



**JINDAL SCHOOL OF PUBLIC HEALTH &
HUMAN DEVELOPMENT**

India's first Interdisciplinary School for Public Health & Development

Women, Gender and Health

Fall 2026

Instructor: Nandita Bhan

This Course Manual is a general guide used for students in the course. Some references/readings may be modified based on the discretion of the instructor for effective delivery of course objectives.

Instructor Information

Instructor: Nandita Bhan

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Office Hours: By appointment

Course Information

Course Duration: Fall 2026

Credit Hours: 60

Meetings: TBD

Location: TBD

Prerequisites: None

Part I. Course Description

Despite economic progress, gender equality remains elusive across all nations and the access to health for women and girls continues to be a major public health and human rights issue. Women's health rights, their rights over their bodies, and freedom from violence are important rallying points for women's rights groups worldwide. There is growing recognition that the determinants of health and wellbeing for women and girls are complex, operate through the lifespan and can be context and culture specific.

This course introduces students to the core themes and dimensions of gender equality and its implications for health and wellbeing of populations. Through the course, students will engage with key issues related to women's autonomy and issues of power, choice and inequalities. We will explore issues related to intrahousehold gender dynamics; sex ratio and sex selection; marital choice; sexual autonomy; fertility and population control; control over mobility and women in public spaces; women in the health system; menstruation; violence against women and girls; and the role of men and boys. Students will engage with these themes in the context of India, bringing in examples and practices from South Asia and the rest of the world. The course will be delivered as a seminar with lectures, debates, break out groups and class reflections on readings.

Course Learning Objectives

Course Learning Objectives	Assessments/ Activities
A. Familiarity with concepts and theories	1 reflection: 20% Mid-term: 20% Class Participation 10% Final in-class Exam: 50%
B. Introduction key topics and debates in the field.	
C. Reflecting on key gender moments in India's history and the inter-linkages between gender equality and health	
D. Ability to develop an independent learning area describing or proposing a key reform in policy or practice	

Keyword Syllabus: gender and health, women and girls, gender equality, gender empowerment, women's empowerment, sexual rights, abortion, violence against women

Part II. Session Plan

Session (with Date)	General Topic	Readings
Session 1:	Introduction to the Course, Setting Course Expectations and Introducing Concepts	<p>Online Resources (Shared on Drive)</p> <p>How to read a paper: Stanford: S. Keshav: How to read a paper https://web.stanford.edu/class/ee384m/Handouts/HowtoReadPaper.pdf</p> <p>How to make a presentation How to make a killer presentation: https://hbr.org/2013/06/how-to-give-a-killer-presentation</p> <p>How to make your presentation more effective: https://scdd.ca.gov/wp-content/uploads/sites/33/2016/08/2017.SSAN_.Handout.3.07.pdf</p>
Session 2-3:	Some moments and milestones for women, gender and health	<p>Report on the Status of Women: Towards Equality Part 1: Chapter 1.</p> <p>Jejeebhoy SJ, Zavier AF, Santhya KG. Meeting the commitments of the ICPD programme of action to young people. Reproductive Health Matters. 2013 Jan 1;21(41):18-30.</p> <p>Van den Broek NR, Falconer AD. Maternal mortality and millennium development goal 5. British medical bulletin. 2011 Sep 1;99(1):25-38.</p> <p>Amartya S. Missing women—revisited. Bmj. 2003 Dec 4;327(7427):1297-8. [Optional Reading: Sen A. Missing women. BMJ: British Medical Journal. 1992 Mar 3;304(6827):587.]</p> <p>SDG 5: https://sdgs.un.org/goals/goal5</p>
Session 3-4:	Understanding Power	<p>Pedagogy of the Oppressed: Chapter 1</p> <p>Kumar K. Culture, state and girls: An educational perspective. Economic and Political Weekly. 2010 Apr 24:75-84.</p>
Session 5-6	Maternal Mortality: Dying while giving birth	<p>Jat TR, Deo PR, Goicolea I, Hurtig AK, Sebastian MS. Socio-cultural and service delivery dimensions of maternal mortality in rural central India: a qualitative exploration using a human rights lens. Global health action. 2015 Dec 1;8(1):24976.</p> <p>Dongre A, Kapur A. How is Janani Suraksha Yojana performing in backward districts of India?. Economic and Political Weekly. 2013 Oct 19:53-9.</p> <p>Mayra K, Sandall J, Matthews Z, Padmadas SS. Breaking the silence about obstetric violence: Body mapping women's narratives of respect, disrespect and abuse during childbirth in</p>

		<p>Bihar, India. BMC pregnancy and childbirth. 2022 Dec;22(1):1-9.</p> <p>Chattopadhyay S, Mishra A, Jacob S. 'Safe', yet violent? Women's experiences with obstetric violence during hospital births in rural Northeast India. Culture, health & sexuality. 2018 Jul 3;20(7):815-29.</p>
Session 7-8	Freedom to love and marry: marital choice and what is the right age to marry?	<p>Raj A. When the mother is a child: the impact of child marriage on the health and human rights of girls. Archives of disease in childhood. 2010 Nov 1;95(11):931-5.</p> <p>Raj A, Salazar M, Jackson EC, Wyss N, McClendon KA, Khanna A, Belayneh Y, McDougal L. Students and brides: a qualitative analysis of the relationship between girls' education and early marriage in Ethiopia and India. BMC public health. 2019 Dec;19(1):1-20.</p> <p>Shireen Jejeebhoy: Child marriages during the pandemic: https://www.theindiaforum.in/article/child-marriages-during-pandemic</p> <p>Hadiya's Case: Final Judgment https://www.scobserver.in/wp-content/uploads/2021/10/19702_2017_Judgement_08-Mar-2018.pdf</p>
Session 9-10	Sex, autonomy and consent	<p>Pérez-Marco A, Soares P, Davó-Blanes MC, Vives-Cases C. Identifying types of dating violence and protective factors among adolescents in Spain: A qualitative analysis of Lights4Violence materials. International journal of environmental research and public health. 2020 Apr;17(7):2443</p> <p>Sex in India: What data shows: https://www.livemint.com/Politics/RC0cvSgltlnzrPBjAZ3f2L/Sex-in-India-What-data-shows.html</p> <p>Dating Attitudes Scale: Scale items</p> <p>Public Attitudes about Today's Dating Landscape https://www.pewresearch.org/social-trends/2020/08/20/public-attitudes-about-todays-dating-landscape/</p>
Session 11-12	Women's bodies in population control	<p>Film/Guest Talk:</p> <p>Poonam Muttreja: Why China got population control wrong: India got it right. Al Jazeera: https://www.aljazeera.com/opinions/2023/5/4/why-china-got-population-control-wrong-india-got-it-right</p> <p>Botched sterilizations go beyond Bilaspur https://www.livemint.com/Politics/NXnbhxDcNq5Tso0IN5A2DI/Botched-sterilizations-go-beyond-Bilaspur.html</p>
Session 13-14:	Abortion: rights and implications for health	Six months Post-Roe, 24 US States have banned abortion or are likely to do so: A Roundup

		<p>https://www.gutmacher.org/2023/01/six-months-post-roe-24-us-states-have-banned-abortion-or-are-likely-do-so-roundup</p> <p>Srivastava A, Saxena M, Percher J, Diamond-Smith N. Pathways to seeking medication abortion care: a qualitative research in Uttar Pradesh, India. PLoS One. 2019 May 13;14(5):e0216738.</p>
Session 15:		Review Class
Session 16 & 17:	Son preference, sex selection, and household gender discrimination	Census Data Exercise
Session 18:	Menstrual hygiene and health in India [guest lecture]	<p>Garg, S., Singh, M.M., Basu, S., Bhatnagar, N., Dabi, Y., Azmi, F., Bala, I., Marimuthu, Y. and Borle, A., 2021. Perceptions of frontline workers, female health workers, and school teachers in menstrual hygiene promotion among adolescent girls of Delhi, India: a qualitative study. Indian Journal of Community Medicine: Official Publication of Indian Association of Preventive & Social Medicine, 46(2), p.201.</p> <p>Vashisht A, Pathak R, Agarwalla R, Patavegar BN, Panda M. School absenteeism during menstruation amongst adolescent girls in Delhi, India. Journal of family & community medicine. 2018 Sep;25(3):163.-</p>
Session 19-20:	Women in public spaces	<p>Viswanath K, Mehrotra ST. 'Shall we go out?' Women's safety in public spaces in delhi. Economic and political weekly. 2007 Apr 28:1542-8.</p> <p>Gupta S, Janicki S, Casula P, Parvin N. Rethinking Safe Mobility: The Case of Safetipin in India. In Proceedings of the 2022 International Conference on Information and Communication Technologies and Development 2022 Jun 27 (pp. 1-6).</p>
Session 21-23:	Violence against women and girls: how do we measure violence and intervene on it?	<p>IPV Data NFHS</p> <p>Gadappa, S., Prabhu, P., Deshpande, S., Gaikwad, N., Arora, S., Rege, S., Meyer, S.R., Garcia-Moreno, C. and Amin, A., 2022. Innovations in implementing a health systems response to violence against women in 3 tertiary hospitals of Maharashtra India: Improving provider capacity and facility readiness. <i>Implementation research and practice</i>, 3, p.26334895211067988.</p> <p>Sikder SS, Ghoshal R, Bhate-Deosthali P, Jaishwal C, Roy N. Mapping the health systems response to violence against women: key learnings from five LMIC settings (2015–2020). BMC women's health. 2021 Dec;21(1):1-3.</p> <p>Karakurt G, Silver KE. Emotional abuse in intimate relationships: The role of gender and age. Violence and victims. 2013 Jan 1;28(5):804-21.</p> <p>Marganski, A., & Melander, L. (2018). Intimate Partner Violence Victimization in the Cyber and Real World: Examining the Extent of Cyber Aggression Experiences and Its Association With In-Person</p>

		<p>Dating Violence. Journal of Interpersonal Violence, 33(7), 1071-1095. doi: 10.1177/0886260515614283</p> <p>Oliffe JL, Han C, Maria ES, Lohan M, Howard T, Stewart DE, MacMillan H. Gay men and intimate partner violence: A gender analysis. Sociology of health & illness. 2014 May;36(4):564-79.</p>
Reflection		
Session 24-25	Women's work	<p>Lauren Frayer & Raksha Kumar. 2023. NPR: It's a mystery: Women in India drop out of the workforce even as the economy grows:</p> <p>Diva Dhar: (2022). Indian matchmaking: The marriage market penalty for working women.</p> <p>Shanthosh J, Durbach A, Joshi R. Charting the rights of community health workers in India: the next frontier of universal health coverage. Health and Human Rights. 2021 Dec;23(2):225.</p> <p>Chaudhuri P. Experiences of sexual harassment of women health workers in four hospitals in Kolkata, India. Reproductive health matters. 2007 Jan 1;15(30):221-9.</p> <p>Ferrant G, Pesando LM, Nowacka K. Unpaid Care Work: The missing link in the analysis of gender gaps in labour outcomes. Boulogne Billancourt: OECD Development Center. 2014 Dec 6.</p>
Session 26	Technology women	<p>Dehingia N, Lundgren R, Dey A, Raj A. Trends in online misogyny before and during the COVID-19 pandemic: Analysis of Twitter data from five South-Asian countries. University of California San Diego. 2021.</p>
Session 27-28	Role of men and boys	<p>Grace B, Shawe J, Johnson S, Stephenson J. You did not turn up... I did not realise I was invited...: understanding male attitudes towards engagement in fertility and reproductive health discussions. Human Reproduction Open. 2019;2019(3):hoz014.</p> <p>Burgher I, Flood M. 'Why are you carrying him? Where is the mother?': Male caregiving and the remaking of fatherhood and masculinity in Mizoram, Northeast India. NORMA. 2019 Oct 2;14(4):206-22.</p> <p>Kabagenyi A, Jennings L, Reid A, Nalwadda G, Ntozi J, Atuyambe L. Barriers to male involvement in contraceptive uptake and reproductive health services: a qualitative study of men and women's perceptions in two rural districts in Uganda. Reproductive health. 2014 Dec;11(1):1-9.</p> <p>Singleton A, Maher J. The "new man" is in the house: Young men, social change, and housework. The Journal of Men's Studies. 2004 Jun;12(3):227-40.</p> <p>Mason L, Sivakami M, Thakur H, Kakade N, Beauman A, Alexander KT, van Eijke AM, Laserson KF, Thakkar MB, Phillips-Howard PA. 'We do not know': a qualitative study exploring boys</p>

		perceptions of menstruation in India. Reproductive health. 2017 Dec;14:1-9.
<i>Reading and revision period</i>		
FINAL EXAM (To be scheduled)		

Part III. Scheme of Evaluation and Grading

To successfully complete the course, students must get a passing grade of 40% on each of the three components.

Components	Percent of the Grade
One reflections	20% (20 marks)
Mid term take-home reflection	20% (20 marks)
Class Participation	10% (10 marks)
Final Exam	50% (50 marks)

*Details on each of these components will be shared with students.

Letter Grade	Percentage of Marks	Grade Points	Interpretation
O	80 and above	8	Outstanding: Exceptional knowledge of the subject matter, thorough understanding of issues; ability to synthesize ideas, rules and principles and extraordinary critical and analytical ability
A+	75-79	7.5	Excellent: Sound knowledge of the subject matter, thorough understanding of issues; ability to synthesize ideas, rules and principles and critical and analytical ability.
A	70-74	7	Very Good: Sound knowledge of the subject matter, excellent organizational capacity, ability to synthesize ideas, rules and principles, critically analyze existing material and originality in thinking and presentation.
A-	65-69	6	Good: Good understanding of the subject matter, ability to identify issues and provide balanced solutions to problems and good critical and analytical skills
B+	60-64	5	Fair: Average understanding of the subject matter, limited ability to identify issues and provide solutions to problems and reasonable critical and analytical

			skills.
B	55-59	4	Acceptable: Adequate knowledge of the subject matter to go to the next level of the study and reasonable critical and analytical skills.
B-	50-54	3	Marginal: Limited knowledge of the subject matter and irrelevant use of materials, and poor critical and analytical skills.
P1	45-49	2	Pass 1: Pass with basic understanding of the subject matter
P2	40-44	1	Pass 2 : Pass with rudimentary understanding of the subject matter
F	Below 40	0	Fail: Poor comprehension of the subject matter; poor critical and analytical skills and marginal use of the relevant materials. Will require repeating the course.
P	Pass		'P' represents the option of choosing Pass grade over the CGPA grading system in the COVID-19 semesters. The option is provided when students attain a minimum of 40 percentage marks under the current grading structure in a given subject.
I	Incomplete		Extenuating circumstances preventing the student from completing coursework assessment, or taking the examination; or where the Assessment Panel at its discretion assigns this grade. If an "I" grade is assigned, the Assessment Panel will suggest a schedule for the re-exam.

Part IV. Academic Integrity and Student Expectations

Academic Integrity, Cheating and Plagiarism

The School expects students to maintain the highest standards of ethical behavior as they embark on this new journey of learning. This includes respect for teachers and students, that extends to respecting diverse ideas, theories and debates, and contributing respectfully to all discourse. Through this course, we expect students to adhere to these principles. Students must also acknowledge in scientific ways, the sources and processes that contribute to their learning and their authorship. Ideas that have been borrowed or have inspired must be duly credited. Formal and informal ways of crediting must also be utilized in writing or presentations to acknowledge the role of contributors. Cheating and plagiarism in any form are considered serious violations by the university and will be dealt with through sanctions.

Participation/Attendance Policy

Attendance to the course is mandatory, and participation counts for nearly 20% of the final grade. Participation in class should be viewed not only as a responsibility, but as a means to raise the classroom

discourse and contribute to a meaningful understanding of issues in the field. Any student not able to attend class due to any genuine medical or other reasons must send in a prior note requesting permission to skip class or providing reasons if permission could not be sought in time. Not having the permissions to skip class will result in deductions in the final grade.

Use of Technology in Classrooms

While technology is an important aid for learning, the use of phone and laptop in class can be a source of distraction for students. We encourage students to use technology creatively and for the purposes of learning only. The use of phone or laptop for browsing social media or texting is heavily discouraged.

Disability Support and Sexual Harassment Requirements

JGU endeavors to make all its courses accessible to students. All students with any known disability needing academic accommodation are required to register with the Disability Support Committee dsc@jgu.edu.in. The Disability Support Committee maintains strict confidentiality on the matters under its purview. Students should preferably register with the Committee during the month of June/January as disability accommodation requires early planning. DSC will coordinate all disability related services such as appointment of academic mentors, arranging infrastructural facilities, and course related requirements such as special lectures, tutorials and examinations. Faculty members will extend all necessary support to students while maintaining confidentiality in the matter.

Respect is a core value in any collaborative learning process, and is central to our engagement in this course. In accordance with the Student Handbook, students should not indulge in displaying pornographic materials, obscenity or in gambling, ragging or sexual harassment, nor practice discrimination based on race, religion, caste, and place of origin.

Safe Space Pledge

In this class, we will engage with a number of sensitive topics related to gender and social realities, and raise contentious social debates as part of learning. The objective is to see various sides of an issue and reach a collective consensus (or not). However, inadvertently a classroom dialogue may lead to distress for a student or a topic may provoke a strong emotional response. Hence, it is incumbent upon all students to pledge respect towards peers and to ensure that they do not hurt the sentiment of one or more students during the classroom discourse. This means that while students do not feel restrained to offer their opinion, they also create a safe space where everyone can speak and learn without inhibitions and fear. Recording (audio/video) of any kind is not permitted without the consent of the person being recorded. **Please do not hesitate to raise an issue with me that is causing you distress.**