assure you that the feedback provided by you will be kept confidential and used only for quality improvement of academic programmes offered by IIPS.

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Google Forms

Student Satisfaction Survey Report-2023

For the academic year 2022-23

International Institute for Population Sciences
Govandi Station Road
Deonar
Mumbai-400 088

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Background of the survey

The International Institute for Population Sciences (IIPS), Mumbai conducts its routine student satisfaction at the end of every academic year. The objective of the survey is to obtain students opinion about the academic practices experienced during their tenure at the IIPS. Student feedback is obtained on broad topics like syllabus coverage, teaching methods, mentoring process, course evaluation and overall learning experiences. The student feedback is discussed in faculty meetings at the IIPS and is seen as one of the major inputs while setting standards for the forthcoming academic sessions. The student's satisfaction survey for the academic year 2022-23 was conducted in May 2023. This online survey using google form platform ensured complete anonymity for those students participating in the survey. Email invitation along with link to survey was sent by the academic section of IIPS to all students completing Masters in Population Studies (MPS), Masters in Biostatistics and Demography (MBD) and MA/MSc in Population Studies (MA/MSc) in the academic year 2022-23. Reminders were sent to the students to remind/motivate them to complete the student satisfaction survey.

Respondents

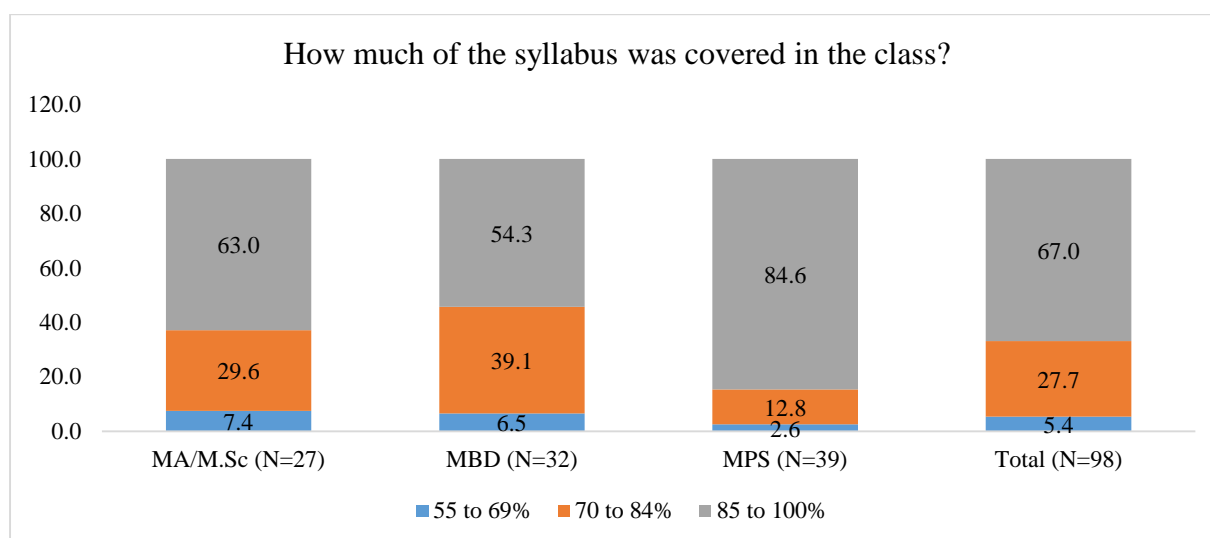
Out of the 107 students who passed out in 2022-23, 98 students volunteered to participate in the student satisfaction survey. Course-wise response rate is provided in table 1

Table 1: Response rate for the student satisfaction survey 2023.

	Total passing out in 2022-23	Number responded to the survey	Response rate (%)
MA/MSc	33	27	81.8
MBD	32	32	100.0
MPS	42	39	92.9
All courses	107	98	91.6

Syllabus coverage

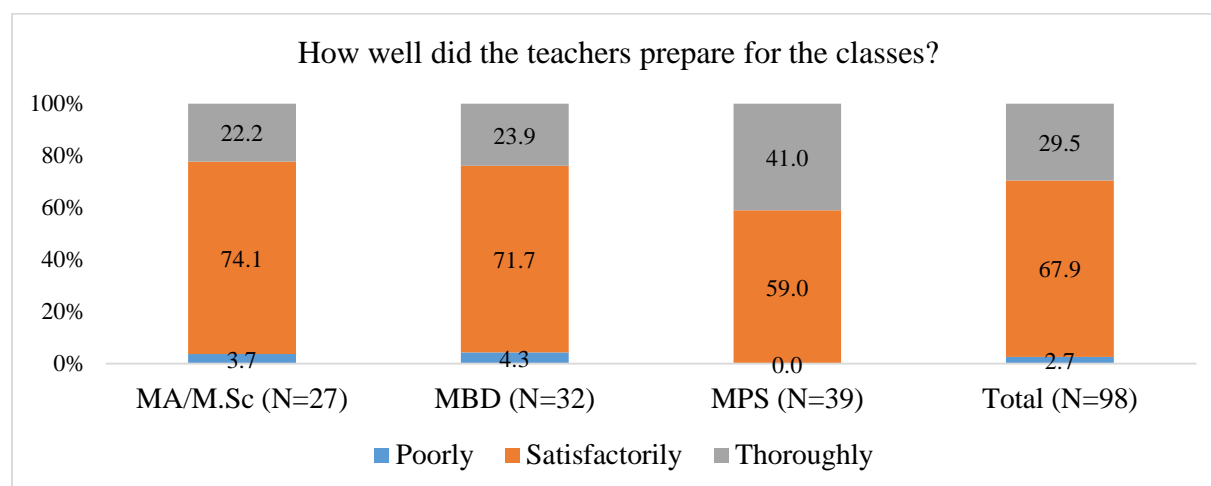
When enquired about how much of their syllabus was covered in the class, two third of students reported that 85-100 percent of the syllabus was covered. The proportion reporting the same was more in the case of MPS course (85 percent) and lowest for MBD course (54 percent).



Results indicate the need to attend to the syllabus coverage level for MBD and MA/MSc courses.

Teacher attributes

The students were asked in the survey to rate the teachers' preparation for classes into the following 3 groups; (1) Poorly (2) Satisfactorily and (3) Thoroughly. Only a negligible share of students were not satisfied (3 percent) with the teacher preparation for the. Satisfaction levels were higher for MPS course than that for the MBD and MA/MSc courses. The fact that only less than one-third of students reporting "thoroughly" prepared shows that there is enough room for improving this aspect.



The students were also made to categorize teachers' ability to communicate as; (1) Generally ineffective, (2) Just satisfactorily, (3) Sometimes effective, and (4) Always effective. About 39 percent reported that communication level was "always effective" while another 50 percent reported "sometimes effective". Rating provided by MPS students were better than the one given by MA/MSc and MBD respectively.

Table 2: How well were the teachers able to communicate?

	MA/M.Sc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Generally ineffective	3.7	2.2	0.0	1.8
Just satisfactorily	3.7	10.9	10.3	8.9
Sometimes effective	51.9	54.3	43.6	50.0
Always effective	40.7	32.6	46.2	39.3
Total	100.00	100.00	100.00	100.00

When enquired about the teacher's approach to teaching, more than two-third of students other than MBD course reported the approach to very good or excellent (table 3). The student ratings by course indicate MBD students were more critical than their counterparts enrolled for other courses.

Table 3: The teacher's approach to teaching can best be described as

	MA/MSc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Fair	3.7	2.2	5.1	3.6
Good	22.2	34.8	15.4	25.0
Very good	51.9	41.3	56.4	49.1
Excellent	22.2	21.7	23.1	22.3
Total	100.00	100.00	100.00	100.00

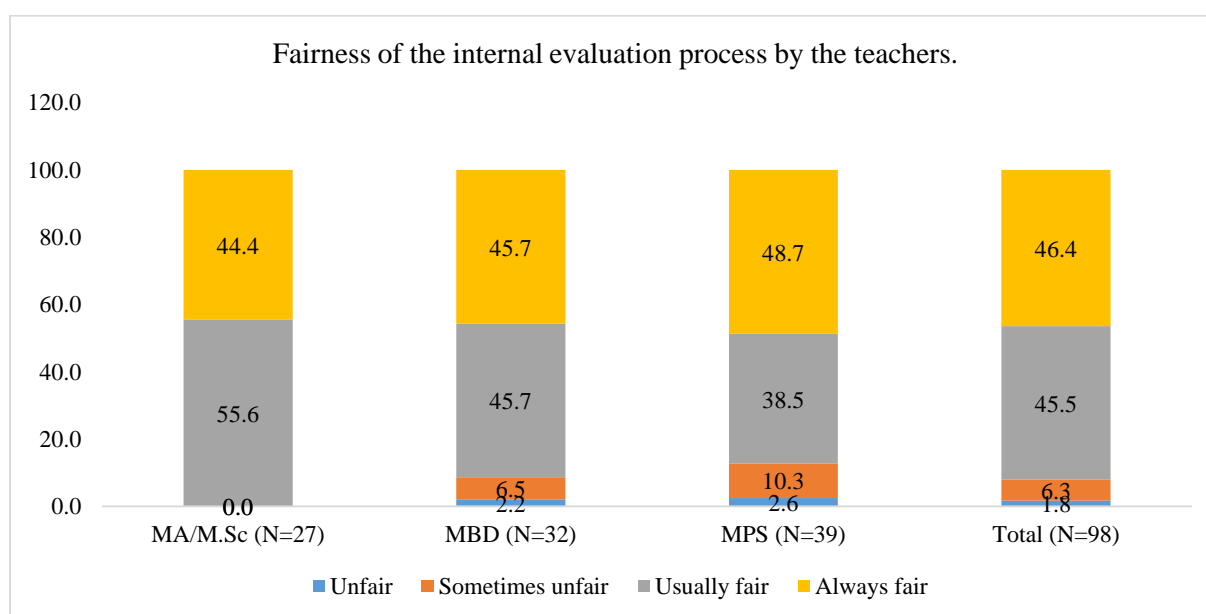
Table 4: Teachers inform you about your expected competencies, course outcomes and programme outcomes.

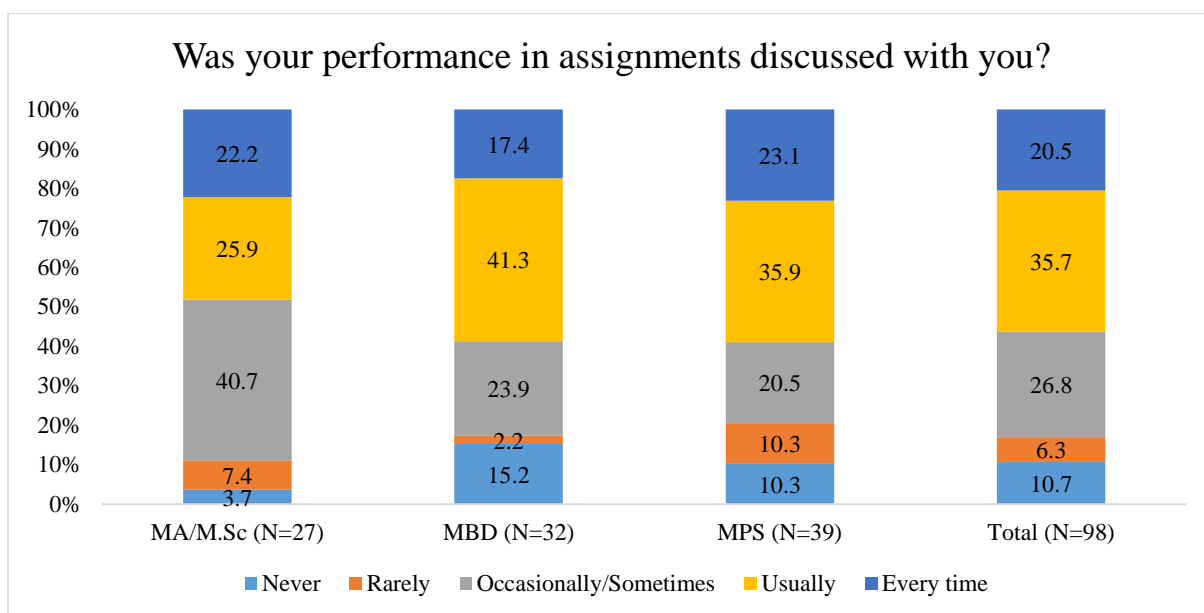
	MA/M.Sc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Rarely	0.0	4.3	0.0	1.8
Occasionally/Sometimes	29.6	28.3	23.1	26.8
Usually	55.6	47.8	51.3	50.9
Every time	14.8	19.6	25.6	20.5
Total	100.00	100.00	100.00	100.00

When enquired if the teachers inform you about the about the your expected competencies, course outcomes and programme outcomes (Table 4), only about one fifth of the students reported that it is done every time. Another half of the students reported that teachers usually does that is encouraging.

Internal evaluation and assignments

Students were enquired about the nature of fairness in the internal evaluation process by the teachers and if their performance in assignment were discussed with them. All the students from MA/MSc course reported internal evaluation to be usually/always fair, while the same was 91 percent and 87 percent in cases of MBD and MPS course respectively.





The feedback on assignment submitted by students or discussion about the assignment is reported to a critical area of concern. Only one fifth of the students reported about such a discussion. The share of students not receiving regular feedback was 52 percent for MA/MSc course and 41 percent for other two courses.

Institutional level support

Internship and students exchange activities: More than one fifth of the students enrolled for MBD and MA/MSc course opinioned that the institute never/ rarely takes interest in promoting internship, student exchange, field visit opportunities for students. Another one fifth in all the three courses reported that IIPS “sometimes” takes interest in such activities.

Table 5: The institute takes active interest in promoting internship, student exchange, field visit opportunities for students

	MA/MSc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Never	3.7	2.2	2.6	2.7
Rarely	22.2	19.6	5.1	15.2
Sometimes	18.5	19.6	23.1	20.5
Often	37.0	34.8	43.6	38.4
Regularly	18.5	23.9	25.6	23.2
Total	100.00	100.00	100.00	100.00

Teaching and mentoring process: Students also rated if the teaching and mentoring process in IIPS institution facilitates you in cognitive, social and emotional growth. The students in general had a mixed opinion about this.

Table 6: Whether the teaching and mentoring process in your institution facilitates you in cognitive, social and emotional growth?

	MA/MSc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Not at all	0.0	2.2	0.0	0.9
Marginally	7.4	13.0	7.7	9.8
Moderately	40.7	23.9	25.6	28.6
Very well	40.7	45.7	41.0	42.9
Significantly	11.1	15.2	25.6	17.9
Total	100.00	100.00	100.00	100.00

The proportion reporting that teaching and mentoring process at the IIPS “significantly” facilitated them in cognitive, social and emotional growth was 18 percent and same was reported to be highest among MPS students. More than 40 % in all courses reported that the institutional facilitation to be very well. Student satisfaction about teaching and mentoring reported to be lowest among those from the MA/MSc course.

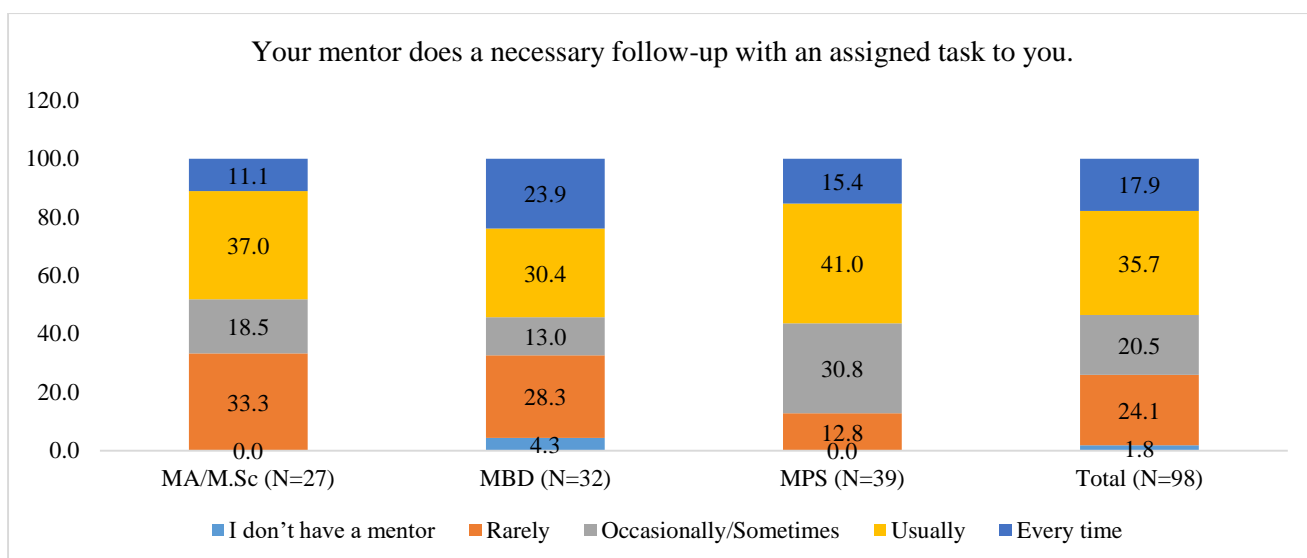
Table 7: Whether the institution provides multiple opportunities to learn and grow.

	MA/MSc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Agree	51.9	43.5	59.0	50.9
Strongly agree	18.5	21.7	20.5	20.5
Neutral	29.6	21.7	10.3	19.6
Disagree	0.0	2.2	0.0	0.9
Strongly disagree	0.0	10.9	10.3	8.0
Total	100.00	100.00	100.00	100.00

Opportunities to learn and grow: One fifth of the students in all the three courses “strongly agreed” that IIPS provides multiple opportunities to learn and grow. Half of students in MA/MSc and MPS course reported they also “agreed” with the statement, while the same was only 44 percent in the MBD students. A substantial proportion being neutral to or disagreeing with statement across all courses is a critical observation.

Mentorship

The students were posed a question on whether a mentor does a necessary follow-up with an assigned task to them. The responses indicate that there is a need to strengthen the mentorship activities in the institution as only about 50 % of students in each course provided a positive response (usually/every time). One third of students of MA/MSc and MBD rarely had interactions with their mentors.



Teacher support

Students also made to provide their evaluation on the nature of teacher support to them in terms of (1) in illustrating the concepts through examples and applications, (2) identifying strengths and encourage students by providing right level of challenges, and (3) Identifying their weakness and helping them to overcome it and (4) encouragement to participation in extracurricular activities.

Illustration of the concepts through examples and applications: The observation that more than 75 percent in all the courses reporting that the teachers illustrate the concepts through examples and application is a commendable achievement (Table 8).

Table 8: The teachers illustrate the concepts through examples and applications.

	MA/MSc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Rarely	0.0	6.5	0.0	2.7
Occasionally/Sometimes	14.8	17.4	7.7	13.4
Usually	59.3	54.3	64.1	58.9
Every time	25.9	21.7	28.2	25.0
Total	100.00	100.00	100.00	100.00

Teachers' identification of student strengths: However the response to the question on if teachers identify your strengths and encourage you with providing right level of challenges portrayed a mixed scenario. A little more than 50 percent of students in all the three courses reported that they received reasonable or full support from the teachers. Response of remaining students indicate the need to encourage IIPS faculty to increase the level of student engagement to strengthen this component.

Table 9: The teachers identify your strengths and encourage you with providing right level of challenges.

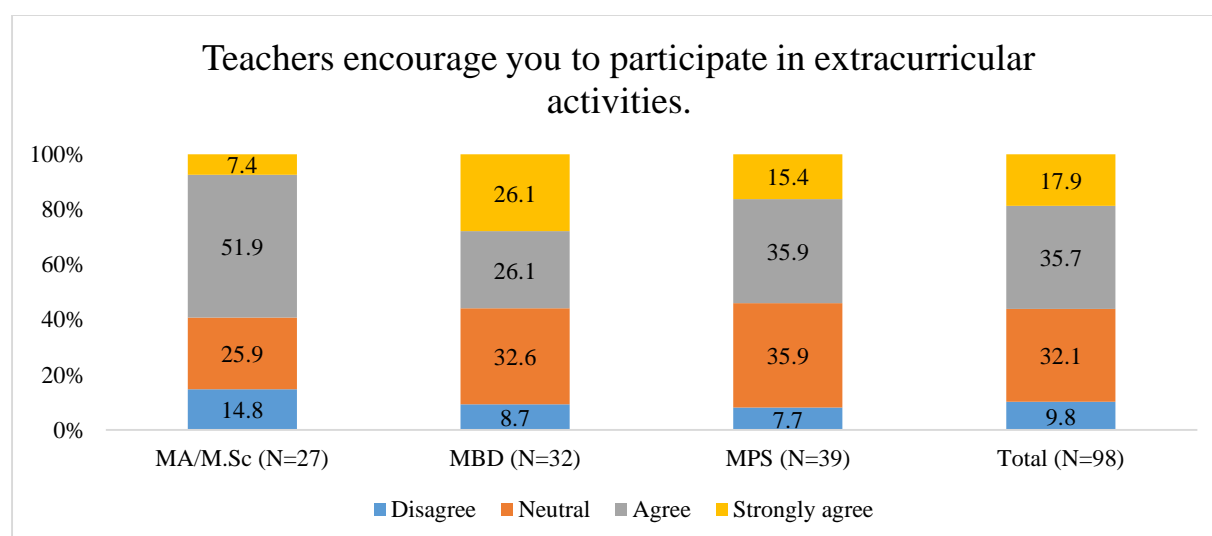
	MA/MSc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Unable to	3.7	4.3	2.6	3.6
Slightly	3.7	10.9	10.3	8.9
Partially	33.3	28.3	30.8	30.4
Reasonably	40.7	34.8	30.8	34.8
Fully	18.5	21.7	25.6	22.3
Total	100.00	100.00	100.00	100.00

Teachers' identification of student weakness: The students were further posed a question on if “Teachers are able to identify your weaknesses and help you to overcome them?”. The results were in line with or even poorer than that observed in the previous section on student’s strength identification. Less than 50 percent of the students in all the three courses reported that teachers are able to identify their weaknesses and help them to overcome it. This reiterates the need to strengthen the student-teacher interaction in IIPS.

Table 10: Teachers are able to identify your weaknesses and help you to overcome them.

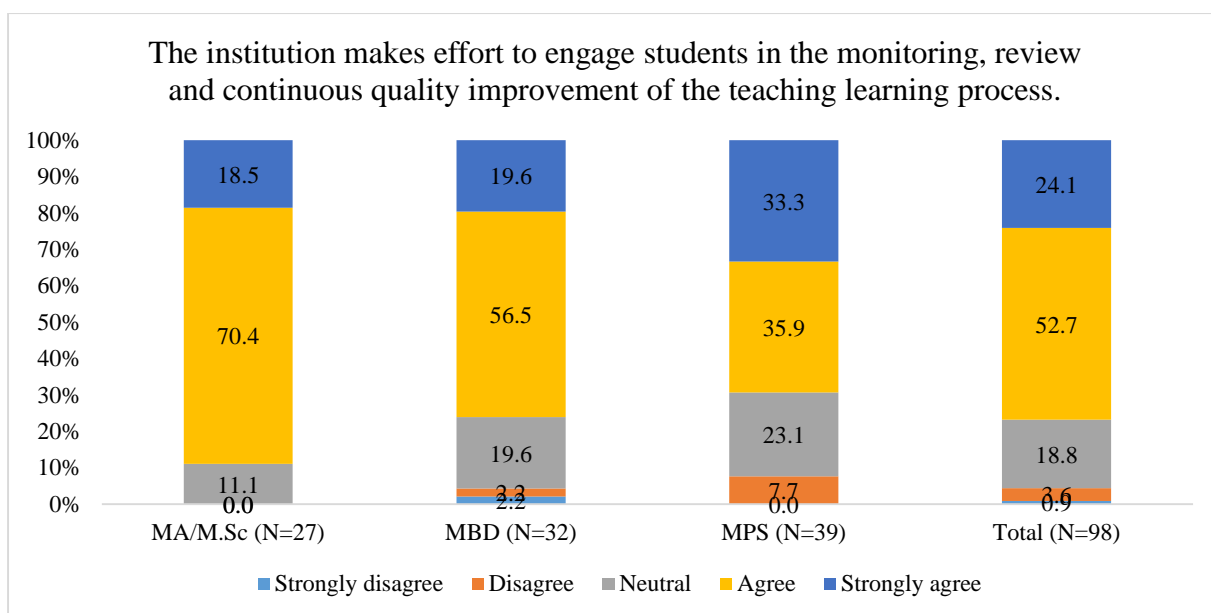
	MA/MSc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Never	0.0	4.3	2.6	2.7
Rarely	18.5	15.2	12.8	15.2
Occasionally/Sometimes	37.0	37.0	33.3	35.7
Usually	25.9	30.4	28.2	28.6
Every time	18.5	13.0	23.1	17.9
Total	100.00	100.00	100.00	100.00

Encouraging participation in extracurricular activities: Teachers were reported to be encouraging students to participate in extracurricular activities. This results are encouraging as these activities were not applicable to all the students who participated in the student satisfaction survey.



Student involvement in teaching and learning process

Involvement in monitoring, review and continuous quality improvement of the teaching learning process: The survey collected information from students on if the institution makes effort to engage students in the monitoring, review and continuous quality improvement of the teaching learning process. It is encouraging to observe that about 75 percent of the students positively responded (agree/ strongly agree) to this question.



Institutional efforts to inculcate soft skills, life skills and employability skills

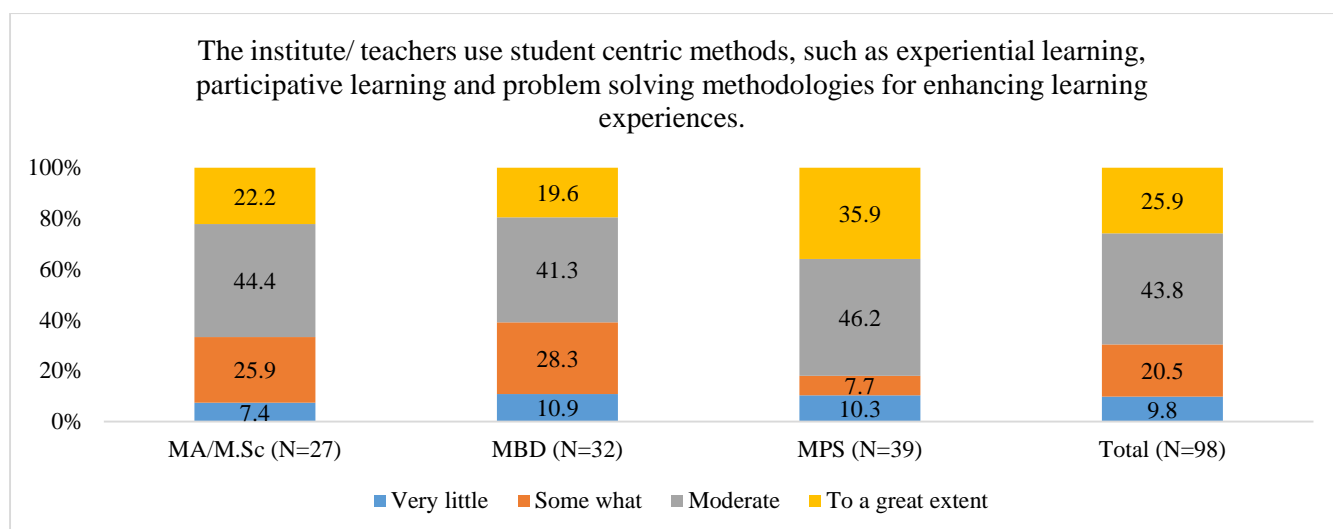
The student feedback shows they need more support from institute/ teachers to inculcate soft skills, life skills and employability skills to make you ready for the world of work. About 43 percent reported that they only received “moderate” support, followed by 18 percent reporting “some-what” support and 6 percent reporting “very little” support.

Table 11: Efforts are made by the institute/ teachers to inculcate soft skills, life skills and employability skills to make you ready for the world of work.

	MA/MSc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
Not at all	0.0	2.2	0.0	0.9
Very little	3.7	8.7	5.1	6.3
Some what	7.4	23.9	17.9	17.9
Moderate	63.0	39.1	33.3	42.9
To a great extent	25.9	26.1	43.6	32.1
Total	100.00	100.00	100.00	100.00

Teaching methods and facilities

Use student centric methods: The student feedback was obtained for use student centric methods by the teachers, such as experiential learning, participative learning and problem solving methodologies for enhancing learning experiences. About 44 percent of students across all courses reported “moderate” use of student centric methods for teaching. THE MPS students were reportedly exposed to such methods than MA/MSc and MBD students.



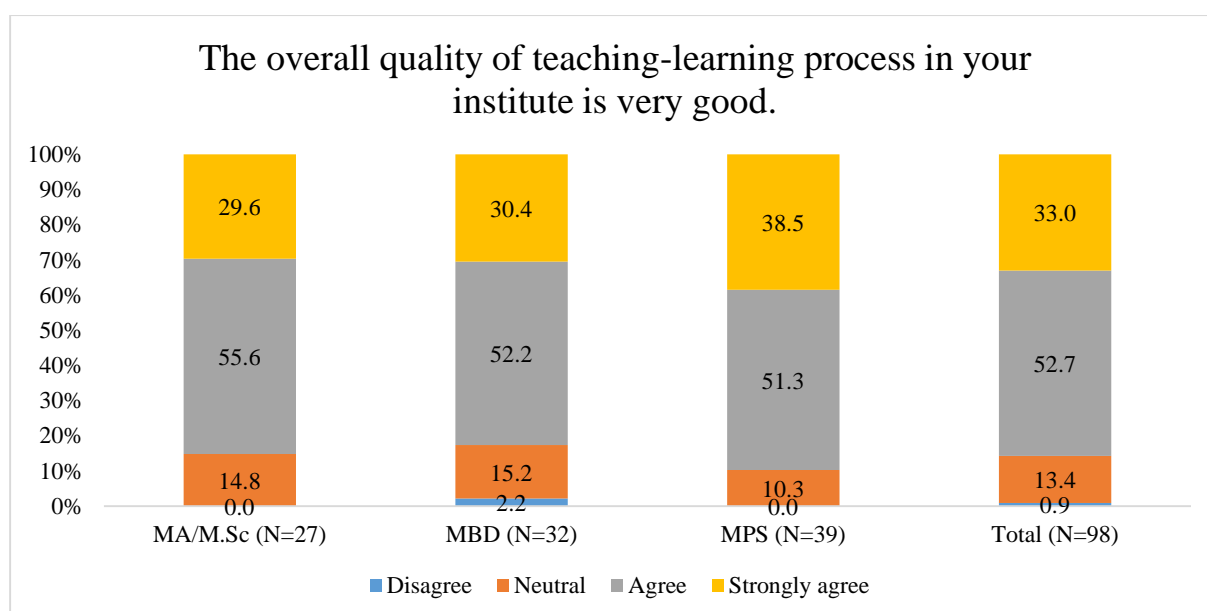
Use of ICT Tools for teaching: The students also reported on whether teachers use ICT tools such as LCD projector, Multimedia, etc. while teaching. As can be seen in table 13, students reported that most of the teachers were reported to be using such ICT tools. MA/MSc students in higher usage of such tools than MPS and MDB students.

Table 13: What percentage of teachers use ICT tools such as LCD projector, Multimedia, etc. while teaching?

	MA/MSc (N=27)	MBD (N=32)	MPS (N=39)	Total (N=98)
30 – 49%	0.0	8.7	0.0	3.6
50 – 69%	0.0	4.3	7.7	4.5
70 – 89%	14.8	23.9	17.9	19.6
Above 90%	85.2	63.0	74.4	72.3
Total	100.00	100.00	100.00	100.00

Overall quality of teaching-learning process

In the end the students if they agree to the statement that “The overall quality of teaching-learning process in your institute is very good”. About 33 percent “strongly agreed” to that statement, while another 53 percent “agreed” to that statement. Agreement share was higher for students who completed the MPS course than their counterparts who completed MA/MSc or MBD course.



Conclusion

As can be expected this well represented student satisfaction survey give insights about students perceptions about academic standards and student development opportunities at the IIPS. From an institutional perspective results are seen as a form of feedback about the strengths and weakness of the ongoing academic courses at the IIPS and also facilitate academic planning where actions can be introduced/strengthened to enhance the level of student satisfaction. Most positive is the observation that in general the students are highly satisfied with the overall teaching and learning process. Other strengths that emerged from the survey are students opinion regarding opportunities to learn and grow at IIPS, illustration of concepts with examples and applications, students involvement in teaching and learning process, and use of ICT tools in teaching.

The focal areas improve student's satisfaction levels can be improved further is by strengthening the teaching and mentoring process and providing them opportunities to inculcate soft skills, life skills and employability skills to make you ready for the world of work and encouraging them in getting internship opportunities. The critical areas where concerted action is required is about attending to syllabus coverage issues and in strengthening the academic involvement between students and teachers. The concern from the students about poor-mentor mentee relation, feedback on assignments, and strength and weakness identification indicates, the need for bettering student-teacher interaction in the institution.

Annexure I: Student Satisfaction Survey Questionnaire

International Institute for Population Sciences. Student Satisfaction Survey on Teaching–Learning and Evaluation

IIPS is conducting a Student Satisfaction Survey regarding Teaching–Learning and Evaluation, which will help to upgrade the quality in higher education in IIPS. Student are required to respond to all the questions given in the following format with her/his sincere effort and thought. Her/his identity will be kept strictly confidential and will not be revealed to anyone.

** Indicates required question*

1. A) Please confirm this is the first and only time you answer this survey *

Mark only one oval.

☐ Yes

☐ No

2. B) Age: *

3. C) Gender: *

Mark only one oval.

☐ Male

☐ Female

4. D) What degree program are you pursuing now? *

Mark only one oval.

- ☐ MPS
- ☐ MBD
- ☐ MA/M.Sc
- ☐ Pre-Ph.D.

Instructions to fill the questionnaire • All questions should be compulsorily attempted. • Each question has five responses, choose the most appropriate one. • The response to the qualitative Question No. 21 is student's opportunity to give suggestions or improvements; she/he can also mention weaknesses of the institute here. (Kindly restrict your response to teaching learning process only)

Criterion II – Teaching–Learning and Evaluation

Student Satisfaction Survey on Teaching Learning Process

Following are questions for online student satisfaction survey regarding teaching learning process.

5. 1. How much of the syllabus was covered in the class? *

Mark only one oval.

- ☐ 4 – 85 to 100%
- ☐ 3 – 70 to 84%
- ☐ 2 – 55 to 69%
- ☐ 1 – 30 to 54%
- ☐ 0 – Below 30%

6. 2. How well did the teachers prepare for the classes? *

Mark only one oval.

- ☐ 4 – Thoroughly
- ☐ 3 – Satisfactorily
- ☐ 2 – Poorly
- ☐ 1 – Indifferently
- ☐ 0 – Won't teach at all

7. 3. How well were the teachers able to communicate? *

Mark only one oval.

- ☐ 4 – Always effective
- ☐ 3 – Sometimes effective
- ☐ 2 – Just satisfactorily
- ☐ 1 – Generally ineffective
- ☐ 0 – Very poor communication

8. 4. The teacher's approach to teaching can best be described as *

Mark only one oval.

- ☐ 4 – Excellent
- ☐ 3 – Very good
- ☐ 2 – Good
- ☐ 1 – Fair
- ☐ 0 – Poor

9. 5. Fairness of the internal evaluation process by the teachers. *

Mark only one oval.

- ☐ 4 – Always fair
- ☐ 3 – Usually fair
- ☐ 2 – Sometimes unfair
- ☐ 1 – Usually unfair
- ☐ 0– Unfair

10. 6. Was your performance in assignments discussed with you? *

Mark only one oval.

- ☐ 4 – Every time
- ☐ 3 – Usually
- ☐ 2 – Occasionally/Sometimes
- ☐ 1 – Rarely
- ☐ 0– Never

11. 7. The institute takes active interest in promoting internship, student exchange, field visit opportunities for students *

Mark only one oval.

- ☐ 4 – Regularly
- ☐ 3 – Often
- ☐ 2 – Sometimes
- ☐ 1 – Rarely
- ☐ 0– Never

12. 8. The teaching and mentoring process in your institution facilitates you in cognitive, social and emotional growth. *

Mark only one oval.

- ☐ 4 – Significantly
- ☐ 3 – Very well
- ☐ 2 – Moderately
- ☐ 1 – Marginally
- ☐ 0– Not at all

13. 9. The institution provides multiple opportunities to learn and grow. *

Mark only one oval.

- ☐ Strongly disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly agree

14. 10. Teachers inform you about your expected competencies, course outcomes and programme outcomes. *

Mark only one oval.

- ☐ 4 – Every time
- ☐ 3 – Usually
- ☐ 2– Occasionally/Sometimes
- ☐ 1 – Rarely
- ☐ 0– Never

15. 11. Your mentor does a necessary follow-up with an assigned task to you. *

Mark only one oval.

- ☐ 4 – Every time
☐ 3 – Usually
☐ 2 – Occasionally/Sometimes
☐ 1 – Rarely
☐ 0 – I don't have a mentor

16. 12. The teachers illustrate the concepts through examples and applications. *

Mark only one oval.

- ☐ 4 – Every time
☐ 3 – Usually
☐ 2 – Occasionally/Sometimes
☐ 1 – Rarely
☐ 0 – Never

17. 13. The teachers identify your strengths and encourage you with providing right level of challenges. *

Mark only one oval.

- ☐ 4 – Fully
☐ 3 – Reasonably
☐ 2 – Partially
☐ 1 – Slightly
☐ 0 – Unable to

18. 14. Teachers are able to identify your weaknesses and help you to overcome them. *

Mark only one oval.

- ☐ 4 – Every time
- ☐ 3 – Usually
- ☐ 2 – Occasionally/Sometimes
- ☐ 1 – Rarely
- ☐ 0 – Never

19. 15. The institution makes effort to engage students in the monitoring, review and continuous quality improvement of the teaching learning process. *

Mark only one oval.

- ☐ 4 – Strongly agree
- ☐ 3 – Agree
- ☐ 2 – Neutral
- ☐ 1 – Disagree
- ☐ 0 – Strongly disagree

20. 16. The institute/ teachers use student centric methods, such as experiential learning, participative learning and problem solving methodologies for enhancing learning experiences. *

Mark only one oval.

- ☐ 4 – To a great extent
- ☐ 3 – Moderate
- ☐ 2 – Some what
- ☐ 1 – Very little
- ☐ 0 – Not at all

21. 17. Teachers encourage you to participate in extracurricular activities. *

Mark only one oval.

- ☐ Strongly disagree
- ☐ Disagree
- ☐ Neutral
- ☐ Agree
- ☐ Strongly agree

22. 18. Efforts are made by the institute/ teachers to inculcate soft skills, life skills and employability skills to make you ready for the world of work. *

Mark only one oval.

- ☐ 4 – To a great extent
- ☐ 3 – Moderate
- ☐ 2 – Some what
- ☐ 1 – Very little
- ☐ 0 – Not at all

23. 19. What percentage of teachers use ICT tools such as LCD projector, Multimedia, etc. while teaching. *

Mark only one oval.

- ☐ 4 – Above 90%
- ☐ 3 – 70 – 89%
- ☐ 2 – 50 – 69%
- ☐ 1 – 30 – 49%
- ☐ 0 – Below 29%

24. 20. The overall quality of teaching-learning process in your institute is very good. *

Mark only one oval.

- ☐ 4 – Strongly agree
- ☐ 3 – Agree
- ☐ 2 – Neutral
- ☐ 1 – Disagree
- ☐ 0 – Strongly disagree

25. 21. Give at least three observations / suggestions to improve the overall teaching–learning experience in IIPS. You may also give more than three observations / suggestions. *

Thank you very much for your participation in the Student Satisfaction Survey (SSS).
We assure you once again that your identity will be kept strictly confidential and will not be shared with anyone.

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**MINUTES OF THE MEETING OF THE ACADEMIC COUNCIL OF THE
INTERNATIONAL INSTITUTE FOR POPULATION SCIENCES
HELD ON July 05, 2023.**

The meeting of the Academic Council was held on July 05, 2023 at 10.30 AM in hybrid mode, and was chaired by Prof K.S. James, Director and Senior Professor, IIPS. At the outset, the Chairperson extended warm welcome to all members and external experts to the meeting of Academic Council.

The list of members attended the meeting is given in Annexure I

Prof. K.S James, Chairperson of Academic Council requested Prof. S.K. Singh, Member-Secretary to proceed with the agenda.

Agenda Item No.1: To confirm the minutes of Academic Council Meeting held on April 24, 2023.

The members confirmed and approved the minutes of the meeting of Academic Council held on April 24, 2023.

Agenda Item No.2: Action taken on the Minutes of Academic Council Meeting held on April 24, 2023.

Action taken were noted.

Agenda Item No.3: To discuss & approve revision of syllabus of Master of Arts/Master of Science (M.A/M.Sc.) in Population Studies (Regular & Distance mode).

The Director & Sr. Professor, constituted a committee for the revision of syllabus of Master of Arts/Science in population Sciences (Regular & Distance). Prof. T. V. Sekher, Chairperson. Syllabus revision committee made a presentation on the revised syllabus. He also mentioned the recommendation of the external syllabus committee on the revision. The member of the AC gave their views and opinions on the syllabus.

The members of Academic Council approved the revised syllabus for M.A/M Sc in Population Studies w.e.f AY 2023-24. **Annexure II**

Agenda Item No.4: To discuss & approve revision of syllabus of Master of Science (M.Sc.) in Biostatistics and Demography.

The Director & Sr. Professor constituted a committee for the revision of syllabus of Master of Science in Biostatistics and Demography. Prof. Abhishek Singh, Chairperson, Syllabus revision committee made a presentation on the revised syllabus. He also mentioned about the recommendation of the external syllabus committee on the revision. The member of the AC gave their views and opinions on the syllabus.

The members of Academic Council approved the revised syllabus for M.Sc in Bio-Statistics & Demography w.e.f AY 2023-24. **Annexure III**

Agenda Item No.5: To discuss & approve revision of syllabus of Master of Population Studies (MPS).

The Director & Sr. Professor constituted a committee for the revision of syllabus of Master of Population Studies. Prof. Chander Shekhar, Chairperson, Syllabus revision committee made a presentation on the revised syllabus. He also mentioned about the recommendation of the external syllabus committee on the revision. The member of the AC gave their views and opinions on the syllabus.

The members of Academic Council approved the revised syllabus for Master of Population Studies w.e.f AY 2023-24. **Annexure IV**

Agenda Item No.6: To discuss and approve the UGC [Minimum Standards and Procedures for Award of Ph.D. Degree] regulations.

In line with UGC official Gazette notification dated 7th November 2022, The Academic Council has approved the same.

Agenda Item No.7: To discuss the change of Ph.D. specialization from Population studies to Bio-statistics & Demography.

The Director & Sr. Professor, constituted a committee to look into the request received from Ph.D students to change their specialization from population Studies to Bio-Statistics & Demography. Prof.D.A.Nagdeve, Chairperson of the committee made a presentation on the above.

Academic Council approved the report of the committee for implementation. As suggested by the committee the following students are eligible for the specialization of Biostatistics and Epidemiology

- 1| Mr. Rahul Bawankule
- 2| Mr. Dinesh Chaurasiya
- 3| Mr. Dipak Kumar Das

The committee did not consider the requests of the Ph.D. scholars to change the specialization as they have master degree in statistics/health statistics and they have applied for PhD in Population Studies at the time of Ph.D. admission.

In Addition, academic council decided after deliberation to offer only population studies as specialization for the Ph.D. degree from the academic year 2024-25.

Agenda Item No. 8: To discuss about the grievances received in connection with admission and reservation roster.

Academic council reviewed the entire admission procedure & reservation system followed in IIPS Mumbai and also recommended to continue the same process. The AC did not find any substance in the complaints being sent by external member to the Ministry regarding the admission procedure or in the reservation system.

In addition, Academic Council recommended to add one external member in Personal Interview in the Ph.D. admission process from the academic year 2024-25.

Agenda Item No.9: Any other matter with the permission of Chair.

As there was no any other matter for the discussion meeting ended with vote of thanks by the Member-secretary, Academic Council.



(Prof. S.K. Singh)
Member-Secretary

ANNEXURE - I

1	Prof. B.S. Jaiswal, Director & Sr. Epidemiologist	Chairperson	Attended
2	Mrs. Beenu Singh, Chief Director (Planning), MCHFW, GOI	Member	Absent
3	Dr. Sanil Kumar Dasgupta, Director, NIECD, Mumbai	Member	Online Attended
4	Dr. Chandrajyoti Ghosh, Director, NIEFW, Mumbai (Nominated by Dr. Vijay Kumar Tewari)	Member	Online Attended
5	Prof. N.K. Singh, PhD, Dept. of Survey Research & Data Analytics	Member Secretary	Attended
6	Prof. T. G. Nagappa, HOD, Dept. of Vitality & Social Demography	Member	Attended
7	Prof. Hrushikesh Deshpande, HOD, Dept. of Public Health and Maternal Studies	Member	Attended
8	Prof. Rakesh Chandra Das, PhD, Dept. of Migration & Urban Studies	Member	Absent
9	Prof. V.V. Shukla, HOD, Dept. of Family & Community	Member	Attended
10	Prof. Chandra Shukla, Dept. of Vitality & Social Demography	Member	Attended
11	Prof. Sanjay Kumar Mohanty, HOD, Dept. of Population & Development	Member	Attended
12	Prof. K. Nagarajan, Dept. of Population & Development	Member	Absent
13	Prof. Abhishek Singh, Dept. of Public Health & Maternal Studies	Member	Attended
14	Prof. Manali Phule, PhD, Dept. of Vaccinology and Epidemiology	Member	Attended
15	Prof. Anshu K. Roy, Dept. of Migration & Urban Studies	Member	Absent
16	Prof. Chandrajyoti Ghosh, Dept. of Public Health & Maternal Studies	Member	Attended
17	Prof. Aparajita Chatterjee, Dept. of Population & Development	Member	Attended
18	Prof. Lakshmi Devi, Dept. of Survey Research & Data Analytics	Member	Attended
19	Prof. Prachi Sarkar, Dept. of Public Health & Maternal Studies	Member	Absent
20	Prof. Ulhas Prakash Mishra, Dept. of Epidemiology and Epidemiology	Member	Attended
21	Prof. S. Chandra Sekhara, ICMR Member	External Member	Online Attended
22	Prof. Anjali Raut, ICMR Member	External Member	Online Attended
23	Prof. Anus Kumar, ICMR Member	External Member	Online Attended
24	Dr. Chakraborty Bengali, ICMR Member	External Member	Attended
25	Dr. Sanil Kumar, Associate Professor	Member	Absent
26	Dr. Sanjay Goli, Associate Professor	Member	Absent
27	Dr. Anshu Rajan, VAMN Coordinator	Member	Attended
28	Dr. Saikat Choudhury, Assistant Professor	Member	Attended
29	Dr. Pankaj Saha, ICMR Coordinator	Member	Attended
30	Dr. Gita Vaidya, ICMR Coordinator	Member	Attended
31	Dr. Rishi Keshri, ICMR Coordinator	Member	Attended
32	Mr. Suman Prasad, Assistant Registrar (Medical)	Member	Attended

M.A./M.Sc. in Population Studies

A. Program Outcomes (POs):

PO1: To have trained demographers / population scientists equipped with necessary skills and expertise to address evolving population concerns.

PO2: To widen and popularize the relevance of the discipline of Demography/Population Studies in the social science discourses.

PO3: Training students to encourage evidence-based policy making with an understanding of population dynamics and its varied underpinnings.

PO4: To inculcate an interdisciplinary approach in their professional pursuit/academic engagement.

PO5: Prepare students for an advanced career in research/academics with sufficient adaptive potential to contribute in the national and international sphere.

B. Programme Specific Outcomes (PSOs):

PSO1: Understand the basic concepts and measurements in Demography/Population Sciences.

PSO2: Appreciate and recognize the relevance of changing age sex structure of human population with its implications for understanding the development.

PSO3: Develop the unique expertise in handling large scale survey data sets using statistical packages towards research and policy derivatives.

PSO4: Adopt an interdisciplinary perspective in reading population and health issues.

PSO5: Obtain the required skills for conducting scientific research and its communication to a varied audience.

PSO6: Become qualified professionals to contribute towards the frontiers in understanding population dynamics and its overarching relevance in examining the development.



Index to the Courses

Course No.	Course Name	Course Type	Credits	Hours
SEMESTER-I				
MSP F1	Social Science Concepts	Foundation	NC	45
MSP C1	Basic Statistical Methods for Population Studies	Core	4	60
MSP C2	Demography and History of Population	Core	2	30
MSP C3	Age-sex Structure, Quality of Data and Population Dynamics	Core	2	30
MSP C4	Nuptiality	Core	2	30
MSP C5	Fertility	Core	3	45
MSP E1.1	Healthcare System and Policies	Elective	3	45
MSP E1.2	Biostatistics and Epidemiology	Elective		
MSP E1.3	Family Demography	Elective		
Semester Credits			16	285
SEMESTER-II				
MSP C6	Mortality, Morbidity and Public Health	Core	4	60
MSP C7	Research Methodology I	Core	2	30
MSP C8	Gender Equity and Reproductive Health	Core	3	45
MSP C9	Migration and Urbanization	Core	4	60
MSP C10	Statistical Methods and Computer Applications	Core	2	30
MSP E2.1	Historical Demography	Elective	3	45
MSP E2.2	Health Economics and Financing	Elective		
MSP E2.3	Urbanisation, Space and Planning	Elective		
MSP E2.4	Gender, Health and Development	Elective		
MSP V1	Viva-Voce-I	VI	2	30
Semester Credits			20	300
SEMESTER-III				
MSP C11	Application of Statistical Packages in Large Scale data	Core	4	60
MSP C12	Population Projections	Core	2	30
MSP C13	Demographic Estimation Techniques and Models	Core	2	30
MSP C14	Population, Development and Environment	Core	4	60
MSP C15	Population Policies and Programme Evaluation	Core	4	60
MSP C16	Research Methodology II	Core	3	45
MSP E3.1	Concepts and Measures of Global Health	Elective	3	45
MSP E3.2	Political Demography	Elective		
MSP E3.3	Population, Environment and Sustainable Development	Elective		

Course No.	Course Name	Course Type	Credits	Hours
MSP E3.4	Occupational Health	Elective		
Semester Credits			22	330
SEMESTER-IV				
MSP C17	Spatial Demography and Application of GIS	Core	4	60
MSP C18	Population Ageing and Health Transition	Core	4	60
MSP E4.1	Operations Research in Reproductive Health	Elective	3	45
MSP E4.2	Monitoring and Evaluation in Population and Health	Elective		
MSP E4.3	Gender Theories in Demography and Development	Elective		
MSP D	Dissertation	Core	10	
MSP V2	Viva-Voce-II	Core	2	
Semester Credits			23	165
TOTAL CREDITS			81	

- F – Foundation course, C – Core course, E – Elective course, NC: Non Credited course: V-Viva voce, D-dissertation.
- Semester I: One elective should be opted; i.e. E1.1/E1.2/E1.3
- Semester II: One elective should be opted i.e. E2.1/E2.2/E2.3/E2.4
- Semester III: One elective should be opted; i.e. E3.1/E3.2/E3.3/E3.4
- Semester IV: One elective should be opted; i.e. E4.1/E4.2/E4.3

SOCIAL SCIENCE CONCEPTS

Course Outcomes:

- CO1: To gain familiarity with basic social science concepts that has bearing on understanding population dynamics.
CO2: Understand the varied aspects of social reality, such as caste, tribe, gender, kinship, marriage, social mobility and religion in terms of its relevance in population studies.
CO3: Viewing population in space and time and read population geography in consideration of man-environment relationship, geographical factors and regional perspective.
CO4: Recognition of interplay between economic development and population changes in an evolving world order.
CO5: To understand the psychological concepts like perception, behaviour, emotion, personality, coping mechanism, and their bearing on Population Studies

SOCIOLOGY

1. Sociology: sociology as a social science- its nature, subject matter and scope
2. Relation of sociology with other social sciences, sociological perspectives
3. Basic Concepts in sociology
4. The Family:
 - a) Sociological Significance of the Family b) Types and functions of Family
 - c) Nuclear and joint families
5. Marriage: Different forms of marriage, changing patterns of marriage/mate selection in India
6. Kinship --features of kinship system in India, regional variations
7. Social stratification: Social Class and Caste: Principles of Class and Caste
8. Socialization: agencies of socialization
9. Culture: meaning and characteristics of culture.
10. Society and Culture in India
 - a) Aspects of society and culture in India and its role and importance in Population Studies.
 - b) Social Institutions and their role in influencing demographic situation of India - Family, Marriage, Kinship and Religion
11. Caste System
 - i) Concept and definition of Caste System,
 - ii) Changing Caste System in India
12. Social Mobility: vertical and horizontal, intra- and inter-generational mobility
13. Social Change
Definition and Concept of Social Change
14. Process of Social and Cultural Changes in India and their role in influencing demographic behaviours: a) Sanskritization b) Westernization c) Modernization

GEOGRAPHY

1. Importance of Geographical factors- Physical factors (relief, rainfall, temperature, soil and vegetation) Economic and Social factors (Mineral resources and industrialization, transport, language, religion and caste/tribe); the influence of geographical factors on population.
2. Geographical approaches: the concept of region- formal and functional regions; the concept of growth pole and regional development; core and periphery; distance and decay function; Map scale, choropleth, isopleths and distribution maps.
3. Physical divisions of India; administrative organization of India. Historic-Cultural regions, Agro-climatic regions; NSS regions.
4. Theoretical Perspectives in Geography- Place of geography in Social sciences; man and nature relationship- determinism and possibilism; Positivism (quantification) and Phenomenology; and Radical and Postmodern Geography.
5. Concept of Social Space; Social Structure and Spatial Structure; Role of time and space in social sciences.

ECONOMICS

A. Introduction:

Defining Economics and welfare Economics, Micro and Macro Economics, Economic and non-economic good, Basic Economic Activities, Factors of Production, Economic Systems.

B. Basic Concepts in Micro Economics

Concept of Marginal and Total Utility, Law of Diminishing Marginal Utility, Theory of Demand: Indifference curves Theory and Properties, Equilibrium of consumer, Income, Substitution and Price effect. Elasticity of Demand: Price, Income and cross elasticity, Basic concepts in theory of production, cost and market structure.

C. Basic Concepts in Macro Economics

Basic Concepts in National Income: Concept of GDP, NDP, GNP, NNP, NI, PCI, PPP, Theory of consumption and saving: Consumption function, Keynes' Psychological law of consumption, concept of APC and MPC, APS and MPS, Factors affecting consumption and savings, Basic concept of Investment.

PSYCHOLOGY

Social Psychological Concepts:

The Value of psychology and perspectives in psychology; scientific study of social influences on behavior and the interaction between individuals and groups: social pressure, leadership

Basics of Psychology:

Why Psychology, branches of psychology, methods of research, Psychological well-being across major stages of the life span. Role of psychology in population studies.

Sensation, Attention and Perception:

Sensation: concepts of threshold, Factors influencing attention including set and characteristics of stimulus: Definition and concept of perception, biological factors in perception; Perceptual organization-influence of past experiences, perceptual defense- factors influencing space and depth perception, size estimation and perceptual readiness; Extrasensory perception; Culture and perception, Subliminal perception.

Motivation and Emotion:

Psychological and physiological basis of motivation and emotion; Effects of motivation and emotion on behaviour; Extrinsic and intrinsic motivation; Factors influencing intrinsic motivation: the related issues.

Personality:

Definition and concept of personality; Theories of personality (psychoanalytical, socio-cultural, interpersonal, developmental, humanistic, behaviouristic, trait and type approaches); big 5 factor theory;

Language and Communication:

Human language - Properties, structure and linguistic hierarchy; Language acquisition- predisposition, critical period hypothesis, Process and types of communication - effective communication training.

Psychological well being and Mental Disorders:

Concept of health-ill health; Positive health, well being; Causal factors in mental disorders (Anxiety disorders, mood disorders, schizophrenia and delusional disorders; personality disorders, substance abuse disorders); Factors influencing positive health, well being, life style and quality of life; Happiness disposition.

ESSENTIAL READINGS:

1. Davis, Kingslay, *Human Society*. MacMillan and Co., New York, (1975), Chapters 1, 3,5,6.
2. Kapadia, K. M., *Marriage and Family in India*. Oxford University Press, Calcutta, (1966).
3. Mandelbaum, D.G., *Society in India-Continuity and Change(vol I) and Change and Continuity, (Vol. 2)*. University of California Press, London, (1970).
4. Mac Iver R.M. and Charles H. Page, *Society: An Introductory Analysis*, Holt, Rinehard and Winston, New York, (1949), Chapters No.1, 3,7,11,15,22,24,25,26.
5. Srinivas M.N., *Social Change in Modern India*, University of California Press, Berkeley, (1966)
6. Sen, A. (2018). *Collective Choice and Social Welfare: An Expanded Edition*. United Kingdom: Harvard University Press. Haralambos, Michael, *Sociology: Themes and Perspectives*. Oxford University Press, Delhi (1980).
7. Sigmund Freud, *The Interpretation of Dreams* (1900)
8. Charles M. Duhigg, *The Power of Habit* (2012)
9. Karen Horney, *The Neurotic Personality of Our Time* (1937)
10. Oliver Burkeman, *The Antidote: Happiness for People Who Can't Stand Positive Thinking* (2012) .
11. Carl Gustav Jung, *Man and His Symbols* (1964)
12. *Introduction to Psychology* 10th Edition James W. Kalat (2013)
13. Abler, R, Adams, J and Gould P., (1971). *Spatial Organization: The Geographer's view of the World*. Prentice Hall, New Jersey.
14. Johnston, R.J., (2004): *Geography and Geographers*, Oxford Unity Press.
15. Richard, Pect., (1998): *Modern Geographic Thought*, Blackwall Publishers
16. Singh, R.L., (1971) *India: A Regional Geography*. National Geographical Society of India, Varanasi.
17. Ahuja H.L, *Advanced Economic Theory: Microeconomic Analysis*, S. Chand and Company Limited, New Delhi, Chapters 5,6,7,8,9,12,16, 17, 18, 20
18. Koutsoianis A, 1979, *Modern Microeconomics*. London: Macmillan Press Ltd,

19. Lipsey and Chrystal, 2004, Economics, Oxford university Press, Part One, part two and part five
20. Dasgupta AK, Epochs of Economic Theory, OUP, Bombay, Chapters 2, 3, 4, 7 and 8

SUGGESTED READINGS:

1. Kuppaswamy B., *Social Change in India*, Konark Publication Pvt. Ltd. Delhi, (1972).
2. Muzumdar, Haridas , *The Grammar of Sociology: Man in Society*, Asia Publishing House, Mumbai (1966).
3. Johnson, Harry M, *Sociology : A Systematic Introduction* . Allied publishers, Bornhay (1966).
4. Mc Gee , Reece , *Sociology An Introduction* , Holt, Rinehard and Winston, New York (1980).
5. Magill ,Frank N (ed.), *International Encyclopedia of Sociology*, Fitzroy Dearborn Publishers, London. (1995).
6. Francis John Monkhouse (1956) *Maps and Diagrams. Their Compilation and Construction*, University of Michigan.
7. JF Friedman (1966) *Regional Development Policy: A Case Study of Venezuela*, Cambridge, Massachusetts : MIT Press, 1966.
8. Samuelson, Paul A. and William D. Nordhaus., "Economics", New York: Tata McGraw Hill, part one, two and five
9. Datt R and Sundaram K.P.M, 2000, Indian economy, S Chand & Company Ltd. Part II.

**BASIC STATISTICAL METHODS FOR
POPULATION STUDIES****Course Outcomes:**

- CO1: Refresh on basic statistical methods and its application to population data.
CO2: Recognize the relevance of distribution in bivariate and multivariate tabulations.
CO3: Application of statistical distribution in diagnosing demographic outcome and indicators.
CO4: Develop an understanding of generalization based on principles of statistical analysis.

Introduction to statistics: Descriptive and Inductive statistics. Concept of variables, Nominal, Ordinal and Interval and ratio scale variables.

Tabulation of data, conversion of raw data into frequency distribution. Generating simple frequencies. Graphical presentation of nominal, ordinal data. Logarithms: properties of logarithms. Ratios, Proportion and rates, growth rates (arithmetic, geometric and exponential), Interpolation and Extrapolation

Data Manipulation recoding creating new variables, sorting, filtering and selection of specific data.

Measures of Location: Mean (arithmetic, geometric, harmonic) Median, Mode; Its temporal and cross-sectional comparison; virtues and vices as a means of aggregation. Analyzing mean, (arithmetic, geometric, harmonic), median, mode.

Measures of dispersion: Range, Variance, Standard Deviation, coefficient of variation; use and interpretation in comparative reading of situation. Measures of Skewness and Kurtosis.

Techniques of analysing bivariate nominal and ordinal level data: Contingency table, odds ratios, relative risk. Measuring association and interpreting concordance and discordance

Probability concept and set theory: Introduction to the concept of probability, A-priory, and mathematical probability. Events: exhaustive, mutually exclusive events; Illustrating laws of probability, additive and multiplicative laws of probability through demographic data. Bayes' theorem. Discrete probability distributions: Binomial and exponential functions, Binomial probability distribution and Poisson distribution and their properties. Continuous probability distribution: Normal distribution and its properties, applications of normal distribution.

Concept of correlation and regression: Pearson correlation coefficient, and its properties; Spearman ranks correlation coefficient. Concept of linear regression, fitting of regression line to bi-variate data.

Concepts in Inductive statistics: Population, sample parameter, and statistic. Sampling distribution of mean and standard error. Concepts of statistical hypothesis, critical region, level of significance, confidence interval and two types of errors.

Testing statistical hypothesis and test of significance: Introducing the t-distribution, comparing two groups, principles of comparison, independent t-test and paired t-test, Assumptions involved in t-testing. Testing the association of attributes and Chi-square goodness of fit.

Analysis of Variance with and without interaction. Concept of unbiased estimates, **Introduction to Multivariable Analysis.** Multiple regression. Concept of Multiple and Partial correlation coefficients in regression analysis, Standardized regression coefficients, Regression with dummy variables. Logistic regression.

ESSENTIAL READINGS:

1. Blalock, Hubert M. (1960): *Social Statistics*, McGraw-Hill Book Company, New York.
2. Chakravarti, S.R. and Giri, N. (1997): *Basic Statistics*, South Asian Publishers, New Delhi.
3. Clarke, G.M. and Cooke, D., (1994): *A Basic Course in Statistics*, Arnold, London.
4. Dixon, W.J and Massey, F.J. (1983) *Introduction to Statistical Analysis*, 4th ed., New York, MC Graw Hill, 380-381, 534.
5. Goon, A.M., Gupta, M.K. and Dasgupta, B. (1985): *Fundamentals of Statistics* Vol. I, The World Press Private Ltd. Calcutta.
6. Jain, S.K. 1979. *Basic Mathematics for demographers*. Canberra: The Australian National University.

SUGGESTED READINGS:

1. Lipshutz, Seymour., Schaum's Outline Theory and Problems of *Set Theory and Related Topics* Series, McGraw Hill.
2. Marcella Pagano and Kimberlee Gournau (2000) "Principles of Biostatistics" Second Edition. Duxbury Thomson Learning, United States.
3. Prakasam, C.P., G. Rama Rao, and R.B. Upadhyay (1987): *Basic Mathematics in Population Studies*, Gemini Publishers, Mumbai.
4. Siegel J.J. and D.A. Swanson (Ed.), 2004. *The Methods and Materials of Demography*. Second Edition. Flaevier Academic Press.
5. Venkatachary, K. (1994). *Elements of Mathematics for Demographers*. Monograph Series No.9. Regional Institute for Population Studies, University of Ghana. Legon.
6. Bhat N.R and M.R. Singh. 1993. *Applied Mathematics*. New Delhi: Tata McGraw – Hill Publishing Company Ltd.
7. Dillon, W.R. and Goldstein, M. (1984): *Multivariate Analysis*, John Wiley and Sons, New York.
8. Douglas and Altman (2006). *Practical Statistics for Medical Research*, Chapman and Hall Publication, Washington, D.C.
9. Fisher, L.D and Van Belle, G. (1993) *Biostatistics: A Methodology of the Health Sciences*, New York, Wiley Intgescience.

DEMOGRAPHY AND HISTORY OF POPULATION**Course Outcomes:**

CO1: Acquaint the students with the scope and relevance of the discipline of population studies.

CO2: Become aware of the global, regional and national population trends.

CO3: To understand the nature of diversity in the size, distribution, composition, and basic characteristics of population across Indian states.

CO4: To familiarize on various sources of demographic data in India, and their limitations.

CO5: To appreciate the historical perspectives on population change.

1. Introduction to Demography

Definition and Scope: Demography as a scientific discipline; Development of demography as a discipline. Multi-disciplinary nature of Demography, Linkage with other social science disciplines including statistics, mathematics, economics etc. Some basic demographic concepts. Balancing Equation and components of population change, Concept of doubling time, Malthusian concept of population growth and resources.

2. Sources of Demographic Data

Population census; Uses and limitations; Indian Censuses. Census taking under British India and later, details of different domain on which Indian census collect data, publication of census data/ reports. Vital registration system., Historical data Parish Records, National Sample Survey, Sample Registration System, Demographic Health Surveys (DHS), Longitudinal ageing Survey in India, Other sample surveys. Strengths and weaknesses of various data sets

3. Population History

Historical trends in population situation in the world. Present population situation and past and future trends in the world. in developed and developing countries.

Demographic characteristics of first modern people. Socio-economic and demographic features of Indus Valley Civilisation, population change from medieval to Mughal times

History of population in India: Population estimates in ancient time, population history during British rule, famine, plague, influenza and its impact on population. Trends and growth of India's population during pre-independence and post-independence period, major sources of data about the population in the past; major explanations of population change in the past; Contribution of fertility, mortality and migration to population change in the past.

ESSENTIAL READINGS:

1. Jacob S. Siegel and David a Swanson (2004): *The Methods and Materials of Demography*, Second Edition, Chapters 1, 2, 3, 7, 8, 9,10, Elsevier Science, USA.
https://books.google.co.in/books/about/The Methods and Materials of Demography.html?id=uPrAAAAMAAJ&redir_esc=y

2. John Weeks (2005): *Population: An Introduction to Concepts and Issues*, Wordsworth Learning, Singapore 9th edition.
3. Dyson, Tim, *A Population History of India: From the First Modern People to the Present Day* (Oxford, 2018; online edn, Oxford Academic, 18 Oct. 2018), <https://doi.org/10.1093/oso/9780198829058.001.0001>, accessed 20 Mar 2023.
4. Bhende, A., and Kanitkar, J. (1996): *Principles of Population Studies (Seventh Edition)*, Himalaya Publishing House, Bombay.

SUGGESTED READINGS:

1. Warren S. Thompson, (1930), *Population Problems*, New York; London: McGraw-Hill, [C1930]
2. Bogue, D., (1969): *Principles of Demography*, John Wiley and Sons, New York. United Nations, (1973): *The Determinants and Consequences of Population Trends*, Vol. 1, Chapters 1, 2 and
3. Census of India: <http://www.censusindia.gov.in>
4. United Nations, DESA, *World Population Prospects 2022*, https://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/wpp2022_summary_of_results.pdf
5. United Nations, (1998): *Handbook on Civil Registration and Vital Statistics Systems, Management, Operation and Maintenance*, New York.
6. United Nations (1958). *Multilingual Demographic Dictionary*, John Wiley & Sons Ltd., New York

AGE-SEX STRUCTURE, DATA SOURCES AND POPULATION DYNAMICS

CO1: To familiarize the students with age-sex structure of the population

CO2: To develop capacity in measuring and analyzing the age-sex structure of a population and its determinants and consequences.

CO3: To develop an understanding of demographic transition and demographic dividend.

Concepts and Measures of age and sex structure

Defining age and sex, sex ratio, sex ratio at birth, classification of age group and its importance, Measures of age structure; median age, percent distribution, dependency ratio, potential support ratio.

Age and sex pyramid of developed and developing countries, variations in age distribution, sex ratio and sex ratio at birth. Concept of age standardization, demographic transition theory and demographic dividend.

Dynamics of Age-Sex Structure of the World and India

Present levels and past trends in the sex and age structure of the population of the world, developed and developing countries and India.

Importance of age-sex structure in population dynamics and factors affecting sex ratio of the population. Sex ratio of India's population and role of different factors in changing sex ratio.

Factors affecting age structure of the population: dynamics of age structure along with demographic transition; ageing of the population and relative role of low fertility and low mortality. Implication of migration on age sex structure.

Evaluation and Adjustment of Demographic Data:

Appraisal of quality of age-sex data.

Types and source of errors

Methods of data evaluation and error detection: direct (Post-enumeration surveys) and indirect methods

Appraisal of birth and death statistics by means of balancing equation

Dual system of records

Techniques of evaluation of age and sex data:

Measures of errors in age data (Graphical representations, Whipple's index, Myer's index, Age ratio, Sex ratio and UN Joint score

Evaluation of age data for young and old ages

Techniques of errors adjustment in age data and prorating

Quality checks incorporated in survey procedures to minimize errors

Possible errors and implications

Component of non-sampling errors

Mechanisms and protocols to minimize and correct errors

Quality Assessment of Large-Scale Demographic Surveys

ESSENTIAL READINGS:

1. Jacob S. Siegel and David A. Swanson (2004): *The Methods and Materials of Demography*, Second Edition. Chapters 1, 2, 3, 7, 8, 9, 10, Elsevier Science, USA.
https://books.google.co.in/books/about/The_Methods_and_Materials_of_Demography.html?id=ulrA-AAAAAAAJ&redir_esc=y
2. John Weeks (2005): *Population: An Introduction to Concepts and Issues*, Wordsworth Learning. Singapore 9th edition.
3. Bhende, A., and Kanitkar, T. (1996): *Principles of Population Studies* (Seventh Edition), Himalaya Publishing House, Bombay.
4. Preston, Samuel H., Heuveline, Patrick, and Guillot, Michel (2001) *Demography: Measuring and Modeling Population Processes*. Oxford: Blackwell Publishers.

SUGGESTED READINGS:

1. Warren S. Thompson, (1930), *Population Problems*, New York; London: McGraw-Hill, [C.1930]
2. Bogue, D., (1969): *Principles of Demography*, John Wiley and Sons, New York.
3. United Nations, (1973): *The Determinants and Consequences of Population Trends*, Vol. 1, Chapters 1, 2 and 8.
4. Census of India: <http://www.censusindia.gov.in>
5. United Nations. DESA. World Population Prospects 2022.
https://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/wpp2022_summary_of_results.pdf
6. United Nations, (1998): *Handbook on Civil Registration and Vital Statistics Systems, Management, Operation and Maintenance*, New York.
7. Mukherjee S.B. 1976. 'The Age Distribution of the Indian Population: A Reconstruction for the state and territories, 1881-1961'. East-West Centre, University Press of Hawaii, Honolulu.
8. S Irudaya Rajan. K S James (2008). Third National Family Health Survey in India: Issues, Problems and Prospects, *Economic & Political Weekly*, November 29, 2008 33
9. K S James, S Irudaya Rajan (2004). Respondents and Quality of Survey Data. *Economic and Political Weekly* February 14, 2004

NUPTIALITY

- CO1: Familiarize students' basic concepts on nuptiality
 CO2: Inculcate an understanding of various theories of family formation.
 CO3: Identify the different sources of data for nuptiality
 CO4: Perform nuptiality analysis

Nuptiality

Introduction, Basic Concepts, Sources of Data and their limitations, Measures of Nuptiality from Registration data.

1. Analysis of Marital Status Data from Census.
2. Singulate Mean Age at Marriage (SMAM) - Synthetic Cohort and Decadal Synthetic Cohort Method.
3. Indices of Nuptiality (Coale's Indices)
4. Marriage Pattern in India and Selected Countries and related factors.
5. Marriage squeeze: Concepts and Implications, Concepts of Hypergamy and Hypogamy Gross and Net Nuptiality Tables.
6. Non-marriage
7. Multistate approach in Nuptiality analysis. Standard Age Pattern of Marriage - Coale's Model, Divorce and Widowhood.
8. Definition and basic measures.
9. Marriage Dissolution Tables and Remarriage Concept
10. Mean Age at Widowhood/Divorce from Census Returns.

Definition and Measures of Remarriages of Widowed and Divorces.

ESSENTIAL READINGS:

1. Siegel, Jacob S., and David A. Swanson (eds.). (2004) *The Methods and Materials of Demography* (Second edition). San Diego: Elsevier Academic Press.
2. Newell, Colin (1988) *Methods and Models in Demography*. London: Frances Pinter.
3. Asha A. Bhende and Tara Kanitkar, (2003), *Principles of Population Studies*.
4. Sixteenth Revised Edition, Himalaya Publishing House, Mumbai.
5. Pathak, K.B. and F.Ram, (1998) *Techniques of Demographic Analysis*. Mumbai: Himalaya Publishing House. Chapter 4, Pp.108-153.

SUGGESTED READINGS:

1. Coale Ansley J. and T. James Trussell (1978) *Technical Note. Finding the Two Parameters that Specify a Model Schedule of Marital Fertility. Population Index* 44, 2 (1978), pp. 203-213.
2. Palmore, James A. and Gardner, Robert W. (1983) *Measuring Mortality, Fertility and Natural Increase: a Self-Teaching Guide to Elementary Measures*. Honolulu: East-West Population Institute, East-West Center.
3. Rowland, Donald T. (2006), *Demographic Methods and Concepts*. New York: Oxford University Press.
4. Bogue, Donald J., Eduardo E. Arriaga, and Douglas L. Anderson, eds. (publication editor George

- W. Rumsey) (1993) *Readings in Population Research Methodology*. Chicago: United Nations Population Fund. Volume 3: Fertility Research, (All three chapters but selected pages).
5. Pollard, A.H., Yusuf, Farhat and Pollard, G.N. (1990) *Demographic Techniques* (third edition). Sydney: Pergamon Press.

MSP C5

45 Hours

FERTILITY

Course Outcomes:

- CO1: Familiarize students on basic concepts on fertility
CO2: Recognize socio-cultural and economic factors influencing fertility behaviours.
CO3: Inculcate an understanding of various theories of reproduction and family formation.
CO4: Identify the different sources of data for fertility measurements
CO5: Perform fertility analysis

A. FERTILITY

1. Terms and Concepts

Importance of the fertility study in population dynamics; Basic terms and concepts used in the study of fertility, desired family size, Fertility regulation

2. Framework for Fertility Analysis

Determinants of natural fertility; Davis intermediate variables framework of fertility; Socio-economic determinants of proximate variables; Lee and Bulatao framework of fertility determinants.

3. Fertility Transition in Developed Countries

Historical fertility declines in European and Non-European Industrialized Countries and underlying factors; Below-replacement level fertility in developed countries and its implications.

4. Fertility Transition in Developing Countries

Pattern of fertility transition in developing countries; causes of high fertility in Africa and Asia. Fertility Transition in India: Historical trend and regional patterns in development, culture and fertility transition. Fertility Surveys – Findings and Emerging research issues.

5. Hypotheses and Theories of Fertility

Theory of Social Capillarity, Theory of Change Response, Theory of Diffusion and Cultural Lag, Liebenstein Theory, Becker's Theory, Easterlin's Framework of Fertility, Intergenerational Wealth Flow Theory, U. N. Threshold Hypothesis, Reproductive motivations and value of children theories. Second demographic transition

B. FERTILITY MEASURES AND MODELS

6. Introduction of Basic Concepts

Sources of Data for Fertility Analysis

Concept of Period and Cohort Approaches

Direct Estimation of Fertility

Period Measures of Fertility

Basic Fertility Measures

Order-Specific Fertility Rates

Marital Status Specific Fertility Rates

Standardized Birth Rates and Coale's Fertility Indices

Cohort Measures of Fertility

Children Ever Born

Completed Fertility

Parity Progression Ratios

Reproduction Measures

Concept of Maternity Function

Basic Idea of Tempo and Quantum Effects

8. Fertility Models

Age patterns of Fertility: Coale and Trussell Fertility Model: Estimating M and m

Bongaarts and Potters Aggregate Fertility Model and its applications

Essential Readings:

1. Preston, Samuel H., Heuveline, Patrick, and Guillot, Michel (2001) *Demography: Measuring and Modeling Population Processes*. Oxford: Blackwell Publishers.
2. Siegel, Jacob S., and David A. Swanson (eds.), (2004) *The Methods and Materials of Demography* (Second edition). San Diego: Elsevier Academic Press.
3. Newell, Colin (1988) *Methods and Models in Demography*. London: Frances Pinter.
4. United Nations, (1973), *Determinants and Consequences of Population Trends, Vol. 1*, pages 96-104, UN, New York.
5. Bongaarts, J and Potter, R (1983) *Fertility, Biology and Behavior: An Analysis of the Proximate Determinants*. Academic Press, New York.
6. Asha A. Bhende and Tara Kanitkar, (2003), *Principles of Population Studies*, Sixteenth Revised Edition, Himalaya Publishing House, Mumbai.
7. Pathak, K.B. and P. Ram, (1998) *Techniques of Demographic Analysis*, Mumbai: Himalaya Publishing House. Chapter 4, Pp.108-153.

Suggested Readings:

1. David G. Mandelbaum, (1974), *Human Fertility in India: Social Components and Policy Perspectives*, University of California Press, Berkeley.
2. United Nations, (1973), *Determinants and Consequences of Population Trends, Vol. 1*, pages 96-104, UN, New York.
3. Coale Ansley J. and T. James Trussell (1978) *Technical Note: Finding the Two Parameters that Specify a Model Schedule of Marital Fertility* *Population Index* 44, 2 (1978), pp. 203-213.
4. Palmore, James A. and Gardner, Robert W (1983) *Measuring Mortality, Fertility and Natural Increase. a Self-Teaching Guide to Elementary Measures*. Honolulu: East-West Population Institute. East-West Center.
5. Rowland, Donald E. (2006), *Demographic Methods and Concepts*. New York: Oxford

University Press.

6. Bogue, Donald J., Eduardo E. Arriaga, and Douglas L. Anderson, eds. (publication editor George W. Rumsay) (1993) *Readings in Population Research Methodology*. Chicago: United Nations Population Fund. Volume 3: Fertility Research. (All three chapters but selected pages).
7. Sydney H. Coontz, (1968), *Population Theories and the Economic Interpretation*, Routledge, London.
8. Siegel, Jacob S., and David A. Swanson (eds.), (2004) *The Methods and Materials of Demography* (Second edition). San Diego: Elsevier Academic Press.
9. Newell, Colin (1988) *Methods and Models in Demography*. London: Frances Pinter.
10. Asha A. Bhende and Tara Kanitkar, (2003). *Principles of Population Studies*, Sixteenth Revised Edition. Himalaya Publishing House, Mumbai.
11. Pathak, K.B. and F.Rain. (1998) *Techniques of Demographic Analysis*, Mumbai: Himalaya Publishing House, Chapter 4, Pp.108-153.

MSP C6

60 Hours

MORTALITY, MORBIDITY AND PUBLIC HEALTH

CO1: Become familiar with the basic definitions and concepts used, importance and the scope of mortality study and its bearing on fertility, and population health.

CO 2: Become aware of varied sources of health data (morbidity, mortality, disability), their merits/demerits, uses and significance as indicators; and their basic measures.

CO3: Explain synthetic formulation of survival experience (e.g., life table).

CO4: To convey the transitional and differential dynamics of early age life experiences.

CO5: To understand the linkages among epidemiology, mortality transition, and public health.

I. MORTALITY

1. Basic Concepts and Measures of Mortality

Definition of deaths and fetal deaths according to WHO; Need and importance of the study of Mortality; various sources of mortality data and its quality with special reference to the developing countries. Global Mortality and Emerging Issues

Introduction and basic measures:

Some basic measures: - crude death rate (CDR) and Age-Specific Death Rates (ASDRs)- their relative merits and demerits.

Techniques of standardization and decomposition of Rates/Ratio

Need and importance of standardization- direct and indirect technique of standardization of rates and ratios in the light of mortality rates; Decomposition.

Infant mortality and its sub-division

Need and importance of the study of infant mortality in demographic analysis; Conventional measures of infant mortality (IMR) and its sub-divisions- Neo-natal, Post- Neonatal mortality and Peri-natal Mortality Ratio/Rate. Approaches for estimating infant and child mortality rates from birth history collected in large-scale surveys; and Lexus diagram.

Measures of maternal mortality

Maternal Mortality Rate, Ratios, Life time risk; Issues related to estimation of maternal mortality measures.

2. Life Tables

Introduction

Basic concept of a life table; types and forms of life table; Brief history of life tables; Anatomy of life table; uses of life table in demographic analysis.

Construction of Life tables based on Age- specific death Rates (ASDRs)

Underlying assumptions of life table construction using ASDRs of a community during a specified period, Methods of life table Construction-Conventional approach, and those proposed by Greville and Chiang.

3. Mortality and health transitions

Levels and trends in mortality by regions, with special reference to India; age and sex specific mortality with a focus on excess female mortality; differentials by residence and socio- economic factors (occupation, income, education, etc); historic mortality transitions as experienced by developed countries (Europe); overview of epidemiological transition: changing disease and death pattern in developing countries; factors responsible for high mortality in the past; main causes of mortality decline in developing countries; current global mortality scenario; and concepts and overview of health transition.

4. Child survival framework

Importance of infant mortality in population and health; causes of infant mortality (endogenous and exogenous factors); levels and trends (global and south Asia/India); and Mosley and Chen' framework for child survival.

5. Causes of death

Importance of causes of death statistics; definition and sources of causes of death statistics; a brief history of the International statistical classification of diseases, injuries and causes of death (ICD); an overview of ICD – X and XI (1990, 2019); global leading causes of death (with a focus on Asia and India); cause of death statistics in India (RG: Rural and MCCD); distribution of deaths by main causes by age, development, life expectancy (UN).

B. MORBIDITY AND PUBLIC HEALTH

6. Introduction to Morbidity

Need and importance of the morbidity study; sources of morbidity data; concepts and definitions of health and morbidity, and burden of disease: conditions as proposed by WHO and other social scientists.

7. Measures of Morbidity

Need for morbidity indices; various measures of morbidity: incidence and prevalence rates, interrelationships between measures of morbidity, other measures related to working day loss etc.

8. Public Health and Epidemiology

Basic concepts of community health; principles of Epidemiology- basic concepts and definitions; types of Epidemiology, descriptive and analytical; epidemiology of communicable and non-communicable diseases; nutrition and health, environment and health; occupation and health.

ESSENTIAL READINGS:

1.Caldwell, J, Sally Findley, Pat Caldwell and Gigi Santow (1990): What we know about health

transition: The cultural, social and behavioural determinants of health. The proceedings of an international workshop, Vol.1&2, ANU, Canberra, Health Transition Centre.

2. Mosley, W. H. and L. C. Chen (1984): Analytical framework for the study of child survival in developing countries, Population and Development Review 10 (Supplementary Copy).
3. Park, J.F. and K. Park (1989): Text Book of Preventive and Social Medicine (Twelfth Edition), M/S Banarsidas Bhanot Publishers, Jabalpur (Chapters 2 & 3).
4. Ram, P. and K.B. Pathak (1998): Techniques of Demographic Analysis, 2nd Ed, Himalaya Publishing house, Bombay (Chapters 2 & 3).
5. WHO (1992): International Statistical Classification of Diseases and related Health Problems, Tenth Revision, Vol. 1, Geneva

SUGGESTED READINGS:

1. Omran, A. R. (1971): The epidemiologic transition: a theory of the epidemiology of population change. Milbank Memorial Fund Quarterly, Vol. XLIX, pp. 509-538.
2. Park, J.F. and K. Park (1989): Text Book of Preventive and Social Medicine (Twelfth Edition), M/S Banarsidas Bhanot Publishers, Jabalpur (Chapters 2 & 3).
3. Preston, S. H., Patrick Heuveline and Michel Guillot (2001): Demography: Measuring and Modeling Population Process, Blackwell Publishers, Oxford, UK (Chapters 2, 3 & 4).
4. Shryock, Henry S. Jacob Siegel and Associates (1980): The Methods and Materials of Demography Vol. 2, US Department of Commerce, Washington DC, pp. 389-393, Chapter 14

MSP E1.1

45 Hours

HEALTHCARE SYSTEMS AND POLICIES

Course Outcomes:

CO1: To develop capacity among students to analyze health systems from an international and comparative perspectives.

CO2: To provide a historical orientation to the students on Indian-scenario; national health policy, health care delivery system, national health programmes and health sector reforms. CO3: To understand the need and relevance of health legislations as an instrument of protection and promotion of public health and inculcate the ability to critically review them.

CO4: To introduce the students to health policy and systems research, and recent developments.

Unit 1: Basic Concepts: Concepts of Health; Public health; Community health; Preventive and curative health; Health promotion; Health services; and Primary, secondary and tertiary care.

Unit 2: Health System: Goals, boundaries, functions, and WHO's health system building blocks: service delivery, health workforce, health information systems, access to essential medicines, financing and leadership/governance.

Unit 3: Health Services: Basic models and functions of health services, international experiences and goals and elements in universal health care (UHC) approach.

Unit 4: Health care system in India: public sector, private sector, voluntary sector, human resources for health, access to health care, utilisation and expenditure on health services, and UHC initiatives and challenges ahead, SWOT analysis of Indian health system, a critique on the health delivery system- problems related to structural

Unit 5: Health policy: Concepts and tools of health policy, health policy stakeholders, health policy triangle framework, rational decision making to approach to health policymaking,

introduction to health policy and systems research.

Unit 6: Health policymaking in India: Health planning in post-Independent India, Bhore Committee Report 1946, National health policies, national health policy 2017, and current national health programmes.

Unit 7: Regulation in the health sector: Need for regulations, mechanisms for regulation, key legislations and standards in the health sector in India, and challenges in the implementation of regulations. Health care legislations in India: Legal aspect of health care, MTP Act, biomedical waste Rules, COPRA Act, PNDT Act, Transplantation of human organs Act, etc

ESSENTIAL READINGS:

1. Lassey M, Lassey W. and Jinks, M. (1997). *Health Care Systems around the World: Characteristics, Issues and Reforms*. Prentice-Hall, Inc.
2. Bodenheimer, Thomas S., Kevin Grumbach, *Understanding Health Policy*
3. Fort, Meredith, Mary Anne Mercer and Oscar Gish (Editors). *Sickness and Wealth: The Corporate Assault on Global Health*
4. Govt. of India (2017) - *National Health Policy-2017*, Ministry of Health and Family Welfare, New Delhi.
5. Peters, et al (2002). *Better Health System for India's poor: Findings, Analysis and Options: The World bank*, New Delhi
6. Abel-Smith, Brian. *An introduction to health: policy, planning and financing*. Routledge, 2018. Murray, Christopher J.L. and Julio Frenk. "A framework for assessing the performance of health systems." *Bulletin of the World Health Organization* 78 (2000): 717-731.

SUGGESTED READINGS

1. Bhore, J. (1946). *Report of the health survey and development committee* (Vol. 1-4). Manager of Publications.
2. Reddy, K.S. et al (2011)" *Towards achievement of universal health care in India by 2020: A Call of Action*", www.thelancet.com
3. Banerjee, D. (1982), *Poverty, class and Health Culture in India*, Vol. I Parthi Prakashan, New Delhi.
4. Indian Council of Social Science Research and Indian Council of Medical Research (1981), *Health for All by 2000 A. D.*, ICSSR, Delhi.
5. Madan, T.N. (1969), "Who Chooses Modern Medicine and Why", *Economic and Political Weekly*, pp. 1475-84.
6. K. Sujatha Rao, (2017), *Do We Care: India's Health System*, Oxford University Press, ISBN10 : 9780199469543, 478 pages

BIostatISTICS AND EPIDEMIOLOGY**Course Outcomes:**

CO1. To introduce the basic concepts of different streams of epidemiology, disease risks, and interventions as public health tools in population studies.

CO2. To introduce the study designs and methodology in cross-sectional, case-control, cohort, and experimental data to analyze epidemiological patterns.

CO3. To understand the use of summary measures of disease burden over epidemiological data in population science.

CO4. To understand comparability of estimates obtained from various parametric and non-parametric models.

CO5. To appreciate the relevance of epidemiology in public policy making.

I. Basic concepts in Biostatistics

Biostatistics Measuring the occurrence of disease. Measures of morbidity - prevalence and incidence rate; association between prevalence and incidence; uses of prevalence and incidence; problems with incidence and prevalence measurements; Clinical agreement: kappa statistics, Mantel-Haenszel test; intra-class correlation; Surveillance

Assessing the validity and reliability of diagnostic and screening test: Validity of screening test sensitivity, specificity, positive predictive value and negative predictive value; Reliability; Relationship between validity and reliability; ROC curve and its applications; Overall accuracy

Issues in epidemiology: Association; causation; causal inference; Errors and bias; Confounding; Controlling confounding; Measurement of interactions; Generalizability

Estimating risk: Estimating association - absolute risk, relative risk, odds ratio; Estimating potential for prevention - attributable risk; comparison of relative risk and attributable risk; Odds ratios for retrospective studies; Odds ratios approximating the prospective RR; Exact inference for odds ratio analysis of matched case-control data

Statistical process control: special and common causes of variation, Shewhart, CUSUM and EWMA charts

II. Basic Concepts in Epidemiology

Introduction: Definition and objectives of epidemiology; Epidemiology and clinical practice; The epidemiologic approach; Infectious disease epidemiology, occupational epidemiology, disaster epidemiology.

The dynamics of disease transmission: Modes of transmission; epidemic, endemic and pandemic; Disease outbreak; Determinants of disease outbreak; Herd immunity; incubation period; outbreak investigation; epidemiological modeling. Design and analysis of epidemiological studies. test of

significance.

Identifying the roles of genetic and environmental factors in disease causation: Association with known genetic diseases; Age at onset; Family studies; Interaction of genetic and environmental factors.

Epidemiology and public policy: Epidemiology and prevention; Population versus high-risk approaches to prevention; epidemiology and clinical medicine; Risk assessment; Meta-Analysis. Epidemiological Study Designs: Ecological, Cross-Sectional, Case-Control, Cohort Studies, Randomized Intervention Studies.

Experimental epidemiology; Randomized trials; Clinical Trials- Basic concepts; Definitions; Historical perspectives, Phase I, II, III and IV trials, Protocol development, Use of control arms, Concepts of randomization and blinding, ethical issues

III. Measurement of Health & Disease Burden

Measuring the occurrence of disease: Measures of morbidity - prevalence and incidence rate, association between prevalence and incidence, uses of prevalence and incidence, problems with incidence and prevalence measurements; Surveillance; Quality of life including DALY, HALE, etc., Measures of mortality.

Assessing the validity and reliability of diagnostic and screening test: Validity of screening test - sensitivity, specificity, positive predictive value and negative predictive value; Reliability; Relationship between validity and reliability; ROC curve and its applications; Overall accuracy. Issues in epidemiology: Association; causation; causal inference; Errors and bias; Confounding; Controlling confounding; Measurement of interactions; Generalizability.

Estimating risk: Estimating association - absolute risk, relative risk, odds ratio; Estimating potential for prevention - attributable risk; comparison of relative risk and attributable risk; Odds ratios for retrospective studies; Odds ratios approximating the prospective RR; Exact inference for odds ratio analysis of matched case-control data.

Reading List

ESSENTIAL READINGS:

1. Gordis L: Epidemiology, ed. 5. Philadelphia, 2014. Elsevier Saunders, ISBN: 978-1-4557-3733-8
2. Buntin R, Beaglehole R, Kjellstrom T: Basic Epidemiology, ed. 2. World Health Organization, 2016.
3. Friedman L M, Furberg C D, DeMets D L: Fundamentals of Clinical Trials. Boston, PSG, 1982.
4. MacMahon B, Pugh T F: Epidemiology: Principles and Methods. Boston, Little Brown, 1970.
5. Altman D G: Practical Statistics for Medical Research, London: Chapman and Hall, 2006.
6. Bhore, J. (1946). Report of the health survey and development committee (Vol. 1-4). Manager of Publications.

SUGGESTED READINGS:

1. Lee E T: **Statistical Methods for Survival Data Analysis**, ed. 2. New York, John Wiley & Sons.
2. Goldstein H: **Multilevel Statistical Model**. London, Institute of Education, 1999.
3. Murray C J L, Chen LC: **Understanding morbidity change**. In Arthur Kleinmann and Norma C Wanc (eds.) **Health and Social Change in International Perspective**, Harvard Series on Population and International Health, March 1994.
4. Everitt B S, Pickles A: **Statistical Aspects of the Design and Analysis of Clinical Trials**, ed. 2. London, Imperial College Press.
5. Kutner MH, Nachtsheim CJ, Neter J, Li W: **Applied Linear Statistical Models**. 5th edition, McGraw-Hill/Irwin, 2005.
6. Gelman A, Carlin JB, Stern HS, Rubin DB, Dunson DB, Vehtari A: **Bayesian Data Analysis**, 3rd ed. Chapman and Hall, 2013.
7. Van Der Vaart: **Asymptotic Statistics**. Cambridge University Press, 2000.
8. Groeneboom P: **Nonparametric Estimation under Shape Constraints**, Cambridge University Press; 1 edition, 2014.
9. Robin H. Lock, Patti Frazer Lock, Kari Lock Morgan, Eric F. Lock, Dennis F. Lock: **Statistics: Unlocking the Power of Data**, 1 edition. Wiley 2013
10. Kestenbaum, Brya: **Epidemiology and Biostatistics**, Springe ,2009.

MSP E1.3

45 Hours

Family Demography

1. Introduction to Family Demography:

Concepts of Family Demography: Family, Household, Family Size, Family Structure; Attitudes and Expectations in Family Formation; Cohabitation and Live-in Relationships. Type of families in Global and Indian Perspective. Unconventional families – lone parenting, gay families, living alone etc.

2. Theories of Family:

Theoretical Perspectives on Family Change; Social Exchange Theory, Abraham Maslow's (1954) Theory of Changing Needs, Becker's Theory of Family, Becker's Theory of Marriage, Becker's Theory of Time Allocation, Second Demographic Transition.

3. Family Transitions in Life Course and Implications of Family Change

Family Life Cycle, Implications of Family Change for Wellbeing of Women, Children and Older Population; Family Change and Inter-generational Support and Policy; Family Instability in an International Perspective. Evaluating Evidence on the Consequences of Family Change.

4. Family Transitions and Gender Roles

Families in Transiting Societies and Changing Gender Roles; Gender, Work, and Family; Gender, Families, and Time Use; Work-Family Balance and Conflict.

5. Family Transitions and Demographic Behaviour

Marriage and Family; Family Transitions and its Effect on Fertility, Mortality and Health; Fertility in Complex Families, Family Structure and Child Outcomes; Time Use of Parents and Children;

Impact of Fertility on Families in Later Life; Intergenerational Impacts on Health and Demographic Events; Grandparents and Parents Residence: Health and Socio-Economic Wellbeing in Later Life.

6. Family and Household Economics

New Home Economics, Household and Family Economics, New Economics of Migration, Living Arrangement for Children and Older Population; Economic, Emotional and Social Support for Children and Older Population; Left Behind Children and Older Population.

7. Data and Methods in Family Demography (Will be updated in the class)

Cross-sectional and Longitudinal Data, Village Census and Microdata, NTA, and Marriage-market data. Panel data regressions. Regression Discontinuity models or Segmented Regression models. Multistate models; Microsimulation models; Behavioural models: Projection of marriages, divorces and remarriages: Bridging the Macro-to-micro gap: Multi-Level Even-History analyses and Even-History analyses of groups; Meta-Analyses and Age-based simulations.

Essential Readings

1. Becker, G. S. (1981). *A Treatise on the Family*. Enlarged Edition. Harvard University Press, Cambridge, Massachusetts, London.
2. Casterline, J., & Gietel-Basten, S. (2018). Exploring family demography in Asia through the lens of fertility preferences. In *Family Demography in Asia* (pp. 1-14). Edward Elgar Publishing.
3. Ermisch, J. (2003). *An Economic Analysis of the Family*. Princeton, New Jersey: Princeton University Press.
4. Farris, D. N., & Bourque, A. J. J. (Eds.). (2020). *International Handbook on the Demography of Marriage and the Family*. Cham: Springer International Publishing.
5. Gietel-Basten, S., Casterline, J., & Choe, M. K. (Eds.). (2018). *Family demography in Asia: A comparative analysis of fertility preferences*. Edward Elgar Publishing.

Indian Readings

1. Chakravorty, S., Goli, S., & James, K. S. (2021). Family demography in India: Emerging patterns and its challenges. *Sage Open*, 11(2), 21582440211008178.
2. Kapadia, K. M. (1966). *Marriage and family in India* (3rd edition, 1983). Oxford University Press.
3. Patel, T. (Ed.). (2005). *The family in India: Structure and practice*. Sage.
4. Shah, A. M. (1998). *The family in India: Critical essays*. Orient Blackswan.
5. Uberoi, P. (2005). The family in India: Beyond the nuclear versus joint debate. Writing the Women's Movement: a reader. New Delhi, Zubaan. 361-396.

SEMESTER – II

RESEARCH METHODOLOGY I

CO1: To understand the research design and scientific approaches to conduct of research in varied settings.

CO2: To familiarize the quantitative methods of data collection.

CO3: To understand various sampling procedures

I. Scientific Methods of Research

Definition of Scientific Research: Assumptions, Operations and Aims of Scientific Research.

Philosophy of Research

Research Processes: Conceptual, Empirical and Analytical.

Phases of Research: Essential Criteria of Scientific Research Method.

II. Research Design

Observational Studies: Descriptive, explanatory, and exploratory, monitoring and evaluative studies.

Experimental Studies: Pre experimental design, True experimental Design, Pre-test & post-test designs, Follow-up or longitudinal design, Panel Studies.

Threat to internal validity: Reliability and Internal-External validity. Action research studies.

III. Measurement

Reliability and validity of measurement: Face, content, construct, convergent, concurrent, and predictive validity; Inter-coder reliability, stability, non random and random errors, scaling and composite indices.

Attitudinal Scales: Point scales, ranking scales, rating scales. limitations of attitudinal scales.

Types of Scales: Nominal and Ordinal Scale, Guttman, Likert, Semantic and Thurstone scales.

IV. Methods of Data Collection

Quantitative Methods: Checklist schedules, questionnaire (mail method, interviews through telephone, internet and computers), interview schedule (face-to-face interviews or personal interviews). Cross cultural variability and vignettes.

Questionnaire/interview schedule design and construction: Principles of constructing a questionnaire/ interview schedule, Types of questions, framing of questions (simple, delicate, personal matter), sequencing of sections and questions and Interview techniques.

V. Sampling

Complete enumeration versus sampling.

Concept of sampling unit, sampling frame and sampling design.

Sampling methods: Simple random sampling, stratified sampling, systematic sampling, cluster sampling, and purposive sampling.

Multistage sampling in large-scale surveys, self-weighting designs, Stratification in multistage sampling.

Sampling and non-sampling errors, calculation of weights, sample size determination.

VI. Data Collection, processing and analysis

Research ethics; At the level of respondent, community, organization and presentation of results

Fieldwork – interaction with community and respondent. Editing, coding, data entry, validation, processing & analysis.

VII. Writing research proposal and report

Purpose of a proposal/report

Content of proposal/report: Introduction, Review of Literature, Objectives and conceptual framework, Sources of data, Methods of data collection and analysis, Summary, conclusions and recommendations.

Footnotes, References/Bibliography, Appendices and Glossary

Reading List Essential Readings:

1. Bernard, H. Russell, (1995): *Research Methods in Anthropology: Qualitative and Quantitative Approaches*, Altamira Press, Walnut Creek.
2. Goode W J and Hatl P K. 1952. *Methods in Social Research*. McGraw Hills, New York.
3. Kish, Leslie, (1995): *Survey Sampling*, John Wiley and Sons, Inc. New York.
4. L. Sharon,., (1999): *Sampling: Design and Analysis*, Duxbury Press, London.
5. Iwanga S. K. and Lemeshow S., (1991): *Sample Size determination in Health Studies: A Practical Manual*, World Health Organization, Geneva.
6. Mukherji, P.N., (1999): *Methodologies in Social Science*, Sage Publications, New Delhi.
7. Pullum W. 2006. An Assessment of Age and Data Reporting in the DHS Surveys, 1985-2003. DHS Methodological Report No. 5. Calverton, Maryland, Marco International Inc.
8. Royce A. Singleton and Bruce C. Straits, (1999): *Approaches to Social Research*, Oxford, Oxford University Press.
9. Young P V. 1994 *Scientific Social Surveys and Research*. Prentice-Hall, New York (4th Edition).
10. Kothari, CR (2020). *Research Methodology - Methods And Technique*, Generic, ASIN : B0BCPDXG66 . 394 pages

MSP-C8

45 Hours

GENDER EQUITY AND REPRODUCTIVE HEALTH

Course Outcomes:

CO1: To sensitize students with the basic concepts of gender, gender equity and theories.

CO2: To explain students with gender differentials, gender inequalities and empowerment

CO3: To familiarize students with reproductive health paradigm and right based approach to reproduction and gender egalitarianism.

1. Basic concepts and theories

Definitions, Concepts and Terminologies: gender, unequal gender relations, gender equity, gender disparities, gender inequalities, gender main streaming, gender sensitive planning and gender balance. Masculinity and femininity. Importance of the study of Gender Issues in Population Studies: Social Stratification and gender, third gender.

II. Gender Inequalities and linkages with development

Sex ratio trends and patterns in India; Son Preference; Desired sex composition of children; child sex ratio; sex ratio at birth and sex selective abortion; Marriage, customs and practices, dowry and mahr system; age at marriage; Purdah system; female genital mutilation; land rights of women; education, skill development and gender; labour force participation, household activities and social reproduction; gender differentials in nutrition and health; access to health care; political representation, and female headship; valuation of women in context of marriage, dowry and development; Gender based violence (GBV) and its implications on child, adult and elderly; media and gender.

III. Autonomy, Empowerment and Status

Concepts, definition and measurement, various indicators and frameworks: approaches: Functionalist, Marxist, Feminist, Behaviouralism; process of empowerment; paradigm shift in gender, development and empowerment: WID, WAD, GID, GAD, WPD; policies and programmes related to empowerment.

V. Reproduction physiology, rights and ethical issues Evolution of ideas about reproductive health and rationale of RH approach, Components of RH and life cycle approach of RH. Male and female reproductive system; Conception, Pregnancy; Customs and taboos related to menstruation & puberty, and pregnancy in different societies; Aspects of adolescent sexual and reproductive behaviours, vulnerability of adolescent and their health needs, Role of reproductive health policies and programmes on health; ethical values in RH services; information, liberty of choice.

VI. Maternal, obstetric gynaecological and contraceptive morbidity

Risk factors of maternal mortality and morbidity, Three delay model, Emergency obstetric care, Maternal near miss and obstetric fistula, Impact of cultural practices during pregnancy on women's health, Programmes, policies and strategies for safe motherhood, Behavioural and lifestyle factors of different reproductive morbidities, Issues related to RTIs/STIs; HIV infection; Issues related to menopause and socio-psychological health problems of menopausal women.

VIII. Infertility and abortion

Methodological issues in measuring primary and secondary infertility, Social, cultural, environmental and anatomical risk factors of infertility, Sexual Consequences of infertility on marital stability of couples, mental health and violence, assisted reproductive technologies use and misuse; surrogacy; laws and acts regarding their use; abortion data and its measurement, type of abortions, Association of abortion with untimed and unintended births, Unsafe abortion and its association with maternal death and infertility, Laws regarding abortion

ESSENTIAL READINGS:

1. Berer, M. (2000): Making Abortions Safe: A Matter of Good Public Health Policy and Practice. Bulletin, WHO, Vol. 78(5), pp. 590-592.
2. Stairs, A. (2015): A Lancet Commission on sexual and reproductive health and rights: going beyond the Sustainable Development Goals. The Lancet, Vol 386 September 19, 2015.
3. Kamla Bhasin, Understanding Gender (1999): Kali for Women, India, 88 pages, 9788186706213 (ISBN): 8186706216).
4. Rosemarie Tong, Tina Fernandes Botts (2018), Feminist Thought; A More Comprehensive Introduction, 5th edition, by Routledge, ISBN 9781138329522, 432 Pages

5. Michael S. Kimmel. *The Gendered Society* (2000), Oxford University Press, USA, ISBN 9780195399028 (ISBN10: 0195399021), 472 pages.
6. Andrea Parrot, Nina Cummings (2006), *Forsaken Females: The Global Brutalization of Women*, Rowman & Littlefield Publishers, ISBN-10 : 0742545792, 270pages

SUGGESTED READINGS:

1. Alan Guttmacher Institute, (2000)- "Readings on induced abortion vol.1: Policies and policies- Articles from Family Planning Perspectives 1974-1999", The Alan Guttmacher Institute, New York.
2. Chhabra P. Maternal near miss: an indicator for maternal health and maternal care. *Indian J Community Med.* 2014 Jul;39(3):132-7. doi: 10.4103/0970-0218.137145. PMID: 25136152; PMCID: PMC4134527
3. Zampas, C. (2013) Legal and ethical standards for protecting women's human rights and the practice of conscientious objection in reproductive healthcare settings. *International Journal of Gynecology & Obstetrics* 123(Suppl 3): S63-S65.
4. Macaluso, M., et al. (2010) A public health focus on infertility prevention, detection, and management. *Fertility and Sterility* 93(1):16.e1-10.
5. Basu, Alaka M., (1992): *Culture, The Status of Women and Demographic Behaviour*, Oxford University, New York
6. Ellsberg Mary and Heise Lori L. (2005) *Researching violence against women: A practical guide for researchers and activists*. WHO and Path, Washington D.C.
7. Gita Sen, Adrienne Germain and Lincoln C. Chen, (Eds.), (1994): *Population Policies*
8. Rutstein SO, Shah IH. *Infecundity, infertility, and childlessness in developing countries*. DHS Comparative Reports No.9. Calverton, MD: ORC Macro and Geneva: World Health Organization, 2004
9. Pichauri, S. (Eds. 1999): *Implementing a Reproductive Health Agenda in India: The Beginning*, New Delhi; Population Council.
10. Rozee G.V. and Sayeed Unisa (Editors) (2016) *Assisted Reproductive Technologies in the Global South and North: Issues, Challenges and Future*, Rutledge, London.
11. Visvanathan, Nalini, Lynn Duggan, Nan Wieggersma and Laurie Nisonoff (Eds. 2011): *The Women, Gender and Development Reader*. Fernwood Publishing Halifax, Winnipeg.

MIGRATION AND URBANIZATION**Course Outcomes:**

CO1: To make the students understand the basic concepts, definitions, sources of data etc. on migration and urbanization.

CO2: To develop a critical understanding on the various theories/models concerning migration and urbanisation.

CO3: To equip students on the measurement and estimation of level, trend and pattern of migration and urbanization.

CO4: To understand the trend and pattern of spatial distribution and its linkage with migration and urbanization.

CO5: To develop a critical understanding on the emerging migration and urban issues, government policies and programmes in the context of development.

I. SPATIAL DISTRIBUTION

Pattern and factors affecting spatial distribution of population

Selected measures of concentration of population: Measures of concentration of population- Density, percentage distribution and dissimilarity index

II. MIGRATION Introduction and Concepts

Concept of mobility and migration, types of migration, census definition of migrants and its limitations sources and quality of data : Census, NSSO, Migration surveys

Migration theories and models

Ravenstein's Laws of Migration

Everett Lee's Theory of Migrationiii Mobility Field Theory

Todaro's Model of Rural-Urban Migrationv New Economics of Labour Migration

Transnationalism Theory of Migration

Internal Migration

Patterns and characteristics in developing countries with a special focus on India.

Causes and consequences of internal migration demographic, economic, social and political consequences at the individual, household and community level

Policies related to internal migration

International migration

Sources of international migration data and problems.

Patterns and types of international migration: Historical and recent trends, Indian Diaspora and people of Indian origin.

Causes and consequences of international migration: demographic, economic, social and political consequences at the individual, household and community level

Policies of international migration

Measures of Migration

Direct estimation of lifetime and inter-censal migration rates from census data

Indirect measures of net internal migration: Vital Statistics Method, National Growth Rate Method and Census and Life Table Survival Ratio methods

Estimation of return migration

Methods of estimating international migration

Migration and health

Migrants' rights and Social entitlements

Urbanization Definition and Concepts

Definitional and conceptual problems and Data sources: Rural-Urban Fringe, Metropolis or Metropolitan Area, Conurbation, Metropolitan Region, Megalopolis, Metropolitan Hinterland, urban turnaround, sub-urbanization

Definition of urban and other associated urban concepts in Indian census; Urban size class structure

Measures

Degree and tempo of urbanization;

Urban population growth and its components;

Rank-Size rule and Primacy Index, Lorenz curve and Gini's concentration ratio

Theories

Kingsley Davis model of urbanization process

Functional Classification of Urban Centres by Harris iii The City-Region Relationship

Theories and Models of urban planning, Concept of New Towns

Urbanization process

Current urbanization process in developed and developing countries with special focus on India, Major urbanization problems and policies

Essential Readings:

1. Cohen, Robin, (1996): Theories of Migration, The International Library of Studies on Migration, Edward Elgar, Cheltenham
2. Eduardo Arriaga, (1975): "Selected Measures of Urbanization", in Sydney Goldstein and David Sly (Eds.) Measures of Urbanization and Projections of Urban Population, IUSSP Belgium
3. Kingsley, Davis, (1972): World Urbanization, 1950-70, Vol. II, Analysis of Trends, Relationship and Development, Population Monograph Series 4 and 9, University of California, Berkeley
4. United Nations, (2019): World Urbanization Prospects, The 2018 Revision, New York.
5. United Nations, (1974): Methods of Measuring Internal Migration, Manual VI, UN, New York.

Suggested Readings:

1. Oberai, A.S (1987): Migration, Urbanization and Development. International Labour Office, Geneva
2. Gavin Jones and Visaria, Pravin. (Eds.), 1997: Urbanization in large developing countries - China, Indonesia, Brazil and India, Clarendon Press, Oxford
3. International organization for Migration (2021), World Migration Report 2022, IOM, Geneva.
4. Shryock, Henry S. Jacob S. Siegel and Associate, (1980): The Methods and Materials of Demography Vol.1 U.S. Bureau of the Census, Washington D C.

5. Todaro, Michael P. (1976). **Internal Migration in Developing Countries**, International Labour Office, Geneva
6. United Nations. (1979): "Trends and Characteristics of International Migration since 1950" Demographic Studies No. 64, UN, New York
7. United Nations, (1983): **Determinants and Consequences of Population Trends**, Vol I, UN, New York, Chapter-V
8. Weeks, John R. (2015), **Population: An Introduction to Concepts and Issues**, Cengage Learning
9. Haas, H. J., Castles, S., & Miller, M. J. (2020). **The age of migration: international population movements in the modern world**. Sixth edition. New York, The Guilford Press

MSP C10

30 Hours

INTRODUCTION TO DEMOGRAPHIC AND STATISTICAL SOFTWARES

Course Outcomes:

- CO1: To have hands on experience on statistical packages like SPSS, STATA to facilitate handling of large-scale data sets.
- CO2: To familiarize with the data management such as recoding, sorting, filtering, file merging and splitting using SPSS and STATA
- CO3: To understand and learn the uses of univariate, bivariate and multivariate analysis using software packages

Introduction to SPSS-facilities, creating database structure, data entry, specifying scales, validation of data entry, importing and exporting data. Data Manipulation: recoding creating new variable, sorting, filtering and selection of specific data, generating simple frequencies, use of syntax editor. Correlation and regression, Analysis: interpretation and regression diagnostic test.

Introduction to STATA, generating, variables, commands and do file editor.

Survey analysis – estimation of mean, proportion, design.

Multivariate analysis – concepts and interpretation of results of multiple regression, logistic regression, ANOVA, with and without interaction.

Large scale data handling – (using NFHS, DHS, NSSO) Merging, splitting, data and formatting.

Reading List

Essential Readings :

1. *SPSS 11.0 Brief Guide* - SPSS Inc.
2. *SPSS regression models 14.0* - SPSS Inc.
3. *SPSS advanced models 14.0* - SPSS Inc.
4. *Stata user's guide Release 10., 2nd Edition*. Stata Press
5. *Stata survey data reference manual Release 8., 2nd Edition*. Stata Press.

MSP-E2.1

45 HOURS

HISTORICAL DEMOGRAPHY

Course Outcomes:

CO1: To appreciate and recognize an evolutionary account of population changes with traces of historical trends in population

CO2: Familiarizing the students the data sources and methods in analysis of historical demography

CO3: To gain an understanding of transformational trends in settlement and livelihood patterns of human population

CO4: A detailed understanding of India's population history in particular reference to social and cultural reforms.

I. Introduction to historical demography

Introduction to historical demography: Meaning, Scope, and Importance; Difference between History of Demography, Demographic History and Historical Demography; Limitations of Research in Historical Demography. Development of historical demography (Europe and Asia).

II. Data Sources, Methods and Approaches

Data Sources: Parish registers, Population registers, Census, Vital registration data, Bills of mortality, Fiscal documents, Military records, Inventories of properties, Genealogies, Marriage practices, Archaeological remains, Administrative geography, Colonization of new land, Cemetery data, Traveller's tales.

Approaches: Family reconstitution; Cross checking the information from different sources. Back Projection, and Generalised Inverse Projection, Other Methodological Developments

III. Evolution of human and peopling of the earth

Evolutionary Process and Emergence of human (Darwinism, Mendel, Lamarckism); Historical trend and pattern of migration and distribution of population; Historical evolution of towns and peopling of the world. Industrial and agricultural revolution and peopling of the earth

IV. India's demographic history

Historical sources of population data, Population in India from pre-historic to modern time; Peopling in India and racial classification; Peopling in India and linguistic classification; Indian great famines and its implication on mortality; family transition and status of women from historical perspective; Transition from traditional family planning methods to modern methods and health practices in India – a historical perspective

Essential Readings:

1. Davis, Kingsley, *The Population of India and Pakistan*. Princeton, Princeton University Press, 1951.
2. Tim Dyson (ed.), *India's Historical Demography: Studies in Famine, Disease and Society*, London, Curzon, 1989.
3. Glass D.V. & Eversley, D.E., *Population in History: Essays in Historical Demography*, London, Edward Arnold, 1965

4. Hollingsworth, T.H., *Historical Demography: The Sources of History, Studies in the Uses of Historical Evidence*, London, 1969.
5. Maharatna, Arup, *Demography of Tamines: An Indian Historical Perspective*, Delhi, 1996.
6. Willigan, J. Dennis, Lynch, Katherine A., *Sources and Methods of Historical Demography*, Academic Press, New York, 1987.

Suggested Readings:

1. Akerman, S., "History and Demography: An Evaluation of the Family Reconstitution Technique" in A.E. Andersson and I. Holmberg (eds) *Demographic, Economic, and Social Interaction*, Cambridge, Ballinger Publishing Company, 1977.
2. Harris, P.M.G., *History of Human Populations, Vol.II (Migration Urbanization and structural change)* London: Praeger, 2003.
3. John Knodel, "Two and a Half Centuries of Demographic History in a Bavarian Village". *Population studies* Vol.XXIV No.3, Nov. 1970. pp. 353-376.
4. Kertzer, David J., "Qualitative and Quantitative Approaches to Historical Demography", *Population and Development Review*, Vol.23 (4), Dec. 199 (839-84), 1997.
5. Krishnan, P., "Historical Demography Through Literature: Preliminary Report on Indian Historical Demography", Paper presented in the Session Historical Demography, IUSSP Meeting, Florence, Italy, June, 1985.
6. Paul F.Vincent, "French Demography in the Eighteenth Century" *Population Studies* Vol.I, 1947-48, Pp.44-71.
7. Ruzzell, P.E., "The evolution of Baptism as a form of Birth Registration through Cross Matching census and Parish Register Data: A study in Methodology" *Population Studies* Vol.26, No.1, March 1972, pp.121-146.
8. Saito, Osamu, *Historical Demography: Achievements and Prospects*, *Population Studies*, Vol.50 (3) (53), 1996.
9. Srivastava, H.C., "Registration of vital Events in Goa- A study of current system in Retrospect", *Artha Vijanana*, Vol. XIII, No.4, Dec. 1971.
10. Vinovskis, Maris A., *Studies in American Historical Demography*, Academic Press, New York, 1979.
11. William H. Howells, "Estimating Population Numbers Through Archeological and Skeletal Remains" in Robert F. Heizer and Sherburne F. Cook. *The application of Quantitative methods in Archeology*, Viking Fund Publication in Archeology, No.28, 1960. pp. 138-159.
12. W. Ernst, B. Pati and T.V. Sekher (2017). *Health and Medicine in the Indian Princely States, 1850-1950*, Routledge, London., <https://www.routledge.com/Health-and-Medicine-in-the-Indian-Princely-States-1850-1950/Ernst-Pati-Sekher/p/book/9780415679350>
13. Dyson, Tim, *A Population History of India: From the First Modern People to the Present Day* (Oxford, 2018; online edn, Oxford Academic, 18 Oct. 2018), <https://doi.org/10.1093/oso/9780198829058.001.0001>, accessed 20 Mar. 2023.

HEALTH ECONOMICS AND FINANCING**Course Outcomes:**

- CO1: To introduce various concepts on economic gradient of health and demand for and supply of health care.
 CO2: To explain various measures on socio-economic inequality in health.
 CO3: To familiarize the means and measures of health financing.
 CO4: To understand the determinants of health insurance and its coverage.
 CO5: To introduce the methods and measures on economic evaluation of health care.

I: Introduction to Health Economics

Defining health economics, why health economics is important, basic concepts in microeconomics, health across world and over time, scope of health economics, map of health economics, basic questions confronted by health economist, concept of efficiency and equity in health. Production Possibility Frontier (PPF), economic gradient of health, causation of income and health, Preston Curve, economic models and analysis, expenditure function, Theories of X and Y, positive and normative economics.

II. The Demand for Health and Health care

What is Health and Good Health, Utility Analysis, Health as a form of human capital, What is Medical Care. The production of Good Health, Empirical evidences in the production of health, Health as human capital, Grossman Model, The Demand for Health Care, Demand function for health, Economic and non-economic factors of health care, Fuzzy Demand Curve, Price and income elasticity of demand for health care, Important consideration in estimating health care demand elasticity, provider's behavior, Empirical findings, externalities and market failure.

III. Health Financing

Health financing in low, middle and high income countries, demographic transition, epidemiological transition and health expenditure, disparity in disease burden and per-capita health spending, sources of health care in India, out-of-pocket expenditure on health care, catastrophic health expenditure, approaches in measuring catastrophic expenditure, impoverishment, health care payment and poverty, national and regional patterns of catastrophic health spending, determinants of catastrophic health spending, Drivers of health care expenditure, health financing in India, Equity in health care finances, Willingness to pay for health care, User charges as determinant of health financing

IV. Measuring Health Inequalities***Measurement of health inequality: A Prelude***

Why measure health inequality; Health equity and inequality: Concept and definitions; Understanding of the concepts such as need, access and utilisation; cardinal and ordinal health variables

Black Report and Beyond: Historical Background of Black Report, Explanation for social class differences, major empirical theme since Black report

Measures of health inequality: Measures of health inequality: Index based approach; Axiomatic approach to measurement; Individual-mean and inter-individual comparison; WHO Index, Coefficient of Variation, Generalised Entropy Index, Lorenz Curve and Gini Coefficient

Measuring socioeconomic rank related health inequality: Slope index of inequality, Relative index of inequality; Concentration curve and concentration index; various ways of computing, Standardization; Inequality aversion; Normalised and Generalised concentration index; Corrected concentration index

Measuring inequality in healthcare utilization: Horizontal inequality; Vertical inequality; Regression based approach; Measurement of horizontal inequalities; Group inequality, common measures, Gini type index

V. Medical Care, Production and Cost

The Short-Run Production Function of the Medical Firm, Total Product, Marginal Product and Average Product Curve, Law of diminishing marginal productivity, The importance of costing in Health Economics, Short-run cost theory of medical firm, short run cost curves, Cost analysis, Implicit and explicit cost, , factor affecting short-run cost curves, cost minimization, constraints in measuring health cost

VI. Health Insurance

Health care system, a model of health care system, defining health insurance, need for health insurance, type of health insurance, demand for private health services, factors affecting the quantity demanded of health insurances, moral hazards, deductibles, co-insurance, managed care, adverse selection, loading fees, employed based insurance, reimbursement, selection effect, intermediary agent, regulation of health insurance, Need for Government intervention, Trends of health insurance, Coverage of health insurance in India

VII. Economic Evaluation

What is economic evaluation? Cost analyses; direct cost, Indirect cost, tangible cost, capital cost, fixed cost, variable cost, Opportunity cost, average cost, marginal cost, Incremental cost, steps in cost analyses: Identification, measurement and valuation, Various types of economic evaluation used in health care: Cost effectiveness analysis (CEA) Cost-Benefit Analysis (CBA), Divergence between social and private costs and benefits in health care, Limitations of economic evaluation, Consumer Impact Assessment

ESSENTIAL READINGS:

1. Rexford E. Snterre and Stephen P. Neun, [Health Economics: Theories, Insights and Industry Studies, Thompson South – Western, 3rd Edition (614, San/lea, 073226) Note: 4th Edition is out in 2007 (ISBN: 032432068X; ISBN13: 9780324320688)
2. Drummond MF, Sculpher MJ, Torrance GW, O'Brien B, Stoddart GL, eds. Methods for economic evaluation of health care programmes, Third Edition, Oxford University Press, 2005.
3. O'Donnell O, Doorslaer E v, Wagstaff A and Lindelow M. Analyzing Health Equity Using Household Survey Data (2008). A Guide to Techniques and Their Implementation
4. Xu K (2005). Distribution of health payments and catastrophic expenditures Methodology World Health Organization

SUGGESTED READINGS

1. Culyer A J and J P Newhouse, 2000, The state and scope of health economics, **Handbook of Health Economics**, Volume 1A, Eds. Culyer and Newhouse, Elsevier, 2000.
2. Grossman (1982). On the concept of Health capital and Demand for Health. *Journal of Political Economy*, 80(2)
3. Macintyre S (1997). **The Black Report and Beyond-What are the issues**. *Social Science, Medicine*. 44(6):723-745
4. Mohanty, S. K., & Dwivedi, L. K. (2021). Addressing data and methodological limitations in estimating catastrophic health spending and impoverishment in India, 2004–18. *International journal for equity in health*, 20(1), 1–18.
5. Ringel et al (2005) The Elasticity of Demand for Health Care A Review of the Literature and Its Application to the Military Health System
6. Victoria Y Fan and William D. Savedoff (2014), "Health Financing transition: A conceptual framework and empirical evidences, *Social Science Medicine*, 105 (2014):112-121
7. Wagstaff A, P. Paci and E van Doorslaer (1991), On the measurement of inequalities in health, *Social Science and Medicine* 33(5), 545-557
8. Wagstaff, Adam & van Doorslaer, Eddy. 2000. "Chapter 34 Equity in health care finance and delivery." Handbook of Health Economics, in: A. J. Culyer & J. P. Newhouse (ed.), *Handbook of Health Economics*, edition 1, volume 1, chapter 34, pages 1803-1862 Elsevier

URBANIZATION, SPACE AND PLANNING**Course Outcomes:**

- CO1: Developing a comprehensive understanding on concepts of space, place and region.
CO2: Understanding the history of urban planning and its illustration in Indian context.
CO3: Acquainting students with theories of regional development and various strategies of regional planning.
CO4: Developing a critical understanding on urban policies and programmes in India
CO5: Providing students a practical knowledge of Geographical Information Systems and its utility in regional and urban planning.

I. Urbanization and Space

Urbanization and space: Definitions and concepts of urban areas & urbanization. Concepts and forms of formal and informal spaces; Differences between space, place and region; urbanization and space interaction: gravity model, distance decay model, forces of concentration and dispersion, urban agglomeration and spatial economy; Access and right to the city

II. Evolution of Spaces of Settlements

Settlement: evolution, characteristics and factors; settlement pattern and hierarchy; Urban morphology; Change in urban land use and population density; Rural-urban relationship: dichotomy or continuum; Role of urban centres in rural development.

III. Urban and Regional Planning

Definitions, concepts, purpose, types and levels; geography/demography and planning relationship.

Region: concept and definition, types (formal, functional and planning); Need for regional planning; Types of regional planning; Spatial structure of regions,

Theories of regional development: Stages of development, economic base theory, Industrial location theory, Growth Pole theory; Core-periphery interactions.

Regional planning in India; Planning regions in India; Regional disparity in development; causes and consequences, North-Eastern regional council, Mumbai Metropolitan Regional Development Plan.

Concepts; history and origins of urban planning; pioneers of urban planning; types of urban plans: New towns, neighborhood, garden city, green belts; healthy urban planning, WHO concept of healthy city, livable city, sustainable city.

Urban policy since independence, important urban plans (New Delhi, Navi Mumbai, Chandigarh, Gandhinagar, Bhubaneswar); Smart Cities Mission; HRIDAY, AMRUT, PURA, RURBAN mission

IV. Challenges in Urban planning

Recent urban policies and programmes; Urban redevelopment; Urban poverty, urban housing and real estate, Slums and slum rehabilitation, Urban pollution, Solid waste management; Management of migrants; Case studies of rehabilitation programs (SRA)

V. Remote Sensing, GIS and Urban and Regional Planning

Application of Remote Sensing and GIS in urban and regional planning.

Essential Readings:

1. Friedman, John and William Alonso (1964) *Regional Development and Planning: A Reader*, The MIT Press, Massachusetts.
2. Friedman, John (1966) *Regional Development Policy. A Case Study of Venezuela*, MIT Press, Massachusetts.
3. Chaudhuri, J. R. (2001) *An Introduction to Development and Regional Planning*, Orient Longman, Hyderabad.
4. Chand, M and V.K. Puri, (1983), *Regional Planning in India*, Allied Publishers Private Ltd, New Delhi
5. Mishra, R.P. (1992). *Regional planning: Concepts, Techniques, Policies and Case studies*, Concept Publishing Co., New Delhi

Suggested Readings:

1. Bhagat, R. B., Roy, Archana K. and Sahoo, Sahoo. (2020). *Migration and Urban Transition in India: A Development Perspective*. Routledge India, New Delhi.
2. Kumar, A. and Bhagat, R. B. (2021). *Migrants, Mobility and Citizenship in India*. Routledge India, New Delhi.
3. Lefebvre, H (1991). *The Production of Space*, Blackwell, Oxford.
4. Hall, P, (1992), *Urban and Regional Planning*, Third Editions, Routledge, London.
5. Harvey, D. (2012) *Rebel Cities: From the Right to the City to the Urban Revolution*, Verso, London
6. Husain, M. (1994), *Human Geography*, Rawat Publishing, Jaipur.
7. Leong, Goh C. and G.C. Morgan, (1982), *Human and Economic Geography*. Oxford University Press, Singapore.
8. Singh, R. Y. (1994), *Geography of settlements*, Rawat Publications, Jaipur.
9. Ginsburg, N., Bruce Koppel and T.G. Mc Gee (1991) *The Extended Metropolis: Settlement Transition in Asia*, University of Hawaii Press, Honolulu.
10. Nath, V. (1971) "Regional Development Policies", *Economic and Political Weekly*, 6(30-32): 1601-1608.
11. Lo, C.P. and Yeung, A. K. W. (2002): *Concepts and Techniques of Geographic Information Systems*. Prentice Hall of India, New Delhi.
12. Nyerges, Timothy L. and Jankowski Piotr (2010): *Regional and Urban Gis: A Decision Support Approach*, Rawat Publication, Jaipur.
13. Friedman, J and Clyde Weaver, (1979), *Territory and Function: The evolution of regional planning*, Edward Arnold, London.
14. Kawashima, T and P. Korcelli, (1982), *Human Settlement Systems: Spatial Patterns and Trend*, IASA, Luxemburg.
15. Knowles, R and J. Warling, (1983), *Economic and Social geography: Made Simple*,

Heinemann, London.

18. Sarin, M. (1982), *Urban Planning in the Third World: The Chandigarh Experience*, Marshall, London.
19. MMRDA (2016), Mumbai Metropolitan Regional Development Plan 2016-2036 MMRDA, Mumbai.
20. UNEP and others (2007), *Livable Cities: The benefits of environmental planning*. The Cities Alliance, Washington. <http://www.citiesalliance.org/index.html>.

MSP E2.4

45 Hours

GENDER, HEALTH AND DEVELOPMENT

CO1: To sensitise students on gendered perspectives in reading health and development outcome

CO2: To gain an understanding of theoretical and conceptual issues involving gender in examining development at large

CO3: To acquaint students with varied gendered frameworks and relevant analytical tools towards gendered inspection

CO4: To offer skills of adopting a gendered outlook in introspecting health and development.

Introduction

The purpose of this section is to explain the basic concepts of three major components of this course namely gender, health and development.

The Concept of gender, Evolution of gender in historical perspective

Patriarchy, Kinship Structure and gender roles, Feminist theories, Gender stratification in traditional and modern societies, Gender Analysis Tools, Gender Sensitive Indicators and Gender budgeting and auditing

Concept of health, Evolution of the concept of Reproductive Health, life cycle approach to RH and recommendations from ICPD

Changing concept of development, Indicators of development, gender adjusted

HDI

Gender and Health

This section presents the situation analysis regarding sex differentials in different aspects of health and highlights some special issues of women and men's health.

Situation analysis of sex differentials in morbidity and mortality

Major morbidity and mortality burden in the developing world with major focus on India- sex ratio at births, major health problems experienced by women and men, reproductive health of women and men in developing world, differentials in use of male and female methods of contraception

Health infra-structure and health care providers

Nutritional status, susceptibility to infections

Accidents and other risk factor and health seeking behavior

Health and Nutrition issues of adolescent of boys and girls, abuse and maltreatment, Puberty, Sexual Debut, Adolescent Pregnancy, Abortion, women and family planning programs, Contraceptive Technology

Major risk factors of men's health: masculinity, alcoholism, tobacco and drug consumption, accident

Gender and Sexuality: Sexual health of men and women, gender dimension of HIV/AIDS. Gender and Intertility

Gender and Development

The purpose of this section is to understand the sex differentials in health in terms of socio-economic and cultural context of gender and to study the gender dimensions of development.

Understanding social structures- role of caste, class, ethnicity and religion and gender in health inequalities and health outcomes

Gender dimension of social development, status and role of men and women in household and community, culture, marriage customs, dowry and bride price practices, age at marriage

Gender differentials in household headship and role in decision making

Gender differences in access to knowledge-, education, exposure to media and freedom of movements

Gender based violence- Domestic and community violence and gender. Legal aspects of domestic violence and rape

Women's role in community life and involvement in politics-as voter, political worker and leader, women in Panchayati Raj Institutions and self help groups

Media representation of men and women

Gender dimension of economic development: women's access to economic resources, entitlements, land ownership, inheritance laws, access to credit, measurements of women's work, profiling women's work, informal sector involvement, working condition, maternity benefits, wage differentials, gender and poverty

Globalization, changing pattern of economic activity, issues of marginalization and vulnerability along with agency, negotiation and spaces of power, Gender Divisions in Urban Labor Markets, Gender and Migration

Housing, Household environment and its differential impact on men and women's life

Environmental degradation, changes in climate, water table and land use and their differential impact on men and women

Gender mainstreaming in health and development programs

The purpose of this section is to understand the concept of mainstreaming gender in development and to review the measures taken for eliminating undesirable impact of gender inequalities and to bring women in the main stream of development

The concept of Gender Mainstreaming

Historic overview of Gender Mainstreaming- Women in development (WID) concept and criticism by feminist; shift to Gender and Development (GAD), Gender Mainstreaming and the Millennium Development Goals (MDGs)

The rights approach to Health, sexual and reproductive rights, violence, human rights and health Paradigm shift from the Target Based Supply Driven Fertility influencing programs to RH Approach

Legal aspects - laws regarding marriage, dowry, domestic violence, rape PNDT act, property inheritance, maternity and other benefits of working women, sexual harassments at workplace, reservations in political institutions and

Gender mainstreaming in various health and development sectors- e.g.

Agriculture, Health, Education, gender in work place (Public & private) etc.

Advocating for Gender equality

Gender responsive policy making and planning of health and development programs.

Section 5: Some case studies of Gender analysis of health and development programs, budgeting and auditing

This section aims to give necessary skills and tools to undertake the gender analysis of health and development policies and programs and to help them to develop gender sensitive indicators and

Essential Readings :

1. Basu, Alaka M., (1992): *Culture, The Status of Women and Demographic Behaviour*, Oxford University, New York.
2. Bhasin K. 1993. *What is patriarchy?*, Kali for Women Publishers, New Delhi.
3. Bhasin K. (2000). *Understanding Gender*, Kali for Women Publishers, New Delhi
4. Dyson, Tim and Mick Moore, (1983). "On Kinship structure, female autonomy, and demographic behaviour in India", *Population and Development Review* vol. 9(1), pp. 35-60.
5. Ellsberg Mary and Heise Lori L. (2005) *Researching violence against women: A practical guide for researchers and activists*. WHO and Path, Washington D.C.
6. Folbre, Nancy (1992). Improper arts: Sex in classical political economy. *Population and Development Review*. 18(1): 105-112.
7. Gita Sen, Adreinne Germain and Lincoln C. Chen, (Eds.), (1994): *Population Policies Reconsidered: Health and Empowerment and Rights*, Harvard University Press, Harvard.
8. Jeffery Patricia and R. Jeffery, 1997. *Population Gender and Politics: Demographic change in rural north India*. Cambridge University, Cambridge.
9. Miller, Barbara, D.(ed) (1993) *Sex and Gender Hierarchies*, Cambridge University Press, New York.
10. Hess, B.B. and M.M. Ferree. (1987). *Analyzing Gender: A Handbook of Social Science Research*. Sage Publication, London.
11. United Nation. 2001. *Population, Gender and Development: A Concise Report*. UN, Economic and Social Affairs (Dept. of). New York
12. World Health Organization. (1998). *Gender and Health. Technical paper WHO/FRH/WHO/98*. (Website: www.who.int)
13. World Bank. (1991). *Gender and Poverty in India*. World Bank, Washington.
14. World Health Organization (2003). *Comparative Evaluation of Indicators for Gender Equity and Health*, Women and Health Programme, Centre for Health Development, Kobe, Japan.
15. William Joan 1989. Deconstructing Gender, 87 Michigan L Rev. 797. *Law Journal Article*

Suggested Readings :

1. Agnes, Flavia. (2000). *Law and gender inequalities: the policies of women's right in India*. Oxford, New Delhi.
2. Anker, R.(1997). *Gender and Jobs: Sex Segregation of Occupations in the World*, ILO, Geneva.
3. Balk, Deborah. 1997): "Defying Gender Norms in Rural Bangladesh: A Socio demographic Analysis". *Population Studies* Vol.51, pp. 153-172.
4. Bandhopadhyay, D. 2000 Gender and governance in India. *Economic and Political Weekly*. 35(3): 2696-269xxx).
5. Basu, Alaka Malwade. 2000. Gender in population research: Confusing implications for health policy. *Population Studies*. 54: 19-22.
6. Das Gupta, Monica, 1987. Selective discrimination against female children in rural Punjab, India. *Population and Development Review*, 13(1): 77-100.
7. Doyal L.(1995) *What Makes Women Sick: Gender and the Political Economy of Health*. London, Macmillan.
8. Dreze, Jean and Sen Amartya, (1995): *India: Economic and Social Opportunity*, Oxford University Press, New York.

9. Harriet D. Presser, (1997): *Demography, Feminism and the Science-policy Nexus. Population and Development Review* Vol. 23(2), pp. 295-331.
10. Jeffery, Roger and Basu, Alka M. (Eds). (1996): *Girls Schooling, Women's Autonomy and Fertility Changes in South Asia*, Sage Publications, New Delhi
11. Jejeebhoy S. 1996. *Women's Education, Autonomy and Reproductive Behavior: Assessing what we have learned*. East West Centre, Hawaii.
12. Reeves Hazel and Baden Sally (2000): *Gender and Development: Concepts and Definitions*, Report No. 55. Bridge (development- gender) Institute of Development Studies, University of Sussex, Brighton BN1 9RE, UK.
13. Sonya, Andennahr, Lovell Terry and Wolkowitz, Carol, (1997): *A Glossary of Feminist Theory*, Arnold-Hodder Headline Group, London.
14. Sopher, David, (1980). *An Exploration of India: Geographical Perspective on Society and Culture*. Cornell University New York

SEMESTER - III

APPLICATION OF STATISTICAL PACKAGES IN LARGE SCALE DATA**Course Outcomes:**

CO1: To familiarise students with national and international large scale survey data sets and their exploration

CO2: To gain practical expertise in use of statistical softwares

CO3: To make the students appreciate the veracities of evaluation of survey data sets and its derived outcomes in keeping with statistical principles and properties

Unit I: Scope of large scale surveys and big data

Concept of big data, need for big data for planning and monitoring of public health programmes, introduction to large scale demographic and health surveys (DHS): NFHS, DLHS, WHO-SAGE, LASI-objectives, designs, instruments, sample size.

Unit II: Large scale survey data management and quality assurance - Cleaning of big data, Range and consistency checks, missing data, long and wide format conversion, merging files (practical sessions) Revisit of sub-samples, field check tables, non-response pattern, and quality lot assurance, roles of supervisors, editors, field and nodal agencies, Third party audit.

Unit III: Use of STATA for sampling and estimates

Sampling and estimation by simple random sampling, stratified, cluster, systematic and multi-stage sampling, PPS sampling, Use of STATA for sampling

Introduction to STATA for survey data analysis- Summarization of big DHS data, Conversion of ASCII and SPSS data into STATA format (practical sessions).

UNIT IV : Introduction to R

Use of R for sampling Reading ASCII file, data summarization: frequency and graphical representation, survey data summarization using R.

UNIT V : Application of statistical package in survey data

Installation of libraries: sampling, survey, samplingbook, pps, Use of svydesign, svytotal, svymean, Use of R for estimates,

Survival analysis-Kaplan Meier, Cox regression-test of proportionality and heterogeneity

Suggested readings:

1. Lumley, T. Complex Surveys: A Guide to Analysis Using R
2. Damico, A. Step-by-step instructions to analyze major public-use survey data sets with the R language
3. Ladusingh, L. Survey Sampling Methods Fares Qeadan. Sampling Methods Using STATA

POPULATION PROJECTIONS**Course Outcomes:**

- CO1: To train the students in mathematical and component methods of population projection
CO2: To familiarize the students with Use of SPECTRUM and its applications

Population Estimates and Projections

Concepts of population projections: population estimates, forecasts, and projections; uses of population projections.

Methods of interpolation and extrapolation: linear, exponential, polynomial, logistics, and Gompertz curves. Intercensal and post-censal estimates. Regression method of projection for behavioural event. ARIMA.

Cohort component method: basic methodology; projection of mortality, fertility, and migration components; population projections of United Nations and Office of the Registrar General of India. Use of SPECTRUM and its applications.

Methods of rural-urban and sub-national population projections: ratio method, apportionment (Water) method, urban-rural growth difference method, and concept of raking.

Methods of related socio-economic projections: labour force, school-enrolment, and households.

Projection of Future Health Needs: Like ambulatory services, sanitary napkins, old age nest/home, health personnel, nursing staff (hospital and home-based), counselors etc. SPECTRUM software.

ESSENTIAL READINGS:

1. United Nations (1974): *Methods for Projections of Urban and Rural Population: Manual VIII*. Population Studies, No. 55. New York: Department of Economic and Social Affairs. Chapters 3 & 4.
2. United Nations (1955). Manuals on methods of estimating populations: Manual II – Methods of Appraisal of Quality of Basic Data for Population Estimates. Department of Economics and Social Affairs, New York. Chapter 1, 2, 3
3. United Nations, (1955): *Methods of Appraisal of Quality of Basic Data for Population Estimates*, Manual II. New York: United Nations. Chapter 1 & 3.
4. Pathak, K.B. and F. Ram (1998): *Techniques of Demographic Analysis*. Himalaya Publishing House, Second Edition, Mumbai.
5. Seigel Jacob S. and David A. Swanson (eds.) (2004): *The Methods and Materials of Demography*, 2nd Edition, New York: Elsevier Academic Press. Chapters 20 & 21.
6. Srinivasan, K. (1998). *Basic Demographic Techniques and Applications*. London: Sage Publications.

SUGGESTED READINGS:

1. EL. Badry, M.A., (1961): "Failure of Enumerators to make Entries of Zero", Errors in Recording Childless Cases in Population Censuses, *Journal of American Statistical Association* Vol. 56.
2. Potter, R.G. and Kulkarni, P.M. (1977): Population Momentum: A Wider Definition, *Population Studies* Vol. 40 pp. 555-56.
3. Preston, Samuel H., and Subrata Lahiri (1991): "A Short-cut Method for Estimating Death Registration Completeness in Destabilized Populations", *Mathematical Population Studies*, 3(1):39- 51.
4. Rele, J. R., (1987), "Fertility Levels and Trends in India, 1951-81", *Population and Development Review* Vol. 13 (2). Academic Press, New York.
5. Mishra, B.D. (1981): An Introduction to the Study of Population, New Delhi: South Asian Publishers, Pvt. Ltd. New Delhi.
6. K. Srinivasan. Training Manual on Demographic Techniques. Census of India and United Nations Population Fund, India. Chapter 4, 10
7. Jeremiah P. Banda (2003). Non-sampling errors in surveys. UNITED NATIONS SECRETARIAT ESA/STAT/AC.93/7. Statistics Division 03 November 2003
8. Census of India (2011). Report on Post Enumeration Survey, 2011. Registrar General & Census Commissioner.
9. Kim, Young J., Schoen, R. & Sarma, P.S.(1991) : Momentum and The Growth-Free Segment of Population, *Demography*, Vol.28, No.1 pp. 159-173.
10. Potter, R.G. and Kulkarni, P.M. (1977): Population Momentum: A Wider Definition, *Population Studies* Vol. 40 pp. 555-56.

MPS C13

30 Hours

DEMOGRAPHIC ESTIMATION TECHNIQUES AND MODELS

Course Outcomes:

- CO3: To develop the skills to use different demographic packages of projection of population, households, urban-rural, education, and employment for programs and policymaking.
- CO4: To familiarize students with the indirect techniques of estimating demographic components under the limited circumstance of data availability.
- CO2: To familiarize students with demographic models to understand the population issues and evaluate the observed demographic rates and ratios.

Demographic Models

Concepts of Demographic Models:

Stationary, Stable and Generalized Population; Momentum of Population Growth; Concept of Multiregional Model; and Micro Model such as Birth Interval, Waiting Time (Birth Distribution etc., Estimation of fecundability?)

Indirect methods for estimating fertility:

Needs for Indirect methods; Concept of Reverse Survival Method, Robust Method and method based on Generalized Population Model; Rele's Method; Concept of P/F ratio method and its modification [Hypothetical Cohort methods] Completeness of Death Registration by Lopez. applications of MORTPAK in estimating age specific fertility rate (ASFR) and total fertility rate (TFR).

Indirect Method of Estimating Mortality:

Indirect Methods of Estimating Infant and Child Mortality

- (a) Basic concepts, fundamental assumptions and underlying principles to the technique proposed by Brass based on retrospective data on children ever-born and surviving mothers classified by current age of mother; applications of MORTPAK in estimating infant and child mortality; (b) Modifications proposed by Sullivan and subsequently by Trussell over Brass method; and (c) the UN revised and extended version of Trussell's method.

Methods of Estimating Adult (including Maternal Mortality) and Old Age Mortality

- (i) Methods of estimating adult mortality using successive census age-distributions; (ii) Methods of estimating life expectancies at older ages; and (iii) Estimation of maternal mortality through sisterhood method.

Indirect Methods for Estimating Death Registration Completeness for Countries Having Limited and Defective Vital Registration Data

An overview of some selected methods of estimating completeness of death registration, starting from Brass growth balance method and its subsequent development.

ESSENTIAL READINGS:

1. United Nations (1983): *Indirect Techniques for Demographic Estimations*, Manual X, Population Studies No.81. Department International Economic and Social Affairs, (ST/ESA/SER.A/81).
2. Preston, Samuel H. Patrick, Heuveline and Michel Guillot, 2003, *Demography: Measuring and Modeling Population Processes*, Blackwell Publishers, 2001 (First Indian Reprint 2003).
3. United Nations (1955). *Manuals on methods of estimating populations: Manual III – Methods of Population Projections by Age and Sex*. Department of Economics and Social Affairs, New York. Chapter 2.
4. Navaneetham Kunnan and George Gruenewold, (1998). *The Projection of Populations – Data Appraisal, Basic Methods and Applications*, Population and Sustainable Development Teaching Texts, Thiruvananthapuram: Centre for Development Studies.

SUGGESTED READINGS:

1. Bhat P.N.M, (2002): General growth balance method: A reformulation for population open to migration, *Population Studies*, 56 (2002), 23-34, Printed in Great Britain.
2. Preston, Samuel H., and Subrata Lahiri (1991): "A Short-cut Method for Estimating Death Registration Completeness in Destabilized Populations". *Mathematical Population Studies*, 3(1):39- 51.
3. Rele, J. R., (1987), "Fertility Levels and Trends in India, 1951-81", *Population and Development Review* Vol. 13 (2). Academic Press, New York.
4. Srinivasan, K. (1998), *Basic Demographic Techniques and Applications*. London: Sage Publications.
5. Government of India (2019). *Population Projections for India and States, 2011-2036*. New Delhi: NCP, MoHFW.
6. Field, J.L. (1990) Past projections: How successful? In *Population Projections: Trends, Methods and Uses*, Liverpool, 12-14 sept. 1990. Occasional paper 38. Office of Population Censuses and Surveys, pp. 23-29.
7. Shaw, C. (2007). Fifty years of United Kingdom national population projections: how accurate

have they been? Population Trends 128: 8-23. Available at www.ons.gov.uk/ons/rcl/population-trends-rcl/population-trends/no--128--summer-2007/fifty-years-of-united-kingdom-national-population-projections--how-accurate-have-they-been-.pdf

8. Mnultric, Tom, Rob Dorrington, Allan Hill, Kenneth Hill, Jan Timeus and Bayia Zaha, (2013) Tools for
9. Demographic Estimation. International Union for the Scientific Study of Population (IUSSP)
10. Office of the Registrar General of India, Government of India (2020): Population Projections for India and States, 2011-2036. Report of the Technical Group on Population Projection, National Commission on Population and Ministry of Health & Family Welfare, Government of India, New Delhi

MSP C14

60 Hours

POPULATION, DEVELOPMENT AND ENVIRONMENT

- CO1: To acquaint students on key concepts, indicators and composite indices of development
 CO2: To familiarize students on various theories of population and development
 CO3: To introduce pessimistic, optimistic and neutralistic views on population
 CO4: To explain quantitative and qualitative aspects of human resources
 CO5: To introduce the concepts of sustainable development, climate change and global warming

I. Concepts and Measures of Development

Need to study population in the context of development; Concepts of economic growth and economic development – definition and indicators; Limitations of per capita income as an indicator of development; Emphasis on equality, Lorenz curve and Gini coefficient.

Economic determinants of development, non-economic determinants of development, and role of institutional factors in development.

Approaches towards development: Growth oriented approach and basic minimum need approach; Human centred development – welfare approach, investment in human capital, Physical Quality of Life Index (PQLI), Human Development Index (HDI), Gender Development Index (GDI); Concepts and measures of money metric and multidimensional poverty, Human Poverty Index (HPI) and Multidimensional Poverty Index (MPI).

Concepts of social development, social capital and social change.

II. Theories and Strategies of Development

Theories of development: Big push theory, Rostow's stages of growth, Arthur Lewis's two-sector model, Liebenstein's critical minimum effort theory, Harrod-Domar model, and Solow's growth model.

Strategies of development: Millennium Development Goals (MDGs), achievements with special reference to India; Concept of sustainable development, Sustainable Development Goals (SDGs); Development strategies through the different five-year plans in India; Recent development strategy (NITI Aayog) in India.

III. Population and Development linkages

Views regarding relationship between population and development: (i) Classical views: Malthus and Marx, concept of optimum population; (ii) population growth as obstacle to development, Coale and Hoover study, tragedy of commons, limits to growth study, Fuke's investment model; (iii) population growth as conducive to development – views of Colin Clark, Ester Boserup and Julian Simon; and (iv) views of revisionists and need to study linkages between population change and development.

Demographic transition theory, age structure transition, demographic dividends and population ageing; effects of fertility and mortality declines, health improvements and migration on economic growth. Divergent views regarding the relationship between population and development.

IV. Population and Resources

Natural resources: classification of natural resources, renewable and non-renewable resources, resources scarcity and resource depletion.

Capital resources: effect of demographic factors on savings and investments, technology and development; importance of technology to improve the productivity of physical assets.

Human resources – quantitative aspects: concepts labour force, economically active population, unemployment, types of unemployment: disguised, seasonal frictional and chronic. Factors affecting demand and supply of labour, effect of population growth and development on structure of employment.

Human resources – qualitative aspects: factors influencing productivity of human beings need for investment in human capital, implications of population growth on food, sanitation, housing, employment, education and health and social security to improve the quality of human resources. Educational development, urbanization and exposure to mass media and their social consequences.

V. Population and Environment

Ecosystem: Basic concepts, structure and functioning, energy and material flow, changes and challenges of ecosystem; simplification, eutrophication, pollution.

Philosophical dimensions of the new environmentalism: postmodernism, eco Marxism, deep ecology, social ecology and ecofeminism.

Sustainable development and environment: Role of environment in development – evolution, inclusion and progress; Brundtland Commission – Our Common Future; “5 Ps” that shape the SDGs: People, Planet, Prosperity, Peace, and Partnerships; UNGC Ten Principles; Linkages of SDGs with environment. Living planet index, Human foot print, IPAT model; environmental-Kuznetz curve.

Environmental challenges: Resource depletion and environment; pollution; poverty and environment; food, nutrition and environment; ecofeminism; solid waste; climate change and development; health and environmental challenges: occupational health.

UN conventions on environment and development: Major world commissions from 1972 to Rio 120 and so on; UNFCCC and challenges in making policies on environment: Environmental policies and programmes in India.

ESSENTIAL READINGS:

1. Birdsall Nancy, Kelley Allen, & Sinding Steven (2001). *Population Matters. Demographic Change, Economic Growth and Poverty in the Developing World*. Oxford: Oxford University Press. Chapters 2, 4 and 5.
2. Ray, Debraj (1998): *Development Economics*. Delhi: Oxford University Press. Chapters 3 & 4.

3. Todaro, Michael P. (1981): *Economic Development in the Third world* New York: Longman. Chapter
4. UNDP (2022). *Human Development Report 2021-2022: Uncertain Times. Unsettled Lives. Shaping Our Future in a Transforming World*. UNDP: New York.
5. UN Environment (2019). *Global Environment Outlook – GEO-6: Healthy Planet, Healthy People*. Cambridge University Press.
6. World Commission on Environment and Development (1987). *Our Common Future*. London: Oxford University Press.

SUGGESTED READINGS:

1. Chary, S.N. & Vinod Vyasulu (eds). (2000). *Environmental Management: An Indian Perspective*. New Delhi: Macmillan India.
2. Coale A.J. and Hoover, E.M. (1958). *Population Growth and Economic Development in Low-income countries*. Princeton: Princeton University Press.
3. David Bloom, David Canning & Jaypee Sevilla, (2003): *The Demographic Dividend*. Sanata Monica: Rand Corporation. Chapter 2.
4. Irfan Habib, (2010), *Man and Environment. The Ecological History of India* (A Peoples History of India 36). New Delhi: Tulika Books.
5. Kapila, Ray and Uma Kapila (2001). *India's Economy in the Twenty First Century* New Delhi: Academic Foundation. Chapters 1 to 5, 15, 16& 21.
6. Leibenstein, H. (1963). *Economic Backwardness and Economic Growth*. New York: John Wiley. Chapter 8.
7. Lewis W.A. (1958). Economic Development with Unlimited Supplies of Labour. In A.N. Agarwala and P. Singh (eds.) *The Economics of Underdevelopment*. New York: Oxford University Press.
8. Morton Lippman, Beverly S. Cohen, Richard B. Schlesinger, (2003). *Environmental Health Science: Recognition, Evaluation, and Control of Chemical and Physical Health Hazards* Oxford: Oxford University press.
9. Solow, R.M. (1956). A contribution to the theory of economic growth, *Quarterly Journal of Economics*, 70: 65-94.
10. United Nations Development Programme (1990). *Human Development Report, 1990* Delhi: Oxford University Press. Chapter 1.

POPULATION POLICIES AND PROGRAMME EVALUATION**Course Outcomes:**

CO1: To have an understanding of population policy in pro-natalist and anti-natalist divide around the world.

CO2: To appreciate the role of United Nations and International population conferences, including ICPD, in evolving changes in designing and advocating population policies and programmes.

CO3: To critically evaluate the population policies and programmes of India since independence.

CO4: To understand the management and quality of care in health services and family planning programmes.

CO5: To learn the tools of evaluating family planning programmes and SWOT approach.

A. POPULATION POLICIES AND PROGRAMMES

Definition of Population Policy: principal features of a population policy; policies in the context of population growth, structure and distribution. **Policy formulation:** Policy indicators, justification of population policy, socio-cultural, political and ethical issues related to population policy and the mechanism of how government decisions influence family decisions.

Role of the United Nations, and other International agencies: World Population Conferences, Declarations and Plan of Action.

Fertility influencing policies: pro-natalist policies, fertility control policies- direct and indirect. **Policies and programmes for special groups:** women and children.

Health influencing policies: historical perspective for policies and programmes in developing and developed countries.

India's health and family planning programmes: History of birth control movement, National Population Policies, National Health Policies, and National Health Mission.

B. POPULATION AND PROGRAMME MANAGEMENT

Strategic management approach, Targeting the people in need (Community Need Assessment); **Client segmentation;** and **Unmet need approach.**

Providing services; commercial distribution, community based distribution (CBD) systems and social marketing.

Quality of Care: Definition, Importance and Framework of quality of care in family planning.

C. EVALUATION OF PROGRAMME

Evaluation of programmes: objective, types, framework and methodological issues and data requirement. Role of family planning service statistics and surveys as sources of data in evaluation.

Management Information System (MIS); Role of MIS in evaluation of the programmes.
Operation Research Techniques (ORT) in evaluation

Economic evaluation of the programmes: Cost-benefit analysis, Cost-effective analysis, SWOT analysis.

Fertility impact of Family planning programmes: Bongaarts' model for estimating fertility impact.

ESSENTIAL READINGS:

1. Government of India (2000), *National Population Policy- 2000*, Ministry of Health and Family Welfare: New Delhi.
2. Government of India (2017), *National Health Policy- 2017*, Ministry of Health and Family Welfare: New Delhi.
3. Srinivasan, K. (2017), *Population Concerns in India: Shifting trends, policies, and programs*, Sage Publications. New Delhi.
4. United Nations (1995): *Report of the International Conference on Population and Development*, Cairo, 5-13 Sept. 1994

SUGGESTED READINGS:

1. Chrissie, P. and Selwyn S. T. Leger (1993): *Assessing Health Need Using Life Cycle Framework*, Open University, Buckingham.
2. Peabody, J.W.; Rahman, H. Omar; Gertler, Paull J.; Haan, Joyce (1999): *Policy and Health Implication for Development in Asia*, Cambridge University Press. Cambridge.
3. Peters, David H. Yazbeck Abdel S.; Sharma, Rushmi R.; Ramana G.N.V., (2002). *Better Health Care Systems in India*, World Bank, Washington D.C.
4. United Nations (1998): *National Population Policies*. Department of Economics and Social Affairs, New York.
5. Asia Development Bank (2006). *Impact Evaluation: Methodological and Operational Issues*. Economic Analysis and Operations Support Division. ADB, Manila.
6. Jain, A (ed.) *Do Population Policies Matter? Fertility and Politics in Egypt, India, Kenya and Mexico*, Population Council, New York.
7. Visaria, L and R R Ved (2016): *India's family planning programme: Policies, practices and challenges*, Routledge, London.
8. James, K.S. and T.V. Sekher (eds.), (2023). *India Population Report*. Cambridge University Press, <https://www.cambridge.org/core/books/india-population->. New Delhi.

RESEARCH METHODOLOGY II**Course Outcomes:**

- CO1: To understand the theories underlying qualitative research
- CO2: To familiarize the qualitative methods of data collection.
- CO3: To understand qualitative data analysis using packages like Atlas Ti and Nvivo.
- CO4: Develop skills for writing proposal and scientific articles.
- CO5: Introducing students to field level settings and primary data collection.

QUALITATIVE RESEARCH METHODS**Philosophy of Research****Law, Theory, and Model**

Overview on Main Assumptions and Arguments of Selected Social Theories (functionalism, conflict theory, symbolic interactionism, system theory, feminist theories, change theories)

Causation and Research Design

Criterion of causation Nomothetic casual explanation/Idiographic casual explanation

Theory in Qualitative Research

Using the existing literature

Theories underlying the qualitative research

Approaches to qualitative research

Texts as data in qualitative research

Designing Qualitative Research

The qualitative research process

Research questions

Entering the field

Interviews, focus groups, key informants

Using narrative data

Collecting data beyond talk.

QUALITATIVE DATA ANALYSIS SKILLS

Data preparation

Developing codes

Making codebook and its process

Free listing and Pile sorting analysis using ANTHROPAK

In-depth Interviews, FGDs data analysis by N-Vivo/ATLAS-Ti

Group work - hands on data collection, data analysis and presentation

SCIENTIFIC WRITING AND ETHICS

Layout of research proposal and dissertation

Techniques of interpretation

Ethical considerations in data collection

FIELD VISITS

Visit to the field sites.

Conducting Key Informant Interviews and Focus Group Discussions at field level and writing up.

Essential Readings:

1. Hollis, M. (1994) *Philosophy of Social Science. An Introduction*, Cambridge, Cambridge University Press
2. Booth, W. C., Colomb, G. G., Colomb, and J. M., & Williams, J. M. (2003). *The Craft of Research*. University of Chicago press.
3. Hennink, M., Hutter, I. and Bailey, A. (2011), *Qualitative Research Methods*, Sage Publications, London.
4. Flick, Uwe (2014). *An Introduction to Qualitative Research*, SAGE, New Delhi
5. Bryman, Alan (2012). *Social Research Methods*, Oxford University Press
6. Schensul, S.J., J.L. Schensul and M.D. LeCompte (1999). *Essential Ethnographic Methods*, Altamira Press, New York.

Suggested Readings:

1. MacIntyre, A. (1967) *A Short History of Ethics*. London.
2. Resnik, D.B. (2011). *What is ethics in research & why is it important*. National Institute of Environmental Health Sciences, 1-10.
3. Retrieved from <https://www.niehs.nih.gov/research/resources/bioethics/whatis/index.cfm>
4. Srinivas, M. N., A. M. Shah, and E. A. Ramaswamy. (1979). *The Fieldworker and the field . problems and challenges in sociological investigation*. Delhi: Oxford University Press.
5. Mukherjee, R. And P. N. Mukherjee (2000). *Methodology in social research: dilemmas and perspectives*. Sage Publication.
6. Sayer, Andrew. (1984). *Method in Social Science: A Realist Approach*. London: Hutchinson
7. Creswell, J. (2012). *Research design: Qualitative, quantitative, and mixed methods approaches* (4th ed.) Thousand Oaks, CA: Sage
8. Denzin, N. and Lincoln, Y. (2011). *The SAGE handbook of qualitative research* (4th ed.). Thousand Oaks, CA: Sage
9. Lee, T. W. (1999) *Using Qualitative Methods in Organization Research*. London: Sage.
10. Marshall, C. & Rossman, G. B. (2006). *Designing qualitative research* (4th ed.) Thousand Oaks, CA: Sage.
11. Miles, M.B., Huberman, A.M. & Saldana, J. (2014). *Qualitative data analysis. A methods sourcebook* . Third edition. Thousand Oaks, CA: Sage.
12. Patton M. Q. (2002). *Qualitative Research and Methods Evaluation*. Newbury Park: Sage.
13. Silverman, D. (2013) *Doing Qualitative Research*, London: Sage
14. Berg, B. L. & Lune, H. *Qualitative Research Methods for the Social Sciences*, 8th edition, Boston: Pearson, Allyn & Bacon. 201
15. Gastel, Barbara and Robert A. Day. *How to write and publish a scientific paper*.
16. Turabian, Kate L. *A manual for writers of research papers, theses and dissertation* Web reference: <http://owl.english.purdue.edu>

CONCEPTS AND MEASURES OF GLOBAL HEALTH

Course Outcomes:

CO1: To familiarize the students with the emerging concepts, measures, and significance of global health in contemporary world.

CO2: To understand the global mortality transition in terms of its varied features like cause of death, population age structure and differential quality of life.

CO3: To understand the impact of poverty, inequality on disease prevalence, health infrastructure, deprivation for the mortality divide and its repercussions.

CO4: To introduce and understand impacts of environmental factors and recommend public health measures need to be taken to mitigate health effect of climate change.

CO5: To recommend appropriate public health intervention in keeping with disease burden and evaluate health system performance in international perspective.

1. **Concept and introduction:** Concept of global health; importance to study global health, global variation in demographic, health and epidemiological transitions; linkages between globalization and health; linkages between global and local health; current challenges, emerging trends and priorities in global health; major patterns of distribution of disease in the world; sources of data on disease and disability.
2. **Global burden of disease:** Concept of burden of disease; hypotheses related to burden of diseases - compression of morbidity, expansion of morbidity and dynamic equilibrium; measures of burden of disease at the population level - health expectancy and health gap, methods for estimating DFLE, HALE and DALY; how does the burden of disease and mortality vary by geography, age and gender? GBD 1990, 2010 and 2019 - changes and continuities.
3. **Infectious Diseases, Non-Communicable Diseases (NCDs) and Nutrition:** Persistence of infectious diseases in developed and low- and middle-income countries; new and re-emerging infectious diseases across globe; difficulty in prevention, treatment, and rehabilitation from infectious diseases. Current and growing challenge of NCDs in developed and low- and middle-income countries; NCD's epidemiology in developed and low- and middle-income countries. Double burden of malnutrition and diseases in low- and middle-income countries; food security of undernutrition; short-term and long-term impact of undernutrition; nutrition transition.
4. **Determinants of Health:** Factors responsible for variation in the global burden of disease - culture, race, ethnicity, education, socio-political establishment, economic development and economic inequality. Role of water, sanitation, indoor and outdoor air pollution, food security, migration, disaster (man-made, natural), conflicts and epidemics in explaining global health disparities.
5. **Health care delivery systems:** Introduction to health systems; components of health system; financial models of health care; service delivery models; governments role in delivering health care; measurement of health system performance in developed and developing countries; role of WHO, World Bank, etc. in setting global and national health

Essential readings

1. Skolnik, R. (2008). *Essentials of global health*, Jones and Bartlett, Sudbury, MA.
2. Fried LP, Bentley MP, Buckens P, Burke DS, Frenk J, Klag MJ et al. (2010) **Global Health is Public Health**. *Lancet* 375, 535 – 7.
3. Huynen M, Martins P, Hilderink HJM. (2005). The Health Impacts of Globalisation: A Conceptual Framework. *Globalization and Health* 1:14.
<http://www.globalizationandhealth.com/content/1/1/14>
4. Murray, C.J.L., Saloman, J.A., Mathers, C.D., Lopez, A.D. (2007). Summary measures of population health: concepts, ethics, measurement and applications, The World Health Organization: Geneva, Council on Foreign Relations. (2014). **The Emerging Global Health Crisis. Non-Communicable Diseases in Low- and Middle-income Countries. Independent Task Force Report No. 72.**
https://www.cfr.org/sites/default/files/report_pdf/TFR72_NCDs.pdf
5. Fauci AS, Morens DM. (2012) **The Perpetual Challenge of Infectious Diseases**. *N Engl J Med* 366: 454 – 61.

Suggested readings

1. Hoffmann SJ (2010). The Evolution, Etiology and Eventualities of the Global Health Security Regime. *Health Policy Plan* 25(6): 510-22. <https://www.ncbi.nlm.nih.gov/pubmed/20732860>
2. Murray, C.J.L., Saloman, J.A., Mathers, C. (2000). A critical examination of summary measures of population health, *Bulletin of the World Health Organization* 78(8): 981-994.
3. Dieleman JL, Schneider MT, Huskenstad A, Singh I, Sadat N, Birger M, Reynolds A, Templin T, Hamavid H, Chapin A, Murray C. (2016) **Development Assistance for Health: Past Trends, Associations, and the Future of International Financial Flows for Health**. *Lancet* 387: 2536 – 44.
4. Murray, C.J.L., Frenk, J. (2000). A framework for assessing the performance of health systems, *Bulletin of the World Health Organization* 78(6): 717-731.
5. Mozaffarian D. (2017). **Global Scourge of Cardiovascular Disease. Time for Health Care Systems Reform and Precision Population Health**. *Journal of the American College of Cardiology* 70(1): 26 – 8.
6. Mills, A., Rasheed, F., Tollman, S. (2006). Strengthening health systems. In *Disease Control Priorities in Developing Countries* (2nd Edition). pages 87-102, New York: Oxford University Press.
7. Hsiao, W.C. (2003) **What is a health system? Why should we care?** [Harvard School of Public Health Working Paper.
8. World Health Organization (2010). **Key Components of a Well-Functioning Health System**.
http://www.who.int/healthsystems/publications/hss_key/en/
9. World Health Organization. (2017) **Double Burden of Malnutrition**.
<http://www.who.int/nutrition/double-burden-malnutrition/en/>

POLITICAL DEMOGRAPHY

CO1. To provide basic and advanced concepts and methods of analysing political theory of population change and its consequences with an inter-disciplinary perspective.

CO2. To familiarize the students with changing political demography of India and its implications on policy interventions.

1 Population and Political Theory

Political Theory, Development and Population; Weiner's hypotheses; Shaping Future Children: Parental Rights and Societal Interest, Immigrants, Nations and Citizenship.

2. Population and Politics

Politics, Demography and History; Population and World Politics; Population and Power; Cultural identity, nationalism and population; Demography of political representation.

3. Population Change and National and International Security

On Future Generations' Future Rights; Generations at War or Sustainable Social Policy in Ageing Societies, The Ethics of Refugee Policy.

4 Political Demography of India

A framework for the Study of Indian Political Demography; Politics of population growth in the context of Gender, Caste and Religion; Demographics of political representation; Voter Population of India and Its Socio-Demographic Characteristics; Political economy of population and health policy in India.

5 The Political Economy of Health

Virchow's philosophy; Political determinants of health; Governance and health; Political economy of global health financing; Austerity and health.

6. Conflicts, Demography and Health

Conflict Demography, Conflict and Health

7. Future of Political Demography and its Impact on Policy

Politics of Population and Health Policies and methodological choices.

Essential Readings

1. Abernethy, V. D , & Hardin, G. (2018). *Population politics* Routledge
2. Clinton, R. L., & Clinton, R. L. (1973). *Population, Politics and Political Science*. Population and Politics. Lexington, Mass: Lexington Books.
3. Clinton, R. L., Flash, W. S., & Godwin, R. K. (Eds.). (1972). *Political Science in Population Studies*. Lexington, Mass., Lexington Books [1972].

4. Clinton, R. L., Godwin, R. K., & Godwin, R. J. (1972). *Research in the Politics of Population*. Lexington Books.
5. Demeny, P., & McNicoll, G. (2006). *The political demography of the world system, 2000-2050*. *Population and Development Review*, 32, 254-287.
6. Kligman, G. (1995). *Political Demography: The Banning of Abortion* in. *Conceiving the new world order: The global politics of reproduction*, 234.
7. Teitelbaum, M. S. (2005). Political demography. In *Handbook of population* (pp. 719-730). Springer, Boston, MA.
8. Teitelbaum, M. S. (2015). Political demography. Powerful trends under-attended by demographic science. *Population studies*, 69(sup1), S87-S95.

Indian Readings

1. Bhagat, R. B. (2022). *Population and the Political Imagination: Census, Register and Citizenship in India*. Taylor & Francis.
2. Bhagat, R. B. (2006). Census and caste enumeration: British legacy and contemporary practice in India. *Genus*, 119-134.
3. James, K. S., & Balachandran, A. (2021). *Demographic Politics in Asia's Super-Size Democracies: India, Bangladesh and Pakistan*. In *Global Political Demography* (pp. 141-166). Palgrave Macmillan, Cham.
4. James, K. S., & Goli, S. (2016). Demographic changes in India: Is the country prepared for the challenge. *Brown J. World Aff.*, 23, 169.
5. Rao, K. S. (2016). *Do we care?: India's health system*. Oxford University Press.
6. Srinivasan, K. (2017). *Population concerns in India: shifting trends, policies, and programs*. SAGE Publishing India.

MSP-E3.3

45 Hours

POPULATION, ENVIRONMENT AND SUSTAINABLE DEVELOPMENT

Course Outcomes:

- | | |
|------|---|
| CO1. | Understand sustainable development and its challenges. |
| CO2. | Learn quantitative and qualitative methods in environmental health analysis |
| CO3. | Comprehend the role of the environment in development modelling |

1. Sustainable development: Concepts

Sustainable development: Trends of global warming and climate change; Drivers of global warming and climate change; Impact of climate change and biological responses, Meaning and measurements of vulnerability, resilience and adaptive capacity; Calamities and measurements: challenges for environmental governance

2. Environmental challenges in India

Pollution and health- data sources, estimate; Urban environmental challenges: Tourism and

environmental challenges; Indian standards; Role of state in pollution control and resources management; Indian environment policies and programme

Disaster: meaning, factors and significance; Types of disasters: natural and man-made; Causes and effects of disasters; Profiling of disaster in India; Community health during disaster (drinking water, food and nutrition, hygiene and sanitation), urban pollution (with case studies)

3. Practical session on-Training on environment and health

Population potential mapping; Satellite image interpretation; geospatial modeling to measure environmental impact on health; Analyzing environment using large scale data; Local area pollution analysis; Energy literacy training

Field visit: Qualitative methods to measure environmental impact: Community training on environment through IEC

Essential Readings:

1. The Economics of Climate Change: The Stern Review (2014) Cambridge University Press
2. UN Climate reports <https://www.un.org/en/climatechange/reports>
3. Brundtland, G.H. (1987). *Our Common Future: The World Commission on Environment and Development*, Oxford, Oxford University Press.
4. Psychology and Climate Change (2018) Human Perceptions, Impacts, and Responses, 2018
5. Lillesand, Thomas, Kiefer, Ralph W., Chipman Jonathan (2015) *Remote Sensing and Image Interpretation*, 7th Edition, Wiley

Suggested readings:

1. Hardin, Garrett. (1968): "The Tragedy of the Commons." *Science*, Vol. 162, No. 13, reprinted in Rex R. Campbell and Jerry L. Wade. (Eds), *Society and Environment: The Coming Collision* Allyn and Bacon, Inc: Boston, MA. pp.1243-1248.
2. Lutz, Wolfgang, A. Prskawetz and W.C. Sanderson (eds.) (2002). *Population and Environment: Methods of Analysis* Supplement to Population and Development Review, New York, Population Council.
3. Simon, Julian L. (1996). *Population Matters: People, Resources Environment, and Immigration*, Transaction Publishers: New Brunswick, NJ.
4. Hanley, N., Shogren, J. F., & White, B. 2007. *Environmental Economics: In Theory and Practice*, Palgrave Macmillan
5. Bongaarts, John. (1992). Population growth and global warming. *Population and Development Review*, 18: 299-319.

OCCUPATIONAL HEALTH**Course Outcomes:**

CO1: To familiarize students with occupational health risks/ hazards and their demographic implications.

CO2: To train the students in basic concepts, theories, measurements and data sources of occupational health risks/hazards.

CO3: To acquaint students with various types of contemporary hazardous occupations throughout the world.

CO4: To develop in-depth understanding of intersectionality of occupation, health and demography in low and middle-income countries.

CO5: To develop critical thinking among students of social welfare policies and laws/ legislations/ acts for workers in India.

Introduction of Occupational Health and Demography:

Definition, basic concepts, the scope of occupational health and importance in demography; Difference between occupational health risks and hazards; Historical development of occupational health, the intersectionality of occupational health, socioeconomic characteristics, and demography; Pre and Post industrialization theories on occupational health risks and hazards; Decent work; Women's health and safety.

Morbidity and Mortality:

Health Well-being of Workers; Occupation related Morbidity, Health Disorders. Different types of Disabilities, and Mortality; Mental Health.

Types and Measurements of Occupational Health Risks:

Occupational disciplines and related risks - Mechanical, Chemical, Biological, Physical, Psychological, Medical, Ergonomic, and Work organization hazards/risks (Hazards or stressors that cause stress (short-term effects) and strain (long-term effects)); Measurements of occupational health safety, risks and hazards: Health impact assessment, Mental health assessment scale, Musculoskeletal disorder scale, American Thoracic Society and the Division of Lung Diseases (ATS-DLD-78), Occupational Stress Index (OSI), Job Strain Model, etc.

Data Sources of Occupational Health:

International and National Data Sources of Occupational Health - Population Census, Services Statistics, Large - and Small-Scale Sample Surveys etc. Data limitations in the area of occupational health.

Legislation, Social and Welfare Policies:

Sustainable Development Goals - (Decent work), International Labour Organization (ILO) Declaration on Fundamental Principles and Rights at Work; International Labour Standards on Occupational Safety and Health, Wages and Working time; ILO - Occupational Safety and Health

Convention, Health and Safety Acts; The Occupational Safety, Health and Working Conditions Code, 2020 etc. Child Labour and Health

Occupational Health in India:

History of Occupational Health in India (types of occupations, work environment and working conditions); Health behavioral risks and hazards; Evolution of labour unions; and Contemporary occupational health challenges of workers in India. Social and Welfare legal provisions and acts in India; Hazardous Waste Management Rules – 2000, Constitutional Rights, Wage Regulations (Minimum Wage Act), Factory Act – 1948, Workmen Compensation Act – 1960, Employee Provident Act – 1952, Labour Welfare Measures, Retirement Benefits/National Pension Scheme – 2004, Social Welfare Schemes and Programmes.

ESSENTIAL READINGS:

1. Benjamin O. Ali, (2008), *Fundamental Principles of Occupational Health and Safety*, Second Edition, International Labour Office, Geneva: ILO, Pages:1 – 221
2. Government of India, National Policy on Safety, Health and Environment at Work Place, Ministry of Labour and Employment, <https://labour.gov.in/policies/safety-health-and-environment-work-place>.
3. Government of India, Ministry of Rural Development, (2015), *Occupational Health & Safety, Environmental Issues and Decent Work-Module-8*, New Delhi. Pages: 1 -32.
4. Occupational safety and health in public health emergencies: A manual for protecting health workers and responders: Geneva: World Health Organization and the International Labour Office, 2018. Licence : CC BY-NC-SA 3.0 IGO.
5. Dianne F. G. Dyck, 2020, *Occupational Health & Safety: Theory, Strategy & Industry Practice*, 4th Edition. ISBN/ISSN: 9780433502074.

SUGGESTED READINGS:

1. Government of India, Report of the Working Group on Occupational Safety and Health for the Twelfth Five Year Plan (2012 To 2017), Ministry of Labour And Employment, New Delhi, Pages 1- 145.
2. Hyde, Martin, Singh Chungkham, Holendro, (2017), *Work and Health in India*, Policy Press, ISBN:9781447335436, 1447335430
3. Page count:280
4. M. Timothy McAdams, Jeffrey J. Kerwin, Vanessa Olivo, Huseyin A. Goksel, (2011), *National Assessment of the Occupational Safety and Health Workforce, 200-2000-08017*, Task Order 18, Pages 1 – 246.
5. Gautam Bhan, Antara Rai Chowdhury, Rashee Mehra, (2021), *State of occupational safety and health practices at workplace for domestic workers in COVID-19 and possibilities for action*, International Labour Organization, Geneva, ISBN: 9789220350768 (Print). Pages 1 - 36.
6. Jacques Tamin. (2020), *Occupational Health Ethics: From Theory to Practice*, Springer Cham, Hardcover ISBN 978-3-030-47282-5, <https://doi.org/10.1007/978-3-030-47282-5>
7. International Labour Conference, (2003), *Global Strategy on Occupational Safety and Health*, International Labour Organization: ISBN 92-2-116287-7 (print version), Geneva, Pages – 1 – 20.
8. *Global Strategy on Occupational Health for All: The Way to Health at Work* (1994), WHO Collaborating Centres in Occupational Health. WHO/OCH/95.1, GENEVA, Pages: 1 -72.
9. World Health Organization (WHO) - Regional Office for the Eastern Mediterranean (2001), *Occupational health: A manual for primary health care workers*, Cairo, WHO-EM/OCH/ES/EL, pages 1-168.

SEMESTER-IV

SPATIAL DEMOGRAPHY AND APPLICATION OF GIS

Course Outcomes:

- CO1: Understanding the concept of space and develop spatial dynamics in demographic process.
 CO2: Learning visualisation tools of demographic data and draw inferences.
 CO3: Learning different Geo-Spatial software to facilitate spatial analytical methods in demographic research.
 CO4: Learning Geographic Information System (GIS), spatial pattern analysis and spatial statistical techniques to explain a specific spatial pattern.

I. Concepts and Theories

Demography as a spatial science; difference between spatial demography and population geography; Spatial pattern and spatial process; location, distance and area; Distance and decay relationship and spatial hierarchy; space, place and region; Type of spaces- concrete and abstract space; absolute, relative and relational spaces.

Understanding demographic process by geographical scale; nature of disaggregated data- Census and secondary sources; Linking micro and macro demography in a spatial frame.

Application of spatial frameworks to demographic process; Space, culture and fertility; Spatial pattern of mortality and diseases; Distance as factor in access to health care and health planning; Migration and distance- gravity model; space, culture and migration; urban sprawl and suburbanization.

II. Statistical and Geospatial Data and Software

Spatial Concepts and Cartography: Spatial parameters: Site and location; Scale; Plane and spherical coordinate, Map Projection-UTM, Types of maps: cadastral, toposheet, thematic, digital; Representation of spatial and non-spatial data; **Introduction to geospatial software: GIS:** discrete data: point, and polygon data,

Raster and vector data, layouts preparation, Geocoding and basics of digitization in ArcGIS

Introduction to Geoda: ESDA in (Exploratory Spatial Data Analysis); Local Indicators of Spatial Association (LISA)

Statistical Concepts: Bar diagram, Frequency polygon, Frequency curve; Test of significance, confidence intervals, Univariate and Multivariate Statistics: Correlation and Regression, Matrix algebra: Auto-correlation, kriging, Moran's I Index

Introduction to Statistical software: SPSS, STATA, R

III. GIS and Spatial Analysis of demographic data

Representation of statistical data and automated cartography (Lab based exercises):

- a) Population distribution map of India using dot and sphere/circle, cubes,

combined;

Cartograms

- b) Density map by Choropleth and population density gradient by Isopleth;
- c) Fertility, mortality and natural growth of population by Polygraph.
- d) Measurement of population concentration by cumulative curve.
- e) Migration flow by Carogram

Concept and application Models:

- a) Spatial Lag and Error Regression Modeling;
- b) Multilevel modeling (hierarchical linear modeling);
- c) Geographically Weighted Regression;
- d) Spatial Pattern Analysis;
- e) Urban and city level projection

ESSENTIAL READINGS:

1. Anselin, L. (2005). Exploring Spatial Data with GeoDa: A Workbook. UC Santa Barbara, CA; Center for Spatially Integrated Social Science. available on <http://geodacenter.asu.edu/>.
2. Bailey, I. and Gatrell, A. C. (1995): Interactive Spatial Data Analysis. Harlow, Longman.
3. Bonham, Carter G.F. (1995): Information Systems for Geoscientists—Modelling with GIS. Pergamon, Oxford.
4. Chen, X., Orum A.M., and Paulsen K.E. (2013). Introduction to Cities: How Place and Space shape Human Experience. West Sussex, Wiley-Blackwell.
5. Kurland K. S., Gorr W. L. (2007). GIS Tutorial for Health. Redlands, CA, ESRI Press.
6. Lo, C.P. and Yeung, A. K. W. (2002): Concepts and Techniques of Geographic Information Systems. New Delhi, Prentice Hall of India.

SUGGESTED READINGS:

1. Barbara E., Ronald R. R., Stephen J. W., Tom P. E. and Sara R. C. (1997). *Geographic Information Systems, Spatial Network Analysis. And Contraceptive Choice*. Demography. 34(2): 171-187.
2. de Castro M. C. (2007). *Spatial Demography: An Opportunity to Improve Policy Making at Diverse Decision Levels*. Population Research and Policy Review 26: 477-509.
3. Paul V. (2007). *Demography as a Spatial Social Science*. Population Research and Policy Review 26: 457-476. (plus Introduction to the special issue of PRPR on Spatial Demography) pp. 455-456).
4. Reibel, Michael, (2007). *Geographic Information Systems and Spatial Data Processing in Demography. A Review*. Population Research and Policy Review 26: 601-608.
5. Griffith, D. A. and Amrhein (1997): Multivariate Statistical Analysis for Geographers. Englewood Cliffs, New Jersey, Prentice Hall.
6. Robinson, A. H. H., Sale R., Morrison J. and Muchreke, P. C (1984) Elements of Cartography. New York, John Wiley and Sons.
7. Chang, K. (2008). Introduction to Geographic Information Systems. New Delhi. McGraw Hill Education.
8. Shaw, G. and Wheeler, D. (1994). Statistical Techniques in Geographical Analysis. Englewood Cliffs, New Jersey, Prentice Hall.
9. Soja, E. W. (1996). Third space: Journeys to Los Angeles and Other Real-and Imagined Places. Wiley-Blackwell.

10. Dorling, D. and Fairborn, D. (1997): Mapping. Ways of Representing the World. Longman, Harlow.

MSP C18

60 Hours

POPULATION AGING AND HEALTH TRANSITION

Course Outcomes:

- CO1: To impart knowledge of concepts and theoretical framework relating to demography of ageing, and its societal interface.
CO2: To understand the health transition, its linkage with ageing transitions.
CO3: To develop skills to analyze trends, determinants and consequences of population ageing.
CO4: To familiarize with aging data sets and its exploration.
CO5: To acquaint the students with ageing policies and programmes and its bearing on the welfare of the elderly.

I Demography of Ageing:

Concepts and measures of population ageing; components of population ageing; Inter-relationship between population ageing, fertility, mortality and migration; population ageing and momentum of population growth, age structure transition and ageing, and declining population. Population ageing trends, patterns and determinants in India; state variations; future scenario of population ageing in India and states.

II Life Course Perspectives and Social Dynamics of Ageing:

Life course perspective of population ageing; Age and Ageing, Ageism; Social Status and Roles of Elderly, Family Structure, Intergenerational relations, Kinship and family support, Social Security; Social network- Frameworks (Berkman and others) and measurement. Living Arrangements of Elderly, Old Age Homes, Social Networks, and Contribution of elderly: "Feminization" of Ageing, Dependency, Gender Dimensions and Discrimination, Widows, Elder abuse, Social and legal Vulnerability.

III Ageing and Health:

Ageing and Functional Health: Non-communicable diseases, Ageing and disabilities; trends and prevalence. Well-being and life satisfaction.

Ageing and mental health problems; cognition, memory loss, dementia and depression; Alzheimer's and Parkinson.

Ageing and health risk factors: nutrition, diet and food practices; health risk behaviour- tobacco, alcohol; physical activities;

IV Ageing Policies and Programmes:

Social and Economic Support Policies and Programmes for the Elderly- Retirement, Pensions and Social Care Policies in developed and developing countries. Social security and welfare policies and programmes for elderly in India, National Programmes for Health Care of Elderly (NPHE); National Policy for Senior Citizens.

Worldwide Longitudinal Ageing Studies: LASI, SAGE, SHARE, HRS, CHARLS, JSTAR, etc.

ESSENTIAL READINGS:

1. Chakrabarti, Rajagopal Dhar (2004), *The Greying of India: Population Ageing in the Context of Asia*, SAGE Publications, New Delhi.
2. UNFPA (2001), *Population Ageing and Development: Social, Health and Gender Issues*, United Nations, Malta.
3. UNFPA (2011), *Report on the status of elderly in select states of India*, UNFPA, New Delhi.
4. Govt. of India (1999). *National Policy for Older Persons*. Ministry of Social Justice and Empowerment, New Delhi.
5. United Nations, Department of Economic and Social Affairs, Population Division (2019). *World Population Ageing 2019: Highlights*. UN, New York.

SUGGESTED READINGS:

1. World Health Organization (2015), *WHO Report on Ageing and Health*, Geneva, WHO.
2. United Nations (2001): *Living Arrangements of Older Persons: Critical Issues and Policy Responses*. Population Division, Department of Economic and Social Affairs, New York.
3. Sandra Gruescu. (2006). *Population ageing and economic growth*. Physica-Verlag.
4. Goli, S., B. Reddy, James, K. S. & Srinivasan, V. (2019). *Economic independence and social security among India's elderly*. *Economic and Political Weekly*. 54, 39, p. 32-41 10 p.
5. James, K.S and Goli S. (2017). *Demographic Changes in India. Is the Country prepared for the Challenge?* *The Brown Journal of World Affairs*, 23:169.
6. Berman, Lisa (2000) "Social Support, Social Networks, Social Cohesion and Health" *Social Work in Health Care*
7. Pool, Ian, Laura R. Wong and Eric Vilquin (ed) (2006), *Age-structural transitions: challenges for development*. Paris: CIRCRED.
8. National Institute of Ageing (2007). *Why population ageing matters? A global perspective*, US National Institute of Health.
9. Asian Development Bank Institute (2019). *Ageing Societies: Policies and Perspectives*, ADB, Japan.
10. Bloom, D, T.V. Sekher and J. Lee (2021). "Longitudinal Aging Study in India (LASI): new data resources for addressing aging in India", *Nature Ageing*, Vol. 1, Springer. <https://doi.org/10.1038/s43586-021-00161-4>

MSP E4.1

45 Hours

OPERATION RESEARCH IN REPRODUCTIVE HEALTH

Course Outcomes:

- CO1: To familiarize the concept of operation and intervention research in reproductive health and related fields.
- CO2: To differentiate the operation research from other social science research.
- CO3: To train students to identify research problems, design and methodology in operation research.
- CO4: To familiarize the process of developing suitable indicators in keeping with the research design.
- CO5: To develop a capacity to prepare proposal for operation research and its implementation.

1. Basic Concepts and Definition of OR

- (a) What is Operations Research
- (b) Focus, Objective and Characteristics of Operations Research
- (c) Types and Examples of Operations Research
- (d) Methods of Operations Research
- (e) Implementation Research and Its Linkages with OR

2. Role of Researchers and Managers

3. Components of OR proposal

4. Identification of Problem and Solution

- (a) Identification and Definition
- (b) Justification
- (c) Alternative Solution
- (d) Indicators, Outputs, Outcomes and Impacts

5. Causality (Randomize Experimental Design)

- (a) Pretest-Posttest Control Group Design
- (b) Posttest -only Control Group Design
- (c) Multiple Treatment Design

6. Design

- (a) Experimental Design: Pretest-posttest control group design; Posttest-only control group design; Multiple treatment designs
- (b) Quasi Experimental Design: Non-equivalent control group; Time series design; Separate sample pretest-posttest design;
- (c) Non-Experimental Design: Posttest-only design; Pretest-posttest design; Static-group comparison

7. Inferential Research Statistics Accordingly Operations Research design

- (a) χ^2 , t, F-tests
- (b) Deciding Sample Size in case of Different Experimental Design
- (c) Linking Different Design and Statistical Test

8. Study Design Exercises

9. Ethics in Operations Research

- (a) International Perspectives: Research Ethics; Recognize Ethical Issues in Operation Research; Need of Ethical Standards in Operational Research; History and Foundation of Research Ethics; Principles; Codes and Regulations; International Landscape; Ethics Review Committee; Members, Roles
Submission a Proposal for Ethical Clearance
- (b) ICMR Guidelines: Background; ICMR Code; Statement of General Principles; General Ethical Issues
Responsible Conduct of Research (PCR); Ethical Review Procedures; Informed Consent
Process; Vulnerability
- (c) Case Studies

10. Utilization and Dissemination, and Process Documentation

11. Critiques to OR proposal

ESSENTIAL READINGS:

1. Blumenfeld, S. (1985). *Operations research methods. A general approach in primary health care*. Primary Health Care Operations Research, Center for Human Services.
2. Fisher, A. A., Foreit, J. R., Laing, J. E., Stoeckel, J. E., & Townsend, J. (2002). Designing HIV/AIDS intervention studies: An operations research handbook.
3. Foreit, J. R., & Frejka, T. (1998). Family planning operations research. a book of readings.

SUGGESTED READINGS:

1. Gallo, G. (2004). Operations research and ethics: Responsibility, sharing and cooperation. *European Journal of Operational Research*, 153(2), 468-476.
2. Mathur, R., & Swaminathan, S. (2018). National ethical guidelines for biomedical & health research involving human participants, 2017: A commentary. *The Indian journal of medical research*, 148(3), 279.
3. Oliver, P. (2010). *The student's guide to research ethics*. McGraw-Hill Education (UK).
4. Ormerod, R. J., & Ulrich, W. (2013). Operational research and ethics: A literature review. *European journal of operational research*, 228(2), 291-307.
5. Sanmukhani, J., & Tripathi, C. B. (2011). Ethics in clinical research: The Indian perspective. *Indian journal of pharmaceutical sciences*, 73(2), 125.

MSP E4.2

45 Hours

MONITORING AND EVALUATION IN POPULATION & HEALTH

Course Outcomes:

- CO1: Familiarize the students with concepts and methods of monitoring and evaluation research.
CO2: To acquaint with various designs employed in monitoring and evaluation.
CO3: Develop skills on statistical approaches for implementation programmes.
CO4: Orient students on health management information system.

I. Introduction to Monitoring and Evaluation: Basic concepts, Difference between Monitoring and Evaluation; Linkage between Planning, Monitoring and Evaluation; Importance of Monitoring and Evaluation

II. Monitoring and Evaluation Framework: Resources for monitoring and evaluation, Engagement of stakeholders in monitoring and evaluation; Meaning of Indicators, Ideal requirement, process of developing indicator, illustration of indicators developed from large scale surveys; measurement, need & levels of indicator; Challenges in developing indicators from Large-Scale Surveys; Types of Indicators – Input, Process, Output, Outcome, Impact; Learning and accountability of Monitoring and evaluation data

III. Monitoring of Policy Implementation: Components of policy and programme, budget, staff, process of evaluation, developing tangible indicators for policy monitoring in terms of Input, Process, Output, Outcome, Impact; Result based inference

IV. Evaluation in Theory: Principles, norms and standards for evaluation; Criterion for evaluation; Theory of Change; Evaluating for results; Roles and responsibilities in evaluation; Scaling Impact

V. Evaluation Design: Determination of sample size under different approaches and design including measurement of change due to certain interventions; Quasi Experiment design, Case control design, Evaluation Terms of Reference, Formative and Summative Evaluations, Managing Evaluations; Evaluation at different points: Baseline, Mid-point, Concurrent and End line evaluation; Randomization, Statistical design of Randomization; Randomized control trials, time dependant cluster design, interrupted time series analysis.

VI. Assuring the Quality of Evaluation Design and Methodology: Overview; Defining the context; The evaluation purpose; Focusing the evaluation; Evaluation methodology; Mandatory requirements for programme; SWOT analysis of NLM, ICDS and National Livelihood Mission; Social audit – meaning, objectives, advantage, case study of social audit

VII. Statistical Approaches of Evaluation of Intervention Programme: Statistical inferences used in different intervention design – z , t , F and paired t tests, two stage LSM, instrument variable method; Propensity score matching, Difference in Difference Method: Theory and application, advantage and disadvantage, regression implementation, Decomposition analysis

VIII. Management Information System and Use of Technology. MIS – Monitoring information system; Role of programmers; HMIS system; Global Positioning System, Use of Machine learning and Artificial Intelligence, Use of spatial data

ESSENTIAL READINGS:

1. Casley, Dennis J and Kumar, Krishna (1988). *The Collection, Analysis, and Use of monitoring and Evaluation Data*. A World Bank Publication, The John Hopkins University Press
2. FHI (2004). *Introduction to Monitoring and Evaluation Monitoring and Evaluation, monitoring hiv/aids programs: A facilitator's training guide*. Family Health International
3. GoI & UNDP (2012). *Guiding Framework for Monitoring and Impact Evaluation of Capacity Building & Training of Panchayati Raj Institutions in States/UTs*. Government of India and United Nation's Development Programme
4. Rossi, Peter H.; Mark W. Lipsey and Howard E. Freeman (2004). *Evaluation, A Systematic Approach*. Seventh Edition. Sage Publications – New Delhi.
5. United nations development Group. *The Theory of Change*. UNDAF Companion Guideline.

SUGGESTED READINGS:

1. IFRC and RCS (2002). *Handbook for Monitoring and Evaluation*. International Federation of Red Cross and Red Crescent Societies –Geneva
2. McLean R. and Gargani J. (2019) *Scaling Impact Innovations for the Public Good*. Routledge. New York
3. NIRD&PR; MoRD and TISS (2016). *Social Audit. A manual for Trainers*. National Institute of Rural Development & Panchayati Raj; Ministry of Rural Development and Tata Institute of Social Sciences
4. OECD (2021). *Applying Evaluation Criterion Thoughtfully*, OECD Publishing, Paris. <https://doi.org/10.1787/543e84ed-en>.
5. Sullivan, T.M., Strachan, M., and Timmons, B.K. (2007). *Guide to Monitoring and Evaluating Health Information Products and Services*. Baltimore, Maryland: Center for Communication

MSP E4.3

45 Hours

Gender Theories in Demography and Development

Course Outcomes:

CO1: To provide an analysis of the location of women in processes of development and demographic transition and to understand the centrality of gender in each case through cutting-edge gender and feminist theories;

CO2: To examine theoretical and conceptual frameworks for the demographic and development analysis, including an understanding of gender divisions and inequalities and their interaction with other forms of inequality such as caste, class, race, and ethnicity and their spatiality;

CO3: To reflect upon the linkages between the economy, demography, and the gendered macro and micro processes of development; and

CO4: To provide a basis for research, practical action, and policy formulation, and for evaluating directions and strategies for social change by application of gender theories

I. Section A

Gender Theories

i. Theoretical framework – Principal Theories of Patriarchy:

Traditionalist Theories of Patriarchy:

- a. Religious,
- b. Biological determinist,
- c. Darwinian or Sociobiology; Evolutionary Sociobiological Theory.

New Economic Theories of Patriarchy:

- a. Economic Theories of Patriarchy
- b. Cultural or Constructive Social Biology View,
- c. Working Hypothesis,
- d. Maternalist or Matriarchal Theories,
- e. Capitalist Patriarchy.

Indian Context:

- a. Brahmanical Patriarchy,
- b. Landholding-Patriarchy Hypothesis.

ii. Conceptual shift in the women and development discourse:

From 'Women in Development' (WID) to 'Gender in Development' (GID) and 'Gender and Development' (GAD).

iii. **Historical Perspective of Feminism:**

First Wave of Feminism, Second Wave of Feminism, Third Wave of Feminism, Fourth Wave of Feminism.

Introduction to Feminist Theories:

Gender-Reform Theories, Gender-Resistance Theories, Gender-Rebellion Theories, Liberal Feminism, Marxist Feminism, Social Feminism, Radical Feminism, Lesbian Feminism, Multiracial Feminism, Standpoint Feminism, Postmodern Feminism.

Classical and Neo-Classical Theories of human capital formation, institutions, and their feminist critique.

Feminist critique of the gender perspective in the Indian Planning: from welfare to 'empowerment and women's agency' approach.

2. Section B

Locating Gender in Development and Demographic Process

(Note: Worked out as Practical empirical exercises in the form of Classroom Term papers. Precisely use Gender Theories to construct "Theory of Change" in Socio-economic and Demographic measures)

- i. Access and control over resources and assets; the cross-cutting issues of caste and class and space; and Spatial-temporal pattern.
- ii. Social, Economic and Demographic Aspects and related measures:
 - a. Literacy/education
 - b. Women and Economy: Gendered Division of labour- mural and extra-mural
 - c. Gendered livelihoods and poverty; workforce trends and implications for emerging regional patterns; caste/class/region overlap
 - d. Gender biases in access and utilization of health including- gender differentials in nutrition and health; mortality differentials by sex, reproductive health and its consequences, and gender inequalities in healthcare utilization
 - e. Sex Ratio
 - f. Child Marriages
 - g. Gender and political participation: national, state and local; equal participation in policy and decision-making process; equal distribution of political power
 - h. Gender-based violence
 - i. Gender and mass media- language, image, and portrayal of women
 - j. Gender Development Indices; Government and bilateral policies/schemes; Gender budgeting; Gender-sensitive financing
 - k. Institutionalizing gender concerns and gender empowerment in policies and interventions
 - l. Gender and structural adjustment, National, and International programs, policies, and laws favouring the empowerment of women
 - m. Gendered Geographies: Space and Place

Essential Readings

1. Agarwal, B., (1994). *A Field of One's Own: Gender and Land Rights in South Asia*. Cambridge University Press: Cambridge.
2. Bhasin, K. (1993). *What is patriarchy?* Kali for Women Publishers, New Delhi.

3. Boserup, E. (1989). *Woman's Role in Economic Development*. Earthscan: London.
4. Engels, F. (1884). *The Origin of the Family; Private Property and State*. International Publishers: New York.
5. Kaber, N. (1994). *Reversed realities: Gender hierarchies in development thought*. Verso.
6. Lerner, G. (1986). *The creation of patriarchy*. Women and History; Vol. 1. Oxford University Press.
7. John, M. E. (Ed.). (2008). *Women's studies in India: A Reader*. Penguin Group.
8. Walby, S. (1990). *Theorizing Patriarchy*. Basil Blackwell: London.

Suggested Readings

1. John, M. E. (1996). *Discrepant Dislocations: Feminism, Theory and Post-colonial Histories*, Berkeley: University of California Press and Delhi: Oxford University Press.
2. John, M. E. (2014). Feminist Concepts in Time and Space: Perspectives from India, *Economic and Political Weekly*, 2014, vol. 49, no. 22, May 31st.
3. Kaber, N. (1994). *Reversed realities: Gender hierarchies in development thought*. Verso.
4. Kapadia, K. (2002). Translocal modernities and transformations of gender and caste. *The violence of development: the politics of identity, gender and social inequalities in India*, 142-179.
5. Rege, S. (Ed.). (2003). *Sociology of gender: The challenge of feminist sociological thought*. SAGE Publications India.

Master of Arts/Science in Population Studies

Course No.	Course Name	Course Type	Credits	Hours	No. of Internal Exams	Weightage (%)	
						Internal Exam	Semester Exam
SEMESTER-I							
MSP F1	Social Science Concepts	F	NC	45	3	50	50
MSP C1	Basic Statistical Methods for Population Studies	C	4	60	3	40	60
MSP C2	Demography and History of Population	C	2	30	2	40	60
MSP C3	Age-sex Structure, Quality of Data and Population Dynamics	C	2	30	2	40	60
MSP C4	Mortality	C	2	30	2	40	60
MSP C5	Fertility	C	1	45	3	40	60
MSP E1	MSP E1.1: Healthcare System and Policies	E	3	45	3	40	60
	MSP E1.2: Biostatistics and Epidemiology MSP						
	MSP E1.3: Family Demography						
Semester Credits			16	285			
SEMESTER-II							
MSP C6	Mortality, Morbidity and Public Health	C	4	60	3	40	60
MSP C7	Research Methodology I	C	2	30	2	40	60
MSP C8	Gender Equity and Reproductive Health	C	2	30	3	40	60
MSP C9	Migration and Urbanization	C	4	60	3	40	60
MSP C10	Statistical Methods and Computer Applications	C	2	30	2	50	50
MSP E2	MSP E2.1: Historical Demography	E	3	45	3	40	60
	MSP E2.2: Health Economics and Financing						
	MSP E2.3: Urbanization, Space and Planning						
	MSP E2.4: Gender, Health and Development						
MSP V1	Viva-Voce-I	V1					
Semester Credits			20	300			
SEMESTER-III							
MSP C11	Application of Statistical Packages in Large Scale data	C	4	60	3	50	50
MSP C12	Population Estimation and Projections	C	2	30	2	50	50
MSP C13	Demographic Estimation Techniques and Models	C	2	30	2	50	50
MSP C14	Population, Development and Environment	C	4	60	3	40	60
MSP C15	Population Policies and Programme Evaluation	C	4	60	3	40	60
MSP C16	Research Methodology II	C	3	45	3	50	50
MSP E3	MSP E3.1: Concepts and Measures of Global Health	E	3	45	3	40	60
	MSP E3.2: Political Demography						
	MSP E3.3: Population, Environment and Sustainable Development						
	MSP E3.4: Occupational Health						
Semester Credits			22	330			
SEMESTER-IV							
MSP C17	Spatial Demography and Application of GIS	C	4	60	3	50	50
MSP C18	Population Aging and Health Transition	C	4	60	3	40	60
MSP E4	MSP E4.1: Operations Research in Reproductive Health MSP E4.2: Monitoring and Evaluation in Population and Health MSP E4.3: Gender Theories in Demography and Development	E	3	45	3	40	60
MSP D	Dissertation	C	10				
MSP V2	Viva-Voce-II	C	2				
Semester Credits			23	165			
TOTAL CREDITS			81				

Notes:

Course type: F – Foundation course; C – Core course; E – Elective course; V – Viva voce; D – Dissertation.
 NC: Non-credited foundation courses are not counted for calculating the final grade.
 Core papers: Must for all students and cannot be changed.
 Elective papers: One elective paper should be opted from a pair.

anurag

Shruti

T. Bro

Anshu

Internal Examination: Teachers are given the flexibility to decide mode of mode of internal examination from the following list: Written Test; Open Book Test; Written Home Assignment; Individual Thematic Presentation; Thematic Group Presentation; Group Discussion; Surprise Test; MCQ Test; Case Study; Situation Analysis (group activity or individual activity); Field Visit; Small Group Project & Internal Viva-Voce; Role Play; Story Telling; Literature Review / Book Review; Model Development/Simulation Exercises (Group Activity or Individual Activity); In-depth Viva; Quiz; etc.

Dissertation: Weightage in evaluation of dissertation: Guide 0.25; Presentation & Defence 0.25; and Content 0.50.

Evaluation of Dissertation: The Director & Senior Professor appoints an evaluation committee for dissertation consisting of three members from among the faculty of IIPS. First, the committee members independently assess the 'oral presentation and defence' of the student and submit their grade to the Controller of Examinations. Second, the committee members independently evaluate the content of the 'final dissertation' submitted by the student and submit their grades to the Controller of Examinations. To arrive the final dissertation grade, the average of overall all grades of Guide, Presentation & Defence, and Content is considered.

Best Dissertation Award: The Director & Senior Professor appoints a committee consisting of three external experts for recommending the award of the best dissertation. The dissertations of top five ranks (based on the combined score of content, presentation and defence) are placed before the committee. The external members evaluate dissertations and submit their recommendation in a sealed cover to the Controller of Examinations.

Viva voce: Director & Senior Professor constitutes a committee comprising of one external examiner and three/four internal examiners for the viva-voce. The three/four internal examiners shall comprise of one senior professor (Chairperson), one/two faculty members and one programme co-ordinator. The committee members independently evaluate the performance of the students in the viva-voce and assign their grades. To arrive the final viva-voce grade, the average of the evaluation of the members is considered.

Grades Table

GRADE TABLE FOR EVALUATION OF ANSWER SHEET

The Grades, Grade Point and Descriptions are as given below.

Final Grade	Grade Point	Grade Description
O Only	10	Outstanding
A Plus	9	Excellent
A Only	8	Very Good
B Plus	7	Good
B Only	6	Above average
C Only	5	Average
P Only	4	Pass
F+	3	Fail
F?	2	Fail
F-1	1	Fail
NA/AB	0	Not Attempted / Absent

GRADE TABLE FOR SEMESTER GRADE CARD

The Grades, Grade Point and Descriptions are as given below.

Final Grade	Grade Point	Grade Description
O Only	10	Outstanding
A Plus	9	Excellent
A Only	8	Very Good
B Plus	7	Good
B Only	6	Above average
C Only	5	Average
P Only	4	Pass
F Only	0	Fail
NA/AB	0	Not Attempted / Absent

Handwritten signatures and initials are present at the bottom of the page, including "Shay", "anurag", "T. Bar", and "Anshul".

ANNEXURE-III

To

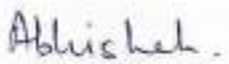
Date: 28th July 2023


The Director,

IIPS Mumbai- 400088.


The committee duly constituted by the Director & Senior Professor to revise the syllabus of the **Master of Science in Biostatistics and Demography (MBD)** course. The committee under the chairpersonship of Prof. Abhishek Singh had several meetings and presented revise draft of syllabus before in the faculty meeting in order to revise the MBD syllabus.

The committee herewith submitting the final version of revised MBD syllabus after incorporating all the suggestions and comments received in the Academic Council meeting held on 5th July 2023.



(Prof. Abhishek Singh)
Chairperson


(Prof. Murali Dhar)
Member


(Dr. Dilip T R)
Member


(Dr. Kaushalendra Kumar)
Member

(Dr. Guru Vasishtha)
Member


20/7/23

Paper Code	COURSE TITLE SEMESTER I	No. of credits
MBD-F1	Basics of Human Biology	2*
MBD-F2	Social Science Concepts	2*
MBD-C1	Introduction to Demography and History of Population	3
MBD-C2	Basic Demographic Methods	3
MBD-C3	Methods in Biostatistics I	2
MBD-C4	Sample Survey Designs	2
MBD-E1	MBD E-1.1: Data Analysis with R and Python	3
	MBD E-1.2: Data Analysis with STATA	3
	Semester Credits	13
	SEMESTER II	
MBD-C5	Basic Concepts and Application of Epidemiology	3
MBD-C6	Infectious Disease Epidemiology	2
MBD-C7	Methods in Biostatistics II	2
MBD-C8	Healthcare Systems and Policies	2
MBD-C9	Demographic Theories and Nuptiality	2
MBD-C10	Advanced Sample Survey Designs and Related Concepts	2
MBD-E2	MBD E-2.1: Introduction to Longitudinal Data Analysis	3
	MBD E-2.2: Introduction to Spatial Statistics	3
MBD-E3	MBD E-3.1: Systematic Review and Application of Meta-Analysis	2
	MBD E-3.2: Large-scale Sample Surveys	2
MBD-V1	Viva-voce	2
	Semester Credits	20
	SEMESTER III	
MBD-C11	Research Methods in Epidemiology and Biostatistics	4
MBD-C12	Advanced Demographic Methods	3
MBD-F3	Introduction to Demographic Packages	2*
MBD-C13	Advanced Methods in Biostatistics	2
MBD-E4	MBD E-4.1: Concepts and Measures of Global Health	3
	MBD E-4.2: Big Data using Machine Learning	3
	MBD E-4.3: Health Economics and Financing	3
MBD-E5	MBD E-5.1: Population Ageing and Health Transition	3
	MBD E-5.2: Population, Environment and Sustainable Development	3
	MBD E-5.3: Gender, Health and Development	3
MBD-C14	Survival Analysis	3
	Semester Credits	18
	SEMESTER IV	
MBD-C15	Data Management and Analysis in SAS	3
MBD-C16	Demographic Models and Indirect Methods of Estimation	3
MBD-C17	Methods in Clinical Trials	3
MBD-E6	MBD E-6.1: Operations Research in Population and Health	3
	MBD E-6.2: Monitoring and Evaluation in Population and Health	3
	MBD E-6.3: Urbanization, Space and Planning	3
MBD-D	Dissertation	10\$
MBD-V2	Viva-voce	2
	Semester Credits	24
	Total credits	75

*Credit not counted for calculating final grade.

\$ Evaluation procedure for dissertation (weights): Guide - 0.25, Presentation & Defense – 0.25, Content – 0.50. The grade for ‘presentation & defense must also be given independently by each member, and submitted to the controller of examinations independently. For content, the director may appoint a three-member committee for each dissertation. The three members should independently evaluate the dissertation and independently submit the grades to the controller of examinations.

Foundation Courses

MBD-F1	Basics of Human Biology	30 Hours
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Course Outcomes:

- CO1: Aware of the basics of human biology.
CO2: Understand the human life cycle and its bearing on health and diseases.
CO3: Familiarity with anatomy and physiology of different organ systems of the human body.
CO4: Acquire basic knowledge about the pathophysiology of human organ systems.

Introduction to human biology; human life cycle; definition & structure of cell, tissue structure & type

Anatomy and physiology of human organ and organ related diseases - Digestive system; respiratory system; cardiovascular system; lymphoid & haemopoietic system (circulatory); nervous & the special senses; muscular and skeletal system; excretory system; urinary system; reproductive system (female and male)

Essential Reading List

1. Guyton Arthur C., 1991, Textbook of Medical Physiology, A Prism Book Pvt. Ltd. Bangalore.
2. Sembulingam K and Prema Sembulingam, 2019, Essentials of Medical Physiology, Jaypee Brothers Medical Publishers New Delhi.

Suggested Reading List

1. Horton Casey, 1994, Atlas of Anatomy, Marshall Cavendish Books, London
2. W. Gordon Sears, Robert S. Winwood and J.L. Smith, 1985, Anatomy and Physiology for Nurses and Students of Human Biology, Education Academic and Medicinal Publishing Division of Hodder and Stoughton, London.
3. Keele, Neil et.al, 1991, Samson Wright's Applied Physiology, Oxford University Press, Delhi.

MBD-F2	Social Science Concepts	30 Hours
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Course Outcomes:

- CO1: To gain familiarity with basic social science concepts that has bearing on understanding population dynamics.
- CO2: Imagine the varied axis of social reality, such as caste, tribe, gender, kinship and marriage, social mobility and religion in terms of its relevance in population studies.
- CO3: Viewing population in space and time and read population geography in consideration of man-environment relationship, geographical factors and regional perspective.
- CO4: Recognition of interplay between economic development and population changes in an evolving world order.
- CO5: To understand the psychological concepts like perception, behaviour, emotion, personality, coping mechanism, communication and their bearing on Population Studies

SOCIOLOGY

1. Sociology: sociology as a social science- its nature, subject matter and scope
2. Relation of sociology with other social sciences, sociological perspective
3. Basic Concepts in sociology
4. The Family:
 - a) Sociological Significance of the Family b) Types and functions of Family
 - b) Nuclear and joint families
5. Marriage: Different forms of marriage, changing patterns of marriage/mate selection in India
6. Kinship –features of kinship system in India, regional variations
7. Social stratification: Social Class and Caste: Principles of Class and Caste
8. Socialization: agencies of socialization
9. Culture: meaning and characteristics of culture.
10. Society and Culture in India
 - a) Aspects of society and culture in India, and its role and importance in Population Studies.
 - b) Social Institutions and their role in influencing demographic situation of the Population of India
- Family, Marriage, Kinship and Religion
11. Caste System
 - i) Concept and definition of Caste System,
 - ii) Changing Caste System in India
12. Social Mobility: vertical and horizontal, intra- and inter-generational mobility
13. Social Change

Definition and Concept of Social Change
14. Process of Social and Cultural Changes in India and their role in influencing demographic behaviour:
 - a) Sanskritization b) Westernization c) Modernization

GEOGRAPHY

1. Importance of Geographical factors- Physical factors (relief, rainfall, temperature, soil and vegetation) Economic and Social factors (Mineral resources and industrialisation, transport, language, religion and caste/tribe); the influence of geographical factors on population.
2. Geographical approaches: the concept of region- formal and functional regions; the concept of growth pole and regional development; core and periphery; distance and decay function; Mapsscale, choropleth, isopleths and distribution maps.
3. Physical divisions of India; administrative organization of India. Historic-Cultural regions; Agro-climatic regions; NSS regions.
4. Theoretical Perspectives in Geography- Place of geography in Social sciences; man and nature relationship- determinism and possibilism; Positivism (quantification) and Phenomenology; and Radical and Postmodern Geography.
5. Concept of Social Space; Social Structure and Spatial Structure; Role of time and space in social sciences.

ECONOMICS

1. Introduction:

Defining Economics and welfare Economics, Micro and Macro Economics, Economic and non-economic good, Basic Economic Activities, Factors of Production, Economic Systems.

2. Basic Concepts in Micro Economics

Concept of Marginal and Total Utility, Law of Diminishing Marginal Utility, Theory of Demand: Indifference curves Theory and Properties, Equilibrium of consumer, Income, Substitution and Price effect. Elasticity of Demand: Price, Income and cross elasticity, Basic concepts in theory of production, cost and market structure.

3. Basic Concepts in Macro Economics

Basic Concepts in National Income: Concept of GDP, NDP, GNP, NNP, NI, PCI, PPP, Theory of consumption and saving: Consumption function, Keynes' Psychological law of consumption, concept of APC and MPC, APS and MPS, Factors affecting consumption and savings, Basic concept of Investment.

PSYCHOLOGY

1. Social Psychological Concepts:

The Value of psychology and perspectives in psychology; scientific study of social influences on behavior and the interaction between individuals and groups; social pressure, leadership

2. Basics of Psychology:

Why Psychology, branches of psychology, methods of research, Psychological wellbeing across major

stages of the life span. Role of psychology in population studies.

ESSENTIAL READINGS:

1. Davis, Kingslay, *Human Society*, MacMillan and Co., New York, (1975), Chapters 1, 3,5,6.
2. Kapadia, K. M., *Marriage and Family in India*, Oxford University Press, Calcutta, (1966).
3. Mandelbaum, D.G., *Society in India-Continuity and Change(vol.1) and Change and Continuity*, (Vol. 2). University of California Press, London, (1970).
4. Mac Iver R.M. and Charles H. Page, *Society: An Introductory Analysis*, Holt, Rinehard and
5. Winston, New York, (1949), Chapters No.1, 3,7,11,15,22,24,25,26.
6. Srinivas M.N., *Social Change in Modern India*, University of California Press, Berkeley, (1966)
7. Sen, A. (2018). *Collective Choice and Social Welfare: An Expanded Edition*. United Kingdom: Harvard University Press.
8. Haralambos, Michael, *Sociology: Themes and Perspectives*, Oxford University Press, Delhi (1980).
9. Sigmund Freud, *The Interpretation of Dreams* (1900)
10. Charles M. Duhigg, *The Power of Habit* (2012)
11. Karen Horney, *The Neurotic Personality of Our Time* (1937)
12. Oliver Burkeman, *The Antidote: Happiness for People Who Can't Stand Positive Thinking*(2012) .
13. Carl Gustav Jung, *Man and His Symbols* (1964)
14. Introduction to Psychology 10th Edition James W. Kalat (2013) Abler, R, Adams, J and Gould P., (1971): *Spatial Organization: The Geographer's view of the World*, Prentice Hall, New Jersey.
15. Johnston, R.J., (2004): *Geography and Geographers*, Oxford Unity Press.
16. Richard, Peet., (1998): *Modern Geographic Thought*, Blackwall Publishers
17. Singh, R.L., (1971) *India: A Regional Geography*, National Geographical Society of India, Varanasi.
18. Ahuja H.L, *Advanced Economic Theory: Microeconomic Analysis*, S. Chand and Company Limited, New Delhi, Chapters 5,6,7,8,9,12,16, 17, 18, 20
19. Koutsoiannis A, 1979, *Modern Microeconomics*, London: Macmillan Press Ltd,
20. Lipsey and Chrystal, 2004, *Economics*, Oxford university Press, Part One, part two and part five
21. Dasgupta AK, *Epochs of Economic Theory*, OUP, Bombay, Chapters 2, 3, 4, 7 and 8
22. Kuppaswamy B., *Social Change in India*, Konark Publication Pvt. Ltd. Delhi, (1972).
23. Muzumdar, Haridas , *The Grammar of Sociology: Man in Society*, Asia Publishing House, Mumbai (1966).
24. Johnson, Harry M, *Sociology: A Systematic Introduction*, Allied publishers, Bombay (1966).
25. Mc Gee, Reece , *Sociology: An Introduction* , Holt, Rinehard and Winston, New York (1980).
26. Magill, Frank N (ed.), *International Encyclopedia of Sociology*, Fitzroy Dearborn Publishers, London, (1995).
27. Francis John Monkhouse (1956) *Maps and Diagrams: Their Compilation and Construction*, University of Michigan.
28. JF Friedman (1966) *Regional Development Policy: A Case Study of Venezuela*, Cambridge, Massachusetts : MIT Press, 1966.
29. Samuelson, Paul A. and William D. Nordhaus., "Economics", New York: Tata McGraw Hill, part one, two and five
30. Datt R and Sundaram K.P.M, 2000, *Indian economy*, S. Chand & Company Ltd, Part II.
31. Government of India, Ministry of Finance, Economic Division, *Economic Survey*

Core Courses

MBD-C1	Introduction to Demography and History of Population	45 Hours
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Course Outcomes:

CO1: Learn scope of demography and its relationship with other disciplines.

CO2: Understand the global, regional and national population trends.

CO3: Understand the nature of diversity in the size, distribution, composition, and basic characteristics of population across Indian states.

CO4: Know various sources of demographic data in India, and their limitations.

CO5: Appreciate the historical perspectives on population change.

Unit I: Definition and Scope

Evolution of demography as a scientific discipline; nature and scope of demography and changes in it over time; multi-disciplinary nature of demography, its linkage with other social science disciplines; basic demographic concepts; components of population change; registration of births and deaths act 1969

Unit II: Population History

Global population trends - Historical population trends, world population growth-a brief history, the power of doubling; global variation in population size and growth; past, present and future population trends across the world, continents, and major regions; history of population in India - trends and growth of India's population; concerns of population growth- before and after independence

Unit III: Sources of Demographic Data

Population census across the world; Census taking under British India; Indian census, details of different items on which Indian census collect data, publication of census data/ reports; Vital registration system; Sample registration system (SRS), survey on causes of death; National Sample Survey Organization's surveys, details of different rounds collecting population and health data; Nationwide sample surveys - National Family Health Survey (NFHS), District Level Household and Facility Survey (DLHS), etc.

Unit IV: Population Theories

Malthus and Marx; optimum population; demographic transition theory

Essential Readings:

1. Bhende, A., (1996): *Principles of Population Studies* (Seventh Edition), Himalaya Publishing House, Bombay.
2. Jacob S. Siegel and David a. Swanson (2004): *The Methods and Materials of Demography*, Second Edition, USA.
3. John Weeks (2005): *Population: An Introduction to Concepts and Issues*, Wordsworth Learning. Singapore 9th edition.
4. United Nations, (1973): *The Determinants and Consequences of Population Trends*, Vol. I, Population Studies, No. 50, Chapter VII, New York.

Suggested Reading List

1. Davis, Kingsley (1968). The Population of India and Pakistan, Russell and Russell, New York.
2. Bogue, D. (1969): *Principles of Demography*, John Wiley and Sons, New York.
3. Livi-Bacci, M. (1996): A Concise History of World Population (2nd edition), Oxford.

MBD-C2	Basic Demographic Methods	45 Hours
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Course Outcomes:

CO1: Learn basic demographic concepts and measures of fertility, mortality and migration.

CO2: Learn synthetic formulation of survival experience (e.g. life table).

CO3: Understand the need for standardized comparison of demographic measures.

CO4: Learn computation and interpretation of levels and trends of fertility, mortality, and migration

Unit I: Fertility

Importance of the fertility study in population dynamics; basic terms and concepts used in the study of fertility

Basic concepts; problems in fertility analysis; period and cohort approaches; period measures of fertility - basic fertility measures, order-specific fertility rates; cohort measures; birth interval analysis; reproduction measures

Determinants of natural fertility; Davis intermediate variables framework of fertility; Bongaarts proximate determinants

Unit II: Mortality

Need and importance of the study of mortality; some basic measures: - crude death rate (CDR) and age-specific death rates (ASDRs) - their relative merits and demerits; standardization: direct and indirect technique of standardization of rates and ratios; decomposition

Infant mortality rate and its sub-divisions; maternal mortality rate, ratios, life time risk; issues related to estimation of maternal mortality measures

Basic concept of a life table; types and forms of life table; anatomy of life table; uses of life table in demographic analysis; construction of life tables

Unit III: Migration

Concept and definition of mobility and migration: sources, quality and limitation of data; definition and concept of urban and urbanization

Types and streams of migration; internal migration - trend, patterns, determinants and consequences in developing countries with a special focus on India; international migration - trend, pattern and consequences

Degree of urbanization; direct estimation of lifetime and inter-censal migration rates from census data; indirect measures of net internal migration - vital statistics method, national growth rate method and census and life table survival ratio methods; methods of estimating return migration;

Essential Reading List

1. Shryock, Henry S. Jacob S. Siegel and Associate, (1980): The Methods and Materials of Demography Vol.1 & 2, U.S. Bureau of the Census, Washington D.C.
2. Pathak, K.B. and F. Ram, (1998) Techniques of Demographic Analysis, Mumbai:Himalaya Publishing House, Chapter 4, Pp.108-153.
3. United Nations, (1974): *Methods of Measuring Internal Migration*, Manual VI, UN, New York.

Suggested Reading List

1. Preston, Samuel, Patrick Heuveline, and Michel Guillot: Demography – Measuring and Modeling Population Processes, Wiley-Blackwell, 2001.
2. Asha A. Bhende and Tara Kanitkar, (2003), *Principles of Population Studies*, Sixteenth Revised Edition, Himalaya Publishing House, Mumbai.
3. Hinde, Andrew (1998) *Demographic Methods*. London: Arnold.
4. John R. Weeks, (2005), *Population: An Introduction to Concepts and Issues*, Ninth Edition, Wadsworth Publishing Company, Belmont, California.

MBD-C3	Methods in Biostatistics I	30 Hours
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Course Outcomes:

CO1: Learn the basic concepts of Biostatistics.

CO2: Understand types of data and summarizing data.

CO3: Understand basic concept of probability and sampling distributions.

CO4: Learn basic concepts of statistical inference.

CO5: Understand statistical methods.

Unit I: Introduction

Definition and objectives of biostatistics

Unit II: Types of data

Categorical data; numerical data; censored data

Unit III: Summarizing data

Tables and graphs; measures of central tendency; measures of dispersion and variability; measures of skewness and kurtosis

Unit IV: Probability concepts and distributions

Random variables; concept of probability; probability distributions; joint, marginal, conditional distributions

Unit V: Sampling distributions

Normal distribution, Chi-square distribution, F- distribution and Student's t distribution; methods for finding estimators - method of moments, maximum likelihood method; properties of estimators- Unbiasedness, Efficiency and consistency.

Unit V: Basic concepts of statistical inference

Using samples to understand populations; standard error; confidence intervals; hypothesis tests, p-value, and statistical power

Unit VI: Goodness of fit and contingency tables

Unit VII: Non-parametric methods

Unit VIII: Statistical methods

Correlation; linear regression; analysis of variance

Essential Reading List

1. Altman D G: Practical Statistics for Medical Research, London: Chapman and Hall, 2006.
2. Rosner B: Fundamentals of Biostatistics, ed. 6, 2006.
3. Mood, A.M., Graybill, F.A., and Boes, D.C.: Introduction to the Theory of Statistics, Third edition. McGraw Hill.

Suggested Reading List

1. Zar, C Z: Biostatistical Analysis, 5th Edition, 2015
2. Bonita R, Beaglehole, R, Kjellstrom, T: Basic Epidemiology, 2nd Edition, 2006.

MBD-C4	Sample Survey Designs	30 Hours
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Course Outcomes:

- CO1: Gain understanding of basic concepts related to sample surveys with specific references to health and demographic surveys.
- CO2: Gain understanding of basic sample survey designs.
- CO3: Learn skills to design and implement sample surveys in keeping with research objectives.

Unit I: Introduction and basic concepts

Introduction; need for sample surveys; sample survey versus complete enumeration; population, units and sampling units; sampling design; probability and non-probability sampling; sampling frame; bias and errors in sample surveys

Unit II: Simple random sampling

Description; method of selection; estimation of mean, total, and proportion; sampling variance of mean, total and proportion; determination of sample size

Unit III: Stratified random sampling

Description; estimation of mean, total, and proportions; sampling variance of mean, total, and proportions; allocation and selection of units; advantages of stratification

Unit IV: Systematic sampling

Description; method of selection; circular systematic sampling; advantages and disadvantages of systematic sampling; estimation of sampling variance

Unit V: Cluster sampling

Description; method of selection; estimation of parameters; estimation of sampling variance of parameters

Essential Reading List

1. Cochran, W.G. (1977). Sampling Technique, Third edition. New York: John Wiley & Sons.
2. Kish, L. (1995). Survey Sampling. New York: John Wiley and Sons, INC.
3. Roy, Tarun Kumar, Acharya, Rajib, and Roy, Arun Kumar (2016). Statistical Survey Design and Evaluating Impact. Delhi, India: Cambridge University Press.

Suggested Reading List

1. Lwanga, S.K. and Lemeshow, S. (1991). Sample size determination in health studies. Geneva: The World Health Organization.
2. Ladusingh, Laishram (2018). Survey Sampling Methods. Prentice Hall India.

MBD-C5	Basic Concepts and Application of Epidemiology	45 Hours
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Course Outcomes:

- CO1: Learn the basic concepts of different streams of Epidemiology, measuring the occurrence of disease, and disease risks.
- CO2: Understand the study designs widely used in Epidemiology.
- CO3: Learn the application of Epidemiology for evaluating health services.

Unit I: Introduction

Definition and objectives of epidemiology; epidemiology and clinical practice; the epidemiologic approach; infectious disease epidemiology, occupational epidemiology, disaster epidemiology

Unit II: Measuring the occurrence of disease

Measures of morbidity - prevalence and incidence rate, association between prevalence and incidence, uses of prevalence and incidence, problems with incidence and prevalence measurements

Unit III: Issues in epidemiology

Association; causation; causal inference; errors and bias; confounding; controlling confounding; interactions; generalizability

Unit IV: Estimating risk

Estimating association – absolute risk, relative risk, odds ratio; estimating potential for prevention – attributable risk; comparison of relative risk and attributable risk; odds ratios for retrospective studies; odds ratios approximating the prospective RR; exact inference for odds ratio analysis of matched case-control data

Unit V: Application of epidemiology to identify the cause of disease

Cohort studies; case-control studies; nested case-control studies; comparing cohort and case-control studies; experimental studies

Unit VI: Application of epidemiology to evaluate health services

Essential Reading List

1. Gordis L: Epidemiology, ed. 3. Philadelphia, 2004.
2. Bonita R, Beaglehole R, Kjellstrom T: Basic Epidemiology, ed. 2. World Health Organization, 2006.
3. Dunn G, Everitt B: Clinical Biostatistics: An Introduction to Evidence-based Medicine. Edward Arnold, 1995.

Suggested Reading List

1. Park, K.: Park's Textbook of Preventive and Social Medicine. 26th Edition, M/S Banarsidas Bhanot Publishers, Jabalpur, 2021.
2. MacMahon B, Pugh T F: Epidemiology: Principles and Methods. Boston, Little Brown, 1970.

MBD-C6	Infectious Disease Epidemiology	30 Hours
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Course Outcomes:

- CO1: Learn terms and concepts of infectious disease epidemiology.
CO2: Learn concepts and methods related to modelling of infectious diseases.
CO3: Learn concepts, principles, and uses of surveillance of infectious diseases.
CO4: Familiarity with history and implications of infectious diseases.

Unit I: Introduction and basic concepts

Introduction; basic concepts; epidemiological triad; chain of transmission.

Unit II: Spread of infectious diseases and determinants

Epidemic, endemic and pandemic; disease outbreak; determinants of disease outbreak; herd immunity; incubation period

Unit III: Modelling infectious diseases

Transmission dynamics models; SI, SIS, SIR, and SIRC models; Kermack- McKendrick threshold theorem; Kermack- McKendrick threshold theorem epidemiology; basic reproductive number (R_0); what determines R_0 ; effective reproductive number (R_t); eradication threshold; other considerations while vaccinating; estimating R_0 .

Unit IV: Surveillance of infectious diseases

Surveillance of infectious diseases; guiding principles behind surveillance; uses of surveillance; integrated disease surveillance programme in India; outbreak investigation.

Unit V: History, implications and health care responses to a pandemic

Examples of COVID-19, SARS, etc.

Essential Reading List

1. Gordis L: Epidemiology, ed. 3. Philadelphia, 2004.
2. Park, K.: Park's Textbook of Preventive and Social Medicine. 26th Edition, M/S Banarsidas Bhanot Publishers, Jabalpur, 2021.
3. Abubaker, Ibrahim, Helen R Stagg, Ted Cohen, and Laura C Rodrigues: Infectious Disease Epidemiology, Oxford University Press, 2016.

Suggested Reading List

1. Giesecke, Johan: Modern Infectious Disease Epidemiology 3rd Edition, CRC Press, 2017.
2. Kramer, Alexander, Mirjam Kretzschmar, and Klaus Krickeberg: Modern Infectious Disease Epidemiology – Concepts, Methods, Mathematical Models, and Public Health, Springer New York, 2012.
3. Centers for Disease Control and Prevention (CDC). Introduction to Public Health. In: Public Health 101 Series. Atlanta, GA: U.S. Department of Health and Human Services, CDC; 2014.

MBD-C7	Methods in Biostatistics II	30 Hours
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Course Outcomes:

CO1: Understand multivariable regression models and related concepts.

CO2: Understand the use and interpretation of outputs of multivariable regression models.

CO3: Understand other multivariate techniques

Unit I: Multivariable regressions

Multiple regressions; partial correlation, relationship among simple, partial and multiple correlation coefficients; issues in multivariable regressions – multicollinearity, interaction, outliers; non-linearity; missing data; R^2 and adjusted R^2 ; omission of relevant variables and inclusion of irrelevant variables; multivariable regression with dummy explanatory variables; effect modifier

Unit II: Multivariable regression with categorical outcome variables

Binary logistic regression; conditional logistics regression; multinomial logistic regression; probit regression

Unit III: Multivariable regression with ordinal and count outcome variables

Ordinal logistic regression; poisson regression

Essential Reading List

1. Kennedy, Peter (2008). A Guide to Econometrics, 6th Edition. Wiley-Blackwell.
2. Agresti, Alan (2002). Categorical data analysis. New York: Wiley.
3. Cameron, A.C. and Trivedi, P.K. (1998). Regression analysis of count data. Cambridge University Press.

Suggested Reading List

1. Gujarati, DN and Sangeetha (2007). *Basic Econometrics* (Fourth Edition), TataMcGraw Hill, New Delhi.
2. Breslow, N.E. and Day, N.E. (1980). Statistical methods in cancer research. Vol I-the analysis of case-control studies. IARC Scientific Publication No. 32. Lyon: International Agency for Research on Cancer.
3. Retherford, R.D. and Choe, M. K., (1993): *Statistical Models for Casual Analysis*, A Wiley-Inter-Science Publications, John Wiley and Sons, INC, New York.

MBD-C8	Healthcare Systems and Policies	30 Hours
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Course Outcomes:

CO1: Become aware about the basic concepts of health/health services/health care.

CO2: Understand health systems and services.

CO3: Understand health policy and its formulation.

CO4: Understand the regulations in the health sector.

Unit I: Basic Concepts

Concepts of health; public health; community health; preventive and curate health; one health; health promotion; health services; and primary, secondary and tertiary care; health data sources

Unit II: Health System

Goals; boundaries; functions; WHO's health system building blocks - service delivery, health workforce, health Information systems, access to essential medicines, financing and leadership/governance.

Unit III: Health Services

Basic models and functions of health services; international experiences; goals and elements in universal health care (UHC) approach.

Unit IV: Health care system in India

Public sector; private sector; voluntary sector; human resources for health; access to health care; utilization and expenditure on health services; UHC initiatives and challenges ahead; health workforce

Unit V: Health policy

Concepts and tools of health policy; health policy stakeholders; health policy triangle framework; rational decision making to approach to health policymaking; introduction to health policy and systems research.

Unit VI: Health policymaking in India

Health planning in post-Independent India; national health policies; national health policy 2017; current national health programmes.

Unit VII: Regulation in the health sector

Need for regulations; mechanisms for regulations; key legislations and standards in the health sector in India; and challenges in the implementation of regulations.

Essential Reading List

1. Abel-Smith, Brian. An introduction to health: policy, planning and financing. Routledge, 2018.
2. Murray, Christopher JL, and Julio Frenk. "A framework for assessing the performance of health systems." *Bulletin of the World Health Organization* 78 (2000): 717-731.
3. Rao, K. Sujatha. Do we care?: India's health system. Oxford University Press, 2016.

Suggested Reading List

1. Government of India. 2017. National Health Policy-2017. New Delhi: Ministry of Health and Family Welfare, Government of India.
2. Balarajan, Yarlani, Selvaraj Selvaraj, and S. V. Subramanian. "Health care and equity in India." *The Lancet* 377, no. 9764 (2011): 505-515.
3. Gilson, Lucy, and World Health Organization. Health policy and system research: a methodology reader: the abridged version. World Health Organization, 2013.
4. Murray, Christopher JL, and David B. Evans. "Health systems performance assessment: goals, framework and overview." *Health systems performance assessment: Debates, methods and empiricism* (2003): 3-23.
5. Nandraj, S., Gupta, P., & Randhawa, S. (2021). Regulation of Health Care Delivery in India - A Landscape Study, Health Systems Transformation Platform, New Delhi.

MBD-C9	Demographic Theories and Nuptiality	30 Hours
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Course Outcomes:

CO1: Learn fertility theories.

CO2: Learn framework of child survival.

CO3: Learn basic concepts of nuptiality.

CO4: Identify the different sources of data for nuptiality

CO5: Perform nuptiality analysis

Unit I: Fertility theories

Theory of social capillarity; theory of change and response; theory of diffusion and cultural lag; Liebenstein theory; Becker's theory; Easterlin framework of fertility; Caldwell's theory; U. N. threshold hypothesis; reproductive motivations and value of children theories.

Unit II: Mosley & Chen framework of child survival

Unit III: Nuptiality

Introduction, Basic Concepts, Sources of Data and their limitations. Measures of Nuptiality from Registration data.

Analysis of Marital Status Data from Census.

Singulate Mean Age at Marriage (SMAM) - Synthetic Cohort and Decadal Synthetic Cohort Method.

Indices of Nuptiality (Coale's Indices)

Marriage Pattern in India and Selected Countries and related factors.

Marriage squeeze: Concepts and Implications, Concepts of Hypergamy and Hypogamy Gross and Net Nuptiality Tables.

Non-marriage

Multistate approach in Nuptiality analysis. Standard Age Pattern of Marriage – Coale's Model.

Divorce and Widowhood.

- i. Definition and basic measures.
- ii. Marriage Dissolution Tables and Remarriage Concept
- iii. Mean Age at Widowhood/Divorce from Census Returns.

Definition and Measures of Remarriages of Widowed and Divorces

ESSENTIAL READINGS:

1. Siegel, Jacob S., and David A. Swanson (eds.), (2004) *The Methods and Materials of Demography* (Second edition). San Diego: Elsevier Academic Press.
2. Newell, Colin (1988) *Methods and Models in Demography*. London: Frances Pinter.
3. Asha A. Bhende and Tara Kanitkar, (2003), *Principles of Population Studies*,
4. Sixteenth Revised Edition, Himalaya Publishing House, Mumbai.

5. Pathak, K.B. and F.Ram, (1998) *Techniques of Demographic Analysis*, Mumbai: Himalaya Publishing House, Chapter 4, Pp.108-153.

SUGGESTED READINGS:

1. Coale Ansley J. and T. James Trussell (1978) *Technical Note: Finding the TwoParameters that Specify a Model Schedule of Marital Fertility. Population Index 44, 2* (1978), pp. 203-213.
2. Mosley, W.H. and Chen, L.C. (1984). *An analytical framework for the study of child survival in developing countries*. Population and Development Review 10: 25-45.
3. Palmore, James A. and Gardner, Robert W. (1983) *Measuring Mortality, Fertility and Natural Increase: a Self-Teaching Guide to Elementary Measures*. Honolulu: East-West Population Institute, East-West Center.
4. Rowland, Donald T. (2006), *Demographic Methods and Concepts*. New York: Oxford University Press.
5. Bogue, Donald J., Eduardo E. Arriaga, and Douglas L. Anderson, eds. (publication editor George W. Rumsey) (1993) *Readings in Population Research Methodology*. Chicago: United Nations Population Fund. Volume 3: FertilityResearch, (All three chapters but selected pages).
6. Pollard, A.H., Yusuf, Farhat and Pollard, G.N. (1990) *Demographic Techniques* (third edition). Sydney: Pergamon Press.

MBD-C10	Advanced Sample Survey Designs and Related Concepts	30 Hours
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Course Outcomes:

CO1: Gain understanding of complex sample survey designs.

CO2: Know and appreciate the sampling design of large-scale surveys conducted in India.

CO3: Learn estimation of sampling errors in large-scale surveys

CO4: Become aware about the concept of sampling weights and estimation and application of sampling weights in large-scale surveys.

Unit I: Advanced concepts

Use of auxiliary information, ratio and regression methods of estimation under simple random sampling, bias, mean square error, and ratio and regression estimators in stratified random sampling.

Unit II: Multi-stage designs

Introduction; two-stage design; selection of sampling units at different stages; estimation of mean and sampling variance; design effect; intra-class correlation; probability proportional to size sampling

Unit III: Examples of sampling design of large-scale surveys

National Family Health Survey; Longitudinal Ageing Study in India; Sample registration System; National Sample Survey Organization

Unit IV: Estimating sampling errors in large-scale surveys

Taylor series linearization method; replication approach - the Jackknife repeated replication method, balanced repeated replication

Unit V: Sampling weight

Description; computation of sampling weight under different designs; self-weighting designs; post-stratification

Unit VI: Nonsampling errors

Introduction; coverage error; non-response error; response error

Essential Reading List

1. Kish, L. (1995). Survey Sampling. New York: John Wiley and Sons, INC.
2. Roy, Tarun Kumar, Acharya, Rajib, and Roy, Arun Kumar (2016). Statistical Survey Design and Evaluating Impact. Delhi, India: Cambridge University Press.
3. United Nations (2005). Household Sample Surveys in Developing and Transition Countries. New York: United Nations.

Suggested Reading List

1. Ladusingh, Laishram (2018). Survey Sampling Methods. Prentice Hall India.
2. Cochran, W.G. (1977). Sampling Technique, Third edition. New York: JohnWiley & Sons.

MBD-C11	Research Methods in Epidemiology and Biostatistics	60 Hours
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Course Outcomes:

CO1: Become familiar with the scientific approaches for conducting research.

CO2: Understand qualitative and quantitative methods of data collection.

CO3: Understand qualitative data analysis using packages like Atlas Ti, Nvivo and Dedoose.

CO4: Enhanced skills for writing a proposal and scientific articles.

CO5: Gain experience of field level setting and primary data collection.

Unit I: Philosophy of Research

Unit II: Scientific Methods of Research

Definition of research, assumptions, operations and aims of scientific research; the research process - conceptual, empirical and analytical phases of research

Unit III: Validity and reliability of diagnostic and screening test

Validity of screening test – sensitivity, specificity, positive predictive value and negative predictive value; reliability; relationship between validity and reliability; ROC curve and its applications; overall accuracy

Unit IV: Clinical agreement

Kappa statistics

Unit V: Research Ethics

Ethics of Research; history of ethical guidelines and general principles informed consent and human subject protection; ICMR ethical guidelines for biomedical research on human participants; biomedical research on human subjects -regulation, control and safeguards

Unit VI: Quantitative methods of data collection

Questionnaire (mail method, interviews through telephone, internet and computers), interview schedule (face-to-face interviews or personal interviews); questionnaire/interview schedule design and construction - principles of constructing a questionnaire/interview schedule, types of questions, framing of questions, sequencing of sections and questions and interview techniques

Unit VII: Qualitative methods of data collection

Introduction to qualitative research; approaches in qualitative research; participatory rapid techniques – transect walk, social mapping; systematic techniques – free listing, pile sorting, Delphi techniques, projective techniques, mechanical devices (camera, tape recorder, mobile recording), mystery client technique; in-depth techniques – in-depth interviews, focus group discussion, key informant interview, case study, observation

Unit VIII: Data Collection and processing

Unit IX: Analysis of qualitative data using softwares

Nvivo; ATLAS Ti; Dedoose

Unit X: Writing research proposal and report

Purpose of a proposal/report; content of proposal/report; critical review of research report and journal article; introductory section, methodology adopted, development of research tools; protocol preparation; analysis and inferences; summary, conclusions and recommendations; references/bibliography; appendices; footnotes; STROBE checklist

Essential Reading List

1. Given, Lisa M: The SAGE Encyclopedia of Qualitative Research Methods, SAGE Publications Inc., 2008.
2. Dunn G, Everitt B: Clinical Biostatistics: An Introduction to Evidence-based Medicine. Edward Arnold, 1995.
3. Wolf, Christof, Dominique Joye, Tom W Smith, and Yang-chih Fu: The SAGE Handbook of Survey Methodology, SAGE Reference Los Angeles, 2016.

Suggested Reading List

1. Schensul, Stephen L, Jean J Schensul, and Margaret D LeCompte: Essential Ethnographic Methods – Observations, Interviews, and Questionnaires, Altamira Press, Walnut Creek, 1999.
2. Indian Council of Medical Research (ICMR): National Ethical Guidelines for Biomedical and Health Research involving Human Participants, ICMR New Delhi, 2017.
3. Creswell, John W: Qualitative inquiry and research design: Choosing among five approaches- 2nd ed. Sage Publications, 2007.
4. United Nations: Household Sample Surveys in Developing and Transition Countries, Department of Economics and Social Affairs, United Nations New York, 2005.

MBD-C12	Advanced Demographic Methods	45 Hours
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Course Outcomes:

- CO1: Measure and analyze the age-sex structure of a population and its determinants and consequences.
- CO2: Learn framework of child survival.
- CO3: Learn stable population model
- CO4: Learn methods used for evaluating and adjusting demographic data.
- CO5: Learn methods used for population projections.

Unit I: Age and sex structure and its implications

Defining age and sex, sex ratio, sex ratio at birth; classification of age group and their importance; measures of age structure - percent distribution, median age, age-sex pyramid, dependency ratio and potential support ratio; factors affecting age and sex structure; socio-economic implications of age and sex structure

Unit II: Stable Population model

Stable population; conditions producing a stable population; equations characterizing a stable population; relation between intrinsic growth rate and NRR; effects of changes in fertility and mortality on age structure; momentum of population growth

Unit III: Evaluation and adjustment of demographic data

Types of errors - coverage and content errors; sources of errors; post-enumeration surveys, dual record system; techniques of evaluation of age data using Whipple's index, Myer's index, UN Joint score; smoothing of age data

Unit IV: Population Estimates and Projections

Concepts of population projections; population estimates, forecasts and projections, uses of population projections; methods of interpolation, extrapolation using linear, exponential, polynomial, logistics and Gompertz curves; cohort component method - basic methodology; projection of mortality, fertility and migration components; population projections of United Nations, World Bank and Expert Committees of Government of India; methods of rural-urban and sub-national population projections; methods of related socio-economic projections: labour force, school-enrolment, health personnel and households;

Essential Reading List

1. Preston, S.H., Heuveline, P and Guillot, Michel (2001). Demography: measuring and modelling population processes. Oxford: Blackwell Publishers Ltd.
2. Shryock, H.S. and Siegel, J.S. (1976). The methods and materials of demography. California: Academic Press, Inc.
3. United Nations (1956). Manual III. Methods for population projections by age and sex. New York: United Nations.

Suggested Reading List

1. Moultrie, Tom et al. (2013). Tools of demographic estimation. Paris: IUSSP.
2. Srinivasan, K. (1997). Basic demographic techniques and applications. New Delhi: SAGE.

3. Government of India (2006). *Population Projections for India and States, 2001-2026*. New Delhi: Office of the Registrar General.

MBD-F3	Introduction to Demographic Packages	30 Hours
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Course Outcomes:

CO1: Gain understanding of demographic packages.

CO2: Capable of estimating demographic outcomes using these packages.

CO3: Capable of projecting demographic and health parameters using these packages.

Unit I: Introduction of MORTPAK

File - new, open, close; save input and output; print worksheet; Edit - undo, select, cut, copy, and clear from worksheet, paste to worksheet; view; application; run; chart; window.

Unit II: MORTPAK modules and their application

BENHR; COMPAR; FERTCB; FERTPF; ICM; LIFTB; QFIVE; STABLE; WIDOW.

Unit III: Introduction and application of SPECTRUM

Introduction; DemProj; FamPlan; LiST; AIM; Goals; Resource Needs Module; TIME; Malaria; STI; NCD.

Essential Reading List

1. Futures Institute: SPECTRUM Manual: Spectrum System of Policy Models, Future Institute.
2. United Nations: MORTPAK for Windows. United Nations, 2013.

MBD-C13	Advanced Methods in Biostatistics	30 Hours
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Course Outcomes:

- CO1: Become aware about the advanced multivariate models.
CO2: Capable of estimating and interpreting advanced multivariate models.
CO3: Capable of estimating and interpreting multilevel models.
CO4: Learn other multivariate techniques

Unit I: Simultaneous equation models

Identification problem; methods of estimation - instrumental variable method and two-stage-least squares method; diagnostic checking and model selection

Unit II: Generalized linear models

A general model for the response probability; the logit, the probit and the complementary log-log model; choice of link function; estimation of generalized model; latent variable representation of a generalized linear model

Unit III: Multilevel modelling

A multilevel model for group effects; estimating group effects; random vs. fixed effects; random intercept model; random slope model; generalized linear random intercept model; random intercept logit model; random slope logit model

Unit IV: Other multivariate techniques

Factor analysis; discriminant analysis; cluster analysis; correspondence analysis

Essential Reading List:

1. Snijders, Tom A.B. and Bosker, Roel J., (1999): *Multilevel analysis: An introduction to basic and advanced multilevel modeling*. Sage Publications.
2. McCullagh, P., & Nelder, J.A. (1989). *Generalized linear models*. CRC press.
3. Hair Jr, J.F., Black, W.C., Babin, B.J. and Anderson, Roph E. (2009) Multivariate data analysis 7th Edition. Pearson.

Suggested Reading List

1. Goldstein, H. 2003. Multilevel Statistical Models. Arnold. Some of the contents can be downloaded for from the following link, including updates and corrections: Multilevel Statistical Models (3rd Edition).
2. Gujarati, DN and Sangeetha (2007). Basic Econometrics (Fourth Edition), Tata McGraw Hill, New Delhi.
3. Dobson, AJ & Barnett, A. (2008). An Introduction to Generalized Linear Models. Chapman and Hall.
4. Backhaus, K., Erichson, B., Gensler, S., Weiber, R. and Weiber, T. (2021). Multivariate Analysis: an application-oriented introduction. Springer Gabler Wiesbaden.

MBD- C14	Survival Analysis	45 Hours
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Course Outcomes:

CO1: Learn basic premises of survival analysis and its application.

CO2: Learn application of non-parametric methods for estimating survival functions and differentiation of survival curves.

CO3: Learn frequently used regression models of survival analysis.

Unit I: Introduction

Introduction to survival analysis; motivating the need; concepts and definitions; concept of censoring and type of censoring

Unit II: Functions of survival time

Survival function, probability density function, hazard function; relationship between the three types of function; survival curve; estimating median survival time; estimation of these function in the absence and presence of censoring; application of these functions in survival analysis

Unit III: Survival distributions

Weibull distribution; exponential distribution; lognormal distribution; gamma distribution

Unit IV: Nonparametric methods of estimating survival function

Introduction; Kaplan-Meier estimates; life table estimates; clinical life tables; life table vs. Kaplan-Meier estimates; the Mantel-Haenszel test

Unit V: Comparing survival curves

Generalized Wilcoxon (Breslow, Gehan); Logrank test

Unit VI: Regression methods for survival analysis

Introduction to Cox-proportional hazard models; proportionality assumption in Cox-proportional hazard models; test of proportionality; interpretation of coefficients; application of Cox-proportional hazard models in Epidemiology and Public Health; discrete-time survival models; regression models with time dependence; competing risks

Essential Reading List

1. *Altman D G*: Practical Statistics for Medical Research, London: Chapman and Hall, 2006
2. *Lee E T*: Statistical Methods for survival Data Analysis, ed. 2. New York, John Wiley & Sons.

Suggested Reading List

1. *Armitage P, Berry G*: Statistical Methods in Medical Research, ed.4, Wiley Blackwell, 2001.
2. *Choe MK, Retherford RD*: Statistical Models for Causal Analysis, Wiley-Interscience, 1993.

MBD-C15	Data Management and Analysis in SAS	45 Hours
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Course Outcomes:

CO1: Learn the functioning of the SAS statistical packages in handling data sets.

CO2: Learn data wrangling in SAS.

CO3: Learn data analysis in SAS.

CO4: Learn the survey data analysis module in SAS.

Unit I: Access and create data structures and generate reports and output

Create temporary and permanent SAS data sets; use a LIBNAME statement to assign a library reference name to a SAS library; access SAS data sets with the SET statement; INFILE Statement & PROC IMPORT to access non-SAS data sources; combine SAS data sets; use informats and formats to correctly read & display data; control observations and variables in a SAS data set by using the WHERE statement & DROP and KEEP statements; generate list reports using the PRINT procedure; generate reports using ODS statements.

Unit II: Manage data

Sort observations in a SAS data set; conditionally execute IF-THEN/ELSE statements; use assignment statements in the DATA to create new variables and assign a new constant value & an expression to a variable; Modify variable attributes using RENAME= options and LENGTH, LABEL and FORMAT statements in the DATA step; Accumulate sub-totals and totals using DATA step statements; use SAS functions to manipulate character data, numeric data, and SAS date values; use SAS functions to convert character data to numeric and vice versa; process data using DO LOOPS; restructure SAS data sets with PROC TRANSPOSE; create macro variables with the %LET statement; use macro variables within SAS programs.

Unit III: Estimation of measures of central tendency and dispersion

Unit IV: Analysis of variance and covariance

One sample tests; two-sample tests; one-way analysis of variance; two- and N- way analysis of variance; analysis of covariance

Unit V: Linear regression analysis and regression diagnostics

Unit VI: Regression models for binary, categorical and ordinal outcomes; conditional logistic regression model

Unit VII: Regression models for survival data analysis

Cox proportional hazard model; test for proportionality assumption; discrete-time survival models

Unit VIII: Event-count models

Poisson regression; generalized linear models

Unit IX: Survey data analysis

Estimation of mean and proportion; estimation of multivariable linear regression and binary and multinomial logistic regression models

Essential Reading List

1. Field, Andy and Miles, Jeremy (2010). *Discovering Statistics using SAS*. SAGE Publishing.
2. Cody R, Smith J (1997). *Applied Statistics & the SAS Programming Language, 4th Edition*. Prentice Hall.

MBD-C16	Demographic Models and Indirect Methods of Estimation	45 Hours
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Course Outcomes:

- CO1: Learn and appreciate the concept of demographic modelling of events, processes, and outcomes.
- CO2: Familiarity with indirect estimation procedures of vital rates towards verifying its robustness with observed survey estimates.
- CO3: Learn the limitation in available data and service statistics as regards its completeness, accuracy, and reliability.

Unit I: Concepts of demographic models

Concept of multiregional model; micro models, such as birth interval, waiting time (birth distribution etc, estimation of fecundability)

Unit II: Indirect methods for estimating fertility

Need for indirect methods; concept of reverse survival method, robust method and method based on generalized population model; Rele's method; concept of P/F ratio method and its modification [Hypothetical Cohort methods]; own-children method of fertility estimation

Unit III: Indirect method of estimating mortality

Methods for estimating infant and child mortality: basic concepts, fundamental assumptions, and underlying principles to the technique proposed by Brass based on retrospective data on children ever-born and surviving mothers classified by current age of mother; modifications proposed by Sullivan and subsequently by Trussell for Brass method; the United Nations revised and extended version of Trussell's method

Methods for estimating adult (including maternal mortality) and old-age mortality: Estimating adult mortality using successive census age- distributions; methods for estimating life expectancies at older ages; estimation of maternal mortality through sisterhood method

Unit IV: Assessing completeness of death registration

Methods for estimating death registration completeness for countries having limited and defective vital registration data: Overview of some selected methods of estimating completeness of death registration - Brass growth balance method and its subsequent development

Essential Reading List

1. Preston, Samuel H. Patrick, Heuveline and Michel Guillot, 2003, *Demography: Measuring and Modeling Population Processes*, Blackwell Publishers, 2001 (First Indian Reprint 2003).
2. Pathak, K.B. and F. Ram (1998): *Techniques of Demographic Analysis*, Himalaya Publishing House, Second Edition, Mumbai.
3. United Nations (1983): *Indirect Techniques for Demographic Estimations*, Manual X, Population Studies No.81, Department International Economic and Social Affairs, (ST/ESA/SER.A/81).

Suggested Reading List

1. Moultrie, Tom et al. (2013). Tools of demographic estimation. Paris: IUSSP.
2. Bhat P.N.M, (2002): General growth balance method: A reformulation for population open to migration, *Population Studies*, 56 (2002), 23-34, Printed in Great Britain.
3. Bhat P.N.M., (2002): Completeness of India's Sample Registration System: An assessment using the general growth balance method, *Population Studies*, 56 (2002), 119-134, Printed in Great Britain.
4. Keyfitz, Nathan (1977): *Introduction to the Mathematics of Population with Revision*, Addison-Wesley Publishing Company, Inc., Massachusetts.

MBD-C17	Methods in Clinical Trials	45 Hours
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Course Outcomes:

CO1: Learn features and characteristics of clinical trials and its execution.

CO2: Learn varying designs, recruitment of clients, and various stages of clinical trials.

CO3: Learn methods for analyzing clinical trial data.

Unit I: Basic concepts of clinical trials

Basic concepts; definitions; historical perspectives

Unit II: Classification of trials by design and purpose

Phases of clinical trials, concept of randomization, process of randomization, types of blinding

Unit III: Clinical trial designs

Completely randomized design, randomized block designs and factorial designs; cross-over designs

Unit IV: Sample size determination

Sample size determination for qualitative and quantitative outcomes, sample size for cluster randomization, sample size for repeated trials

Unit V: Planning and conduct of clinical trials

Protocol development; multicentric trials; deviations from protocol; stopping rules; considerations of adverse effects and non-compliance

Unit VI: Ethical issues

Ethical issues in clinical research; ICMR guidelines on ethical issues in medical research

Unit VII: Data safety and monitoring concepts

Types of form for clinical trials - baseline assessment, evaluation form, flow sheet, layout and design, missing, range and logical checks, data transfer

Unit VIII: Analysis of data from clinical trials

Describing clinical trials data-qualitative and quantitative, prognostic, adjustment for prognostic factors

Essential Reading List

1. Pocock S. J.: Clinical Trials: A Practical Approach. Michigan, Wiley Medical Publication, 1983.
2. Everitt B.S., Pickels, A.: Statistical Aspects of the Design and Analysis of Clinical Trials, ed. 2. London, Imperial College Press, 2004.
3. Friedman L. M., Furberg, C.D., DeMets, D. L.: Fundamentals of Clinical Trials. Boston, PSG, 1982.

Suggested Reading List

1. Dean, A., Voss, M: Design and Analysis of Experiments.
2. Federer, W.T.: Experimental Designs- Theory and Methods. Oxford & IBH.
3. Das, M.N. and Giri, N.C.: Design and Analysis of Experiments. Wiley Eastern.

Elective Courses

MBD E-1.1	Data Analysis with R and Python	45 Hours
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Course Outcomes:

CO1: Learn open source softwares R and Python for data analysis.

CO2: Learn exploratory data analysis with R and Python.

CO3: Learn use of R and Python programming for model development.

R

Unit I: Introduction

Introduction to R/RStudio; advantages of R over other programming languages; R packages for data science

Unit II: Importing dataset

Understanding the data; importing and exporting data; getting started analyzing data; accessing database

Unit III: Data Visualization

Histogram; boxplots; bar charts; line graphs; heat map; scatterplots; pie charts; customize plot axes, labels, add legends, and add colors

Unit IV: Data manipulation

Pre-processing data; handling missing values; data formatting; data normalizing; grouping data values into bins; converting categorical variables into numerical quantitative variables

Unit V: Exploratory data analysis

Computation of measures of central tendency and dispersion; computation of correlation coefficient; chi-square test for association between two categorical variables

Unit VI: Model development

Linear regression, multiple linear regression, binary logistic regression; ordinal logistic regression

Python

Unit I: Introduction

Introduction to Python; advantages of python over other programming languages; Python packages for data science

Unit II: Importing dataset

Understanding the data; importing and exporting data; getting started analyzing data; accessing database

Unit III: Data manipulation

Pre-processing data; handling missing values; data formatting; data normalizing; grouping data values into bins; converting categorical variables into numerical quantitative variables

Unit IV: Exploratory data analysis

Computation of measures of central tendency and dispersion; computation of correlation coefficient; chi-square test for association between two categorical variables

Unit V: Model development

Linear regression, multiple linear regression, binary logistic regression; ordinal logistic regression

Essential Reading List

1. Gareth James, Daniela Witten, Trevor Hastie, and Robert Tibshirani, [Introduction to Statistical Learning with Applications in R](#), Springer 2013. Available free online.
2. Christian Kleiber and Achim Zeileis, [Applied Econometrics with R](#), Springer-Verlag, New York, 2008.
3. Wes McKinney, Python for Data Analysis, O'Reilly Media, Inc., 2017.
4. Samir Madhavan, Mastering Python for Data Science, Packt Publishing, 2015.

Suggested Reading List

1. Download and install R from <https://cran.r-project.org/>
2. Download RStudio from www.rstudio.com
3. Video Tutorials on [Installing R on windows](#)
4. Video Tutorials for [Installing R on Mac](#)

MBD E 1.2	Data Analysis with STATA	45 Hours
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Course Outcomes:

CO1: Familiarity with STATA for data analysis.

CO2: Learn model development in STATA.

CO3: Learn use of STATA for survey data analysis.

Unit I: Introduction to STATA

Facilities, creating database structure, data entry, specifying scales, validation of data entry, importing and exporting data.

Unit II: Importing dataset

Understanding the data; importing and exporting data; getting started analyzing data; accessing database

Unit III: Data visualization

Histogram; boxplots; bar charts; line graphs; heat map; scatterplots; pie charts; customize plot axes, labels, add legends, and add colors

Unit IV: Data manipulation

Recoding; creating new variable; sorting; filtering and selection of specific data; merging files; generating simple frequencies; use of syntax editor; handling missing values

Unit V: Exploratory data analysis

Computation of measures of central tendency and dispersion; computation of correlation coefficient; chi-square test for association between two categorical variables

Unit VI: Model development

Linear regression analysis - interpretation and regression diagnostic test; regression models for binary outcomes, categorical, and ordinal outcomes

Unit VII: Survey data analysis

Introduction; need for using survey data commands; estimation of means, proportions, ratios, totals; regression models for binary outcomes, categorical, and ordinal outcomes

Essential Reading List

1. StataCorp. 2021. STATA user's guide, release 17. College Station, TX: StataCorp LLC.
2. StataCorp. 2021. STATA survey data reference manual, release 17. College Station, TX: StataCorp LLC.

MBD E-2.1	Introduction to Longitudinal Data Analysis	45 Hours
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Course Outcomes:

CO1: Learn basic concepts and examples of longitudinal data.

CO2: Learn models frequently used for analyzing longitudinal data.

CO3: Learn longitudinal data analysis using STATA/SAS.

Unit I: Introduction and basic concepts

Exploring longitudinal data, Examples of longitudinal studies, Features and characteristics of longitudinal data statistics, Descriptive methods, Criteria, Causality, Repeated measurements, Clustering, Missing data issues.

Unit II: Examples of Longitudinal Data

Young Lives Study; Health and Retirement Study; British Cohort Study; India Human Development Survey

Unit III: Linear Models

Overview of linear models, Distributional assumptions, Modelling the mean and covariance, Maximum likelihood estimation, Statistical inference, Variance and covariance, Fixed-effects models, Random-effects models, Baseline response, Biasness in mean and variance, Diagnostic and residual analysis

Unit IV: Generalized Linear Models (GLM)

Review of Generalized linear model (GLM), Moments and characteristic functions, Weighted GLM, Conditional GLM models, Estimation of Marginal models, Generalized Estimating Equations, Residual and diagnostics analyses.

Unit V: Longitudinal Data Analysis using STATA/SAS

Essential Reading list:

1. Garrett M Fitzmaurice, Nan M Laird and James H Ware. Applied longitudinal analysis; John Wiley & Sons.
2. Diggle, P., Heagerty, P., Liang, K. Y., & Zeger, S. (2002). Analysis of longitudinal data. Oxford University Press.
3. Davis, C. S. (2002). Statistical methods for the analysis of repeated measurements. Springer Science & Business Media.

Suggested Reading list:

1. Walter W Stroup. Generalized linear mixed models: modern concepts, methods and applications; CRC Press.
2. Helen Brown and Robin Prescott. Applied mixed models in medicine; John Wiley & Sons.
3. Brady T West, Kathleen B Welch and Andrzej T Gatecki. Linear mixed models; CRC Press.
4. Weiss, R. E. (2005). *Modeling Longitudinal Data: With 72 Figures*. Springer Science & Business Media.
5. Brown, H., & Prescott, R. (2015). *Applied mixed models in medicine*. John Wiley & Sons.

MBD E-2.2	Introduction to Spatial Statistics	45 Hours
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Course Outcomes:

- CO1: Learn basic spatial concepts and cartography.
CO2: Learn basic spatial statistics.
CO3: Learn spatial regression models and their application.
CO4: Learn softwares used for estimating spatial statistics.
CO5: Learn application of spatial statistics using ArcGIS and Geoda.

Unit I: Introduction to spatial statistics

Unit II: Spatial Concepts and Cartography

Spatial parameters; site and location; scale; plane and spherical coordinate; map projection - UTM, types of maps: cadastral, toposheet, thematic, digital; representation of spatial and non-spatial data

Unit III: Basic Spatial Statistics

Exploratory spatial data analysis (ESDA); Moran's I; local indicators of spatial association (LISA) – univariate and bivariate; kriging; spatial pattern analysis

Unit IV: Spatial Regression Models

Lag and error regressions; multilevel models; geographically weighted regression

Unit V: Introduction to Geospatial Software

Geographic Information System (GIS) - discrete data, point, and polygon data; raster and vector data; layouts preparation; geocoding and basics of digitization in ArcGIS; Geoda

Unit VI: Application of spatial statistics using ArcGIS and Geoda

Essential Reading list:

1. Anselin, L. (2005). Exploring Spatial Data with GeoDa: A Workbook. UC Santa Barbara, CA: Center for Spatially Integrated Social Science. available on <http://geodacenter.asu.edu/>.
2. Bailey, T. and Gatrell, A. C. (1995): Interactive Spatial Data Analysis. Harlow, Longman.
3. ESRI (1993): Understanding GIS. Redlands, USA

Suggested Reading list:

1. Parker R. N., Asencio E. K. (2008). GIS and Spatial Analysis for the Social Sciences: Coding, Mapping, and Modeling. New York, NY, Routledge/Taylor & Francis.
2. Zhu E J. and Chi G. (2008). Spatial Regression Models for Demographic Analysis. Population Research Policy Review 27:17–42 DOI 10.1007/s11113-007-9051-8
3. Sparks Corey. (2013). *Spatial Analysis in R: Part 1*. Spatial Demography 1(1) 131-139
4. Sparks Corey. (2013). *Spatial Analysis in R: Part 2*. Spatial Demography 1(2) 219-226

MBD E-3.1	Systematic Review and Application of Meta-Analysis	30 Hours
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Course Outcomes:

CO1: Learn and describe the process and the uses of systematic reviews and meta-analyses.

CO2: Learn skills required for performing basic systematic reviews and meta-analyses.

Unit I: Introducing the systematic reviews

Need for a systematic review, difference between a narrative and a systematic review. Producers and users of systematic reviews, systematic review for randomized control trials and observational studies, and main challenges in systematic reviews.

Unit II: Developing a protocol for a systematic review

Determining scope of a review, defining the research question, framing the question (PICO/PECO), deciding the type and scope of the question, defining specific inclusion and exclusion criteria, Introduction to the Cochrane Collaboration, examples of questions and inclusion/exclusion criteria from Cochrane.

Unit III: Developing an analytic framework for review

Searching strategy, identifying key sources and techniques for searching, using databases for searching articles, building a high-quality search strategy, documenting search conclusions, reference management

Unit IV: Meta-analysis

Why do a meta-analysis?, strengths and weaknesses compared to narrative literature reviews. General steps of a meta-analysis, Hypotheses and problems in research synthesis, Types of data and summary measures, Statistical methods for meta-analysis, effect sizes, standardised mean difference, cumulative meta-analysis, fixed effect model, random effect model and summary effects

Unit V: Biases in the systematic review and meta-analysis

Selection bias, information bias and analysis bias. Heterogeneity, minimising meta-bias, meta regression, and handling within study dependency.

Unit VI: Reporting guidelines and tools

PRISMA, MOOSE, Screening i.e. Rayaana, EPPI-Reviewer, Covidence, DistillerSR. Qualitative synthesis, Interpreting results and their presentation.

Essential Reading List

1. Egger, M., Smith, G. D., & Altman, D. (Eds.). (2008). Systematic reviews in health care: meta-analysis in context. John Wiley & Sons.
2. Higgins, J. P., Thomas, J., Chandler, J., Cumpston, M., Li, T., Page, M. J., & Welch, V. A. (Eds.). (2019). Cochrane handbook for systematic reviews of interventions. John Wiley & Sons. Online version available at <https://training.cochrane.org/handbook/current>
3. Borenstein, Michael, Larry V. Hedges, Julian PT Higgins, and Hannah R. Rothstein. Introduction to meta-analysis. John Wiley & Sons, 2021.

Suggested Reading List

1. Card, Noel A. Applied meta-analysis for social science research. Guilford Publications, 2015.
2. Macaskill, Petra, Constantine Gatsonis, Jonathan Deeks, Roger Harbord, and Yemisi Takwoingi. "Cochrane handbook for systematic reviews of diagnostic test accuracy." (2010).
3. Leandro, Gioacchino. Meta-analysis in medical research: The handbook for the understanding and practice of meta-analysis. John Wiley & Sons, 2005.

MBD E-3.2	Large-scale Sample Surveys	30 Hours
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Course Outcomes:

- CO1: Learn determination of sample size in a large-scale household survey and its allocation at the state and district levels.
CO2: Learn basic concepts of sampling frame and construction and maintenance of sampling frame.
CO3: Learn tools for monitoring the quality of data in large-scale household surveys.
CO4: Learn how to develop data collection software.
CO5: Learn estimation of sampling weight in large-scale household surveys.

Unit I: Scope of large-scale surveys and sampling design

Need for large scale surveys; objectives of cross-sectional, longitudinal, rotational, and interpenetrating surveys; sample size determination and sample allocations for such surveys to districts, states and regions in terms of individuals, households and primary sampling units.

Unit II: Sampling frames

Sources of sampling frame for cross-sectional, longitudinal, rotational and interpenetrating surveys; explicit and implicit stratifications; domain-controlled sampling by regions and social groups; merging and segmentation procedures for small and large primary sampling units; mapping and household listing for preparation of frame for last stage sampling units; sample selection of PSUs and households.

Unit III: Quality assurance procedures

Revisit of sub-samples; field check tables; non-response pattern; roles of supervisors, editors, field and nodal agencies; third party audit.

Unit IV: Software development

Computer assisted personal interview (CAPI); process of data transfers; introduction to features of census and survey processing system (CSPro); steps for development of data entry software in CSPro.

Unit V: Ethical considerations in large-scale sample surveys

Unit VI: Estimation of sampling weights

Essential Reading List

1. United Nations (2005): Household Sample Surveys in Developing and Transition Countries. www.unstats.un.org/unsd/hhsurveys/
2. CSPro Software. www.census.gov/data/software/cspro.Download.htm
3. Roy, T.K., Acharya R., Roy, A.K. (2016). Statistical survey design and evaluating impact, Cambridge University Press, New Delhi.

Suggested Reading List

1. Kish, Leslie, (1995): Survey Sampling, John Wiley and Sons, Inc. New York.
2. Lohr L. Sharaon., (1999): Sampling: Design and Analysis, Duxbury Press, London
3. Ladusingh, L. (2018). Survey Sampling Methods, PHI Learning, New Delhi

MBD E-4.1	Concepts and Measures of Global Health	45 Hours
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Course Outcomes:

CO1: Learn basic concepts and importance of global health.

CO2: Learn the basic concepts and methods used for studying global burden of disease.

CO3: Learn determinants of health.

CO4: Learn functioning of health care delivery system.

1. **Concept and introduction:** Concept of global health; importance to study global health, global variation in demographic, health and epidemiological transitions; linkages between globalization and health; linkages between global and local health; current challenges, emerging trends and priorities in global health; major patterns of distribution of disease in the world; sources of data on disease and disability.
2. **Global burden of disease:** Concept of burden of disease; hypotheses related to burden of diseases - compression of morbidity, expansion of morbidity and dynamic equilibrium; measures of burden of disease at the population level - health expectancy and health gap; methods for estimating DFLE, HALE and DALY; how does the burden of disease and mortality vary by geography, age and gender? GBD 1990, 2010 and 2019 - changes and continuities.
3. **Infectious Diseases, Non-Communicable Diseases (NCDs) and Nutrition:** Persistence of infectious diseases in developed and low- and middle-income countries; new and re-emerging infectious diseases across globe; difficulty in prevention, treatment, and rehabilitation from infectious diseases. Current and growing challenge of NCDs in developed and low- and middle-income countries; NCD's epidemiology in developed and low- and middle-income countries. Double burden of malnutrition and diseases in low- and middle-income countries; food security of undernutrition; short-term and long-term impact of undernutrition; nutrition transition.
4. **Determinants of Health:** Factors responsible for variation in the global burden of disease - culture, race, ethnicity, education, socio-political establishment, economic development and economic inequality. Role of water, sanitation, indoor and outdoor air pollution, food security, migration, disaster (man-made, natural), conflicts and epidemics in explaining global health disparities.
5. **Health care delivery systems:** Introduction to health systems; components of health system; financial models of health care; service delivery models; governments role in delivering health care; measurement of health system performance in developed and developing countries; role of WHO, World Bank, etc. in setting global and national health priorities.

Essential readings

1. Skolnik, R. (2008). Essentials of global health, Jones and Bartlett: Sudbury, MA.
2. Murray, C.J.L., Saloman, J.A., Mathers, C.D., Lopez, A.D. (2002). Summary measures of population health: concepts, ethics, measurement and applications, The World Health Organization: Geneva.
3. Council on Foreign Relations. (2014). The Emerging Global Health Crisis. Non-Communicable Diseases in Low- and Middle-Income Countries. Independent Task Force Report No. 72. https://www.cfr.org/sites/default/files/report_pdf/TFR72_NCDs.pdf
4. World Health Organization. (2017) Double Burden of Malnutrition. <http://www.who.int/nutrition/double-burden-malnutrition/en/>

Suggested readings

1. Hoffmann SJ. (2010). The Evolution, Etiology and Eventualities of the Global Health Security Regime. *Health Policy Plan* 25(6): 510-22.
<https://www.ncbi.nlm.nih.gov/pubmed/20732860>
2. Murray, C.J.L., Saloman, J.A., Mathers, C. (2000). A critical examination of summary measures of population health, *Bulletin of the World Health Organization* 78(8): 981-994.
3. Dielman JL, Schneider MT, Haakenstad A, Singh L, Sadat N, Birger M, Reynolds A, Templin T, Hamavid H, Chapin A, Murray C. (2016) Development Assistance for Health: Past Trends, Associations, and the Future of International Financial Flows for Health. *Lancet* 387; 2536 – 44.
4. Murray, C.J.L., Frenk, J. (2000). A framework for assessing the performance of health systems, *Bulletin of the World Health Organization* 78(6): 717-731.
5. Mozaffarian D. (2017). Global Scourge of Cardiovascular Disease. Time for Health Care Systems Reform and Precision Population Health. *Journal of the American College of Cardiology* 70(1): 26 – 8.
6. Mills, A., Rasheed, F., Tollman, S. (2006). Strengthening health systems, In *Disease Control Priorities in Developing Countries* (2nd Edition), pages 87-102, New York: Oxford University Press.
7. Hsiao, W.C. (2003). What is a health system? Why should we care? Harvard School of Public Health Working Paper.
8. World Health Organization (2010). Key Components of a Well-Functioning Health System. http://www.who.int/healthsystems/publications/hss_key/en/
9. Fried LP, Bentley ME, Buekens P, Burke DS, Frenk JJ, Klag MJ et al. (2010). Global Health is Public Health. *Lancet* 375, 535 – 7.

MBD E-4.2	Big Data using Machine Learning	45 Hours
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MBD E-4.3	Health Economics and Health Financing	45 Hours
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Course Outcomes:

CO1: To introduce various concepts on economic gradient of health and demand for and supply of health care.

CO2: To explain various measures on socio-economic inequality in health.

CO3: To familiarize the means and measures of health financing.

CO4: To understand the determinants of health insurance and its coverage.

CO5: To introduce the methods and measures on economic evaluation of health care.

I: Introduction to Health Economics

Defining health economics, why health economics is important, basic concepts in microeconomics, health across world and over time, scope of health economics, map of health economics, basic questions confronted by health economist, concept of efficiency and equity in health, Production Possibility Frontier (PPF), economic gradient of health, causation of income and health, Preston Curve, economic models and analysis, expenditure function, Theories of X and Y, positive and normative economics.

II. The Demand for Health and Health care

What is Health and Good Health, Utility Analysis, Health as a form of human capital, What is Medical Care, The production of Good Health, Empirical evidences in the production of health, Health as human capital, Grossman Model, The Demand for Health Care, Demand function for health, Economic and non-economic factors of health care, Fuzzy Demand Curve, Price and income elasticity of demand for health care, Important consideration in estimating health care demand elasticity, provider's behavior, Empirical findings, externalities and market failure.

III. Health Financing

Health financing in low, middle and high income countries, demographic transition, epidemiological transition and health expenditure, disparity in disease burden and per-capita health spending, sources of health care in India, out-of-pocket expenditure on health care, catastrophic health expenditure, approaches in measuring catastrophic expenditure, impoverishment, health care payment and poverty, national and regional patterns of catastrophic health spending, determinants of catastrophic health spending, Drivers of health care expenditure, health financing in India, Equity in health care finances, Willingness to pay for health care, User charges as determinant of health financing

IV. Measuring Health Inequalities

Measurement of health inequality: A Prelude

Why measure health inequality; Health equity and inequality: Concept and definitions; Understanding of the concepts such as need, access and utilisation; cardinal and ordinal health variables

Black Report and Beyond: Historical Background of Black Report, Explanation for social class differences, major empirical theme since Black report

Measures of health inequality: Measures of health inequality: Index based approach; Axiomatic approach to measurement; Individual-mean and inter-individual comparison; WHO Index, Coefficient of Variation, Generalised Entropy Index, Lorenz Curve and Gini Coefficient

Measuring socioeconomic rank related health inequality: Slope index of inequality; Relative index of inequality; Concentration curve and concentration index: various ways of computing; Standardization; Inequality aversion; Normalised and Generalised concentration index; Corrected concentration index

Measuring inequality in healthcare utilization: Horizontal inequality; Vertical inequality; Regression based approach; Measurement of horizontal inequalities; Group inequality, common measures, Gini type index

V. Medical Care, Production and Cost

The Short-Run Production Function of the Medical Firm, Total Product, Marginal Product and Average Product Curve, Law of diminishing marginal productivity, The importance of costing in Health Economics, Short-run cost theory of medical firm, short run cost curves, Cost analysis, Implicit and explicit cost, , factor affecting short-run cost curves, cost minimization, constraints in measuring health cost

VI. Health Insurance

Health care system, a model of health care system, defining health insurance, need for health insurance, type of health insurance, demand for private health services, factors affecting the quantity demanded of health insurances, moral hazards, deductibles, co-insurance, managed care, adverse selection, loading fees, employed based insurance, reimbursement, selection effect, intermediary agent, regulation of health insurance, Need for Government intervention, Trends of health insurance, Coverage of health insurance in India

VII. Economic Evaluation

What is economic evaluation? Cost analyses; direct cost, Indirect cost, tangible cost, capital cost, fixed cost, variable cost, Opportunity cost, average cost, marginal cost, Incremental cost, steps in cost analyses: Identification, measurement and valuation, Various types of economic evaluation used in health care: Cost effectiveness analysis (CEA) Cost-Benefit Analysis (CBA), Divergence between social and private costs and benefits in health care, Limitations of economic evaluation, Consumer Impact Assessment.

ESSENTIAL READINGS:

1. Rexford E. Snterre and Stephen P. Neun, Health Economics: Theories, Insights and Industry Studies, Thompson South – Western, 3rd Edition (614, San/Hea, 073226) Note: 4th Edition is out in 2007 (ISBN: 032432068X; ISBN13: 9780324320688)
2. Drummond MF, Sculpher MJ, Torrance GW, O'Brien B, Stoddart GL, eds. Methods for economic evaluation of health care programmes, Third Edition, Oxford University Press, 2005.
3. O'Donnell O, Doorslaer E v, Wagstaff A and Lindelow M. Analyzing Health Equity Using Household Survey Data (2008), AGuide to Techniques and Their Implementation
4. Xu K (2005). Distribution of health payments and catastrophic expenditures Methodology World Health Organization.

SUGGESTED READINGS

1. Culyer A J and J P Newhouse, 2000, The state and scope of health economics, Handbook of Health Economics, Volume 1A, Eds. Culyer and Newhouse, Elsevier, 2000.
2. Grossman (1982), On the concept of Health capital and Demand for Health, Journal of Political Economy, 80(2)

3. Macintyre S (1997). The Black Report and Beyond-What are the issues, *Social Science, Medicine*, 44(6):723-745
4. Mohanty, S. K., & Dwivedi, L. K. (2021). Addressing data and methodological limitations in estimating catastrophic health spending and impoverishment in India, 2004–18. *International journal for equity in health*, 20(1), 1-18.
5. Ringel et al (2005) The Elasticity of Demand for Health Care A Review of the Literature and Its Application to the Military Health System
6. Victoria Y Fan and William D. Savedoff (2014), “Health Financing transition: A conceptual framework and empirical evidences, *Social Science Medicine*, 105 (2014):112-121
7. Wagstaff A, P. Paci and E van Doorslaer (1991), On the measurement of inequalities in health, *Social Science and Medicine* 33(5), 545-557
8. Wagstaff, Adam & van Doorslaer, Eddy, 2000. "Chapter 34 Equity in health care finance and delivery," *Handbook of Health Economics*, in: A. J. Culyer & J. P. Newhouse (ed.), *Handbook of Health Economics*, edition 1, volume 1, chapter 34, pages 1803-1862 Elsevier

MBD E-5.1	Population Ageing and Health Transition	45 Hours
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Course Outcomes:

- CO1: Learn concepts and theoretical framework relating to demography of ageing, and its health and societal interface.
- CO2: Develop skills to analyze trends, determinants and consequences of population ageing.
- CO4: Familiarize with aging data sets and its exploration.
- CO5: Learn ageing policies and programmes and its bearing on the welfare of the elderly.

Unit I: Demography of ageing

- A. Concepts and measures of population ageing; components of population ageing; Inter-relationship between population ageing, fertility, mortality and migration; population ageing and momentum of population growth, age structure transition and ageing, and declining population.
- B. Population ageing trends, patterns and determinants in India; state variations; future scenario of population ageing in India and states.

Unit II: Life course perspective and social dynamics of ageing

- A. Life course perspective of population ageing; Age and Ageing, Ageism; Social Status and Roles of Elderly, Family Structure, Intergenerational relations, Kinship and family support, Social Security; Social network- Frameworks (Berkman and others) and measurement.
- B. Living Arrangements of Elderly, Old Age Homes, Social Networks, and Contribution of elderly: “Feminization” of Ageing, Dependency, Gender Dimensions and Discrimination, Widows, Elder abuse, Social and legal Vulnerability.

Unit III: Ageing and health

- A. Ageing and Functional Health: Ageing and disabilities; trends and prevalence; Wellbeing and Life satisfaction.
- B. Ageing and mental health problems; cognition, memory loss, dementia and depression; Alzheimer’s and Parkinson.
- C. Ageing and health risk factors: nutrition, diet and food practices; health risk behaviour- tobacco, alcohol; physical activities

Unit IV: Ageing policies and programmes

- A. Social and Economic Support Policies and Programmes for the Elderly- Retirement, Pensions and Social Care Policies in developed and developing countries. Social security and welfare policies and programmes for elderly in India. National Programmes for Health Care of Elderly (NPHCE); National Policy for Senior Citizens
- B. Worldwide Longitudinal Ageing Studies: LASI, SAGE, SHARE, HRS, CHARLS, JSTAR, etc.

Essential Reading List

1. Chakraborti, Rajagopal Dhar (2004), The⁵¹ Greying of India: Population Ageing in the Context of Asia, SAGE Publications Private Limited, New Delhi.
2. UNFPA, 2001, Population Ageing and Development: Social, Health and Gender

Issues, United Nations, Malta.

3. UNFPA (2011), Report on the status of elderly in select states of India, UNFPA, India.

Suggested Reading List

1. World Health Organization (2015), *WHO Report on Ageing and Health*, WHO, Geneva.
2. United Nations (2001): *Living Arrangements of Older Persons: Critical Issues and Policy Responses*. Population Division, Department of Economic and Social Affairs, Special Issue Nos. 42/43, 2001, New York.
3. Sandra Gruescu, (2006), *Population ageing and economic growth*. Physica-Verlag.
4. M. Alam (2004). Ageing, old age income security and reforms: An exploration of Indian situation. *Economic and Political Weekly*, 39(33): 3731-3740.
5. Berman, Lisa (2000) "Social Support, Social Networks, Social Cohesion and Health" *Social Work in Health Care* http://dx.doi.org/10.1300/J010v31n02_02.
6. Pool, Ian, Laura R. Wong and Eric Vilquin (ed) (2006), *Age-structural transitions: challenges for development*. Paris: CIRCRED.

MBD E-5.2	Population, Environment and Sustainable Development	45 Hours
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Course Outcomes:

CO1: Learn the concept of sustainable development and its challenges.

CO2: Learn quantitative and qualitative methods in environmental health analysis.

CO3: Comprehend the role of the environment in development modeling.

Unit I: Sustainable development: Conceptual and contemporary issues

Sustainable development; Meaning, Concepts, and Definitions; Inter-linkages between ecology and development; Brundtland Report on Environment and Development; SDG goals, progress; Pillars of SDG; Environmental Kuznetz model, Living Planet Index, ecological footprint;

Approaches to environment; Gandhian, Socialist, Neo-classical approach; Environment and development challenges: Water, energy, health and disease, nutrition, education, energy, food, species, climate;

Trends of global warming and climate change; drivers of global warming and Global Warming Potential (GWP) & climate change; impact of climate change on atmosphere, weather patterns, sea level rise, agricultural productivity and biological responses, CO₂ fertilization and agriculture; impact on the economy and spread of human diseases; the challenges for International Environmental Governance.

Unit II: Environmental challenges in India

Calamities and the measurements; urban challenges; environmental health hazards; air Pollution and health- estimate, data sources, Indian standards, geospatial modeling;

Water resources and condition of surface and ground water resources; water quality standards in India; role of state in water resources management, water and health;

Regional Development in India; Women and Environment; Green Movements in India; Solid Waste Management; Success models of efficient environmental management;

Unit III: Environmental resilience, adaptive capacity, and vulnerability (RACV)

Meaning and measurements of vulnerability and resilience, concept and processes of adaptive capacity; indicators and modeling; qualitative methods to measure RACV; Case studies and practical exercises.

Essential Reading List

1. The Economics of Climate Change: The Stern Review (2014) Cambridge University Press
2. UN Climate reports <https://www.un.org/en/climatechange/reports>
3. Bründtland, G.H. (1987). Our Common Future: The World Commission on Environment and Development, Oxford, Oxford University Press.
4. Psychology and Climate Change (2018) Human Perceptions, Impacts, and Responses, 2018

Suggested reading list

1. Hardin, Garrett.(1968): “The Tragedy of the Commons.” *Science*. Vol. 162, No. 13, reprinted in Rex R. Campbell and Jerry L. Wade, (Eds), *Society and Environment: The Coming Collision*. Allyn and Bacon, Inc: Boston, MA, pp. 1243-1248.
2. Lutz, Wolfgang, A.Prskawetz and W.C.Sanderson (eds.) (2002). *Population and Environment: Methods of Analysis*. Supplement to Population and Development Review. New York, Population Council.
3. Simon, Julian L. (1996). *Population Matters: People, Resources, Environment, and Immigration*. Transaction Publishers: New Brunswick, NJ.
4. Hanley, N., Shogren, J. F., & White, B. 2007. Environmental Economics: In Theory and Practice. Palgrave Macmillan
5. Bongaarts, John. (1992). Population growth and global warming. *Population and Development Review*, 18: 299-319.

MBD E-5.3	Gender, Health and Development	45 Hours
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Course Outcomes:

CO1: To sensitise students on gendered perspectives in reading health and development outcome

CO2: To gain an understanding of theoretical and conceptual issues involving gender in examining development at large

CO3: To acquaint students with varied gendered frameworks and relevant analytical tools towards gendered inspection

CO4: To offer skills of adopting a gendered outlook in introspecting health and development.

Introduction

The purpose of this section is to explain the basic concepts of three major components of this course namely gender, health and development.

The Concept of gender, Evolution of gender in historical perspective

Patriarchy, Kinship Structure and gender roles, Feminist theories, Gender stratification in traditional and modern societies, Gender Analysis Tools, Gender Sensitive Indicators and Gender budgeting and auditing

Concept of health, Evolution of the concept of Reproductive Health, life cycle approach to RH and recommendations from ICPD

Changing concept of development, Indicators of development, gender adjusted HDI

Gender and Health

This section presents the situation analysis regarding sex differentials in different aspects of health and highlights some special issues of women and men's health.

Situation analysis of sex differentials in morbidity and mortality

Major morbidity and mortality burden in the developing world with major focus on India- sex ratio of births, major health problems experienced by women and men, reproductive health of women and men in developing world, differentials in use of male and female methods of contraception

Health infra-structure and health care providers

Nutritional status, susceptibility to infections

Accidents and other risk factor and health seeking behavior

Health and Nutrition issues of adolescent of boys and girls , abuse and maltreatment, Puberty, Sexual Debut, Adolescent Pregnancy, Abortion, women and family planning programs, Contraceptive Technology

Major risk factors of men's health: masculinity, alcoholism, tobacco and drug consumption, accident

Gender and Sexuality: Sexual health of men and women, gender dimension of HIV /AIDS. Gender and Infertility

Gender and Development

The purpose of this section is to understand the sex differentials in health in terms of socio- economic and cultural context of gender and to study the gender dimensions of development.

Understanding social structures- role of caste, class, ethnicity and religion and gender in health inequalities and health outcomes

Gender dimension of social development, status and role of men and women in household and community, culture, marriage customs, dowry and bride price practices, age at marriage

Gender differentials in household headship and role in decision making

Gender differences in access to knowledge-, education, exposure to media and freedom of movements

Gender based violence- Domestic and community violence and gender, Legal aspects of domestic

violence and rape

Women's role in community life and involvement in politics-as voter, political worker and leader, women in Panchayati Raj Institutions and self-help groups

Media representation of men and women

Gender dimension of economic development: women's access to economic resources, entitlements, land ownership, inheritance laws, access to credit, measurements of women's work, profiling women's work, informal sector involvement, working condition, maternity benefits, wage differentials, gender and poverty

Globalization, changing pattern of economic activity, issues of marginalization and vulnerability along with agency, negotiation and spaces of power, Gender Divisions in Urban Labor Markets, Gender and Migration

Housing, Household environment and its differential impact on men and women's life Environmental degradation, changes in climate, water table and land use and their differential impact on men and women

Gender mainstreaming in health and development programs

The purpose of this section is to understand the concept of mainstreaming gender in development and to review the measures taken for eliminating undesirable impact of gender inequalities and to bring women in the main stream of development

The concept of Gender Mainstreaming

Historic overview of Gender Mainstreaming- Women in development (WID) concept and criticism by feminist; shift to Gender and Development (GAD), Gender Mainstreaming and the Millennium Development Goals (MDGs)

The rights approach to Health, sexual and reproductive rights, violence, human rights and health Paradigm shift from the Target Based Supply Driven Fertility influencing programs to RH Approach.

Legal aspects – laws regarding marriage, dowry, domestic violence, rape PNDT act, property inheritance, maternity and other benefits of working women, sexual harassments at workplace, reservations in political institutions and

Gender mainstreaming in various health and development sectors- e.g.

Agriculture, Health, Education, gender in work place (Public & private) etc.

Advocating for Gender equality

Gender responsive policy making and planning of health and development programs.

Section 5: Some case studies of Gender analysis of health and development programs, budgeting and auditing

This section aims to give necessary skills and tools to undertake the gender analysis of health and development policies and programs and to help them to develop gender sensitive indicators and measures

Essential Readings:

1. Basu, Alaka M., (1992): *Culture, The Status of Women and Demographic Behaviour*, Oxford University, New York.
2. Bhasin K. 1993. *What is patriarchy?*, Kali for Women Publishers, New Delhi.
3. Bhasin K. (2000). *Understanding Gender*, Kali for Women Publishers, New Delhi.
4. Dyson, Tim and Mick Moore, (1983). "On Kinship structure, female autonomy, and demographic behaviour in India", *Population and Development Review* vol. 9(1), pp. 35-60.
5. Ellsberg Mary and Heise Lori L. (2005) *Researching violence against women: A practical guide for researchers and activists*. WHO and Path, Washington D.C.
6. Folbre, Nancy. (1992). Improper arts: Sex in classical political economy. *Population and Development Review*. 18(1): 105-112.
7. Gita Sen, Adreinne Germain and Lincoln C. Chen, (Eds.), (1994): *Population Policies Reconsidered:*

Health and Empowerment and Rights, Harvard University Press, Harvard.

8. Jeffery Patricia and R. Jeffery. 1997. *Population Gender and Politics: Demographic change in rural north India*. Cambridge University, Cambridge.
9. Miller, Barbara, D.(ed) (1993) *Sex and Gender Hierarchies*, Cambridge University Press, New York.
10. Hess, B.B. and M.M. Ferree. (1987). *Analyzing Gender: A Handbook of Social Science Research*. Sage Publication, London.
11. United Nation. 2001. *Population, Gender and Development: A Concise Report*. UN, Economic and Social Affairs (Dept. of), New York
12. World Health Organization. (1998). *Gender and Health. Technical paper WHO/FRH/WHO/98*. (Website: www.who.int)
13. World Bank. (1991). *Gender and Poverty in India*. World Bank, Washington.
14. World Health Organization (2003): *Comparative Evaluation of Indicators for Gender Equity and Health*, Women and Health Programme, Centre for Health Development, Kobe, Japan.
15. William Joan. 1989. Deconstructing Gender, 87 Michigan L Rev. 797. *Law Journal Article*

Suggested Readings:

1. Agnes, Flavia. (2000). Law and gender inequalities: the policies of women's right in India. Oxford, New Delhi.
2. Anker, R.(1997). *Gender and Jobs: Sex Segregation of Occupations in the World*, ILO, Geneva.
3. Balk, Deborah, 1997): "Defying Gender Norms in Rural Bangladesh: A Socio demographic Analysis". *Population Studies* Vol.51, pp. 153-172.
4. Bandhopadhyay, D. 2000. Gender and governance in India. *Economic and Political Weekly*. 35(3): 2696-269xxx).
5. Basu, Alaka Malwade. 2000. Gender in population research: Confusing implications for health policy. *Population Studies*. 54: 19-22.
6. Das Gupta, Monica, 1987. Selective discrimination against female children in rural Punjab, India. *Population and Development Review*, 13(1): 77-100.
7. Doyal L.(1995) What Makes Women Sick: Gender and the Political Economy of Health. London, Macmillan.
8. Dreze, Jean and Sen Amartya, (1995): *India: Economic and Social Opportunity*, Oxford University Press, New York.
9. Harriet B. Presser, (1997): Demography, Feminism and the Science-policy Nexus, *Population and Development Review* Vol. 23(2), pp. 295-331.
10. Jeffery, Roger and Basu, Alka M. (Eds.), (1996): *Girls Schooling, Women's Autonomy and Fertility Changes in South Asia*, Sage Publications, New Delhi.
11. Jejeebhoy S. 1996. Women's Education, Autonomy and Reproductive Behavior: Assessing what we have learned. East West Centre, Hawaii.
12. Reeves Hazel and Baden Sally (2000): *Gender and Development: Concepts and Definitions*, Report No. 55, Bridge (development- gender) Institute of Development Studies, University of Sussex, Brighton BN1 9RE, UK.
13. Sonya, Andermahr, Lovell Terry and Wolkowitz, Carol, (1997): *A Glossary of Feminist Theory*, Arnold-Hodder Headline Group, London.
14. Sopher, David, (1980). *An Exploration of India: Geographical Perspective on Society and Culture*, Cornell University New York

MBD E-6.1	Operations Research in Population and Health	45 Hours
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Course Outcomes:

- CO1: Learn the concept of operations and intervention research in reproductive health and related fields.
CO2: Differentiate the operation research from other social science research.
CO3: Identify research problems, design and methodology in operation research.
CO4: Capacity to prepare proposal for operation research and its implementation.

Unit I: Introduction

What is operations research; focus and objective of operations research; types and examples of operations research; role of researchers and managers; components of operations research proposal; critiques to operations research proposal

Unit II: Identification of problem and solution

Identification and definition; justification; alternative solution; indicators - outputs, outcomes and impacts

Unit III: Causality (Randomize Experimental Design)

Pretest-posttest control group design; Posttest –only control group design; multiple treatment design

Unit IV: Quasi/non-experimental design

Non-experimental control design; time series design; before and after design

Unit V: Inferential statistics in operations research

T^2 , t, and F tests; deciding sample size in case of different experimental design; linking different design and statistical tests

Unit VI: Study design exercises

Unit VII: Ethics in operations research

ICMR guidelines; international perspectives; case studies

Unit VIII: Utilization and dissemination, and process documentation

Essential Reading List

1. Fisher, Andrew A., James R. Foreit, J. Laing, J. Stoeckel and J. Townsend 2002: Designing HIV/AIDS Intervention Studies-An Operations Research Handbook, Population Council, New York.
2. Foreit, James R. and Tomas Frejka 1998: Family Planning Operations Research-A Book of Reading, Population Council, New York
3. Kish, Leslie 1965: Survey Sampling, New York, John Wiley and Sons.

MBD E-6.2	Monitoring and Evaluation in Population and Health	45 Hours
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Course Outcomes:

CO1: Develop M & E framework and statistical analysis plan.

CO2: Demonstrate an understanding of the essential principles and design of program evaluation.

CO3: Learn statistical methods used in evaluation Program.

CO4: Understand Ethical issues in evaluation research.

CO5: Understand public interventions related to health and family welfare.

Unit I: Introduction to monitoring and evaluation

Basic concepts, difference between monitoring and evaluation; linkage between planning, monitoring and evaluation; importance of monitoring and evaluation

Unit II: Monitoring and evaluation framework

Resources for monitoring and evaluation, engagement of stakeholders in monitoring and evaluation; meaning of indicators, ideal requirement, process of developing indicator, illustration of indicators developed from large scale surveys, measurement, need & levels of indicator; challenges in developing indicators from large-scale surveys; types of Indicators – input, process, output, outcome, impact; learning and accountability of monitoring and evaluation data

Unit III: Monitoring of policy implementation

Components of policy and programme, budget, staff, process of evaluation, developing tangible indicators for policy monitoring in terms of input, process, output, outcome, impact; result based inference

Unit IV: Evaluation in theory

Principles, norms and standards for evaluation; criterion for evaluation; theory of change; evaluating for results; roles and responsibilities in evaluation; scaling Impact

Unit V: Evaluation design

Determination of sample size under different approaches and design including measurement of change due to certain interventions; quasi experiment design, case control design, evaluation terms of reference - formative and summative evaluations, managing evaluations; evaluation at different points: baseline, mid-point, concurrent and end line evaluation; randomization, statistical design of randomization; randomized control trials, time dependent cluster design, interrupted time series analysis.

Unit VI: Assuring the quality of evaluation design and methodology

Overview; defining the context; the evaluation purpose; focusing the evaluation; evaluation methodology; mandatory requirements for programme; SWOT analysis of NHM, ICDS and National Livelihood Mission; social audit – meaning, objectives, advantage, case study of social audit

Unit VII: Statistical approaches for evaluation of intervention programme

Statistical inferences used in different intervention design – z, t, F and paired ‘t’ tests, two stage LSM, instrument variable method; propensity score matching; difference in difference method: theory and application, advantage and disadvantage, regression implementation; decomposition analysis

Unit VIII: Management information system and use of technology

MIS – monitoring information system; role of programmers; HMIS system; global positioning system; Use of machine learning and artificial intelligence, use of spatial data

Essential Reading List:

1. Casley, Dennis J and Kumar, Krishna (1988). The Collection, Analysis, and Use of monitoring and Evaluation Data. A World Bank Publication, The John Hopkins University Press
2. FHI (2004). Introduction to Monitoring and Evaluation Monitoring and Evaluation, monitoring hiv/aids programs: A facilitator’s training guide. Family Health International
3. IFRC and RCS (2002). Handbook for Monitoring and Evaluation. International Federation of Red Cross and Red Crescent Societies –Geneva

Suggested Reading List:

1. McLean R. and Gargani J. (2019) Scaling Impact Innovations for the Public Good. Routledge, New York.
2. United nations development Group. The Theory of Change, UNDAF Campanion Guideline.
3. UNDP (2009). Handbook on planning, monitoring and evaluating for development results. United Nations Development Programme - New York
4. Sullivan, T.M., Strachan, M., and Timmons, B.K. (2007). Guide to Monitoring and Evaluating Health Information Products and Services. Baltimore, Maryland: Center for Communication Programs, Johns Hopkins Bloomberg School of Public Health; Washington, D.C.: Constella Futures; Cambridge, Massachusetts: Management Sciences for Health, 2007

MBD E-6.3	Urbanization, Space and Planning	45 Hours
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Course Outcomes:

- CO1: Developing a comprehensive understanding on concepts of space, place and region.
CO2: Understanding the history of urban planning and its illustration in Indian context.
CO3: Acquainting students with theories of regional development and various strategies of regional planning.
CO4: Developing a critical understanding on urban policies and programmes in India
CO5: Providing students a practical knowledge of Geographical Information Systems and its utility in regional and urban planning.

Unit I: Urbanization and Space

Urbanization and space: Definitions and concepts of urban areas & urbanization. Concepts and forms of formal and informal spaces; Differences between space, place and region; urbanization and space interaction: gravity model, distance decay model, forces of concentration and dispersion, urban agglomeration and spatial economy; Access and right to the city

Unit II: Evolution of Spaces of Settlements

Settlement: evolution, characteristics and factors; settlement pattern and hierarchy; Urban morphology; Change in urban land use and population density; Rural-urban relationship: dichotomy or continuum; Role of urban centres in rural development.

Unit III: Urban and Regional Planning

Definitions, concepts, purpose, types and levels; geography/demography and planning relationship.

Region: concept and definition, types (formal, functional and planning); Need for regional planning; Types of regional planning; Spatial structure of regions,

Theories of regional development: Stages of development, economic base theory, Industrial location theory, Growth Pole theory; Core-periphery interactions.

Regional planning in India; Planning regions in India; Regional disparity in development; causes and consequences, North-Eastern regional council, Mumbai Metropolitan Regional Development Plan.

Concepts; history and origins of urban planning; pioneers of urban planning; types of urban plans: New towns, neighborhood, garden city, green belts; healthy urban planning, WHO concept of healthy city, livable city, sustainable city.

Urban policy since independence, important urban plans (New Delhi, Navi Mumbai, Chandigarh, Gandhinagar, Bhubaneswar); Smart Cities Mission; HRIDAY, AMRUT, PURA, RURBAN mission

Unit IV: Challenges in Urban planning

Recent urban policies and programmes; Urban redevelopment; Urban poverty, urban housing and real estate, Slums and slum rehabilitation, Urban pollution, Solid waste management; Management of migrants; Case studies of rehabilitation programs (SRA)

Unit V: Remote Sensing, GIS and Urban and Regional Planning

Application of Remote Sensing and GIS in urban and regional planning.

Essential Readings:

1. Friedman, John and William Alonso (1964) *Regional Development and Planning: A Reader*, The MIT Press, Massachusetts.
2. Friedman, John (1966) *Regional Development Policy: A Case Study of Venezuela*, MIT Press, Massachusetts.
3. Chaudhuri, J. R. (2001) *An Introduction to Development and Regional Planning*, Orient Longman, Hyderabad.
4. Chand, M and V.K. Puri, (1983), *Regional Planning in India*, Allied Publishers Private Ltd, New Delhi
5. Mishra, R.P, (1992), *Regional planning: Concepts, Techniques, Policies and Case studies*, Concept Publishing Co., New Delhi

Suggested Readings:

1. Bhagat, R. B., Roy, Archana K. and Sahoo, Sahoo. (2020). *Migration and Urban Transition in India: A Development Perspective*. Routledge India, New Delhi.
2. Kumar, A. and Bhagat, R. B. (2021). *Migrants, Mobility and Citizenship in India*. Routledge India, New Delhi.
3. Lefebvre, H (1991). *The Production of Space*, Blackwell, Oxford.
4. Hall, P, (1992), *Urban and Regional Planning*, Third Editions, Routledge, London.
5. Harvey, D. (2012) *Rebel Cities: From the Right to the City to the Urban Revolution*, Verso, London
8. Husain, M, (1994), *Human Geography*, Rawat Publishing, Jaipur.
9. Leong, Goh C. and G.C. Morgan, (1982), *Human and Economic Geography*, Oxford University Press, Singapore.
10. Singh, R. Y. (1994), *Geography of settlements*, Rawat Publications, Jaipur.
11. Ginsburg, N., Bruce Koppel and T.G. Mc Gee (1991) *The Extended Metropolis: Settlement Transition in Asia*, University of Hawaii Press, Honolulu.
12. Nath, V. (1971) "Regional Development Policies", *Economic and Political Weekly*, 6(30- 32):1601-1608.
13. Lo, C.P. and Yeung, A. K. W. (2002): *Concepts and Techniques of Geographic Information Systems*. Prentice Hall of India, New Delhi.
14. Nyerges, Timothy L. and, Jankowski Piotr (2010): *Regional and Urban Gis: A Decision Support Approach*, Rawat Publication, Jaipur.
15. Friedman, J and Clyde Weaver, (1972), *Territory and Function: The evolution of*

- regional planning*, Edward Arnold, London.
16. Kawashima, T and P. Korcelli, (1982), *Human Settlement Systems: Spatial Patterns and Trend*, IIASA, Luxembourg.
 17. Knowles, R and J. Warling, (1983), *Economic and Social geography: Made Simple*, Heinemann, London.
 18. Sarin, M, (1982), *Urban Planning in the Third World: The Chandigarh Experience*, Manshell, London.
 19. MMRDA (2016), Mumbai Metroplan Regional Development Plan 2016-2036 MMRDA, Mumbai.
- UNEP and others (2007), *Livable Cities: The benefits of environmental planning*, The Cities Alliance, Washington. <http://www.citiesalliance.org/index.html>.

Master of Science in Biostatistics & Demography

Course Code	Name of the Course	Course Type	Credits	No. of hours	No. of Attempts*	Weightage (%)	
						Internal Exam	Semester Exam
	Semester-I						
MBD-E1	Basics of Human Biology	F	NC*	45	3	50	50
MBD-E2	Basic Science Concepts	F	NC*	45	3	50	50
MBD-C1	Introduction to Demography and History of Population	C	3	45	3	40	60
MBD-C2	Basic Demographic Method	C	3	45	3	40	60
MBD-C3	Methods in Demography I	C	2	30	2	40	60
MBD-C4	Sample Survey Designs	C	2	30	2	40	60
MBD-E1	MBD-E1.1 Data Analysis with R and Python	E	3	45	3	50	50
	MBD-E1.2 Data Analysis with STATA			45	3	50	50
		Total	13				
	Semester-II						
MBD-C5	Core Concepts and Application of Epidemiology	C	3	45	3	40	60
MBD-C6	Intuitive Overview Epidemiology	C	2	30	2	40	60
MBD-C7	Methods in Biostatistics II	C	2	30	2	40	60
MBD-C8	Healthcare Systems and Policies	C	2	30	2	40	60
MBD-C9	Demographic Theories and Migration	C	2	30	2	40	60
MBD-C10	Advanced Sample Survey Designs and Related Concepts	C	2	30	2	40	60
MBD-E2	MBD-E2.1 Introduction to Longitudinal Data Analysis	E	3	45	3	50	50
	MBD-E2.2 Introduction to Spatial Analysis						
MBD-E1	MBD-E1.1 Advanced Review and Application of Data Analysis	E	2	30	2	50	50
	MBD-E1.2 Two-phase Sample Surveys						
MBD-V1	Viva-voce	V1					
		Total	20				
	Semester-III						
MBD-E3	Introduction to Demographic Packages	E	NC*	45	3	50	50
MBD-C11	Research Methods in Epidemiology and Biostatistics	C	3	45	3	40	60
MBD-C12	Advanced Demographic Methods	C	3	45	3	50	50
MBD-C13	Advanced Methods in Demography	E	2	30	2	40	60
MBD-E4	MBD-E4.1 Concepts and Measures of Global Health	E	3	45	3	50	50
	MBD-E4.2 Big Data using Machine Learning						
	MBD-E4.3 Health Economics and Financing						
MBD-E5	MBD-E5.1 Population Ageing and Health Transition	E	3	45	3	40	60
	MBD-E5.2 Population Environment and Sustainable Development						
	MBD-E5.3 Gender, Health and Disparities						
MBD-C14	Survival Analysis	C	3	45	3	50	50
		Total	18				
	Semester-IV						
MBD-C15	Data Management and Analysis in SAS	C	3	45	3	50	50
MBD-C16	Demographic Models and Indirect Methods of Estimation	C	3	45	3	50	50
MBD-C17	Methods in Clinical Trials	C	3	45	3	40	60
MBD-E6	MBD-E6.1 Operational Research in Population and Health	E	3	45	3	50	50
	MBD-E6.2 Monitoring and Evaluation in Population and Health						
MBD-E6.3	Operational Space and Planning	E	3	45	3	50	50
MBD-D	Dissertation	D*	6				
MBD-V2	Viva-voce	V2	2				
		Total	24				
		Total Credits	75				

Notes:

Course type: F – Foundation course; C – Core course; E – Elective course; V – Viva-voce; D – Dissertation.
NC: Non-credited foundation courses are not counted for calculating the final grade.

Core papers: Must for all students and cannot be changed.

Elective papers: One elective paper should be opted from a pair.

Internal Examination: Teachers are given the flexibility to decide mode of mode of internal examination from the following list: Written Test; Open Book Test; Written Home Assignment; Individual Thematic Presentation; Thematic Group Presentation; Group Discussion; Surprise Test; MCQ Test; Case Study; Situation Analysis (group activity or individual activity); Picnic Visit; Small Group Project & Internal Viva Voce; Role Play / Story Telling; Literature Review / Book Review; Model Development/Simulation exercises (Group Activity or Individual Activity), In-depth Interview, etc.

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24/07/23

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24/07/23

Dissertation: Weightage for evaluation of dissertation: Guide 0.25; Presentation & Defence 0.25; and Content 0.50.

Evaluation of Dissertation: The Director & Senior Professor appoints an evaluation committee for dissertation consisting of three members from among the faculty of IIPS. First, the committee members independently assess the 'oral presentation and defence' of the student and submit their grade to the Controller of Examinations. Second, the committee members independently evaluate the content of the 'final dissertation' submitted by the student and submit their grades to the Controller of Examinations. To arrive the Final dissertation grade, the average of overall grades of Guide, Presentation & Defence, and Content is considered.

Best Dissertation Award: The Director & Senior Professor appoints a committee consisting of three external experts for recommending the award of the best dissertation. The dissertations of top five ranks (based on the combined score of content, presentation and defence) are placed before the committee. The external members evaluate dissertations and submit their recommendation in a sealed cover to the Controller of Examinations.

Viva voce: Director & Senior Professor constitutes a committee comprising of one external examiner and three/four internal examiners for the viva-voce. The three/four internal examiners shall comprise of one senior professor (Chairperson), one/two faculty members and one programme co-ordinator. The committee members independently evaluate the performance of the students in the viva-voce and assign their grades. To arrive the final viva-voce grade, the average of the evaluation of the members is considered.

Grades Table

GRADE TABLE FOR EVALUATION OF ANSWER SHEET			GRADE TABLE FOR SEMESTER GRADE CARD		
The Grades, Grade Point and Descriptions are as given below			The Grades, Grade Point and Descriptions are as given below		
Final Grade	Grade Point	Grade Description	Final Grade	Grade Point	Grade Description
O Only	10	Outstanding	O Only	10	Outstanding
A Plus	9	Excellent	A Plus	9	Excellent
A Only	8	Very Good	A Only	8	Very Good
B Plus	7	Good	B Plus	7	Good
B Only	6	Above average	B Only	6	Above average
C Only	5	Average	C Only	5	Average
P Only	4	Pass	P Only	4	Pass
F1	3	Fail	F Only	0	Fail
F2	2	Fail	NA/AB	0	Not Attempted / Absent
F1	1	Fail			
NA/AB	0	Not Attempted / Absent			

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20/07/23
Leausthalemdar
25/07/23
Abhishek
26/07/23

ANNEXURE-IV

To

Date: 19th July 2023

The Director,

IIPS Mumbai- 400088.

The committee constituted for the revision of the **Master of Population Studies (MPS) syllabus** herewith submitting its report and the revised MPS syllabus along with the minutes of the meetings. The first committee meeting held its first meeting on 14th December 2023 under the chairpersonship of Prof. Chander Shekhar. The committee has requested all the faculty members who are teaching the respective MPS courses to follow the uniform guidelines. Subsequently, comments and suggestions of External committee established by IIPS, Board of Studies and Research (BSOR) committee and Academic Council of IIPS have incorporated over the period.

Finally, committee revised the syllabus incorporating the suggestions and comments received in the Academic Council meeting held on 5th July 2023.

The committee herewith submitting its report to the Director of IIPS.



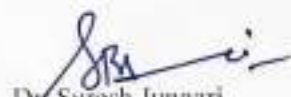
Prof. Chander Shekhar
(Chairperson)



Dr. Harihar Sahoo
(Member)



Dr. D. Govil
(Member)



Dr. Suresh Jungari
(Member)



Dr. Pradeep Salve
(Convener)

Master of Population Studies (MPS)				
Semester I				
Code	Type	TITLE	Credits	Hours
MPS F1	Foundation	Basic Statistical Methods for Population Studies	NC	45
MPS F2	Foundation	Social Science Concepts	NC	45
MPS C1	Core	Demography and History of Population	2	30
MPS C2	Core	Age-sex structure, Quality of Data and Population Dynamics	2	30
MPS C3	Core	Nuptiality	2	30
MPS C4	Core	Fertility	3	45
MPS C5	Core	Mortality, Morbidity and Public Health	3	45
MPS C6	Core	Research Methodology	3	45
MPS C7	Core	Population Ageing and Health Transition	3	45
MPS E1	Elective	E1.1: Healthcare Systems and Policies E1.2: Biostatistics and Epidemiology	3	45
MPS E2	Elective	E2.1: Concepts and Measures of Global Health E2.2: Operations Research in Reproductive Health	3	45
VV-I	Viva-Voce Examination I		2	30
	Total		26	390
Semester II				
MPS C8	Core	Migration and Urbanization	3	45
MPS C9	Core	Population, Development and Environment	3	45
MPS C10	Core	Gender Equity and Reproductive Health	3	45
MPS C11	Core	Population Policies and Programme Evaluation	3	45
MPS C12	Core	Statistical Methods and Computer Applications	2	30
MPS C13	Core	Population Projections	2	30
MPS C14	Core	Demographic Estimation Techniques and Models	2	30
MPS E3	Elective	E3.1: Urbanization, Space and Planning E3.2: Occupational Health E3.3: Monitoring and Evaluation in Population and Health	3	45
MPS E4	Elective	E4.1: Health Economics and Financing E4.2: Spatial Demography and Application of GIS E4.3: Large-scale Sample Surveys	3	45
MPS C15	Term paper		4	60
VV-II	Viva-Voce Examination II		2	30
	Total		30	450
Grand Total			56	840

BASIC STATISTICAL METHODS FOR POPULATION STUDIES

Course Outcomes:

CO1: Refresh on basic statistical methods and its application to population data.

CO2: Recognize the relevance of distribution in bivariate and multivariate tabulations.

CO3: Application of statistical distribution in diagnosing demographic outcome and indicators.

CO4: Develop an understanding of generalization based on principles of statistical analysis.

Introduction to statistics: Descriptive and Inductive statistics. Concept of variables, Nominal, Ordinal and Interval and ratio scale variables.

Tabulation of data, conversion of raw data into frequency distribution. Generating simple frequencies. Graphical presentation of nominal, ordinal data, Logarithms: properties of logarithms, Ratios, Proportion and rates, growth rates (arithmetic, geometric and exponential), Interpolation and Extrapolation.

Data Manipulation – recoding creating new variables, sorting, filtering and selection of specific data.

Measures of Location: Mean (arithmetic, geometric, harmonic) Median, Mode; Its temporal and cross-sectional comparison; virtues and vices as a means of aggregation. Analyzing mean, (arithmetic, geometric, harmonic), median, mode.

Measures of dispersion: Range, Variance, Standard Deviation, coefficient of variation; use and interpretation in comparative reading of situation. Measures of Skewness and Kurtosis.

Techniques of analysing bivariate nominal and ordinal level data: Contingency table, odds ratios, relative risk. Measuring association and interpreting concordance and discordance

Probability concept and set theory: Introduction to the concept of probability, A-priori, and mathematical probability. Events: exhaustive, mutually exclusive events; Illustrating Laws of probability, additive and multiplicative laws of probability through demographic data, Bayes' theorem. Discrete probability distributions: Binomial and exponential functions, Binomial probability distribution and Poisson distribution and their properties. Continuous probability distribution: Normal distribution and its properties, applications of normal distribution.

Concept of correlation and regression: Pearson correlation coefficient, and its properties; Spearman ranks correlation coefficient. Concept of linear regression, fitting of regression line to bi-variate data.

Concepts in Inductive statistics: Population, sample parameter, and statistic. Sampling distribution of mean and standard error. Concepts of statistical hypothesis, critical region, level of significance, confidence interval and two types of errors.

Testing statistical hypothesis and test of significance: Introducing the t-distribution, comparing two groups, principles of comparison, independent t-test and paired t-test, Assumptions involved in t-testing. Testing the association of attributes and Chi-square goodness of fit.

Analysis of Variance with and without interaction, Concept of unbiased estimates, Introduction to Multivariable Analysis. Multiple regression. Concept of Multiple and Partial correlation coefficients in regression analysis, Standardized regression coefficients, Regression with dummy variables. Logistic regression.

ESSENTIAL READINGS:

1. Blalock, Hubert M. (1960): *Social Statistics*, McGraw-Hill Book Company, New York.
2. Chakravorti, S.R. and Giri, N. (1997): *Basic Statistics*, South Asian Publishers, New Delhi.
3. Clarke, G.M. and Cooke, D., (1994): *A Basic Course in Statistics*, Arnold, London.
4. Dixon, W.J and Massey, F.J. (1983) *Introduction to Statistical Analysis*, 4th ed., New York, McGraw Hill, 380-381, 534.
5. Goon, A.M., Gupta, M.K. and Dasgupta, B. (1985): *Fundamentals of Statistics* Vol. I, The World Press Private Ltd. Calcutta.
6. Jain, S.K. 1979. *Basic Mathematics for demographers*. Canberra: The Australian National University.

SUGGESTED READINGS:

1. Lipshutz, Seymour., Schaum's Outline Theory and Problems of *Set Theory and Related Topics* Series, McGraw Hill.
2. Marcello Pagano and Kimberlee Gourneau (2000) "Principles of Biostatistics" Second Edition, Duxbury Thomson Learning, United States.
3. Prakasam, C.P., G. Rama Rao, and R.B. Upadhyay (1987): *Basic Mathematics in Population Studies*, Gemini Publishers, Mumbai.
4. Siegel J.J. and D.A. Swanson (Ed.), 2004. *The Methods and Materials of Demography*. Second Edition. Elsevier Academic Press.
5. Venkatachary, K (1994). *Elements of Mathematics for Demographers*. Monograph Series No.9. Regional Institute for Population Studies, University of Ghana. Legon.
6. Bhat N.R and M.R. Singh, 1993. *Applied Mathematics*. New Delhi: Tata McGraw – Hill Publishing Company Ltd.
7. Dillon, W.R. and Goldstein, M. (1984): *Multivariate Analysis*, John Wiley and Sons, New York.
8. Douglas and Altman (2006): *Practical Statistics for Medical Research*, Chapman and Hall Publication, Washington, D.C.
9. Fisher, L.D and Van Belle, G. (1993) *Biostatistics: A Methodology of the Health Sciences*, New York, Wiley Interscience,

SOCIAL SCIENCE CONCEPTS**Course Outcomes:**

CO1: To gain familiarity with basic social science concepts that has bearing on understanding population dynamics.

CO2: Imagine the varied axis of social reality, such as caste, tribe, gender, kinship and marriage, social mobility and religion in terms of its relevance in population studies.

CO3: Viewing population in space and time and read population geography in consideration of man-environment relationship, geographical factors and regional perspective.

CO4: Recognition of interplay between economic development and population changes in an evolving world order.

CO5: To understand the psychological concepts like perception, behaviour, emotion, personality, coping mechanism, communication and their bearing on Population Studies

SOCIOLOGY

1. Sociology: sociology as a social science- its nature, subject matter and scope
2. Relation of sociology with other social sciences, sociological perspective
3. Basic Concepts in sociology
4. The Family:
 - a) Sociological Significance of the Family
 - b) Types and functions of Family
 - b) Nuclear and joint families
5. Marriage: Different forms of marriage, changing patterns of marriage/mate selection in India
6. Kinship –features of kinship system in India, regional variations
7. Social stratification: Social Class and Caste: Principles of Class and Caste
8. Socialization: agencies of socialization
9. Culture: meaning and characteristics of culture.
10. Society and Culture in India
 - a) Aspects of society and culture in India, and its role and importance in Population Studies.
 - b) Social Institutions and their role in influencing demographic situation of the Population of India
- Family, Marriage, Kinship and Religion
11. Caste System
 - i) Concept and definition of Caste System,

ii) Changing Caste System in India

12. Social Mobility: vertical and horizontal, intra- and inter-generational mobility

13. Social Change

Definition and Concept of Social Change

14. Process of Social and Cultural Changes in India and their role in influencing demographic behaviour:

a) Sanskritization b) Westernization c) Modernization

GEOGRAPHY

1. Importance of Geographical factors- Physical factors (relief, rainfall, temperature, soil and vegetation) Economic and Social factors (Mineral resources and industrialisation, transport, language, religion and caste/tribe); the influence of geographical factors on population.
2. Geographical approaches: the concept of region- formal and functional regions; the concept of growth pole and regional development; core and periphery; distance and decay function; Mapsscale, choropleth, isopleths and distribution maps.
3. Physical divisions of India; administrative organization of India. Historic-Cultural regions; Agro-climatic regions; NSS regions.
4. Theoretical Perspectives in Geography- Place of geography in Social sciences; man and nature relationship- determinism and possibilism; Positivism (quantification) and Phenomenology; and Radical and Postmodern Geography.
5. Concept of Social Space; Social Structure and Spatial Structure; Role of time and space in social sciences.

ECONOMICS

1. Introduction:

Defining Economics and welfare Economics, Micro and Macro Economics, Economic and non-economic good, Basic Economic Activities, Factors of Production, Economic Systems.

2. Basic Concepts in Micro Economics

Concept of Marginal and Total Utility, Law of Diminishing Marginal Utility, Theory of Demand: Indifference curves Theory and Properties, Equilibrium of consumer, Income, Substitution and Price

effect. Elasticity of Demand: Price, Income and cross elasticity, Basic concepts in theory of production, cost and market structure.

3. Basic Concepts in Macro Economics

Basic Concepts in National Income: Concept of GDP, NDP, GNP, NNP, NI, PCI, PPP, Theory of consumption and saving: Consumption function, Keynes' Psychological law of consumption, concept of APC and MPC, APS and MPS, Factors affecting consumption and savings, Basic concept of Investment.

PSYCHOLOGY

1. Social Psychological Concepts:

The Value of psychology and perspectives in psychology; scientific study of social influences on behavior and the interaction between individuals and groups; social pressure, leadership

2. Basics of Psychology:

Why Psychology, branches of psychology, methods of research, Psychological wellbeing across major stages of the life span. Role of psychology in population studies.

ESSENTIAL READINGS:

1. Davis, Kingslay, *Human Society*, MacMillan and Co., New York, (1975), Chapters 1, 3,5,6.
2. Kapadia, K. M., *Marriage and Family in India*, Oxford University Press, Calcutta, (1966).
3. Mandelbaum, D.G., *Society in India-Continuity and Change(vol.1) and Change and Continuity*, (Vol. 2). University of California Press, London, (1970).
4. Mac Iver R.M. and Charles H. Page, *Society: An Introductory Analysis*, Holt, Rinehard and
5. Winston, New York, (1949), Chapters No.1, 3,7,11,15,22,24,25,26.
6. Srinivas M.N., *Social Change in Modern India*, University of California Press, Berkeley, (1966)
7. Sen, A. (2018). *Collective Choice and Social Welfare: An Expanded Edition*. United Kingdom: Harvard University Press.
8. Haralambos, Michael, *Sociology: Themes and Perspectives*, Oxford University Press, Delhi (1980).
9. Sigmund Freud, *The Interpretation of Dreams* (1900)
10. Charles M. Duhigg, *The Power of Habit* (2012)
11. Karen Horney, *The Neurotic Personality of Our Time* (1937)
12. Oliver Burkeman, *The Antidote: Happiness for People Who Can't Stand Positive Thinking*(2012) .
13. Carl Gustav Jung, *Man and His Symbols* (1964)
14. *Introduction to Psychology* 10th Edition James W. Kalat (2013)Abler, R, Adams, J and Gould P., (1971): *Spatial Organization: The Geographer's view of the World*, Prentice Hall, New Jersey.
15. Johnston, R.J., (2004): *Geography and Geographers*, Oxford Unity Press.
16. Richard, Peet., (1998): *Modern Geographic Thought*, Blackwall Publishers
17. Singh, R.L., (1971) *India: A Regional Geography*, National Geographical Society of India, Varanasi.
18. Ahuja H.L, *Advanced Economic Theory: Microeconomic Analysis*, S. Chand and Company Limited, New Delhi, Chapters 5,6,7,8,9,12,16, 17, 18, 20
19. Koutsoiannis A, 1979, *Modern Microeconomics*, London: Macmillan Press Ltd,

20. Lipsey and Chrystal, 2004, Economics, Oxford university Press, Part One, part two and part five
21. Dasgupta AK, Epochs of Economic Theory, OUP, Bombay, Chapters 2, 3, 4, 7 and 8
22. Kuppaswamy B., *Social Change in India*, Konark Publication Pvt. Ltd. Delhi, (1972).
23. Muzumdar, Haridas , *The Grammar of Sociology: Man in Society*, Asia Publishing House, Mumbai (1966).
24. Johnson, Harry M, *Sociology: A Systematic Introduction*, Allied publishers, Bombay (1966).
25. Mc Gee, Reece , *Sociology: An Introduction* , Holt, Rinehard and Winston, New York (1980).
26. Magill, Frank N (ed.), *International Encyclopedia of Sociology*, Fitzroy Dearborn Publishers, London, (1995).
27. Francis John Monkhouse (1956) *Maps and Diagrams: Their Compilation and Construction*, University of Michigan.
28. JF Friedman (1966) *Regional Development Policy: A Case Study of Venezuela*, Cambridge, Massachusetts : MIT Press, 1966.
29. Samuelson, Paul A. and William D. Nordhaus., “Economics”, New York: Tata McGraw Hill, part one, two and five
30. Datt R and Sundaram K.P.M, 2000, Indian economy, S. Chand & Company Ltd, Part II.
31. Government of India, Ministry of Finance, Economic Division, Economic Survey

DEMOGRAPHY AND HISTORY OF POPULATION

Course Outcomes:

CO1: Acquaint the students with the scope and relevance of the discipline of population studies.

CO2: Become aware of the global, regional and national population trends.

CO3: To understand the nature of diversity in the size, distribution, composition, and basic characteristics of population across Indian states.

CO4: To familiarize on various sources of demographic data in India, and their limitations.

CO5: To appreciate the historical perspectives on population change.

Introduction to Demography

Definition and Scope: Demography as a scientific discipline; Development of demography as a discipline. Multi-disciplinary nature of Demography, Linkage with other social science disciplines including statistics, mathematics, economics etc. Some basic demographic concepts. Balancing Equation and components of population change, Concept of doubling time. Malthusian concept of population growth and resources.

Sources of Demographic Data

Population census; Uses and limitations; Indian Censuses. Census taking under British India and later, details of different domains on which Indian census collect data, publication of census data/ reports. Vital registration system., Historical data – Parish Records, National Sample Survey, Sample Registration System, Demographic Health Surveys (DHS), Longitudinal ageing Survey in India, Other sample surveys. Strengths and weaknesses of various data sets

Population History

Historical trends in population situation in the world. Present population situation and past and future trends in the world, in developed and developing countries.

Demographic characteristics of first modern people. Socio-economic and demographic features of Indus Valley Civilisation, population change from medieval to Mughal times.

History of population in India: Population estimates in ancient time, population history during British rule, famine, plague, influenza and its impact on population, Trends and growth of India's population during pre-independence and post-independence period, major sources of data about the population in the past; major explanations of population change in the past; Contribution of fertility, mortality and migration to population change in the past.

ESSENTIAL READINGS:

1. Jacob S. Siegel and David a. Swanson (2004): *The Methods and Materials of Demography*, Second Edition, Chapters 1, 2, 3, 7, 8, 9,10, Elsevier Science, USA.
https://books.google.co.in/books/about/The_Methods_and_Materials_of_Demography.html?id=-uPrAAAAMAAJ&redir_esc=y
2. John Weeks (2005): *Population: An Introduction to Concepts and Issues*, Wordsworth Learning, Singapore 9th edition.
3. Dyson, Tim, *A Population History of India: From the First Modern People to the Present Day* (Oxford, 2018; online edn, Oxford Academic, 18 Oct. 2018),
<https://doi.org/10.1093/oso/9780198829058.001.0001>, accessed 20 Mar. 2023.
4. Bhende, A., and Kanitkar, T. (1996): *Principles of Population Studies* (Seventh Edition), Himalaya Publishing House, Bombay.

SUGGESTED READINGS:

1. Warren S. Thompson, (1930), *Population Problems*, New York; London: McGraw-Hill, [C1930]
2. Bogue, D., (1969): *Principles of Demography*, John Wiley and Sons, New York.
3. United Nations, (1973): *The Determinants and Consequences of Population Trends*, Vol. I, Chapters 1, 2 and 8.
4. Census of India: <http://www.censusindia.gov.in>
5. United Nations. DESA. World Population Prospects 2022.
https://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/wpp2022_summary_of_results.pdf
6. United Nations, (1998): *Handbook on Civil Registration and Vital Statistics Systems, Management, Operation and Maintenance*, New York.
7. United Nations (1958). *Multilingual Demographic Dictionary*, John Wiley & Sons Ltd., New York
8. International Institute for Population Sciences, Mumbai. www.iipsindia.ac.in

AGE-SEX STRUCTURE, QUALITY OF DATA AND POPULATION DYNAMICS

CO1: To familiarize the students with age-sex structure of the population

CO2: To develop capacity in measuring and analyzing the age-sex structure of a population and its determinants and consequences.

CO3: To develop an understanding of demographic transition and demographic dividend.

Concepts and Measures of age and sex structure

Defining age and sex, sex ratio, sex ratio at birth, classification of age group and its importance, Measures of age structure; median age, percent distribution, dependency ratio, potential support ratio.

Age and sex pyramid of developed and developing countries, variations in age distribution, sex ratio and sex ratio at birth. Concept of age standardization, demographic transition theory and demographic dividend.

Dynamics of Age-Sex Structure of the World and India

Present levels and past trends in the sex and age structure of the population of the world, developed and developing countries and India.

Importance of age-sex structure in population dynamics and factors affecting sex ratio of the population. Sex ratio of India's population and role of different factors in changing sex ratio.

Factors affecting age structure of the population: dynamics of age structure along with demographic transition; ageing of the population and relative role of low fertility and low mortality. Implication of migration on age sex structure.

Evaluation and Adjustment of Demographic Data:

Appraisal of quality of age-sex data:

Types and source of errors

Methods of data evaluation and error detection: direct (Post-enumeration surveys) and indirect methods

Appraisal of birth and death statistics by means of balancing equation

Dual system of records

Techniques of evaluation of age and sex data:

Measures of errors in age data (Graphical representations, Whipple's index, Myer's index, Age ratio, Sex ratio and UN Joint score)

Evaluation of age data for young and old ages

Techniques of errors adjustment in age data and prorating

Quality checks incorporated in survey procedures to minimize errors

Possible errors and implications

Component of non-sampling errors

Mechanisms and protocols to minimize and correct errors

ESSENTIAL READINGS:

1. Jacob S. Siegel and David a. Swanson (2004): The Methods and Materials of Demography, Second Edition, Chapters 1, 2, 3, 7, 8, 9,10, Elsevier Science, USA.
https://books.google.co.in/books/about/The_Methods_and_Materials_of_Demography.html?id=uPrA
2. John Weeks (2005): Population: An Introduction to Concepts and Issues, Wordsworth Learning. Singapore 9th edition.
3. Bhende, A., and Kanitkar, T. (1996): Principles of Population Studies (Seventh Edition), Himalaya Publishing House, Bombay.
4. Preston, Samuel H., Heuveline, Patrick, and Guillot, Michel (2001) Demography: Measuring and Modeling Population Processes. Oxford: Blackwell Publishers.

SUGGESTED READINGS:

1. Warren S. Thompson, (1930), Population Problems, New York; London: McGraw-Hill, [C1930]
2. Bogue, D., (1969): Principles of Demography, John Wiley and Sons, New York.
3. United Nations, (1973): The Determinants and Consequences of Population Trends, Vol. I, Chapters 1, 2 and 8.
4. Census of India: <http://www.censusindia.gov.in>
5. United Nations. DESA. World Population Prospects 2022.
https://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/wpp2022_summary_of_results.pdf
6. United Nations, (1998): Handbook on Civil Registration and Vital Statistics Systems, Management, Operation and Maintenance, New York.
7. Mukherjee S.B. 1976. 'The Age Distribution of the Indian Population: A Reconstruction for the state and territories, 1881-1961'. East-West Centre, University Press of Hawaii, Honolulu.
8. S Irudaya Rajan, K S James (2008). Third National Family Health Survey in India: Issues, Problems and Prospects, Economic & Political Weekly, November 29, 2008 33
9. K S James, S Irudaya Rajan (2004). Respondents and Quality of Survey Data. Economic and Political Weekly February 14, 2004

NUPTIALITY

CO1: Familiarize students' basic concepts on nuptiality

CO2: Inculcate an understanding of various theories of family formation.

CO3: Identify the different sources of data for nuptiality

CO4: Perform nuptiality analysis

Nuptiality

Introduction, Basic Concepts, Sources of Data and their limitations. Measures of Nuptiality from Registration data.

Analysis of Marital Status Data from Census.

Singulate Mean Age at Marriage (SMAM) - Synthetic Cohort and Decadal Synthetic Cohort Method.

Indices of Nuptiality (Coale's Indices)

Marriage Pattern in India and Selected Countries and related factors.

Marriage squeeze: Concepts and Implications, Concepts of Hypergamy and Hypogamy Gross and Net Nuptiality Tables.

Non-marriage

Multistate approach in Nuptiality analysis. Standard Age Pattern of Marriage – Coale's Model.

Divorce and Widowhood.

- a. Definition and basic measures.
- b. Marriage Dissolution Tables and Remarriage Concept
- c. Mean Age at Widowhood/Divorce from Census Returns.

Definition and Measures of Remarriages of Widowed and Divorces

ESSENTIAL READINGS:

1. Siegel, Jacob S., and David A. Swanson (eds.), (2004) *The Methods and Materials of Demography* (Second edition). San Diego: Elsevier Academic Press.
2. Newell, Colin (1988) *Methods and Models in Demography*. London: Frances Pinter.
3. Asha A. Bhende and Tara Kanitkar, (2003), *Principles of Population Studies*,
4. Sixteenth Revised Edition, Himalaya Publishing House, Mumbai.
5. Pathak, K.B. and F.Ram, (1998) *Techniques of Demographic Analysis*, Mumbai: Himalaya Publishing House, Chapter 4, Pp.108-153.

SUGGESTED READINGS:

1. Coale Ansley J. and T. James Trussell (1978) *Technical Note: Finding the Two Parameters that Specify a Model Schedule of Marital Fertility. Population Index* 44, 2 (1978), pp. 203-213.

Increase: a Self-Teaching Guide to Elementary Measures. Honolulu: East-West Population Institute, East-West Center.

3. Rowland, Donald T. (2006), *Demographic Methods and Concepts*. New York: Oxford University Press.
4. Bogue, Donald J., Eduardo E. Arriaga, and Douglas L. Anderson, eds. (publication editor George W. Rumsey) (1993) *Readings in Population Research Methodology*. Chicago: United Nations Population Fund. Volume 3: Fertility Research, (All three chapters but selected pages).
5. Pollard, A.H., Yusuf, Farhat and Pollard, G.N. (1990) *Demographic Techniques* (third edition). Sydney: Pergamon Press.

FERTILITY

Course Outcomes:

- CO1: Familiarize students' basic concepts on fertility
- CO2: Recognize socio-cultural and economic factors influencing fertility behaviours.
- CO3: Inculcate an understanding of various theories of reproduction and family formation.
- CO4: Identify the different sources of data for fertility measurements
- CO5: Perform fertility analysis

A. FERTILITY

Terms and Concepts

Importance of the fertility study in population dynamics; Basic terms and concepts used in the study of fertility, desired family size, fertility regulation

Framework for Fertility Analysis

Determinants of natural fertility; Davis intermediate variables framework of fertility; Socio-economic determinants of proximate variables; Lee and Bulatao framework of fertility determinants.

Fertility Transition in Developed Countries

Historical fertility declines in European and Non-European Industrialized Countries and underlying factors; Below-replacement level fertility in developed countries and its implications.

Fertility Transition in Developing Countries

Pattern of fertility transition in developing countries; causes of high fertility in Africa and Asia. Fertility Transition in India: Historical trend and regional patterns in development, culture and fertility transition. Fertility Surveys – Findings and Emerging research issues.

Hypotheses and Theories of Fertility

Theory of Social Capillarity, Theory of Change Response, Theory of Diffusion and Cultural Lag, Liebenstein Theory, Becker's Theory, Easterlin's Framework of Fertility, Intergenerational Wealth Flow Theory, U. N. Threshold Hypothesis, Reproductive motivations and value of children theories. Second demographic transition

B. FERTILITY MEASURES AND MODELS

Introduction of Basic Concepts

Sources of Data for Fertility Analysis

Concept of Period and Cohort Approaches

Direct Estimation of Fertility

Period Measures of Fertility

Basic Fertility Measures

- Order-Specific Fertility Rates
- Marital Status Specific Fertility Rates
- Standardized Birth Rates and Coale's Fertility Indices

Cohort Measures of Fertility

- Children Ever Born
- Completed Fertility
- Parity Progression Ratios

Reproduction Measures

Concept of Maternity Function

Basic Idea of Tempo and Quantum Effects

Fertility Models

Age patterns of Fertility: Coale and Trussell Fertility Model: Estimating M and m

Bongaarts and Potters Aggregate Fertility Model and its applications

ESSENTIAL READINGS:

1. Preston, Samuel H., Heuveline, Patrick, and Guillot, Michel (2001) *Demography: Measuring and Modeling Population Processes*. Oxford: Blackwell Publishers.
2. Siegel, Jacob S., and David A. Swanson (eds.), (2004) *The Methods and Materials of Demography* (Second edition). San Diego: Elsevier Academic Press.
3. Newell, Colin (1988) *Methods and Models in Demography*. London: Frances Pinter.
4. United Nations, (1973), *Determinants and Consequences of Population Trends, Vol. 1*, pages 96-104, UN, New York.
5. Bongaarts, J and Potter, R (1983) *Fertility, Biology and Behavior: An Analysis of the Proximate Determinants*. Academic Press, New York.
6. Asha A. Bhende and Tara Kanitkar, (2003), *Principles of Population Studies*, Sixteenth Revised Edition, Himalaya Publishing House, Mumbai.
7. Pathak, K.B. and F.Ram, (1998) *Techniques of Demographic Analysis*, Mumbai: Himalaya Publishing House, Chapter 4, Pp.108-153.

SUGGESTED READINGS:

1. David G. Mandelbaum, (1974), *Human Fertility in India: Social Components and Policy Perspectives*, University of California Press, Berkeley.
2. United Nations, (1973), *Determinants and Consequences of Population Trends, Vol. 1*, pages 96-104, UN, New York.
3. Coale Ansley J. and T. James Trussell (1978) *Technical Note: Finding the Two Parameters that Specify a Model Schedule of Marital Fertility. Population Index* 44, 2 (1978), pp. 203-213.
4. Palmore, James A. and Gardner, Robert W. (1983) *Measuring Mortality, Fertility and Natural Increase: A Guide to the Methods and Materials of Demography*. New York: Academic Press.

Institute, East-West Center.

5. Rowland, Donald T. (2006), *Demographic Methods and Concepts*. New York: Oxford University Press.
6. Bogue, Donald J., Eduardo E. Arriaga, and Douglas L. Anderson, eds. (publication editor George W. Rumsey) (1993) *Readings in Population Research Methodology*. Chicago: United Nations Population Fund. Volume 3: Fertility Research, (All three chapters but selected pages).
7. Pollard, A.H., Yusuf, Farhat and Pollard, G.N. (1990) *Demographic Techniques* (third edition). Sydney: Pergamon Press.
8. Sydney H. Contz, (1968) , *Population Theories and the Economic Interpretation*, Routledge, London.

MORTALITY, MORBIDITY AND PUBLIC HEALTH

Course Outcomes:

CO1: Become familiar with the basic definitions and concepts used, importance and the scope of mortality study and its bearing on fertility, and population health.

CO 2: Become aware of varied sources of health data (morbidity, mortality, disability), their merits/demerits, uses and significance as indicators; and their basic measures.

CO3: Explain synthetic formulation of survival experience (e.g., life table).

CO4: To convey the transitional and differential dynamics of early age life experiences.

CO5: To understand the linkages among epidemiology, mortality transition, and public health.

A. MORTALITY

1. Basic Concepts and Measures of Mortality

Definition of deaths and fetal deaths according to WHO; Need and Importance of the study of Mortality; various sources of mortality data and its quality with special reference to the developing countries. Global Mortality and Emerging Issues

Introduction and basic measures:

Some basic measures: - crude death rate (CDR) and Age-Specific Death Rates (ASDRs)- their relative merits and demerits.

Techniques of standardization and decomposition of Rates/Ratio

Need and importance of standardization: direct and indirect technique of standardization of rates and ratios in the light of mortality rates; Decomposition.

Infant mortality and its sub-division

Need and importance of the study of infant mortality in demographic analysis; Conventional measures of infant mortality (IMR) and its sub-divisions- Neo-natal, Post- Neonatal mortality and Peri-natal Mortality Ratio/Rate. Approaches for estimating infant and child mortality rates from birth history collected in large-scale surveys; and Lexis diagram.

Measures of maternal mortality

Maternal Mortality Rate, Ratios, Life time risk; Issues related to estimation of maternal mortality measures.

2. Life Tables

Introduction

Basic concept of a life table; types and forms of life table; Brief history of life tables; Anatomy of life table; uses of life table in demographic analysis.

Construction of Life tables based on Age- specific death Rates (ASDRs), MORTPAK4

Underlying assumptions of life table construction using ASDRs of a community during a specified period; Methods of life table Construction-Conventional approach, and those proposed by Greville and Chiang.

3. Mortality and health transitions

Levels and trends in mortality by regions, with special reference to India; age and sex specific mortality with a focus on excess female mortality; differentials by residence and socio- economic factors (occupation, income, education, etc); historic mortality transitions as experienced by developed countries (Europe); overview of epidemiological transition; changing disease and death pattern in developing countries; factors responsible for high mortality in the past; main causes of mortality decline in developing countries; current global mortality scenario; and concepts and overview of health transition.

4. Child survival framework

Importance of infant mortality in population and health; causes of infant mortality (endogenous and exogenous factors); levels and trends (global and south Asia/India); and Mosley and Chen' framework for child survival.

5. Causes of death

Importance of causes of death statistics; definition and sources of causes of death statistics; a brief history of the International statistical classification of diseases, injuries and causes of death (ICD); an overview of ICD – X and XI (1990, 2019); global leading causes of death (with a focus on Asia and India); cause of death statistics in India (RG: Rural and MCCD); distribution of deaths by main causes by age, development, life expectancy (UN).

B. MORBIDITY AND PUBLIC HEALTH

6. Introduction to Morbidity

Need and importance of the morbidity study; sources of morbidity data; concepts and definitions of health and morbidity, and burden of disease; conditions as proposed by WHO and other social scientists

7. Measures of Morbidity

Need for morbidity indices; various measures of morbidity: incidence and prevalence rates; interrelationships between measures of morbidity; other measures related to working day loss etc.

8. Public Health and Epidemiology

Basic concepts of community health; principles of Epidemiology- basic concepts and definitions; types of Epidemiology: descriptive and analytical; epidemiology of communicable and non-communicable diseases; nutrition and health, environment and health; occupation and health.

ESSENTIAL READINGS:

1. Caldwell, J, Sally Findley, Pat Caldwell and Gigi Santow (1990): What we know about health transition: The cultural, social and behavioural determinants of health. The proceedings of an international workshop, Vol.1&2, ANU, Canberra, Health Transition Centre.
2. Mosley, W. H. and L. C. Chen (1984): Analytical framework for the study of child survival in developing countries, Population and Development Review 10 (Supplementary Copy).
3. Park, J.E. and K. Park (1989): Text Book of Preventive and Social Medicine (Twelfth Edition), M/S Banarsidas Bhanot Publishers, Jabalpur (Chapters 2 & 3).
4. Ram, F. and K.B. Pathak (1998): Techniques of Demographic Analysis, 2nd Ed, Himalaya Publishing house, Bombay (Chapters 2 & 3).
5. WHO (1992): International Statistical Classification of Diseases and related Health Problems, Tenth Revision, Vol. 1, Geneva.

SUGGESTED READINGS:

1. Omran, A. R. (1971): The epidemiologic transition: a theory of the epidemiology of population change, Milbank Memorial Fund Quarterly, Vol. XLIX, pp. 509-538.
2. Park, J.E. and K. Park (1989): Text Book of Preventive and Social Medicine (Twelfth Edition), M/S Banarsidas Bhanot Publishers, Jabalpur (Chapters 2 & 3).
3. Preston, S. H., Patrick Heuveline and Michel Guillot (2001): Demography: Measuring and Modeling Population Process, Blackwell Publishers, Oxford, UK (Chapters 2, 3 & 4).
4. Shryock, Henry S. Jacob Siegel and Associates (1980): The Methods and Materials of Demography Vol. 2, US Department of Commerce. Washington DC, pp. 389-393, Chapter 14

RESEARCH METHODOLOGY

Course Outcomes:

CO1: To understand the research design and scientific approaches to conduct of research in varied settings.

CO2: To familiarize the qualitative and quantitative methods of data collection.

CO3: To understand qualitative data analysis using packages like Atlas Ti and Nvivo.

CO4: Develop skills for writing proposal and scientific articles.

CO5: Introducing students to field level settings and primary data collection.

Scientific Methods of Research

Definition of Research, Assumptions, Operations and Aims of Scientific Research. Philosophy of Research, The Research Process: conceptual, Empirical and Analytical Phases of Research: Essentials Criteria of Scientific methods.

Research Designs

Observational Studies: Descriptive, explanatory, and exploratory, monitoring and evaluative studies. Experimental Studies: Pre-test design, post-test design, Follow-up or longitudinal design, threat to internal validity. Action research studies, Panel Studies.

Methods of Data Collection

Quantitative Methods: Checklist schedules, questionnaire (mail method, interviews through telephone, internet and computers), interview schedule (face-to-face interviews or personal interviews).

Questionnaire/interview schedule design and construction: Principles of constructing a questionnaire/ interview schedule, Types of questions, framing of questions (simple, delicate, personal matter), sequencing of questions.

Qualitative Method: In-depth interviews, key informant interview, observation (participatory and non-participatory), focus group discussion, content analysis, social mapping, social networking, free listing, pile sorting, projective techniques, mechanical devices (camera, tape recorder), mystery client technique, vignettes method.

Measurement

Reliability and validity of measurement: Face, content, construct, convergent, concurrent, and predictive validity; Inter-coder reliability, stability, non-random and random errors, scaling and composite indices.

Attitude Scales: Point scales, ranking scales, rating scales, limitations of attitude scales, Types of Scales: Bogardus, Guttman, Likert, Semantic, Thurstone scale.

Sampling

Complete enumeration versus sampling.

Concept of sampling unit, sampling frame and sampling design.

Sampling methods: Simple random sampling, stratified sampling, systematic sampling, cluster sampling, and purposive sampling.

Multistage sampling in large-scale surveys, self-weighting designs, Stratification in multistage sampling.

Sampling and non-sampling errors, calculation of weights, sample size determination.

Data Collection, processing and analysis

Research ethics; At the level of respondent, community, organization and presentation of results

Fieldwork – interaction with community and respondent.

Editing, coding, data entry, validation & analysis.

Writing research proposal and report

Purpose of a proposal/report

Content of proposal/report: Introductory section, methodology adopted, analysis and inferences, summary, conclusion and recommendations.

References/Bibliography, Appendices, Footnotes.

Research Methodology Lab-exercise: ANTHROPAC, Atlast Ti and Group Work

ESSENTIAL READINGS:

1. Bernard, H. Russell, (1995): Research Methods in Anthropology: Qualitative and Quantitative Approaches, Altamira Press, Walnut Creek.
2. Goode W J and Hatt P K. 1952. Methods in Social Resasrch. McGraw Hills, New York.
3. Kish, Leslie, (1995): Survey Sampling, John Wiley and Sons, Inc. New York.
4. Lohr L. Sharaon., (1999): Sampling: Design and Analysis, Duxbury Press, London.
5. Lwanga S. K. and Lemeshow S., (1991): Sample Size determination in Health Studies: A Practical Manual, World Health Organisation, Geneva.
6. Mukherji, P.N., (1999): Methodologies in Social Science, Sage Publications, New Delhi.
7. Pullum W. 2006. An Assessment of Age and Data Reporting in the DHS Surveys, 1985-2003. DHS Methodological Report No. 5. Calverton, Maryland, Marco International Inc.
8. Royce A. Singleton and Bruce C. Straits, (1999): Approaches to Social Research, Oxford, Oxford University Press.
9. Young P V. 1994. Scientific Social Surveys and Reasearch. Prentice-Hall, New York (4th Edition).
10. Kothari, CR (2020), Research Methodology - Methods And Technique, Generic, ASIN : B0BCPDGN66, 394 pages

POPULATION AGEING AND HEALTH TRANSITION

Course Outcome:

CO1: To impart knowledge of concepts and theoretical framework relating to demography of ageing, and its societal interface.

CO2: To understand the health transition, its linkage with ageing transitions.

CO3: To develop skills to analyze trends, determinants and consequences of population ageing.

CO4: To familiarize with aging data sets and its exploration.

CO5: To acquaint the students with ageing policies and programmes and its bearing on the welfare of the elderly.

I Demography of Ageing:

Concepts and measures of population ageing; components of population ageing; Inter- relationship between population ageing, fertility, mortality and migration; population ageing and momentum of population growth, age structure transition and ageing, and declining population.

Population ageing trends, patterns and determinants in India; state variations; future scenario of population ageing in India and states.

II Life Course Perspectives and Social Dynamics of Ageing:

Life course perspective of population ageing; Age and Ageing, Ageism; Social Status and Roles of Elderly, Family Structure, Intergenerational relations, Kinship and family support, Social Security; Social network- Frameworks (Berkman and others) and measurement.

Living Arrangements of Elderly, Old Age Homes, Social Networks, and Contribution of elderly: “Feminization” of Ageing, Dependency, Gender Dimensions and Discrimination, Widows, Elder abuse, Social and legal Vulnerability.

III Ageing and Health:

Ageing and Functional Health: Non-communicable diseases, Ageing and disabilities; trends and prevalence. Well-being and life satisfaction.

Ageing and mental health problems; cognition, memory loss, dementia and depression; Alzheimer’s and Parkinson.

Ageing and health risk factors: nutrition, diet and food practices; health risk behaviour- tobacco, alcohol; physical activities;

IV Ageing Policies and Programmes:

Social and Economic Support Policies and Programmes for the Elderly- Retirement, Pensions and

and programmes for elderly in India. National Programmes for Health Care of Elderly (NPHCE); National Policy for Senior Citizens.

Worldwide Longitudinal Ageing Studies: LASI, SAGE, SHARE, HRS, CHARLS, JSTAR, etc.

ESSENTIAL READINGS:

1. Chakraborti, Rajagopal Dhar (2004), *The Greying of India: Population Ageing in the Context of Asia*, SAGE Publications, New Delhi.
2. UNFPA (2001), *Population Ageing and Development: Social, Health and Gender Issues*, United Nations, Malta.
3. UNFPA (2011), *Report on the status of elderly in select states of India*, UNFPA, New Delhi.
4. Govt. of India (1999). *National Policy for Older Persons*, Ministry of Social Justice and Empowerment, New Delhi.
5. United Nations, Department of Economic and Social Affairs, Population Division (2019). *World Population Ageing 2019: Highlights*. UN, New York.

SUGGESTED READINGS:

1. World Health Organization (2015), *WHO Report on Ageing and Health*, Geneva, WHO.
2. United Nations (2001): *Living Arrangements of Older Persons: Critical Issues and Policy Responses*. Population Division, Department of Economic and Social Affairs, New York.
3. Sandra Gruescu, (2006), *Population ageing and economic growth*. Physica-Verlag.
4. Goli, S., B. Reddy, James, K. S. & Srinivasan, V. (2019). Economic independence and social security among India's elderly. *Economic and Political Weekly*. 54, 39, p. 32-41 10 p.
5. James, K.S and Goli S. (2017). Demographic Changes in India. Is the Country prepared for the Challenge? *The Brown Journal of World Affairs*, 23:169.
6. Berman, Lisa (2000) "Social Support, Social Networks, Social Cohesion and Health" *Social Work in Health Care*
7. Pool, Ian, Laura R. Wong and Eric Vilquin (ed) (2006), *Age-structural transitions: challenges for development*. Paris: CIRCRED.
8. National Institute of Ageing (2007). *Why population ageing matters? A global perspective*, US National Institute of Health.
9. Asian Development Bank Institute (2019). *Ageing Societies: Policies and Perspectives*, ADB, Japan.

HEALTHCARE SYSTEM AND POLICIES

Course Outcomes:

CO1: To develop capacity among students to analyze health systems from an international and comparative perspectives.

CO2: To provide a historical orientation to the students on Indian-scenario; national health policy, health care delivery system, national health programmes and health sector reforms.

CO3: To understand the need and relevance of health legislations as an instrument of protection and promotion of public health and inculcate the ability to critically review them.

CO4: To introduce the students to health policy and systems research and recent developments.

Unit 1: Basic Concepts: Concepts of Health; Public health; Community health; Preventive and curative health; Health promotion; Health services; and Primary, secondary and tertiary care.

Unit 2: Health System: Goals, boundaries, functions, and WHO's health system building blocks: service delivery, health workforce, health Information systems, access to essential medicines, financing and leadership/ governance.

Unit 3: Health Services: Basic models and functions of health services, international experiences and goals and elements in universal health care (UHC) approach.

Unit 4: Health care system in India: public sector, private sector, voluntary sector, human resources for health, access to health care, utilization and expenditure on health services, and UHC initiatives and challenges ahead.

Unit 5: Health policy: Concepts and tools of health policy, health policy stakeholders, health policy triangle framework, rational decision making to approach to health policymaking, introduction to health policy and systems research.

Unit 6: Health policymaking in India: Health planning in post-Independent India, Bhore Committee Report 1946, National health ~~plan~~ national health policy 2017, and current national health programmes.

Unit 7: Regulation in the health sector: Need for regulations, mechanisms for regulation, key legislations and standards in the health sector in India, and challenges in the implementation of regulations.

Health care legislations in India: Legal aspect of health care, MTP Act, biomedical waste Rules, COPRA Act, PNDT Act, Transplantation of human organs Act, etc

Field visits to public health facilities (Sub-Health Centre/Primary Health Centre/Community

ESSENTIAL READINGS:

1. Lassey M, Lassey W, and Jinks, M. (1997). Health Care Systems around the World: Characteristics, Issues and Reforms. Prentice-Hall, Inc.
2. Bodenheimer, Thomas S., Kevin Grumbach. *Understanding Health Policy*
3. Fort, Meredith, Mary Anne Mercer and Oscar Gish (Editors). *Sickness and Wealth: The Corporate Assault on Global Health*
4. Govt. of India (2017) - National Health Policy-2017, Ministry of Health and Family Welfare, New Delhi.
5. Peters, et.al (2002), Better Health System for India's poor: Findings, Analysis and Options: The World bank, New Delhi
6. Abel-Smith, Brian. An introduction to health: policy, planning and financing. Routledge, 2018. Murray, Christopher JL, and Julio Frenk. "A framework for assessing the performance of health systems." Bulletin of the World Health Organization 78 (2000): 717-731.

SUGGESTED READINGS

1. Bhore, J. (1946). Report of the health survey and development committee (Vol. 1-4). Manager of Publications.
2. Reddy, K.S. et.al (2011)" Towards achievement of universal health care in India by 2020: A Call of Action", www.thelancet.com
3. Banerjee, D. (1982), Poverty, class and Health Culture in India, Vol. 1 Parichh Prakashan, New Delhi.
4. Indian Council of Social Science Research and Indian Council of Medical Research (1981), Health for All by 2000 A. D., ICSSR, Delhi.
5. Madan, T.N. (1969), "Who Chooses Modern Medicine and Why", Economic and Political Weekly, pp. 1475-84.
6. K. Sujatha Rao, (2017), Do We Care: India's Health System, Oxford University Press, ISBN10 : 9780199469543, 478 pages

BIostatISTICS & EPIDEMIOLOGY

Course Outcomes:

- CO1: To introduce the basic concepts of different streams of epidemiology, disease risks, and interventions as public health tools in population studies.
- CO2: To introduce the study designs and methodology in cross-sectional, case-control, cohort, and experimental data to analyse epidemiological patterns.
- CO3: To understand the use of summary measures of disease burden over epidemiological data in population science.
- CO4: To understand comparability of estimates obtained from various parametric and non-parametric models.
- CO5: To appreciate the relevance of epidemiology in public policy making.

I. Basic concepts in Biostatistics

Biostatistics Measuring the occurrence of disease: Measures of morbidity - prevalence and incidence rate, association between prevalence and incidence, uses of prevalence and incidence, problems with incidence and prevalence measurements; Clinical agreement: kappa statistics, Mantel-Haenszel test; intra-class correlation; Surveillance

Assessing the validity and reliability of diagnostic and screening test: Validity of screening test – sensitivity, specificity, positive predictive value and negative predictive value; Reliability; Relationship between validity and reliability; ROC curve and its applications; Overall accuracy

Issues in epidemiology: Association; causation; causal inference; Errors and bias; Confounding; Controlling confounding; Measurement of interactions; Generalizability

Estimating risk: Estimating association – absolute risk, relative risk, odds ratio; Estimating potential for prevention – attributable risk; comparison of relative risk and attributable risk; Odds ratios for retrospective studies; Odds ratios approximating the prospective RR; Exact inference for odds ratio analysis of matched case-control data

Statistical process control: special and common causes of variation, Shewhart, CUSUM and EWMA charts

II. Basic Concepts in Epidemiology

Introduction: Definition and objectives of epidemiology; Epidemiology and clinical practice; The epidemiologic approach; Infectious disease epidemiology, occupational epidemiology, disaster epidemiology

The dynamics of disease transmission: Modes of transmission; epidemic, endemic and pandemic; Disease outbreak; Determinants of disease outbreak; Herd immunity; incubation period; outbreak investigation; epidemiological models. Design and analysis of field trials; introduction of

significance

Identifying the roles of genetic and environmental factors in disease causation: Association with known genetic diseases; Age at onset; Family studies; Interaction of genetic and environmental factors.

Epidemiology and public policy: Epidemiology and prevention; Population versus high-risk approaches to prevention; epidemiology and clinical medicine; Risk assessment; Meta Analysis. Epidemiological Study Designs: Ecological, Cross-Sectional, Case-Control, Cohort Studies, Randomized Intervention Studies.

Experimental epidemiology; Randomized trials; Clinical Trials- Basic concepts;

Definitions; Historical perspectives, Phase I, II, III and IV trials, Protocol development, Use of control arms, Concepts of randomization and blinding, ethical issues

III. Measurement of Health & Disease Burden

Measuring the occurrence of disease: Measures of morbidity - prevalence and incidence rate, association between prevalence and incidence, uses of prevalence and incidence, problems with incidence and prevalence measurements; Surveillance; Quality of life including DALY, HALE, etc., Measures of mortality.

Assessing the validity and reliability of diagnostic and screening test: Validity of screening test – sensitivity, specificity, positive predictive value and negative predictive value; Reliability; Relationship between validity and reliability; ROC curve and its applications; Overall accuracy. Issues in epidemiology: Association; causation; causal inference; Errors and bias; Confounding; Controlling confounding; Measurement of interactions; Generalizability.

Estimating risk: Estimating association – absolute risk, relative risk, odds ratio; Estimating potential for prevention – attributable risk; comparison of relative risk and attributable risk; Odds ratios for retrospective studies; Odds ratios approximating the prospective RR; Exact inference for odds ratio analysis of matched case-control data.

ESSENTIAL READINGS:

1. Gordis L: Epidemiology, ed. 5. Philadelphia, 2014. Elsevier Saunders; ISBN: 978-1-4557-3733-8
2. Bonita R, Beaglehole R, Kjellstrom T: Basic Epidemiology, ed. 2. World Health Organization, 2006.
3. Friedman L M, Furberg C D, DeMets D L: Fundamentals of Clinical Trials. Boston, PSG, 1982.
4. MacMahon B, Pugh T F: Epidemiology: Principles and Methods. Boston, Little Brown, 1970.
5. Altman D G: Practical Statistics for Medical Research, London: Chapman and Hall, 2006.
6. Bhore, J. (1946). Report of the health survey and development committee (Vol. 1-4). Manager of Publications.

SUGGESTED READINGS:

1. Lee E T: Statistical Methods for Survival Data Analysis, ed. 2. New York, John Wiley & Sons.
2. Goldstein H: Multilevel Statistical Model. London, Institute of Education, 1999.
3. Everitt B S, Pickles A: Statistical Aspects of the Design and Analysis of Clinical Trials, ed. 2. London, Imperial College Press.
4. Kutner MH, Nachtsheim CJ, Neter J, Li W: Applied Linear Statistical Models. 5th edition, McGraw-Hill/Irwin, 2005.
5. Gelman A, Carlin JB, Stern HS, Rubin DB, Dunson DB, Vehtari A: Bayesian Data Analysis, 3rd ed. Chapman and Hall, 2013.

7. Groeneboom P: Nonparametric Estimation under Shape Constraints, Cambridge University Press; 1 edition, 2014.
8. Robin H. Lock, Patti Frazer Lock, Kari Lock Morgan, Eric F. Lock, Dennis F. Lock: Statistics: Unlocking the Power of Data, 1 edition, Wiley 2013
9. Kestenbaum, Brya: Epidemiology and Biostatistics, Springer, 2009.

CONCEPTS AND MEASURES OF GLOBAL HEALTH

Rationale: This paper introduces to the students the basic concepts of global health. This course emphasizes on understanding the global burden of disease and measuring population health. A key component of this course is to understand the determinants of health and health disparities. It will also provide student with a broad understanding of the relationship between environment and health. It also develops the understanding of the students about the health care delivery system, human resources for health, migration of human resources for health, etc. Finally, it introduces to students the issues related to policy and health. The topics that will be covered in the course are listed below:

1. Concept and introduction:

Concept of global health; importance to study global health, global variation in demographic, health and epidemiological transitions; linkages between globalization and health; linkages between global and local health; current challenges, emerging trends and priorities in global health; major patterns of distribution of disease in the world; sources of data on disease and disability.

2. Global burden of disease:

Concept of burden of disease; hypotheses related to burden of diseases - compression of morbidity, expansion of morbidity and dynamic equilibrium; measures of burden of disease at the population level - health expectancy and health gap; methods for estimating DFLE, HALE and DALY; how does the burden of disease and mortality vary by geography, age and gender? GBD 1990, 2010 and 2019 - changes and continuities.

3. Infectious Diseases, Non-Communicable Diseases (NCDs) and Nutrition:

Persistence of infectious diseases in developed and low- and middle-income countries; new and re-emerging infectious diseases across globe; difficulty in prevention, treatment, and rehabilitation from infectious diseases. Current and growing challenge of NCDs in developed and low- and middle-income countries; NCD's epidemiology in developed and low- and middle-income countries. Double burden of malnutrition and diseases in low- and middle-income countries; food security of undernutrition; short-term and long-term impact of undernutrition; nutrition transition.

4. Determinants of Health:

Factors responsible for variation in the global burden of disease - culture, race, ethnicity, education, socio-political establishment, economic development and economic inequality. Role of water, sanitation, indoor and outdoor air pollution, food security, migration, disaster (man-made, natural), conflicts and epidemics in explaining global health disparities.

5. Health care delivery systems:

Introduction to health systems; components of health system; financial models of health care; service delivery models; governments role in delivering health care; measurement of health system performance in developed and developing countries; role of WHO, World Bank, etc. in setting global and national health priorities

Essential readings

1. Skolnik, R. (2008). Essentials of global health, Jones and Bartlett: Sudbury, MA.
2. Fried LP, Bentley ME, Buekens P, Burke DS, Frenk JJ, Klag MJ et al. (2010). Global Health is Public Health. *Lancet* 375, 535 – 7.
3. Huynen M, Martins P, Hilderink HBM. (2005). The Health Impacts of Globalisation: A Conceptual Framework. *Globalization and Health* 1:14.
<http://www.globalizationandhealth.com/content/1/1/14>
4. Murray, C.J.L., Saloman, J.A., Mathers, C.D., Lopez, A.D. (2002). Summary measures of population health: concepts, ethics, measurement and applications, The World Health Organization: Geneva. Council on Foreign Relations. (2014). The Emerging Global Health Crisis. Non-Communicable Diseases in Low- and Middle-Income Countries. Independent Task Force Report No. 72.
https://www.cfr.org/sites/default/files/report_pdf/TFR72_NCDs.pdf
5. Fauci AS, Morens DM. (2012) The Perpetual Challenge of Infectious Diseases. *N Engl J Med* 366: 454 – 61.

Suggested readings

1. Hoffmann SJ. (2010). The Evolution, Etiology and Eventualities of the Global Health Security Regime. *Health Policy Plan* 25(6): 510-22. <https://www.ncbi.nlm.nih.gov/pubmed/20732860>
2. Murray, C.J.L., Saloman, J.A., Mathers, C. (2000). A critical examination of summary measures of population health, *Bulletin of the World Health Organization* 78(8): 981-994.
3. Dielman JL, Schneider MT, Haakenstad A, Singh L, Sadat N, Birger M, Reynolds A, Templin T, Hamavid H, Chapin A, Murray C. (2016) Development Assistance for Health: Past Trends, Associations, and the Future of International Financial Flows for Health. *Lancet* 387; 2536 – 44.
4. Murray, C.J.L., Frenk, J. (2000). A framework for assessing the performance of health systems, *Bulletin of the World Health Organization* 78(6): 717-731.
5. Mozaffarian D. (2017). Global Scourge of Cardiovascular Disease. Time for Health Care Systems Reform and Precision Population Health. *Journal of the American College of Cardiology* 70(1): 26 – 8.
6. Mills, A., Rasheed, F., Tollman, S. (2006). Strengthening health systems, In *Disease Control Priorities in Developing Countries* (2nd Edition), pages 87-102, New York: Oxford University Press.
7. Hsiao, W.C. (2003). What is a health system? Why should we care? Harvard School of Public Health Working Paper.
8. World Health Organization (2010). Key Components of a Well-Functioning Health System. http://www.who.int/healthsystems/publications/hss_key/en/
9. World Health Organization. (2017) Double Burden of Malnutrition. <http://www.who.int/nutrition/double-burden-malnutrition/en/>

OPERATIONS RESEARCH IN REPRODUCTIVE HEALTH

Course Outcomes:

CO1: To familiarize the concept of operation and intervention research in reproductive health and related fields.

CO2: To differentiate the operation research from other social science research.

CO3: To train students to identify research problems, design and methodology in operation research.

CO4: To familiarize the process of developing suitable indicators in keeping with the research design.

CO5: To develop a capacity to prepare proposal for operation research and its implementation.

1. Basic Concepts and Definition of OR

- (a) What is Operations Research
- (b) Focus, Objective and Characteristics of Operations Research
- (c) Types and Examples of Operations Research
- (d) Methods of Operations Research
- (e) Implementation Research and Its Linkages with OR

2. Role of Researchers and Managers

3. Components of OR proposal

4. Identification of Problem and Solution

- (a) Identification and Definition
- (b) Justification
- (c) Alternative Solution
- (d) Indicators- Outputs, Outcomes and Impacts

5. Causality (Randomize Experimental Design)

- (a) Pretest-Posttest Control Group Design
- (b) Posttest –only Control Group Design
- (c) Multiple Treatment Design

6. Design

- (a) Experimental Design: Pretest-posttest control group design; Posttest-only control group design; Multiple treatment designs
- (b) Quasi Experimental Design: Non-equivalent control group; Time series design; Separate sample pretest-posttest design;

(c) Non-Experimental Design: Posttest-only design; Pretest-posttest design; Static-group comparison

7. Inferential Research Statistics Accordingly Operations Research design

(a) (X², t, F)-tests

(b) Deciding Sample Size in case of Different Experimental Design

(c) Linking Different Design and Statistical Test

8. Study Design Exercises

9. Ethics in Operations Research

(a) International Perspectives: Research Ethics; Recognize Ethical Issues in Operation Research
Need of Ethical Standards in Operational Research; History and Foundation of Research Ethics;
Principles; Codes and Regulations: International Landscape; Ethics Review Committee:
Members, Roles

Submission a Proposal for Ethical Clearance

(b) ICMR Guidelines: Background; ICMR Code; Statement of General Principles; General
Ethical Issues

Responsible Conduct of Research (PCR); Ethical Review Procedures; Informed Consent
Process; Vulnerability

(c) Case Studies

10. Utilization and Dissemination, and Process Documentation

11. Critiques to OR proposal

ESSENTIAL READINGS:

1. Blumenfeld, S. (1985). *Operations research methods: A general approach in primary health care*. Primary Health Care Operations Research, Center for Human Services.
2. Fisher, A. A., Foreit, J. R., Laing, J. E., Stoeckel, J. E., & Townsend, J. (2002). Designing HIV/AIDS intervention studies: An operations research handbook.
3. Foreit, J. R., & Frejka, T. (1998). Family planning operations research: a book of readings.

SUGGESTED READINGS:

1. Gallo, G. (2004). Operations research and ethics: Responsibility, sharing and cooperation. *European Journal of Operational Research*, 153(2), 468-476.
2. Mathur, R., & Swaminathan, S. (2018). National ethical guidelines for biomedical & health research involving human participants, 2017: A commentary. *The Indian journal of medical research*, 148(3), 279.
3. Oliver, P. (2010). *The student's guide to research ethics*. McGraw-Hill Education (UK).
4. Ormerod, R. J., & Ulrich, W. (2013). Operational research and ethics: A literature review. *European journal of operational research*, 228(2), 291-307.
5. Sanmukhani, J., & Tripathi, C. B. (2011). Ethics in clinical research: The Indian perspective. *Indian journal of pharmaceutical sciences*, 73(2), 125.

MIGRATION AND URBANIZATION

Course Outcomes:

CO1: To make the students understand the basic concepts, definitions, sources of data etc. on migration and urbanization.

CO2: To develop a critical understanding on the various theories/models concerning migration and urbanisation.

CO3: To equip students on the measurement and estimation of level, trend and pattern of migration and urbanization.

CO4: To understand the trend and pattern of spatial distribution and its linkage with migration and urbanization.

CO5: To develop a critical understanding on the emerging migration and urban issues, government policies and programmes in the context of development.

I. SPATIAL DISTRIBUTION

- i. Pattern and factors affecting spatial distribution of population
- ii. Selected measures of concentration of population: Measures of concentration of population-Density, percentage distribution and dissimilarity index

II. MIGRATION Introduction and Concepts

i Concept of mobility and migration, types of migration, census definition of migrants and its limitations

Sources and quality of data : Census, NSSO, Migration surveys

Migration theories and models

- i. Ravenstein's Laws of Migration
- ii. Everett Lee's Theory of Migration
- iii. Mobility Field Theory
- iv. Todaro's Model of Rural-Urban Migration
- v. New Economics of Labour Migration
- vi. Transnationalism Theory of Migration

Internal Migration

- i Patterns and characteristics in developing countries with a special focus on India.
- ii Causes and consequences of internal migration: demographic, economic, social and political consequences at the individual, household and community level
- iii Policies related to internal migration

International migration

- ii. Patterns and types of international migration: Historical and recent trends, Indian Diaspora and people of Indian origin.
- iii. Causes and consequences of international migration: demographic, economic, social and political consequences at the individual, household and community level
- iv. Policies of international migration

Measures of Migration

- i Direct estimation of lifetime and inter-censal migration rates from census data

Indirect measures of net internal migration: Vital Statistics Method, National Growth Rate Method and Census and Life Table Survival Ratio methods

- i. Estimation of return migration
- ii. Methods of estimating international migration

Migration and health

Migrants' rights and Social entitlements

III Urbanization Definition and Concepts

- i. Definitional and conceptual problems and Data sources: Rural-Urban Fringe, Metropolis or Metropolitan Area, Conurbation, Metropolitan Region, Megalopolis, Metropolitan Hinterland, urban turnaround, sub-urbanization
- ii. Definition of urban and other associated urban concepts in Indian census; Urban size class structure

Measures

- i Degree and tempo of urbanization;
- ii Urban population growth and its components;
- iii Rank-Size rule and Primacy Index, Lorenz curve and Gini's concentration ratio

Theories

- i. Kingsley Davis model of urbanization process
- ii. Functional Classification of Urban Centres by Harris
- iii. The City-Region Relationship
- iv Theories and Models of urban planning, Concept of New Towns

Urbanization process

- i Current urbanization process in developed and developing countries with special focus on India,
- ii Major urbanization problems and policies

ESSENTIAL READINGS:

- 1. Cohen Robin (1996): Theories of Migration. The International Library of Studies on Migration

2. Eduardo Arriaga, (1975): “Selected Measures of Urbanization”, in Sydney Goldstein and David Sly (Eds.) Measures of Urbanization and Projections of Urban Population, IUSSP Belgium
3. Kingsley, Davis, (1972): World Urbanization, 1950-70, Vol. II, Analysis of Trends, Relationship and Development, Population Monograph Series 4 and 9, University of California, Berkeley
4. United Nations, (2019): *World Urbanization Prospects, The 2018 Revision*, New York.
5. United Nations, (1974): Methods of Measuring Internal Migration, Manual VI, UN, New York.

SUGGESTED READINGS:

1. Oberai, A.S. (1987): Migration, Urbanization and Development, International Labour Office, Geneva
2. Gavin Jones and Visaria, Pravin, (Eds.), 1997: Urbanization in large developing countries –China, Indonesia, Brazil and India, Clarendon Press, Oxford
3. International organization for Migration (2021), World Migration Report 2022, IOM, Geneva.
4. Shryock, Henry S. Jacob S. Siegel and Associate, (1980): The Methods and Materials of Demography Vol.1 U.S. Bureau of the Census, Washington D.C.
5. Todaro, Michael P. (1976), Internal Migration in Developing Countries, International Labour Office, Geneva
6. United Nations, (1979): “Trends and Characteristics of International Migration since 1950” Demographic Studies No. 64, UN, New York
7. United Nations, (1983): Determinants and Consequences of Population Trends, Vol 1, UN, New York, Chapter-V
8. Weeks, John R. (2015), Population: An Introduction to Concepts and Issues, Cengage Learning
9. Haas, H. d., Castles, S., & Miller, M. J. (2020). The age of migration: international population movements in the modern world. Sixth edition. New York, The Guilford Press

POPULATION, DEVELOPMENT AND ENVIRONMENT

CO1: To acquaint students on key concepts, indicators and composite indices of development

CO2: To familiarize students on various theories of population and development

CO3: To introduce pessimistic, optimistic and neutralistic views on population

CO4: To explain quantitative and qualitative aspects of human resources

CO5: To introduce the concepts of sustainable development, climate change and global warming

I. Concepts and Measures of Development

- i. Need to study population in the context of development; Concepts of economic growth and economic development – definition and indicators; Limitations of per capita income as an indicator of development; Emphasis on equality, Lorenz curve and Gini coefficient.
- ii. Economic determinants of development, non-economic determinants of development, and role of institutional factors in development.
- iii. *Approaches towards development:* Growth oriented approach and basic minimum need approach; Human centred development – welfare approach, investment in human capital, Physical Quality of Life Index (PQLI), Human Development Index (HDI), Gender Development Index (GDI); Concepts and measures of money metric and multidimensional poverty, Human Poverty Index (HPI) and Multidimensional Poverty Index (MPI).
- iv. Concepts of social development, social capital and social change.

II. Theories and Strategies of Development

- i. *Theories of development:* Big push theory, Rostow's stages of growth, Arthur Lewis's two-sector model, Liebenstein's critical minimum effort theory, Harrod-Domar model, and Solow's growth model.
- ii. *Strategies of development:* Millennium Development Goals (MDGs), achievements with special reference to India; Concept of sustainable development, Sustainable Development Goals (SDGs); Development strategies through the different five-year plans in India; Recent development strategy (NITI Aayog) in India.

III. Population and Development linkages

- *Views regarding relationship between population and development:* (i) Classical views: Malthus and Marx, concept of optimum population; (ii) population growth as obstacle to development, Coale and Hoover study, tragedy of commons, limits to growth study, Enke's investment model; (iii) population growth as conducive to development – views of Colin Clark, Ester Boserup and Julian Simon; and (iv) views of revisionists and need to study linkages between population change and development.
- Demographic transition theory, age structure transition, demographic dividends and population

growth. Divergent views regarding the relationship between population and development.

IV. Population and Resources

- i. *Natural resources*: classification of natural resources, renewable and non-renewable resources, resources scarcity and resource depletion.
- ii. *Capital resources*: effect of demographic factors on savings and investments, technology and development; importance of technology to improve the productivity of physical assets.
- iii. *Human resources - quantitative aspects*: concepts labour force, economically active population, unemployment, types of unemployment, disguised, seasonal frictional and chronic. Factors affecting demand and supply of labour, effect of population growth and development on structure of employment.
- iv. *Human resources – qualitative aspects*: factors influencing productivity of human beings need for investment in human capital, implications of population growth on food, sanitation, housing, employment, education and health and social security to improve the quality of human resources.
- v. Educational development, urbanization and exposure to mass media and their social consequences.

V. Population and Environment

- i. *Ecosystem*: Basic concepts, structure and functioning, energy and material flow, changes and challenges of ecosystem; simplification, eutrophication, pollution.
- ii. *Philosophical dimensions of the new environmentalism*: postmodernism, eco Marxism, deep ecology, social ecology and ecofeminism.
- iii. *Sustainable development and environment*: Role of environment in development – evolution, inclusion and progress; Brundtland Commission – Our Common Future; “5 Ps” that shape the SDGs: People, Planet, Prosperity, Peace, and Partnerships; UNGC Ten Principles; Linkages of SDGs with environment. Living planet index, Human foot print, IPAT model; environmental-Kuznetz curve;
- iv. *Environmental challenges*: Resource depletion and environment; pollution; poverty and environment; food, nutrition and environment; ecofeminism; solid waste; climate change and development; health and environmental challenges; occupational health.
- v. *UN conventions on environment and development*: Major world commissions from 1972 to Rio+20 and so on; UNFCCC and challenges in making policies on environment; Environmental policies and programmes in India.

ESSENTIAL READINGS:

1. Birdsall Nancy, Kelley Allen, & Sinding Steven (2001). *Population Matters: Demographic Change, Economic Growth and Poverty in the Developing World*, Oxford: Oxford University Press. Chapters 2, 4 and 5.
2. Ray, Debraj (1998): *Development Economics*. Delhi: Oxford University Press. Chapters 3 & 4.
3. Todaro, Michael P. (1981): *Economic Development in the Third world*. New York: Longman. Chapter 3.
4. UNDP (2022). *Human Development Report 2021-2022: Uncertain Times, Unsettled Lives*:

5. UN Environment (2019). *Global Environment Outlook – GEO-6: Healthy Planet, Healthy People*. Cambridge University Press.
6. World Commission on Environment and Development (1987). *Our Common Future*. London: Oxford University Press.

SUGGESTED READINGS:

1. Chary, S.N. & Vinod Vyasulu (eds). (2000). *Environmental Management: An Indian Perspective*. New Delhi: Macmillan India.
2. Coale A.J. and Hoover, E.M. (1958). *Population Growth and Economic Development in Low Income countries*. Princeton: Princeton University Press.
3. David Bloom, David Canning & Jaypee Sevilla, (2003): *The Demographic Dividend*. Sanata Monica: Rand Corporation. Chapter 2.
4. Irfan Habib, (2010), *Man and Environment: The Ecological History of India* (A Peoples History of India 36). New Delhi: Tulika Books.
5. Kapila, Ray and Uma Kapila (2001). *India's Economy in the Twenty First Century*. New Delhi: Academic Foundation. Chapters 1 to 5, 15, 16 & 21.
6. Leibenstein, H. (1963). *Economic Backwardness and Economic Growth*. New York: John Wiley. Chapter 8.
7. Lewis W.A. (1958). Economic Development with Unlimited Supplies of Labour. In A.N. Agarwala and P. Singh (eds.) *The Economics of Underdevelopment*. New York: Oxford University Press.
8. Morton Lippmann, Beverly S. Cohen, Richard B. Schlesinger, (2003). *Environmental Health Science: Recognition, Evaluation, and Control of Chemical and Physical Health Hazards*. Oxford: Oxford University press.
9. Solow, R.M. (1956). A contribution to the theory of economic growth, *Quarterly Journal of Economics*, 70: 65-94.
10. United Nations Development Programme (1990). *Human Development Report, 1990*. Delhi: Oxford University Press. Chapter 1.

GENDER AND REPRODUCTIVE HEALTH

Course Outcomes:

CO1: To sensitize students to basic gender concepts, gender equity, gender inequalities and gender differentials.

CO2: To explain to students about empowerment, feminist and gender theories.

CO3: To familiarize students with the reproductive health paradigm and right-based approach to reproduction and gender egalitarianism.

Learning objectives: This paper aims to teach students about gender issues related to population, development and reproductive health. The main goal is to build skills for students to understand and analyze evidence pertaining to the institutional context of gender and gender-based inequalities and linkages between population, development and health with gender. Further, it provides a non-clinical foundation in the main aspects of reproductive health: maternal care, obstetric health, gynaecological morbidities, RTI/ STI/HIV/AIDS, infertility, abortion, family planning, and adolescent and men.

I. Basic concepts and theories of gender

Definitions, Concepts and Terminologies: gender, third gender, unequal gender relations, gender equity, gender disparities, gender inequalities, gender mainstreaming, gender-sensitive planning and gender balance, Masculinity and femininity, importance of the study of gender issues in Population Studies.

II. Gender Inequalities and Linkages with Development

Sex ratio trends and patterns in India; Son Preference, Desired sex composition of children, child sex ratio, the sex ratio at birth and sex-selective abortion; Marriage, customs and practices, dowry and mohar system, age at marriage; Purdah system; female genital mutilation; land rights of women; education, skill development and gender; labour force participation, household activities and social reproduction; gender differentials in nutrition and health; access to health care; political representation, and female headship; valuation of women in the context of marriage, dowry and development; gender-based violence (GBV) and its implications on child, adult and elderly; media and gender.

III. Autonomy, Empowerment and Status

Concepts, definition and measurement; various indicators and frameworks; approaches: Functionalist, Marxist, Feminist, Behaviouralism; the process of empowerment; a paradigm shift in gender, development and empowerment: WID, WAD, GID, GAD, WED; policies and programmes related to empowerment.

IV. Reproduction physiology, Rights and Ethical issues

Evolution of ideas about reproductive health and rationale of RH approach, Components of RH

Customs and taboos related to menstruation & puberty, and pregnancy in different societies; Aspects of adolescent sexual and reproductive behaviours, the vulnerability of adolescent and their health needs. Role of reproductive health policies and programmes on health. Ethical values in RH services; information, liberty of choice.

V. Maternal, obstetric, gynaecological and contraceptive morbidity

Risk factors of maternal mortality and morbidity, Three delay model, Emergency obstetric care, Maternal near miss and obstetric fistula, Impact of cultural practices during pregnancy on women's health, Programmes, policies and strategies for safe motherhood. Behavioural and lifestyle factors of different reproductive morbidities, Issues related to RTIs/STIs, HIV infection, Issues related to menopause and socio-psychological health problems of menopausal women.

VI. Infertility and abortion

Methodological issues in measuring primary and secondary infertility; social, cultural, environmental and anatomical risk factors of infertility. Consequences of infertility on marital stability of couples, mental health and violence. Assisted Reproductive Technologies(ART) use and misuse; surrogacy; laws and acts regarding their use. Abortion data and its measurement, type of abortions, the association of abortion with untimed and unintended births, Unsafe abortion and its association with maternal death and infertility, Laws regarding abortion

ESSENTIAL READINGS:

1. Kamla Bhasin, Understanding Gender (1999): Kali for Women, India, 88 pages, 9788186706213 (ISBN10: 8186706216).
2. Rosemarie Tong, Tina Fernandes Botts (2018), Feminist Thought; A More Comprehensive Introduction, 5th edition, by Routledge, ISBN 9781138329522, 432 Pages
3. Andrea Parrot, Nina Cummings (2006), Forsaken Females: The Global Brutalization of Women, Rowman & Littlefield Publishers, ISBN-10 : 0742545792, 270 pages
4. Michael S. Kimmel, The Gendered Society (2000), Oxford University Press, USA, ISBN 9780195399028 (ISBN10: 0195399021), 472 pages.
5. Berer, M., (2000): Making Abortions Safe: A Matter of Good Public Health Policy and Practice, Bulletin, WHO, Vol. 78(5), pp. 590-592.
6. Starrs, A. (2015): A Lancet Commission on sexual and reproductive health and rights: going beyond the Sustainable Development Goals. The Lancet, Vol 386 September 19, 2015.

SUGGESTED READINGS:

1. Alan Guttmacher Institute, (2000): "Readings on induced abortion vol.1: Politics and policies- Articles from Family Planning Perspectives 1974-1999", The Alan Guttmacher Institute, New York.
2. Chhabra P. Maternal near miss: an indicator for maternal health and maternal care. Indian J Community Med. 2014 Jul;39(3):132-7. doi: 10.4103/0970-0218.137145. PMID: 25136152; PMCID: PMC4134527
3. Zampas, C. (2013) Legal and ethical standards for protecting women's human rights and the practice of conscientious objection in reproductive healthcare settings. International Journal of Gynecology & Obstetrics 123(Suppl 3): S63-S65.
4. Macaluso, M., et al. (2010) A public health focus on infertility prevention, detection, and management. Fertility and Sterility 93(1):16.e1-10.

5. Basu, Alaka M., (1992): Culture, The Status of Women and Demographic Behaviour, Oxford University, New York.
6. Ellsberg Mary and Heise Lori L. (2005) Researching violence against women: A practical guide for researchers and activists. WHO and Path, Washington D.C.
7. Gita Sen, Adreinne Germain and Lincoln C. Chen, (Eds.), (1994): Population Policies
8. Rutstein SO, Shah IH. Infecundity, infertility, and childlessness in developing countries. DHS Comparative Reports No.9. Calverton, MD: ORC Macro and Geneva: World Health Organization, 2004
9. Pachauri, S. (Eds. 1999): Implementing a Reproductive Health Agenda in India: The Beginning, New Delhi; Population Council.
10. Rozee G.V. and Sayeed Unisa (Editors) (2016) Assisted Reproductive Technologies in the Global South and North: Issues, Challenges and Future, Rutledge, London
11. Michael A. Koenig, Shireen Jejeebhoy (2008) Reproductive Health in India: New Evidence , Rawat Publications.
12. The Women, Gender and Development Edition 2, (2011) by Nalini Visvanathan (Editor), Lynn Duggan (Editor), Nan Wiegersma (Editor), Laurie Nisonoff (Editor), et al ; ZED Books, London.

POPULATION POLICIES AND PROGRAMME MANAGEMENT

Course Outcomes:

CO1: To have an understanding of population policy in pro-natalist and anti-natalist divide around the world.

CO2: To appreciate the role of United Nations and International population conferences, including ICPD, in evolving changes in designing and advocating population policies and programmes.

CO3: To critically evaluate the population policies and programmes of India since independence.

CO4: To understand the management and quality of care in health services and family planning programmes.

CO5: To learn the tools of evaluating family planning programmes and SWOT approach.

A. POPULATION POLICIES AND PROGRAMMES

Definition of Population Policy; principal features of a population policy; policies in the context of population growth, structure and distribution. Policy formulation: Policy indicators, justification of population policy, socio-cultural, political and ethical issues related to population policy and the mechanism of how government decisions influence family decisions.

Role of the United Nations, and other International agencies; World Population Conferences, Declarations and Plan of Action. Fertility influencing policies: pro-natalist policies, fertility control policies- direct and indirect. Policies and programmes for special groups: women and children.

Health influencing policies: historical perspective for policies and programmes in developing and developed countries.

India's health and family planning programmes: History of birth control movement, National Population Policies, National Health Policies, and National Health Mission.

B. POPULATION AND PROGRAMME MANAGEMENT

Strategic management approach, Targeting the people in need (Community Need Assessment); Client segmentation; and Unmet need approach.

Providing services; commercial distribution, community-based distribution (CBD) systems and social marketing.

Quality of Care: Definition, Importance and Framework of quality of care in family planning.

C. EVALUATION OF PROGRAMME

Evaluation of programmes: objective, types, framework and methodological issues and data

Management Information System (MIS); Role of HMIS in evaluation of the programmes.

Operation Research Techniques (ORT) in evaluation.

Economic evaluation of the programmes: Cost-benefit analysis, Cost-effective analysis, SWOT analysis

Fertility impact of Family planning programme: Bongaarts' model for estimating fertility impact.

ESSENTIAL READINGS:

1. Government of India (2000), *National Population Policy- 2000*, Ministry of Health and Family Welfare: New Delhi.
2. Government of India (2017), *National Health Policy- 2017*, Ministry of Health and Family Welfare: New Delhi.
3. Srinivasan, K. (2017), *Population Concerns in India: Shifting trends, policies, and programs*, Sage Publications: New Delhi.
4. United Nations (1995): *Report of the International Conference on Population and Development*, Cairo, 5-13 Sept, 1994

SUGGESTED READINGS:

1. Chrissie, P. and Selwyn S. T. Leger (1993): *Assessing Health Need Using Life Cycle Framework*, Open University, Buckingham.
2. Peabody, J.W.; Rahman, H. Omar; Gertlor, Paull, J.; Haan, Joyce (1999): *Policy and Health Implication for Development in Asia*, Cambridge University Press. Cambridge.
3. Peters, David H. Yazbeek Abdo S.; Sharma, Rashmi R.; Ramana G.N.V., (2002): *Better Health Care Systems in India*, World Bank, Washington D.C.
4. United Nations (1998): *National Population Policies*, Department of Economics and Social Affairs, New York.
5. Asia Development Bank (2006). *Impact Evaluation: Methodological and Operational Issues*. Economic Analysis and Operations Support Division. ADB, Manila.
6. Jain, A (ed.) *Do Population Policies Matter? Fertility and Politics in Egypt, India, Kenya and Mexico*, Population Council, New York
7. Visaria, L and R R Ved (2016): *India's family planning programme: Policies, practices and challenges*, Routledge, London.

STATISTICAL METHODS AND COMPUTER APPLICATIONS IN LARGE SCALE DATA

Course Outcome:

CO1: To have hands on experience on statistical packages like SPSS, STATA to facilitate handling of large-scale data sets.

CO2: To familiarize with the data management such as recoding, sorting, filtering, file merging and splitting using SPSS and STATA

CO3: To understand and learn the uses of univariate, bivariate and multivariate analysis using software packages

- i. Introduction to SPSS-facilities, creating database structure, data entry, specifying scales, validation of data entry, importing and exporting data. Data Manipulation – recoding creating new variable, sorting, filtering and selection of specific data, generating simple frequencies, use of syntax editor. Large scale data handling – (using NFHS, DLHS-RCH, NSSO) Merging, splitting data and formatting.
- ii. Correlation and regression analysis – interpretation and regression diagnostic test.
- iii. Multivariable analysis – concepts and interpretation of results of multiple regression, logistic regression, ANOVA, MCA with and without interaction. Survival analysis-cox regression test of proportionality and heterogeneity.
- iv. Introduction to STATA and R - generating, variables, commands and do file editor. Survey analysis – estimation of mean, proportion, design effect and probit analysis and standard non-parametric test.
- v. Concept of data hierarchy and multilevel analysis. Introduction to MLwiN, importing and formatting data. Illustration of 2 and 3 level analysis using NFHS, DLHS-RCH, NSSO data.

ESSENTIAL READINGS:

1. *SPSS 14.0 Brief Guide* – SPSS Inc.
2. *SPSS regression models 11.0* - SPSS Inc.
3. *SPSS advanced models 11.0* - SPSS Inc.
4. *Stata user's guide: Release 8*, 2nd Edition. Stata Press.
5. *Stata programming reference manual: Release 8*, 2nd Edition. Stata Press.
6. *Stata survey data reference manual: Release 8*, 2nd Edition. Stata Press.
7. Snijders, Tom A.B. and Bosker, Roel J., (1999): *Multilevel analysis: An introduction to basic and advanced multilevel modeling*. Sage Publications.
8. Cromley, Ellen K. and McLafferty, Sara L., (2002): *GIS and public health*. Guilford Press, New York.

POPULATION PROJECTIONS

Course Outcomes:

CO1: To train the students in mathematical and component methods of population projections.

CO 2: To develop the skills to use different demographic packages of projection of population, households, urban-rural, education, and employment for programs and policymaking.

Population Estimates and Projections

Concepts of population projections: population estimates, forecasts, and projections; uses of population projections.

Methods of interpolation and extrapolation: linear, exponential, polynomial, logistics, and Gompertz curves. Intercensal and post-censal estimates. Regression method of projection for behavioural event. ARIMA.

Cohort component method: basic methodology; projection of mortality, fertility, and migration components; population projections of United Nations and Office of the Registrar General of India. Use of SPECTRUM and its applications.

Methods of rural-urban and sub-national population projections: ratio method, apportionment (Water) method, urban-rural growth difference method, and concept of fraking.

Methods of related socio-economic projections: labour force, school-enrolment, and households. Projection of Future Health Needs: Like ambulatory services, sanitary napkins, old age nest/home, health personnel, nursing staff (hospital and home-based), counselors etc. SPECTRUM software.

ESSENTIAL READINGS:

1. United Nations (1974): *Methods for Projections of Urban and Rural Population: Manual VIII*. Population Studies, No. 55. New York: Department of Economic and Social Affairs. Chapters 3 & 4.
2. United Nations (1955). Manuals on methods of estimating populations: Manual II – Methods of Appraisal of Quality of Basic Data for Population Estimates. Department of Economics and Social Affairs, New York. Chapter 1, 2, 3
3. United Nations, (1955): Methods of Appraisal of Quality of Basic Data for Population Estimates, Manual II. New York: United Nations. Chapter 1 & 3.
4. Pathak, K.B. and F. Ram (1998): *Techniques of Demographic Analysis*, Himalaya Publishing House, Second Edition, Mumbai.
5. Seigel Jacob S. and David A. Swanson (eds.) (2004): *The Methods and Materials of Demography*. 2nd Edition, New York: Elsevier Academic Press. Chapters 20 & 21.
6. Srinivasan, K. (1998), *Basic Demographic Techniques and Applications*. London: Sage Publications.

SUGGESTED READINGS:

1. EL. Badry, M.A., (1961): "Failure of Enumerators to make Entries of Zero", Errors in Recording Childless Cases in Population Censuses, *Journal of American Statistical Association* Vol. 56.
2. Potter, R.G. and Kulkarni, P.M. (1977): Population Momentum: A Wider Definition, *Population Studies* Vol. 40 pp. 555-56.
3. Preston, Samuel H., and Subrata Lahiri (1991): "A Short-cut Method for Estimating Death Registration

4. Rele, J. R., (1987), "Fertility Levels and Trends in India, 1951-81", *Population and Development Review* Vol. 13 (2). Academic Press, New York.
5. Mishra, B.D. (1981): An Introduction to the Study of Population, New Delhi: South Asian Publishers, Pvt. Ltd. New Delhi.
6. K. Srinivasan. Training Manual on Demographic Techniques. Census of India and United Nations Population Fund, India. Chapter 4, 10
7. Jeremiah P. Banda (2003). Non-sampling errors in surveys. UNITED NATIONS SECRETARIAT ESA/STAT/AC.93/7. Statistics Division 03 November 2003
8. Census of India (2011). Report on Post Enumeration Survey, 2011. Registrar General & Census Commissioner.
9. Kim, Young J., Schoen, R. & Sarma, P.S.(1991) : Momentum and The Growth-Free Segment of Population, *Demography*, Vol.28, No.1 pp. 159-173.
10. Potter, R.G. and Kulkarni, P.M. (1977): Population Momentum: A Wider Definition, *Population Studies* Vol. 40 pp. 555-56.

DEMOGRAPHIC ESTIMATION TECHNIQUES AND MODELS

Course Outcomes:

CO1: To familiarize students with the indirect techniques of estimating demographic components under the limited circumstance of data availability.

CO2: To familiarise students with demographic models to understand the population issues and evaluate the observed demographic rates and ratios.

Demographic Models

Concepts of Demographic Models:

Stationary, Stable and Generalized Population; Momentum of Population Growth; Concept of Multiregional Model; and Micro Model such as Birth Interval, Waiting Time (Birth Distribution etc., Estimation of fecundability?)

Indirect methods for estimating fertility:

Needs for Indirect methods; Concept of Reverse Survival Method, Robust Method and method based on Generalized Population Model; Rele's Method; Concept of P/F ratio method and its modification [Hypothetical Cohort methods] Completeness of Death Registration by Lopez applications of MORTPAK in estimating age specific fertility rate (ASFR) and total fertility rate (TFR).

Indirect Method of Estimating Mortality:

Indirect Methods of Estimating Infant and Child Mortality

(a) Basic concepts, fundamental assumptions and underlying principles to the technique proposed by Brass based on retrospective data on children ever-born and surviving mothers classified by current age of mother; applications of MORTPAK in estimating infant and child mortality.

(b) Modifications proposed by Sullivan and subsequently by Trussell over Brass method; and (c) the UN revised and extended version of Trussell's method.

Methods of Estimating Adult (including Maternal Mortality) and Old Age Mortality

(i) Methods of estimating adult mortality using successive census age-distributions; (ii) Methods of estimating life expectancies at older ages; and (iii) Estimation of maternal mortality through sisterhood method.

Indirect Methods for Estimating Death Registration Completeness for Countries Having Limited and Defective Vital Registration Data

An overview of some selected methods of estimating completeness of death registration, starting from Brass growth balance method and its subsequent development.

ESSENTIAL READINGS:

1. United Nations (1983): *Indirect Techniques for Demographic Estimations*, Manual X, Population Studies No.81, Department International Economic and Social Affairs, (ST/ESA/SER.A/81).
2. Preston, Samuel H. Patrick, Heuveline and Michel Guillot, 2003, *Demography: Measuring and Modeling Population Processes*, Blackwell Publishers, 2001 (First Indian Reprint 2003).
3. United Nations (1955). Manuals on methods of estimating populations: Manual III – Methods of Population Projections by Age and Sex. Department of Economics and Social Affairs, New York. Chapter 2.
4. Navaneetham Kannan and George Groenewold, (1998): *The Projection of Populations: Data Appraisal, Basic*

SUGGESTED READINGS:

1. Bhat P.N.M, (2002): General growth balance method: A reformulation for population open to migration, *Population Studies*, 56 (2002), 23-34, Printed in Great Britain.
2. Preston, Samuel H., and Subrata Lahiri (1991): "A Short-cut Method for Estimating Death Registration Completeness in Destabilized Populations", *Mathematical Population Studies*, 3(1):39- 51.
3. Rele, J. R., (1987), "Fertility Levels and Trends in India, 1951-81", *Population and Development Review* Vol. 13 (2). Academic Press, New York.
4. Srinivasan, K. (1998), *Basic Demographic Techniques and Applications*. London: Sage Publications.
5. Government of India (2019): *Population Projections for India and States, 2011-2036*. New Delhi: NCP, MoHFW.
6. Field, J.L. (1990) Past projections: How successful? In *Population Projections: Trends, Methods and Uses*, Liverpool, 12-14 sept. 1990. Occasional paper 38. Office of Population Censuses and Surveys, pp. 23-29.
7. Shaw, C. (2007). Fifty years of United Kingdom national population projections: how accurate have they been? *Population Trends* 128: 8-23. Available at www.ons.gov.uk/ons/rel/population-trends-rd/population-trends/no-128--summer-2007/fifty-years-of-united-kingdom-national-population-projections--how-accurate-have-they-been-.pdf
8. Moultrie, Tom, Rob Dorrington, Allan Hill, Kenneth Hill, Ian Timæus and Basia Zaba, (2013) Tools for
9. Demographic Estimation. International Union for the Scientific Study of Population (IUSSP)
10. Office of the Registrar General of India, Government of India (2020): *Population Projections for India and States, 2011-2036*. Report of the Technical Group on Population Projection. National Commission on Population and Ministry of Health & Family Welfare, Government of India. New Delhi

URBANIZATION, SPACE AND PLANNING

Course Outcomes:

CO1: Developing a comprehensive understanding on concepts of space, place and region.

CO2: Understanding the history of urban planning and its illustration in Indian context.

CO3: Acquainting students with theories of regional development and various strategies of regional planning.

CO4: Developing a critical understanding on urban policies and programmes in India

CO5: Providing students a practical knowledge of Geographical Information Systems and its utility in regional and urban planning.

I. Urbanization and Space

Urbanization and space: Definitions and concepts of urban areas & urbanization. Concepts and forms of formal and informal spaces; Differences between space, place and region; urbanization and space interaction: gravity model, distance decay model, forces of concentration and dispersion, urban agglomeration and spatial economy; Access and right to the city.

II. Evolution of Spaces of Settlements

Settlement: evolution, characteristics and factors; settlement pattern and hierarchy; Urban morphology; Change in urban land use and population density; Rural-urban relationship: dichotomy or continuum; Role of urban centres in rural development.

III. Urban and Regional Planning

Definitions, concepts, purpose, types and levels; geography/demography and planning relationship. Region: concept and definition, types (formal, functional and planning); Need for regional planning; Types of regional planning; Spatial structure of regions, Climate resilience,

Theories of regional development: Stages of development, economic base theory, Industrial location theory, Growth Pole theory; Core-periphery interactions.

Regional planning in India; Planning regions in India; Regional disparity in development; causes and consequences, North-Eastern regional council, Mumbai Metropolitan Regional Development Plan.

Concepts; history and origins of urban planning; pioneers of urban planning; types of urban plans: New towns, neighborhood, garden city, green belts; healthy urban planning, WHO concept of healthy city, livable city, sustainable city.

Urban policy since independence, important urban plans (New Delhi, Navi Mumbai, Chandigarh, Gandhinagar, Bhubaneswar); Smart Cities Mission; HRIDAY, AMRUT, PURA,

IV. Challenges in Urban planning

Recent urban policies and programmes; Urban redevelopment; Urban poverty, urban housing and real estate, Slums and slum rehabilitation; Urban pollution, Solid waste management; Management of migrants; Case studies of rehabilitation programs (SRA)

V. Remote Sensing, GIS and Urban and Regional Planning

Application of Remote Sensing and GIS in urban and regional planning.

ESSENTIAL READINGS:

1. Friedman, John and William Alonso (1964) *Regional Development and Planning: A Reader*, The MIT Press, Massachusetts.
2. Friedman, John (1966) *Regional Development Policy: A Case Study of Venezuela*, MIT Press, Massachusetts.
3. Chaudhuri, J. R. (2001) *An Introduction to Development and Regional Planning*, Orient Longman, Hyderabad.
4. Chand, M and V.K. Puri, (1983), *Regional Planning in India*, Allied Publishers Private Ltd, New Delhi
5. Mishra, R.P, (1992), *Regional planning: Concepts, Techniques, Policies and Case studies*, Concept Publishing Co., New Delhi

SUGGESTED READINGS:

1. Bhagat, R. B., Roy, Archana K. and Sahoo, Harihar. (2020). *Migration and Urban Transition in India: A Development Perspective*. Routledge India, New Delhi.
2. Kumar, A. and Bhagat, R. B. (2021). *Migrants, Mobility and Citizenship in India*. Routledge India, New Delhi.
3. Hall, P, (1992), *Urban and Regional Planning*, Third Editions, Routledge, London.
4. Harvey, D. (2012) *Rebel Cities: From the Right to the City to the Urban Revolution*, Verso, London
5. Leong, Goh C. and G.C. Morgan, (1982), *Human and Economic Geography*, Oxford University Press, Singapore.
6. Lo, C.P. and Yeung, A. K. W. (2002): *Concepts and Techniques of Geographic Information Systems*. Prentice Hall of India, New Delhi.
7. Nyerges, Timothy L. and, Jankowski Piotr (2010): *Regional and Urban Gis: A Decision Support Approach*, Rawat Publication, Jaipur.
8. Kawashima, T and P. Korcelli, (1982), *Human Settlement Systems: Spatial Patterns and Trend*, IIASA, Luxemburg.
9. Sarin, M, (1982), *Urban Planning in the Third World: The Chandigarh Experience*, Manshell, London.
10. MMRDA (2016), *Mumbai Metroplitan Regional Development Plan 2016-2036* MMRDA, Mumbai.
11. UNEP and others (2007), *Livable Cities: The benefits of environmental planning*, The Cities Alliance, Washington. <http://www.citiesalliance.org/idex.html>

OCCUPATIONAL HEALTH

Course Outcomes:

CO1: To familiarize students with occupational health risks/ hazards and their demographic implications.

CO2: To train the students in basic concepts, theories, measurements and data sources of occupational health risks/hazards.

CO3: To acquaint students with various types of contemporary hazardous occupations throughout the world.

CO4: To develop in-depth understanding of intersectionality of occupation, health and demography in low and middle-income countries.

CO5: To develop critical thinking among students of social welfare policies and laws/ legislations/ acts for workers in India.

Teaching Strategy: Classroom teaching, seminars, case studies, group exercises and field visits.

I. Introduction of Occupational Health and Demography:

Definition, basic concepts, the scope of occupational health and importance in demography; Difference between occupational health risks and hazards; Historical development of occupational health, the intersectionality of occupational health, socioeconomic characteristics, and demography; Pre and Post industrialization theories on occupational health risks and hazards; Decent work; Women's health and safety.

II. Morbidity and Mortality:

Health Well-being of Workers; Occupation-related Morbidity, Health Disorders, Different types of Disabilities, and Mortality; Mental Health.

III. Types and Measurements of Occupational Health Risks:

Occupational disciplines and related risks - Mechanical, Chemical, Biological, Physical, Psychological, Medical, Ergonomic, and Work organization hazards/risks (Hazards or stressors that cause stress (short- term effects) and strain (long-term effects)); Measurements of occupational health safety, risks and hazards; Health impact assessment, Mental health assessment scale, Musculoskeletal disorder scale, American Thoracic Society and the Division of Lung Diseases (ATS-DLD-78), Occupational Stress Index (OSI), Job Strain Model, etc.

IV. Data Sources of Occupational Health:

International and National Data Sources of Occupational Health - Population Census, Services Statistics, Large - and Small-Scale Sample Surveys etc. Data limitations in the area of occupational health.

V. Legislation, Social and Welfare Policies:

Sustainable Development Goals - (Decent work), International Labour Organization (ILO) Declaration on Fundamental Principles and Rights at Work; International Labour Standards on Occupational Safety and Health, Wages and Working time; ILO - Occupational Safety and Health Convention, Health and Safety Acts; The Occupational Safety, Health and Working Conditions Code, 2020 etc. Child Labour and Health

VI. Occupational Health in India:

History of Occupational Health in India (types of occupations, work environment and working conditions); Health behavioral risks and hazards; Evolution of labour unions; and Contemporary occupational health challenges of workers in India. Social and Welfare legal provisions and acts in India; Hazardous Waste Management Rules – 2000, Constitutional Rights, Wage Regulations (Minimum Wage Act), Factory Act – 1948, Employees' State Insurance Act, 1948 (ESI Act), Workmen Compensation Act – 1960, Employee Provident Act – 1952, Labour Welfare Measures, Retirement Benefits/National Pension Scheme – 2004, Social Welfare Schemes and Programmes.

ESSENTIAL READINGS:

1. Benjamin O. Alli, (2008), Fundamental Principles of Occupational Health and Safety, Second Edition, International Labour Office, Geneva: ILO, Pages:1 – 221
2. Government of India, National Policy on Safety, Health and Environment at Work Place, Ministry of Labour and Employment, <https://labour.gov.in/policies/safety-health-and-environment-work-place>.
3. Government of India, Ministry of Rural Development, (2015), Occupational Health & Safety, Environmental Issues and Decent Work-Module-8, New Delhi. Pages: 1 -32.
4. Occupational safety and health in public health emergencies: A manual for protecting health workers and responders: Geneva: World Health Organization and the International Labour Office, 2018. Licence : CC BY-NC-SA 3.0 IGO.
5. Dianne E. G. Dyck, 2020, Occupational Health & Safety: Theory, Strategy & Industry Practice, 4th Edition, ISBN/ISSN: 9780433502074.

SUGGESTED READINGS:

1. Government of India, Report of the Working Group on Occupational Safety and Health for the Twelfth Five Year Plan (2012 To 2017), Ministry of Labour And Employment, New Delhi, Pages 1- 145.
2. Hyde, Martin, Singh Chungkham, Holendro, (2017), Work and Health in India, Policy Press, ISBN:9781447335436, 1447335430
3. Page count:280
4. M. Timothy McAdams, Jeffrey J. Kerwin, Vanessa Olivo, Huseyin A. Goksel, (2011), National Assessment of the Occupational Safety and Health Workforce, 200-2000-08017, Task Order 18, Pages 1 - 246.
5. Gautam Bhan, Antara Rai Chowdhury, Rashee Mehra, (2021), State of occupational safety and health practices at workplace for domestic workers in COVID-19 and possibilities for action, International Labour Organization, Geneva, ISBN: 9789220350768 (Print). Pages 1 - 36.
6. Jacques Tamin, (2020), Occupational Health Ethics: From Theory to Practice, Springer Cham, Hardcover ISBN 978-3-030-47282-5, <https://doi.org/10.1007/978-3-030-47283-2>
7. International Labour Conference, (2003), Global Strategy on Occupational Safety and Health, International Labour Organization: ISBN 92-2-116287-7 (print version), Geneva, Pages – 1 – 20.
8. Global Strategy on Occupational Health for All: The Way to Health at Work (1994), WHO Collaborating Centres in Occupational Health, WHO/OCH/95.1, GENEVA, Pages: 1 -72.
9. World Health Organization (WHO) - Regional Office for the Eastern Mediterranean (2001), Occupational health: A manual for primary health care workers, Cairo, WHO-EM/OCH/85/E/L, pages – 1-168.

MONITORING AND EVALUATION IN POPULATION & HEALTH

Course Outcomes:

CO1: Familiarize the students with concepts and methods of monitoring and evaluation research.

CO2: To acquaint with various designs employed in monitoring and evaluation.

CO3: Develop skills on statistical approaches for implementation programmes.

CO4: Orient students on health management information system.

I. Introduction to Monitoring and Evaluation: Basic concepts, Difference between Monitoring and Evaluation; Linkage between Planning, Monitoring and Evaluation; Importance of Monitoring and Evaluation

II. Monitoring and Evaluation Framework: Resources for monitoring and evaluation, Engagement of stakeholders in monitoring and evaluation; Meaning of Indicators, Ideal requirement, process of developing indicator, illustration of indicators developed from large scale surveys, measurement, need & levels of indicator; Challenges in developing indicators from Large-Scale Surveys; Types of Indicators – Input, Process, Output, Outcome, Impact; Learning and accountability of Monitoring and evaluation data

III. Monitoring of Policy Implementation: Components of policy and programme, budget, staff, process of evaluation, developing tangible indicators for policy monitoring in terms of Input, Process, Output, Outcome, Impact; Result based inference

IV. Evaluation in Theory: Principles, norms and standards for evaluation; Criterion for evaluation; Theory of Change; Evaluating for results; Roles and responsibilities in evaluation; Scaling Impact

V. Evaluation Design: Determination of sample size under different approaches and design including measurement of change due to certain interventions; Quasi Experiment design, Case control design, Evaluation Terms of Reference, Formative and Summative Evaluations, Managing Evaluations; Evaluation at different points: Baseline, Mid-point, Concurrent and End line evaluation; Randomization, Statistical design of Randomization; Randomized control trials, time dependant cluster design, interrupted time series analysis.

VI. Assuring the Quality of Evaluation Design and Methodology: Overview; Defining the context; The evaluation purpose; Focusing the evaluation;

Evaluation methodology; Mandatory requirements for programme; SWOT analysis of NHM, ICDS and National Livelihood Mission; Social audit – meaning, objectives, advantage, case study of social audit

VII. Statistical Approaches of Evaluation of Intervention Programme: Statistical inferences used in different intervention design – z, t, F and paired ‘t’ tests, two stage LSM, instrument variable method; Propensity score matching; Difference in Difference Method: Theory and application, advantage and disadvantage, regression implementation, Decomposition analysis

VIII. Management Information System and Use of Technology: MIS – Monitoring information system; Role of programmers; HMIS system; Global Positioning System, Use of Machine learning and Artificial Intelligence, Use of spatial data

ESSENTIAL READINGS:

1. Casley, Dennis J and Kumar, Krishna (1988). *The Collection, Analysis, and Use of monitoring and Evaluation Data*. A World Bank Publication, The John Hopkins University Press
2. FHI (2004). *Introduction to Monitoring and Evaluation Monitoring and Evaluation, monitoring hiv/aids programs: A facilitator's training guide*. Family Health International
3. GoI & UNDP (2012). *Guiding Framework for Monitoring and Impact Evaluation of Capacity Building & Training of Panchayati Raj Institutions in States/UTs*. Government of India and United Nation's Development Programme
4. Rossi, Peter H.; Mark W. Lipsey and Howard E. Freeman (2004). *Evaluation, A Systematic Approach*. Seventh Edition. Sage Publications – New Delhi.
5. United nations development Group. *The Theory of Change, UNDAF Companion Guideline*.

SUGGESTED READINGS:

1. IFRC and RCS (2002). *Handbook for Monitoring and Evaluation*. International Federation of Red Cross and Red Crescent Societies –Geneva
2. McLean R. and Gargani J. (2019) *Scaling Impact Innovations for the Public Good*. Routledge, New York.
3. NIRD&PR; MoRD and TISS (2016). *Social Audit: A manual for Trainers*. National Institute of Rural Development & Panchayati Raj; Ministry of Rural Development and Tata Institute of Social Sciences
4. OECD (2021). *Applying Evaluation Criterion Thoughtfully*, OECD Publishing, Paris.
<https://doi.org/10.1787/543e84ed-en>.
5. Sullivan, T.M., Strachan, M., and Timmons, B.K. (2007). *Guide to Monitoring and Evaluating Health Information Products and Services*. Baltimore, Maryland: Center for Communication Programs, Johns Hopkins Bloomberg School of Public Health; Washington, D.C.: Constella Futures; Cambridge, Massachusetts: Management Sciences for Health, 2007.

HEALTH ECONOMICS AND FINANCING

Course Outcomes:

CO1: To introduce various concepts on economic gradient of health and demand for and supply of health care.

CO2: To explain various measures on socio-economic inequality in health.

CO3: To familiarize the means and measures of health financing.

CO4: To understand the determinants of health insurance and its coverage.

CO5: To introduce the methods and measures on economic evaluation of health care.

I: Introduction to Health Economics

Defining health economics, why health economics is important, basic concepts in microeconomics, health across world and over time, scope of health economics, map of health economics, basic questions confronted by health economist, concept of efficiency and equity in health, Production Possibility Frontier (PPF), economic gradient of health, causation of income and health, Preston Curve, economic models and analysis, expenditure function, Theories of X and Y, positive and normative economics.

II. The Demand for Health and Health care

What is Health and Good Health, Utility Analysis, Health as a form of human capital, What is Medical Care, The production of Good Health, Empirical evidences in the production of health, Health as human capital, Grossman Model, The Demand for Health Care, Demand function for health, Economic and non-economic factors of health care, Fuzzy Demand Curve, Price and income elasticity of demand for health care, Important consideration in estimating health care demand elasticity, provider's behavior, Empirical findings, externalities and market failure.

III. Health Financing

Health financing in low, middle and high income countries, demographic transition, epidemiological transition and health expenditure, disparity in disease burden and per-capita health spending, sources of health care in India, out-of-pocket expenditure on health care, catastrophic health expenditure, approaches in measuring catastrophic expenditure, impoverishment, health care payment and poverty, national and regional patterns of catastrophic health spending, determinants of catastrophic health spending, Drivers of health care expenditure, health financing in India, Equity in health care finances, Willingness to pay for health care, User charges as determinant of health financing

IV. Measuring Health Inequalities

Measurement of health inequality: A Prelude

Why measure health inequality; Health equity and inequality: Concept and definitions; Understanding of the concepts such as need, access and utilisation; cardinal and ordinal health variables

Black Report and Beyond: Historical Background of Black Report, Explanation for social class

Measures of health inequality: Measures of health inequality: Index based approach; Axiomatic approach to measurement; Individual-mean and inter-individual comparison; WHO Index, Coefficient of Variation, Generalised Entropy Index, Lorenz Curve and Gini Coefficient

Measuring socioeconomic rank related health inequality: Slope index of inequality; Relative index of inequality; Concentration curve and concentration index: various ways of computing; Standardization; Inequality aversion; Normalised and Generalised concentration index; Corrected concentration index

Measuring inequality in healthcare utilization: Horizontal inequality; Vertical inequality; Regression based approach; Measurement of horizontal inequalities; Group inequality, common measures, Gini type index

V. Medical Care, Production and Cost

The Short-Run Production Function of the Medical Firm, Total Product, Marginal Product and Average Product Curve, Law of diminishing marginal productivity, The importance of costing in Health Economics, Short-run cost theory of medical firm, short run cost curves, Cost analysis, Implicit and explicit cost, , factor affecting short-run cost curves, cost minimization, constraints in measuring health cost

VI. Health Insurance

Health care system, a model of health care system, defining health insurance, need for health insurance, type of health insurance, demand for private health services, factors affecting the quantity demanded of health insurances, moral hazards, deductibles, co-insurance, managed care, adverse selection, loading fees, employed based insurance, reimbursement, selection effect, intermediary agent, regulation of health insurance, Need for Government intervention, Trends of health insurance, Coverage of health insurance in India

VII. Economic Evaluation

What is economic evaluation? Cost analyses; direct cost, Indirect cost, tangible cost, capital cost, fixed cost, variable cost, Opportunity cost, average cost, marginal cost, Incremental cost, steps in cost analyses: Identification, measurement and valuation, Various types of economic evaluation used in health care: Cost effectiveness analysis (CEA) Cost-Benefit Analysis (CBA), Divergence between social and private costs and benefits in health care, Limitations of economic evaluation, Consumer Impact Assessment.

ESSENTIAL READINGS:

1. Rexford E. Snterre and Stephen P. Neun, Health Economics: Theories, Insights and Industry Studies, Thompson South – Western, 3rd Edition (614, San/Hea, 073226) Note: 4th Edition is out in 2007 (ISBN: 032432068X; ISBN13: 9780324320688)
2. Drummond MF, Sculpher MJ, Torrance GW, O'Brien B, Stoddart GL, eds. Methods for economic evaluation of health care programmes, Third Edition, Oxford University Press, 2005.
3. O'Donnell O, Doorslaer E v, Wagstaff A and Lindelow M. Analyzing Health Equity Using Household Survey Data (2008), AGuide to Techniques and Their Implementation
4. Xu K (2005). Distribution of health payments and catastrophic expenditures Methodology World Health Organization.

SUGGESTED READINGS

1. Culyer A J and J P Newhouse, 2000, The state and scope of health economics, Handbook of Health Economics, Volume 1A, Eds. Culyer and Newhouse, Elsevier, 2000.
2. Grossman (1982), On the concept of Health capital and Demand for Health, Journal of Political Economy, 80(2)
3. Macintyre S (1997). The Black Report and Beyond-What are the issues, Social Science, Medicine, 44(6):723-745
4. Mohanty, S. K., & Dwivedi, L. K. (2021). Addressing data and methodological limitations in estimating catastrophic health spending and impoverishment in India, 2004–18. International journal for equity in health, 20(1), 1-18.
5. Ringel et al (2005) The Elasticity of Demand for Health Care A Review of the Literature and Its Application to the Military Health System
6. Victoria Y Fan and William D. Savedoff (2014), “Health Financing transition: A conceptual framework and empirical evidences, Social Science Medicine, 105 (2014):112-121
7. Wagstaff A, P. Paci and E van Doorslaer (1991), On the measurement of inequalities in health, Social Science and Medicine 33(5), 545-557
8. Wagstaff, Adam & van Doorslaer, Eddy, 2000. "Chapter 34 Equity in health care finance and delivery," Handbook of Health Economics, in: A. J. Culyer & J. P. Newhouse (ed.), Handbook of Health Economics, edition 1, volume 1, chapter 34, pages 1803-1862 Elsevier

SPATIAL DEMOGRAPHY AND APPLICATION OF GIS

Course Outcomes:

CO1: Understanding the concept of space and develop spatial dynamics in demographic process.

CO2: Learning visualisation tools of demographic data and draw inferences.

CO3: Learning different Geo-Spatial software to facilitate spatial analytical methods in demographic research.

CO4: Learning Geographic Information System (GIS), spatial pattern analysis and spatial statistical techniques to explain a specific spatial pattern.

I. Concepts and Theories

Demography as a spatial science; difference between spatial demography and population geography; Spatial pattern and spatial process; location, distance and area; Distance and decay relationship and spatial hierarchy; space, place and region; Type of spaces- concrete and abstract space; absolute, relative and relational spaces.

Understanding demographic process by geographical scale; nature of disaggregated data- Census and secondary sources; Linking micro and macro demography in a spatial frame.

Application of spatial frameworks to demographic process; Space, culture and fertility; Spatial pattern of mortality and diseases; Distance as factor in access to health care and health planning; Migration and distance- gravity model; space, culture and migration; urban sprawl and sub-urbanization.

II. Statistical and Geospatial Data and Software

Spatial Concepts and Cartography: Spatial parameters: Site and location; Scale; Plane and spherical coordinate, Map Projection-UTM, Types of maps: cadastral, toposheet, thematic, digital; Representation of spatial and non-spatial data; **Introduction to geospatial software: GIS:** discrete data: point, and polygon data,

Raster and vector data, layouts preparation. Geocoding and basics of digitization in ArcGIS

Introduction to Geoda: ESDA in (Exploratory Spatial Data Analysis); Local Indicators of Spatial Association (LISA)

Statistical Concepts: Bar diagram, Frequency polygon, Frequency curve; Test of significance, confidence intervals, Univariate and Multivariate Statistics: Correlation and Regression, Matrix algebra; Auto-correlation; kriging, Moran's I index

Introduction to Statistical software: SPSS, STATA, R

III. GIS and Spatial Analysis of demographic data

Representation of statistical data and automated cartography (Lab based exercises):

- i. Population distribution map of India using dot and sphere/circle, cubes, combined; Cartograms
- ii. Density map by Choropleth and population density gradient by Isopleth;
- iii. Fertility, mortality and natural growth of population by Polygraph.
- iv. Measurement of population concentration by cumulative curve.
- v. Migration flow by Carogram

Concept and application Models:

- i. Spatial Lag and Error Regression Modeling;
- ii. Multilevel modeling (hierarchical linear modeling);
- iii. Geographically Weighted Regression;
- iv. Spatial Pattern Analysis;
- v. Urban and city level projection

ESSENTIAL READINGS:

1. Anselin, L. (2005). Exploring Spatial Data with GeoDa: A Workbook. UC Santa Barbara, CA: Center for Spatially Integrated Social Science. available on <http://geodacenter.asu.edu/>.
2. Bailey, T. and Gatrell, A. C. (1995): Interactive Spatial Data Analysis. Harlow, Longman.
3. Bonham, Carter G.F. (1995): Information Systems for Geoscientists–Modelling with GIS. Pergamon, Oxford.
4. Chen, X., Orum A.M., and Paulsen K.E. (2013). Introduction to Cities: How Place and Space shape Human Experience. West Sussex, Wiley-Blackwell.
5. Kurland K. S., Gorr W. L. (2007). GIS Tutorial for Health. Redlands, CA, ESRI Press.
6. Lo, C.P. and Yeung, A. K. W. (2002): Concepts and Techniques of Geographic Information Systems. New Delhi, Prentice Hall of India.

SUGGESTED READINGS:

1. Barbara E., Ronald R. R., Stephen J. W., Tom P. E. and Sara R. C. (1997). *Geographic Information Systems, Spatial Network Analysis, And Contraceptive Choice*. Demography. 34(2): 171-187.
2. de Castro M. C. (2007). *Spatial Demography: An Opportunity to Improve Policy Making at Diverse Decision Levels*. Population Research and Policy Review 26: 477-509.
3. Paul V. (2007). *Demography as a Spatial Social Science*. Population Research and Policy Review 26: 457-476. (plus Introduction to the special issue of PRPR on Spatial Demography) pp. 455-456).
4. Reibel, Michael, (2007). *Geographic Information Systems and Spatial Data Processing in Demography: A Review*. Population Research and Policy Review 26: 601-608.
5. Griffith, D. A. and Amrhein (1997): Multivariate Statistical Analysis for Geographers. Englewood Cliffs, New Jersey, Prentice Hall.
6. Robinson, A. H. H., Sale R., Morrison J. and Muehrcke, P. C (1984) Elements of Cartography. New York, John Wiley and Sons.
7. Chang, K. (2008). Introduction to Geographic Information Systems. New Delhi, McGraw Hill Education.
8. Shaw, G. and Wheeler, D. (1994). Statistical Techniques in Geographical Analysis. Englewood Cliffs, New Jersey, Prentice Hall.
9. Soja, E. W. (1996). Third space: Journeys to Los Angeles and Other Real-and Imagined Places. Wiley-Blackwell.
10. Dorling, D. and Fairborn, D. (1997): Mapping. Ways of Representing the World. Longman, Harlow.

LARGE-SCALE SAMPLE SURVEYS

Course Outcomes:

- CO1: To decide sample size for large-scale and its allocation at the states and districts level.
- CO2: To select rural and urban Primary Sampling Unit (PSU) from sampling frame such as – Census, NSS, or other frame.
- CO3: To implement stratified sampling for PSU selection.
- CO4: To conduct household mapping and listing for household selection.
- CO5: to devise the mechanism or develop a tool to monitor the large-scale household survey.
- CO6: To check the quality of household sample survey data to generate reliable estimate at the national, sub-national, global level.
- CO7: To assess the cognitive process of survey response.

Scope of large-scale surveys and sampling design: Need for large scale surveys; objectives of cross-sectional, longitudinal, rotational, and interpenetrating surveys; sample size determination and sample allocations for such surveys to districts, states and regions in terms of individuals, households and primary sampling units.

Sampling frames: Sources of sampling frame for cross-sectional, longitudinal, rotational and interpenetrating surveys; explicit and implicit stratifications; domain-controlled sampling by regions and social groups; merging and segmentation procedures for small and large primary sampling units; mapping and household listing for preparation of frame for last stage sampling units; sample selection of PSUs and households.

Quality assurance procedures: Revisit of sub-samples; field check tables; non-response pattern; roles of supervisors, editors, field and nodal agencies; third party audit.

Software development: Computer assisted personal interview (CAPI); process of data transfers; introduction to features of census and survey processing system (CSPRO); steps for development of data entry software in CSPRO.

Ethical considerations in large-scale sample surveys

Estimation of sampling weights

ESSENTIAL READINGS:

1. United Nations (2005): Household Sample Surveys in Developing and Transition Countries. www.unstats.un.org/unsd/hhsurveys/
2. CSPRO Software. www.census.gov/data/software/cspro.Download.htm
3. Roy, T.K., Acharya R., Roy, A.K. (2016). Statistical survey design and evaluating impact, Cambridge University Press, New Delhi.

SUGGESTED READINGS:

1. Kish, Leslie, (1995): Survey Sampling, John Wiley and Sons, Inc. New York.
2. Lohr L. Sharaon., (1999): Sampling: Design and Analysis, Duxbury Press, London
3. Ladusingh, L. (2018). Survey Sampling Methods, PHI Learning, New Delhi

Master of Population Studies (MPS)

Code	TITLE	Type	Credits	Hours	No. of Internal Exams	Weightage (%)	
						Internal Exam	Semester Exam
Semester I							
MPS F1	Basic Statistical Methods for Population Studies	F	NC	45	1	50	50
MPS F2	Social Science Concepts	F	NC	45	1	50	50
MPS C1	Demography and History of Population	C	2	90	2	40	60
MPS C2	Age-sex structure, Quality of Data & Population Dynamics	C	2	90	2	40	60
MPS C3	Nuptiality	C	2	90	2	40	60
MPS C4	Fertility	C	3	135	2	40	60
MPS C5	Mortality, Morbidity and Public Health	C	3	135	2	40	60
MPS C6	Research Methodology	C	3	135	2	50	50
MPS C7	Population Ageing and Health Transition	C	3	135	2	40	60
MPS E1	E1.1: Healthcare Systems and Policies E1.2: Biostatistics and Epidemiology	E	3	135	3	40	60
MPS E2	E2.1: Concepts and Measures of Global Health E2.2: Quantitative Research on Reproductive Health	E	3	135	3	40	60
VV-I	Viva-Voce Examination I	V	2	30			
	Semester credits		26	390			
Semester II							
MPS C8	Migration and Urbanization	C	3	135	3	40	60
MPS C9	Population, Development and Environment	C	3	135	3	40	60
MPS C10	Gender equity and Reproductive Health	C	3	135	3	40	60
MPS C11	Population Policies and Programme Evaluation	C	3	135	3	40	60
MPS C12	Statistical Methods and Computer Applications	C	2	90	2	50	50
MPS C13	Population Estimation and Projections	C	2	90	2	50	50
MPS C14	Demographic Estimation: Techniques and Models	C	2	90	2	50	50
MPS E3	E3.1: Urbanization: Space and Planning E3.2: Occupational Health E3.3: Monitoring and Evaluation in Population & Health	E	3	135	3	40	60
MPS E4	E4.1: Health Economics and Financing E4.2: Spatial Demography and Application of GIS E4.3: Large-scale Sample Surveys	E	3	135	3	40	60
MPS C15	Term paper	C	4	180			
VV-II	Viva-Voce Examination II	V	2	30			
	Semester credits		30	450			
Grand Total			56	840			

Notes:

Course type: F – Foundation course; C – Core course; E – Elective course; V – Viva voce; T – Term Paper.

NC: Non-credited foundation courses are not counted for calculating the final grade.

Core papers: Must for all students and cannot be changed.

Elective papers: One elective paper should be opted from a pair.

Internal Examination: Teachers are given the flexibility to decide mode of mode of internal examination from the following list: Written Test; Open Book Test; Written Home Assignment; Individual Thematic Presentation; Thematic Group Presentation; Group Discussion; Surprise Test; MCQ Test; Case Study; Situation Analysis (group activity or individual activity); Field Visit; Small Group Project & Internal Viva-Voce; Role Play / Story Telling; Literature Review / Book Review; Model Development/Simulation Exercises (Group Activity or Individual Activity); In-depth Viva; Quiz; etc.



Term Paper: Weights for evaluation of term paper: Guide: 0.25; Presentation & Defence: 0.25; and Content: 0.50.

Evaluation of Term Paper: The Director & Senior Professor appoints an evaluation committee for term paper consisting of three members from among the faculty of HPS. First, the committee members independently assess the 'oral presentation and defence' of the student and submit their grade to the Controller of Examinations. Second, the committee members independently evaluate the content of the 'final term paper' submitted by the student and submit their grades to the Controller of Examinations. The average of the evaluation is considered for the final grade of the term paper.

Best Term Paper Award: The Director & Sr. Professor appoints a committee consisting of three external experts for recommending the award of the best term paper. The term papers of top five ranks (based on the combined score of content, presentation and defence) are placed before the committee. The external members evaluate term paper and submit their recommendation in a sealed cover to the Controller of Examinations.

Viva voce: Director & Sr. Professor constitutes a committee comprising of one external examiner and three/four internal examiners for the viva-voce. The three/four internal examiners shall comprise of one senior professor (Chairperson), one/two faculty members and one programme co-ordinator. The committee members independently evaluate the performance of the students in the viva-voce and assign their grades. To arrive the final viva-voce grade, the average of the evaluation of the members is considered.

Evaluation of Term Paper: The Director & Senior Professor appoints an evaluation committee for ^{TP} ~~dissertation~~ consisting of three members from among the faculty of HPS. First, the committee members independently assess the 'oral presentation and defence' of the student and submit their grade to the Controller of Examinations. Second, the committee members independently evaluate the content of the 'final ~~dissertation~~' submitted by the student and submit their grades to the Controller of Examinations. To arrive the final term paper grade, the average of overall all grades of Guide, Presentation & Defence, and Content is considered.

Best Term Paper: The Director & Senior Professor appoints a committee consisting of three external experts for recommending the award of the best dissertation. The dissertations of top five ranks (based on the combined score of content, presentation and defence) are placed before the committee. The external members evaluate dissertations and submit their recommendation in a sealed cover to the Controller of Examinations.

Viva voce: Director & Sr. Professor constitutes a committee comprising of one external examiner and three/four internal examiners for the viva-voce. The three/four internal examiners shall comprise of one senior professor (Chairperson), one/two faculty members and one programme co-ordinator. The committee members independently evaluate the performance of the students in the viva-voce and assign their grades. To arrive the final viva-voce grade, the average of the evaluation of the members is considered.

Grades Table

GRADE TABLE FOR EVALUATION OF ANSWER SHEET

The Grades, Grade Point and Descriptions are as given below

Final Grade	Grade Point	Grade Description
O Only	10	Outstanding
A Plus	9	Excellent
A Only	8	Very Good
B Plus	7	Good
B Only	6	Above average
C Only	5	Average
P Only	4	Pass
F1	3	Fail
F2	2	Fail
F1	1	Fail
NA/AB	0	Not Attempted / Absent

GRADE TABLE FOR SEMESTER GRADE CARD

The Grades, Grade Point and Descriptions are as given below

Final Grade	Grade Point	Grade Description
O Only	10	Outstanding
A Plus	9	Excellent
A Only	8	Very Good
B Plus	7	Good
B Only	6	Above average
C Only	5	Average
P Only	4	Pass
F Only	0	Fail
NA/AB	0	Not Attempted / Absent

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राष्ट्रीय मूल्यांकन एवं प्रत्यायन परिषद

विश्वविद्यालय अनुदान आयोग का स्वायत्त संग्घान

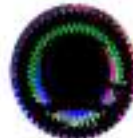
NATIONAL ASSESSMENT AND ACCREDITATION COUNCIL

An Autonomous Institution of the University Grants Commission

Certificate of Accreditation

*The Executive Committee of the
National Assessment and Accreditation Council
is pleased to declare the
International Institute for Population Sciences
(Deemed to be University u/s 3 of the UGC Act, 1956)
Deonar, Mumbai, Maharashtra as
Accredited
with *CGPA* of 3.01 on four point scale
at *A* grade
valid up to February 07, 2027*

Date : February 08, 2022



S. C. Chaturvedi
Director