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Appendix 1: Description of schools used as case studies

1 Summary of the two schools

The table below gives a summary overview of the characteristics of the two schools of public health selected as case studies in this enquiry. The table is followed by a more detailed description of these characteristics.

	Characteristic	School 1600	School 2500
1.	Country background	• In Eastern Africa • Women-friendly government • Gender-sensitive constitution • Ministry of Gender BUT society is • male dominated • deeply rooted in patriarchal tradition	• In Southern Africa • Strong and gender-sensitive constitution • Gender Commission • Equity and transformation policy • History of racial and gender discrimination
2.	University policies	• Gender mainstreaming	• Gender equity and transformation
3.	Departments & programmes related to gender	• Department of Women and Gender Studies	• Women and Gender Studies Programme
4.	School of Public Health	• A School of the College of Health Sciences • Five departments: - Health Policy Planning and Management - Epidemiology and Biostatistics - Disease Control and Environment Health - Community Health and Behavioural Science - Community Health and Behavioural Science - Centre for Quality Health • Only one qualification, a Masters of Public Health (MPH)	• A School of the Faculty of Community and Health Sciences • Seven streams: -Health promotion -Health research -Health information systems -Health management -Human resources development -Nutrition -General public health • Seven MPH qualifications offered in the above streams
5.	Interview participants	• 3 females • 4 males	• 5 females • 2 males

2 School 1600

2.1 Country background in relation to gender

School 1600 is located in an East African country that is perceived to have a women-friendly government and a gender-sensitive constitution that commits the country to affirmative action in the workplace, freedom from sexual discrimination, and economic rights for women. In addition, the government has established a Ministry of Gender, although it is said to have far less financial resources than other departments. However, it is also perceived that all these efforts are all for political expediency, as there seems to be little evidence of gender justice delivery. In general, the society is said to be male dominated and have a deeply rooted patriarchal tradition, a situation that hampers the implementation of gender equality policies. The women's movement in the country has been reported to be episodic and erratic, organised in terms of an issue-based and crisis approach, leaving it vulnerable to co-optation.

2.2 The university and its gender-mainstreaming policy

The university in which the school is located is one of the oldest and most prestigious universities in Africa. It became an independent national university in 1970, offering its own undergraduate and postgraduate courses. The university has adopted an institution-wide gender-mainstreaming (GM) approach for the attainment of gender equality on the campus. The enactment of the GM policy is attributed to the establishment of the Women's and Gender Studies Department in 1991, which lobbied for such a policy by engaging national policy-makers, university managers and other stakeholders.

At this university, GM is regarded as a strategy for making women's as well as men's concerns and experiences an integral dimension of the design, implementation, monitoring and evaluation of policies and programmes for development. The reported ultimate goal of GM is gender equality and women's empowerment.

In this regard, the university launched the Gender Mainstreaming Programme in 2001 with the key objectives of promoting and advocating for the enactment and effective implementation of gender-responsive policies in the various functions of the university to include teaching and learning, research, knowledge transfer, partnerships and networking,

governance and administration, students and staff welfare, data management and the organisational culture. Two key GM policies that were developed and implemented in 2006 were the sexual harassment policy and the 1.5 points scheme. The sexual harassment policy is a regulatory framework through which sexual harassment against students and staff can be prevented or redressed in case it occurs. It is aimed at tackling acts of sexual harassment at all levels within the structures of the university. The 1.5 point scheme is an affirmative action policy where 1.5 points are awarded to female A-level applicants to the university in order to increase the participation of females admitted to the university.

Some of the reported challenges experienced by the GM unit at this institution are that there are few staff on the ground and the workload is overwhelming, leading to backlogs. Due to this there is an over-reliance on consultants and donor funding, which is not sustainable. In order to expand and increase the visibility of the unit it will require an increase in personnel in the right numbers, qualifications, and interest in gender in order to address these challenges. Other challenges include the commitment of actors involved and the attitudinal change, both at individual level and collectively for the institution

One of the main objectives of the GM unit is to support GM in teaching and learning through engendering of the university curricula. Therefore the University's GM combines both academic and institutional interventions.

2.3   The Department of Women and Gender Studies

The university also has a Women and Gender Studies Department. It was established in 1991 as a department of the Faculty of Social Sciences. The Department of Women and Gender Studies is a multidisciplinary academic unit that strives to address gender and development issues from an African perspective at both the academic and community levels. The department offers undergraduate and postgraduate degrees in women and gender studies, as well as a number of short or tailor-made courses to the local and international community.

2.4   The School of Public Health

At the university, the School of Public Health (SOPH) is located in the College of Health Sciences, which is headed by a dean and two deputies for research and education,

respectively. The faculty employs problem-based learning and community-based education and services in its teaching activities.

The SOPH evolved from the Department of Preventive Medicine in the medical school into the Institute of Public Health in 1974. In 2000 it became a fully-fledged autonomous Institute of Public Health with five departments: Health Policy Planning and Management; Epidemiology and Biostatistics; Disease Control and Environmental Health; Community Health and Behavioural Science; and Regional Centre for Quality Health. In 2007 it became a School of the College of Health Sciences.

With regard to gender, the School responded to the Gender in Education and Training (GET) questionnaire. (See Section 2.2.2.7c.) It indicated that it did not have a gender course and on this basis was chosen for a case study. (See also Section 4.2.2.2 and Figure 4-2.) However, during the time of the interviews, it was discovered that the university had just introduced the gender-mainstreaming policy and that most of the respondents had attended a GM course with the aim of sensitising them to gender issues and encouraging them to mainstream gender in their teaching. However, at the school, there was no established gender course in public health and the lecturers were trying to incorporate gender according to the limited knowledge they had, as described in Section 6.3.2. From the interviews it seemed as if they found GM an abstract construct that they were unable to apply in their own courses.

2.5 The interview participants

A profile of the participants was given in the introduction to Chapter 6. (See also Table 6-1.)

3 School 2500

3.1 Country background in relation to gender

School 2500 is located in Southern Africa. The country's history was steeped in institutional racism where rights, life chances and the distribution of goods and services were predicated along racial lines. More importantly, it is reported that respect for the dignity of individuals was determined by the colour of their skin and, further within the various racial groupings, by their gender designation. In contrast to the country of School 1600, there was thus a double layer of discrimination along race and gender lines. The socio-cultural dictates of all groups defined women to be inferior to men and, as such, assigned to them the position of minors in both the public and private spheres of life. In the private sphere, women were less likely to lead in decision making. In most interpersonal relationships men had more power. This historical legacy of patriarchy influenced essential informal and formal human relationships with a marked impact at the workplace.

The country has a strong constitution that is also gender sensitive. It established a Commission on Gender Equality, whose role it is to advance gender equality in all spheres of society and make recommendations on any legislation affecting the status of women. The Commission aims to transform society by: exposing gender discrimination in laws, policies and practices; advocating changes in sexist attitudes and gender stereotypes; and instilling respect for women's rights as human rights.

Because of its history, this country adopted an intense equity and transformation policy for the achievement of gender equality or transformation rather than mainstreaming adopted by the previous case study. The country has an Employment Equity Act to monitor appointments in order to redress imbalances of race and gender.

3.2 The university and its gender-equity policy

The university in which the School of Public Health is located was established in 1959 along racial lines for a designated racial group. In 1970 the institution gained university status and was able to award its own degrees and diplomas. In line with its country policy, the university also adopted a gender equity and transformation approach rather than mainstreaming, with the

express purpose of redressing past injustices along race and gender lines. A campus-wide Gender Equity Unit was established to redress these injustices, some of which included fighting for the participation of black women in academia and the improvement of their terms and working conditions.

3.3   The Women and Gender Studies Programme

The university also has a Women and Gender Studies (WGS) Programme, which was founded in 1995. It is an interdisciplinary programme based in the Faculty of Arts and aims to promote scholarship on gender issues in the country and to contribute to the challenge of gender transformation in the university and in society at large. The WGS Programme grew out of the university's staff and student opposition to gender inequalities and gender-blind teaching and research in the early 1990s. At the time, radical women staff and students, through the Gender Equity Unit, coordinated activities such as an annual gender studies winter school and lobbied for university policies and procedures that address gender discrimination on campus, campus-wide awareness, and response to gender-based violence.

The WGS Programme offers both undergraduate and postgraduate tuition. Students may enrol for elective undergraduate modules or major in Women's and Gender Studies. The WGS Programme also conducts a wide range of research with particular focus on sexualities, cultural representations of gender, femininities and masculinities, and feminist pedagogies.

3.4   The School of Public Health

The School of Public Health (SOPH) is located in the Faculty of Community and Health Sciences, which comprises a multi-disciplinary team whose aim is to advance the transformation of existing health and welfare services in the country. The SOPH postgraduate programme aims to equip health and social service professionals with the knowledge and research skills to understand the determinants of the health of populations, and to be competent to plan, implement, manage and evaluate health and social programmes.

The SOPH was established in 1993 as the Public Health Programme to strengthen education and research in public health and primary health care at the University and to build capacity in the health services. In 2000, the SOPH staff refined the educational programme into a four-

level Postgraduate Programme in Public Health offered through contact and distance learning. It comprises of a Postgraduate Certificate (PG Certificate), a Postgraduate Diploma (PG Diploma), a Masters (MPH) and a PhD in Public Health. The Programme is accessible to students from all the provinces of the country, countries on the African continent and even from other continents. To date, students have registered from South Africa, Namibia, Malawi, Uganda, Swaziland, Lesotho, Zambia, Zimbabwe, Botswana, Niger, Kenya, Nigeria, Burkina Faso, Somalia, Central African Republic, Senegal, Rwanda, Tanzania, Cameroon, Ethiopia and countries beyond Africa.

With regard to gender, the school had responded in the Gender in Education and Training (GET) questionnaire. (See Section 2.2.2.7c.) It indicated that it had a gender course and on this basis was chosen as one of the case studies. (See also Section 4.2.2.2 and Figure 4-2.) However, during the interviews it became apparent that even though this school had a gender course on paper, there was no person to teach it at the school and they got somebody else from a sister school to teach for them. Some of the lecturers were trying to incorporate gender according to the limited knowledge they had that was informed by their own gendered lived experiences. (See Section 6.3.2.)

3.5 The interview participants

A profile of the participants was given in the introduction to Chapter 6. (See also Table 6-1.)

Appendix 2: Information leaflet and informed consent

AUTHORISATION TO PARTICIPATE IN A RESEARCH PROJECT

TITLE OF STUDY: **A DISCOURSE ANALYSIS OF GENDER IN THE PUBLIC HEALTH CURRICULUM**

1) THE NATURE AND PURPOSE OF THIS STUDY

We are doing a study on the representation of gender in the Master of Public Health curriculum in Africa. The aim is to gain a deeper insight into the different ways in which gender is conceptualised, experienced and thus represented in the public health curriculum. We kindly request your participation in this study

2) EXPLANATION OF THE PROCESS

This study involves interviews with key informants at your institution regarding their understanding of public health and gender, and the courses and modules they are teaching. If you give permission, we would like to audiotape the interview in order to ensure that we capture all the important information that you share with us.

We will also request copies of your course outlines, detailed descriptions, and any other curriculum documents you may have at your disposal.

3) RISK AND DISCOMFORT INVOLVED

Normally there is no risk and discomfort involved in interviews like this. However, we will use about one hour of your time. Should you feel any question is causing discomfort, you are not obliged to answer.

4) POSSIBLE BENEFITS OF THIS STUDY

The findings of this study will provide an overview of the way in which gender is represented in the public health curriculum in Africa. This will provide academics with valuable information for future policy decisions and curriculum development, especially with regard to the role of gender as a determinant of health status.

5) PARTICIPATION

If you do not want to participate in this study, it will in not in any way prejudice you nor your institution in benefiting from the findings of the study.

You may at any time withdraw from this study.

6) INFORMATION

If you have any questions concerning this study, please contact: Mrs Mary Mwaka. Tel: +27 12 841 3510 or e-mail: mary.mwaka@up.ac.za.

7) CONFIDENTIALITY

All information obtained whilst in this study will be regarded as confidential. Audiotapes will be kept under lock and key at our SHSPH offices, and will be destroyed after completion of the data analysis.

Results will be published or presented in such a fashion that participants remain unidentifiable.

8) CONSENT TO PARTICIPATE IN THIS STUDY.

I have read the above information before signing this consent form. The content and meaning of this information have been explained to me. I have been given opportunity to ask questions and am satisfied that they have been answered satisfactorily. I understand that if I do not participate it will not prejudice me or my institution in any way. I hereby volunteer to take part in this study.

I give permission that the interview may be audio taped: Yes/No

I have received a signed copy of this informed consent agreement.

....……. ……………..
Name of participant   Signature   Date

....……. ……………..
Name of investigator   Signature   Date

....……. ……………..
Name of witness   Signature   Date

Appendix 3: Interview guide

Domain	Themes or Sub domains	Prompt Question	Probes	Other Issues to Explore/Time
Training in public health	Area of specialisation Social aspects of health - which Gender in the curriculum Training in gender	Tell me about your training in public health	• Where did you train? • How long ago was that? • What courses did you cover in the curriculum? • Do you think what you learnt then is still the same as what you are teaching? • If so, in what ways? • Which area of public health did you specialize in? • Did you cover what you would consider are social aspects of health? • If so, which social aspects do you remember being addressed? • Have you received any specific training in gender? • If so, which aspects or issues do you remember being addressed?	*10 min*
Understanding of public health	Concept of public health Core domain of public health curriculum Other in public health	What in your view is your understanding of the concept of "public health"?	• What is public health? • To what extent did your training shape your understanding of the concept of public health. • Would you say your understanding of public health has changed since the time you trained? • Is so, in what ways? What factors have played a role in changing your conception of public health? • What in your opinion are the core domains of public health curriculum • What do you consider to be other relevant domains of public health? • Where in your opinion would you place gender within the public health curriculum	*10 min*
Gender	Understanding of gender What has shaped this understanding	What in your opinion does gender mean?	• What do you think has shaped this understanding? • In what way has culture shaped this understanding / socialisation? • What about your ethnicity? • What about religion? • What about education?	

Domain	Themes or Sub domains	Prompt Question	Probes	Other Issues to Explore/Time
	Lived experiences Institutional/departmental view and policies of gender		• Are there any experiences in your life that make this concept stand out for you? • Is this understanding reflected in any way in your courses/modules? How? • Do you consciously or unconsciously include /consider gender concerns when planning your teaching? • If so, what do you teach about gender? • Why have you chosen or not chosen to consider gender in your curriculum? • Would you say your institution gender promotes and supports gender equality • If so, in what ways? • In your opinion, are you aware if your institution has any gender sensitive policies and programmes? • If so, which are they? • Would you say your department promotes and supports gender equality • If so, in what ways? • In your opinion, are you aware if your department has any gender sensitive policies and programmes? • If so, which are they? • Would you say that your institution's support of, or lack of gender sensitive policies and programmes encourages or discourages you from considering gender issues in your curriculum?	How concept of gender has changed over time *10 min*
Gender role identity	Gender roles Masculinity Femininity "Doing gender"	What does being a woman / man mean to you?	• Are you always conscious of your identity as a man/woman? • What does it means to be a woman/man? • Does being a man/woman influence your course content? • As a man/woman, what curriculum content would you emphasize? • As a man/woman, would you include gender issues in your curriculum?	*10 min*

Domain	Themes or Sub domains	Prompt Question	Probes	Other Issues to Explore/Time
Gender in curriculum	Modules/courses taught Is gender addressed? Why and how? Why not?	Tell me more about the courses which you teach	• Who decides on the content of your courses/modules? • Would you say that your courses/modules contain any social aspects of health? • If so, which aspects? • Would you say that your courses/modules contain any gender aspects? • If so, which aspects? • If yes why included? • If no, why not? • Have you had any experiences / problems / successes with including gender in your modules/courses? • In your opinion, are you aware if gender issues are being addressed in other courses / modules? • Are you aware of any staff member who is trying to advance gender issues in health / curriculum?	*10 min*
Construction of the public health curriculum	Lived experiences in the construction of the curriculum Dominant and alternative discourses Knowledge and power issues Organisational support	Could you please take me through the process of how the curriculum is developed here.(Focus on courses and modules.)	• Who chairs the curriculum development committee? • Which stages does new curriculum go through? • What would you say are the core courses of public health curriculum at this institute? • Which would you say are electives? • Who decided on which should be core and which electives? • Which would you say are those that don't really have to be taken? • Have you participated in any curriculum development/review process? • Please relate your experience. • What role do you think you played? What did you argue for? • Do you think your ideas were incorporated into the curriculum?	*10 min*

| Domain	Themes or Sub domains	Prompt Question	Probes	Other Issues to Explore/Time
			• Do you feel the curriculum development is participatory and takes in the view points of all? • Are there any views that you think are not taken into consideration? • If gender issues would be introduced in the curriculum, would you resist or support it? What position would you take? • If gender issues would be introduced in the curriculum, who do you think would resist it most? Men, women, senior members of staff, junior members of staff, older members of staff, younger members of staff? • If gender issues would be introduced in the curriculum, who do you think would support it most? Men, women, senior members of staff, junior members of staff, older members of staff, younger members of staff? • If gender issues would be introduced in the curriculum, do you think it would receive support at organisational level – faculty leadership, institutional leadership?	
Gender and public health	Importance of gender in health	Please tell me if you are aware of calls to incorporate gender in public health programmes	• Are you aware of these calls? • In your opinion, are these calls necessary? • Are they timely? • How would considering gender improve public health? • Would you say that the institute in general and colleagues are aware of gender and its importance as a determinant of health status?	*10 min*

END

That is my last question.
Thank you for helping us with this study.
The information you gave us will be very useful.

Time end: -------------- am/pm

Appendix 4: Approval letter of the Research Ethics Committee, Faculty of Health Sciences, University of Pretoria

FWA 00002567, Approved dd 22 May 2002 and
Expires 24 Jan 2009
IRB 0000 2235 IORG0001762 Approved dd Jan 2006 and
Expires 21 Nov 2008
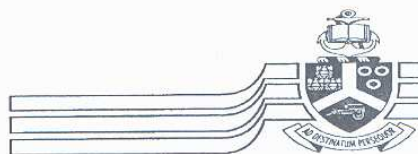
University of Pretoria
Faculty of Health Sciences Research Ethics Committee
University of Pretoria
Date: 31/10/2006

Soutpansberg Road   Private Bag x 385
MRC-Building   Pretoria
Room 2 - 19   0001

Number	:	**97/2006**
Title	:	A discourse analysis of gender in the public health curricula in Sub-Saharan Africa.
Investigators	:	Mary Mwaka; School of Health Systmens and Public Health; University of Pretoria; Pretoria. E: apberg@medic.up.ac.za / kirstie.rendal-mkosi@up.ac.za F: 841 3308 T: 841 3345 C: 0721940127
Sponsor	:	None
VAT No	:	None
Study Degree	:	**PhD Public Health**

This Protocol has been considered by the Faculty of Health Sciences Research Ethics Committee, on 25/10/2006 and found to be acceptable for the University of Pretoria only.

Mr P Behari	B.Proc. KZN; LLM – Unisa; (Lay Member)
Advocate AG Nienaber	(female)BA(Hons) (Wits); LLB; LLM (UP); Dipl.Datametrics (UNISA)
Prof V.O.L. Karusseit	MBChB; MFGP (SA); M.Med (Chir); FCS (SA): Surgeon
Prof M Kruger	(female) MB.ChB.(Pret); Mmed.Paed.(Pret); PhDd. (Leuven)
Dr N K Likibi	MB.BCh.; Med.Adviser (Gauteng Dept.of Health)
*Dr F M Mulaudzi	(female) Department of Nursing,
*Mrs E.L. Nombe	(female) B.A. CUR Honours; MSC Nursing – UNISA (Lay Member)
*Snr Sr J. Phatoli	(female) BCur (Et.Al) Senior Nursing-Sister
*Dr L Schoeman	(female) Bpharm, BA Hons (Psy), PhD
*Prof J.R. Snyman	MBChB, M.Pharm.Med: MD: Pharmacologist
*Dr R Sommers	(female) MBChB; M.Med (Int); MPhar.Med;
Prof TJP Swart	BChD, MSc (Odont), MChD (Oral Path) Senior Specialist; Oral Pathology
Dr A P van Der Walt	BChD, DGA (Pret) Director: Clinical Services of the Pretoria Academic Hospital
*Prof C W van Staden	MBChB; Mmed (Psych); MD; FTCL; UPLM; Dept of Psychiatry

DR R SOMMERS; MBChB; M.Med (Int); MPhar.Med.
SECRETARIAT of the Faculty of Health Sciences Research Ethics Committee - University of Pretoria

* = Members attended the meeting on 25/10/2006.

Appendix 5: Invitation letter to potential research participants

University of Pretoria

The Director
School of Public Health
………………….
………………
………………….

Faculty of Health Sciences
School of Health Systems and Public Health
P.O. Box 667
PRETORIA, 0001 SA
Tel: +27(0) 12-841-3240
Fax: +27(0) 12-841-3328
http://shsph.up.ac.za

23 November 2006

Dear …………………………..

Re: Request for permission to conduct qualitative interviews with academic staff in the School of Public Health, …………………... University.

I am a senior lecturer at the School of Health Systems and Public Health, University of Pretoria. At the same time, I am also carrying out my PhD studies in the area of gender and health. My research topic is titled: "A discourse analysis of gender in the public health curriculum in Africa".

The objective of my study is to examine how gender is understood and represented within the public health curriculum by academic members of staff. In order to achieve this objective, I need to carry out qualitative interviews with academic staff in schools of public health. I have purposively selected your school as one of my study sites for these interviews.

The purpose of this communication is to kindly request for your permission to conduct these interviews with academic members of staff at SOPH. Specifically, I am going to ask them for information about their understanding of gender, what forces have shaped this understanding, and how this understanding has in turn shaped whether or not, and how they include gender in their modules/courses. I will also ask them for copies of their course outlines and descriptions, and any curriculum documents they can offer. By participating in this study and answering the questions, they will help to increase and deepen our understanding of how gender is understood and used within the public health sector. I hope that the results of this study will be used to highlight the implications of the multiple ways in which gender is understood, for public health policy and practice.

The interviews will take approximately one hour, and will be audio taped. In addition they will be carried out on a voluntary basis, and each member of staff who agrees to participate will sign a consent form to indicate their willingness to freely participate in the study.

If granted permission, I would like to conduct these interviews between ……….. 2006, and ………….. 2007, depending on the availability of staff. I would like to interview about 10

members of academic staff, including the director of the school. I have used certain criteria to select the participants, based on the staff data available on the SOPH website.

I would also like to kindly request for a focal person who can serve as a liaison person between me and members of staff, and assist me to arrange the interviews. Some remuneration will be offered in this regard.

Finally, if given permission, I would appreciate an official letter of approval, permitting me to conduct the interviews, as well as analyzing SOPH's curriculum documents, to be submitted to the Faculty of Health Sciences Ethics Committee, of the University of Pretoria.

I trust that you will assist me to achieve my academic objectives.

Yours faithfully,

Mrs Mary Nelly Mwaka
Senior Lecturer and Project Leader
Gender and Health Project
School of Health Systems and Public Health
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Tel: +27 12 8413510, Cell: 0721940127
Fax: +27 12 8413328

Appendix 6: An overview of the public health curriculum by area of specialisation, core and elective courses

Areas of specialisation	Core courses	Electives
Hospital administration/management (1200, 2400) Health system/services/policy management (1200, 1200,1800, 2100, 2400) Epidemiology/Epidemiology and disease control/Applied field epidemiology/Epidemiology and biostatistics/ Laboratory management and epidemiology (1200, 2200, 1800, 2100, 1200) Health promotion (1200, 1800, 2100) Occupational health and safety/occupational hygiene (1200, 1800, 2400) Human nutrition (1200, 1800) Population and reproductive health/ Reproductive and family health (1800) Maternal and child health (1200, 2400) Disaster management and preparedness (1200) Health economics (2200) Environmental health/ Environmental and occupational health (1200, 2100) Rural health (2400) Disease control (2100) Health research ethics (2100) Social and behavioural science (1700)	Introduction/principles of public health/learning in public health (1200, 1500, 2100) Special public health issues (1500) Implementing change (1500) Principles of epidemiology/ Applied epidemiology (1200, 1700, 1800, 2200,1600)/Assessing community health needs (1500)/Introduction to health measurement (2100) Basic biostatistics (1200, 1700, 1500, 1800, 2200, 2100)/applied biostatistics and informatics (1600) Research methods/dissertation (1200, 1600, 1700, 1500, 1800, 2400) Quantitative research methods (2200) Social dimensions of health (1200)/Social and behavioural determinants of health (1600, 1500)/Behavioural science (1700)/Public health and society (1800)/Society and health (2100) Health care organization and management (1200, 1700, 1500)/Health planning and management 1600 , 2200, 2100) Computer applications in health (1200) Biological basis for public health and introduction to community (1600, 1700) Health economics and finance (1600) Field study (1600) Communicable and non communicable disease (1600) Principles of health education and training (1600) Family and reproductive health (1600)	Health policy analysis and development (1200) Principles of management (1200) Supplies management (1200) Public health aspects of sexually transmitted infections (1200) Epidemiology and public health policy (1200) Epidemiologic basis of TB control (1200) Injury epidemiology and control (1200) Clinical epidemiology (1200) Environmental and occupational epidemiology (1200) Gender, sexuality and health (1200)/Gender and health (2200, 2500) Women's health and well being (2500) Law and public health Workplace hazard monitoring and control strategies (1200) Occupational medicine (1200) Operations research (1200) Community based rehabilitation (1700) Preventive measures in HIV/AIDS control (1700, 2500) Ethics in public health (1700) Directed studies (1700) Biostatistics 11 (1700) Evidence based health care (2200) Advanced epidemiology (2200, 2500) Epidemiology of infectious diseases (2200) Epidemiology of non-communicable diseases (2200, 2500) Quantitative methods for health economics Macro economics, health and health care financing (2200) Theory and application of economic evaluation in health care (2200) Microeconomics for the health sector (2200) Public health and human rights (2200) Qualitative research methods (2200, 2500) Alcohol problems: a health promotion approach (2500)

Areas of specialisation	Core courses	Electives
General public health (1500, 1600, 1700, 2200)	Demography and population dynamics (1600, 1700)/Principles of demography (2100) Public health nutrition (1600) Health ethics and law (1600) Environmental health (1600, 2100) Occupational health (1600) Human ecology (1700) Public health practice (1700) Introduction to primary health care (2100) No core courses listed (2400)	Children, health and wellbeing: a cultural perspective (2500) Culture, health and illness (2500) Equity and financial planning (2500) Health management II (2500) Health and social change (2500) Health promoting schools: putting vision into practice (2500) Health promoting settings: a partnership approach to health promotion (2500) Health systems research for planning, evaluation and management 11 (2500) Introduction to human resources development in the health sector (2500) Managing human resources for health (2500) Maternal and child health (2500) Micronutrient malnutrition (2500) Monitoring and evaluation in health and development programmes (2500) Public health nutrition: policy and programming (2500) Qualitative research methods (2500) Quantitative research methods (2500) Surveillance of nutrition programmes (2500) Survey methods: designing questionnaires (2500) Using information for effective management (2500) No electives listed (2400)

Appendix 7: Gender as a domain area of knowledge in the components of the public health curriculum

Curriculum component	Compulsory course	Summary of gender related content	School
Area of specialisation			
Social and behavioural science	Gender and health	Relationship between gender and health Socio-cultural, socio-political and socio-economic constructs of gender and how these constructs impact on women and men's health in the developing world. How women and men's health problems develop, are perceived, and are responded to both medically and socially in contemporary society Gender concepts; patriarchy; gender, experience, culture, power, and health; poverty, health and health care, gender and men's health	1700
Core courses	Social dimensions of health – Gender and health	Men, women and children's health	1200
Elective courses	Theories and models of gender and health	Theoretical frameworks of femininity and masculinity, patriarchy and matriarchy and how these apply to gender and health, development and gender research Gender theory	1700 2200
	Gender and health	The impact of gender on health and health care. Specific topics used as examples to examine the impact of gender on health. health topics Global and local patterns in gender and health Strategic and practical approaches in mainstreaming gender	2200 and 2500
		Gender is silent as a domain area of knowledge.	1500 1600 1800 2100 2400

Appendix 8: Implicit representations of gender in the components of the public health curriculum

Emerging gender discourses	School	Area of specialisation	Compulsory, core and elective courses	Summary of gender-related content
THE WOMEN DISCOURSE				
Women and work – productive roles	1200	Health services management	Population, health and development	The recursive relationship between women's reproductive and productive roles and their health and status
	1200	Maternal and child health	Organization and management of MCH services	Maternity benefits; day care
Women as a vulnerable group	1200	Disaster management and preparedness	Health services for displaced persons	Women as a vulnerable group during disasters
	2100	Health research ethics	Critical issues in health research	Challenges to informed consent in vulnerable communities of women. Challenges to recruitment and retention of diverse and vulnerable communities of women in the research process. Ethical issues in research invulnerable and diverse populations of women and demonstrate means whereby unscrupulous and unethical research in this class of women can be prevented
Women in the life cycle	1700		Gender and ageing	Increasing numbers of ageing women are increasing worldwide – more attention to be paid to ageing women – to ensure that they remain a resource for their families and communities.
Women's health in developing countries	1700		Women's health in sub-Saharan Africa	Factors that determine women's health in sub-Saharan Africa Women's situation and rights Public health and women's health Feminist theories, social constructionist theories Compare the situation of sub-Saharan African women with women from other parts of the world including the United States.

Emerging gender discourses	School	Area of specialisation	Compulsory, core and elective courses	Summary of gender-related content
			THE WOMEN DISCOURSE	
A holistic approach to women's health	2500		Women's health and well-being	Explore the concept of well-being and the values associated with it, in relation to women's physical, social and mental health. Analyze and reflect upon how a particular aspect of women's health and well-being is enhanced or compromised in a local context Definitions and personal as well as comparative perspectives on women's health and well-being Ways in which women's health can be enhanced or compromised Conceptualizing and analyzing women' health and well-being in relation to parameters of: race, class, age/generation, geographical context, historical context, cultural contexts and sexual orientation. Women's health and well being in terms of : mental health issues, HIV/AIDS, reproductive health and sexuality, women's bodily integrity and social well-being.
Women's reproductive and maternal roles	1200	Human nutrition	Maternal and child nutrition	Women's bodies – Nutritional requirements in pregnancy and lactation
	1200	Maternal and child health	Organization and management of MCH services Applied clinical practice in MCH	Policies and services Women's bodies – conception, pregnancy, abortion, breastfeeding, care of mother during delivery and puerperium, etc.
	1200	Health services management	Population, health and development	Family planning – policies and programmes
	1200		Social dimensions of health	Social issues – ethical consideration of abortion

Emerging gender discourses	School	Area of specialisation	Compulsory, core and elective courses	Summary of gender-related content
			THE WOMEN DISCOURSE	
	1500		Special public health issues	Services – maternal and child health/family planning Women's bodies – breastfeeding, lactation and management, female genital mutilation, violence Adolescent sexuality and related sexual and reproductive health consequences Cultural and biological factors shaping adolescent sexual and reproductive health
	1600			Women's bodies – fertility indices, effect of fertility Research – reproductive health surveys
	1600		Family and reproductive health	General – awareness of maternal, child health and family public health issues
	1700		Global perspectives in health promotion	Statistical/measurement aspects of reproductive/maternal and child health - reductions in mortality rates, but these impressive gains in maternal and child survival have levelled off in some countries; while in others, the positive trends have even reversed.
	1700		Women's health in sub-Saharan Africa	Constructs of population health - early marriage, family size, population control (methods of child spacing and decision-making processes). The impact of cultural and religious beliefs on reproductive health and contraception - the main goal of the course is to let students understand a variety of health problems faced by sub-Saharan African women which are often compounded by cultural values and religious principles that undermine decision-making processes on reproductive and other health issues. Women's bodies - health and illness issues specific to women such as Pregnancy and childbirth, maternity services, fertility in relation to women, reproductive technologies, menopause. Services - use of antenatal and postnatal health services.

Emerging gender discourses	School	Area of specialisation	Compulsory, core and elective courses	Summary of gender-related content
				THE WOMEN DISCOURSE
				Gendered illnesses - risk of sexually transmitted infections, including HIV/AIDS.
	1800		Family planning policies and programs	Programmes, strategies and policies related to the development, organization and management of family planning programs, especially in developing countries. Social, economic, health. and human rights rationale for family planning.
	1800		Public health problems in mother and newborn; prevention of mortality and promoting the health of women, infants and children	Policy and programmatic interventions for preventing, reducing, diagnosing and treating the maternal/prenatal morbidity/mortality.
	1800		Maternal nutrition and reproductive health	Community nutrition in relation to population and development and reproductive health
	2100		Reproductive health epidemiology	Introduce epidemiological principles to reproductive health problems Determinants of reproductive health Maternal health epidemiology Relations between maternal reproductive health and child health Male reproductive health epidemiology Epidemiology of sexually transmitted infections Public health interventions and strategies for the promotion of reproductive health, develop and assess a reproductive health surveillance system

Emerging gender discourses	School	Area of specialisation	Compulsory, core and elective courses	Summary of gender-related content
			THE WOMEN DISCOURSE	
	2500		Maternal and child health	Polices and services – comparative US policy on maternal and child health with country XX, maternity services. Women's and children's bodies- family planning, HIV/AIDS, prevention of child to mother transmission, maternal and child nutrition (over and under nutrition), Foetal alcohol syndrome and other alcohol related problems, Children with developmental disabilities Social issues - child welfare grants, and other social welfare and poverty alleviation programmes, ADS orphans
Gender as a biological construct	1200		Principles of epidemiology	Person – age, sex, ethnicity, social class, occupation

Appendix 9: Layering and representation of gender within areas of specialisation

Code	Area of specialisation	Module/unit 1st layer	Topic 2nd layer	Description with gender content 3rd layer	Representation
1200	Hospital administration	Human resource management	Personnel management	Gender issues: sexual harassment at place of work, women in management	Explicit
	Health promotion	Theory and principles of health promotion	Key concepts in health promotion	Social and gender inequalities	Explicit
	Health services management	Population, health and development	Women's health	Demographics, health needs, indicators of health status and health care use, interactions among women's social, the recursive relationship between women's reproductive and productive roles and their health and status, economic and health rationale for family planning, implications for policies and programs on women health.	Implicit
	Disaster management and preparedness	Health services for displaced persons	Health planning: Family health care	Health care for women and children	Implicit
		Rehabilitation and resettlement of displaced people	Vulnerable groups identification	women, minors, adolescents	Implicit
	Human nutrition	Nutrition and primary health care	Maternal and child nutrition:	Nutritional requirements in pregnancy and lactation	Implicit
	Maternal and child health	Organization and management of MCH services	Maternal Child Health (MCH)	Key concepts; definitions; needs assessment; planning; organization implementation, monitoring, evaluation and sustainability.	Implicit
			Policy	Development of MCH services: organization of MCH services; global; national; urban; rural; peri-urban; district approach to MCH service delivery.	
			Applications	Needs assessment; planning - goal setting; budget; work plan formulation; funding; staffing; cost benefit analysis. Implementation of MCH programs, Monitoring and evaluation of MCH programs, Research in MCH service delivery (quantitative; qualitative; health systems research).	

Code	Area of specialisation	Module/unit 1st layer	Topic 2nd layer	Description with gender content 3rd layer	Representation
			Social and family health aspects of MCH	Family violence; child abuse, Parenting	
			Legal	Work and women, maternity benefits; day care; maternal education and child health.	
			Research	Research in family and social aspects of MCH - Qualitative, Quantitative	
			Applied clinical practice in MCH	Maternal health indicators: ANC, conception, pregnancy - diagnosis, high risk; family planning; maternal nutrition; HIV/AIDS; STI Abortion and ethics: Labour – induction, caesarean section, maternal mortality Perinatal health indicators: Care of mother during delivery and puerperium Labour management: Infective in the puerperium, Psychological problem, puerperal, psychosis. Post-natal depression: Care of the newborn; resuscitation perinatal care of the mother and baby prematurity low birth weight, birth trauma, congenital malformation. Nutrition and malnutrition Nutrition in pregnancy, Breast feeding, Weaning practices	
1500	No areas of specialisation	-	-	-	-
1600	No areas of specialisation	-	-	-	-
1700	Social and behavioural aspects of health	Gender and health	-	The main aim of this course is to provide Public Health and Development Workers with the relevant understanding of the role of gender in health and welfare of the populace. The course examines the interrelationship of gender and health. It examines the socio-cultural, socio-political and socio-economic constructs of gender	Explicit

Code	Area of specialisation	Module/unit 1st layer	Topic 2nd layer	Description with gender content 3rd layer	Representation
				and how these constructs impact on women and men's health in the developing world. The central idea of the course, however, is to move beyond a description of specific health problems to critically analyze how women and men's health problems develop, are perceived, and are responded to both medically and socially in contemporary society. In this context, an important theoretical aspect of the course is the development of a socio-medical perspective on health and, specifically, the analysis of women and men's health in relation to their lives and how these experiences are shaped by culture, social institutions and social policies. Some topics under this course are gender concepts; patriarchy; gender, experience, culture, power, and health; poverty, health and health care, gender and men's health. Additionally, it explores the various ways in which the study of gender and health helps Public Health and Development workers to understand women and men's health in a changing world.	
1800	Population and reproductive health nutrition	HIV infection in women, children and adolescents: policies, rights issues and management.	-	Epidemiology of HIV and AIDS. Risk factors and social context for women, children and adolescents including harmful practices. Societal, Biological, political linkages between the epidemic in the three groups. Policy, programmatic and prevention issues. Local and regional factors/issues in control of infections	Implicit
2100	Environmental and occupational health	Environmental Endocrine Disruptors and Health	-	To give information regarding the physiological, reproductive, biochemical, and epidemiological research techniques, including exposure assessment, specific for EDCs, for use on the (sub-) continent	Implicit
	Health research ethics	Public Health, Ethics and Human Rights	-	Understand and accommodate special situations; vulnerable populations, gender and health. Be able to argue for and against ethical dilemmas in resource allocation, gender and environmental health	Explicit
		Critical issues in health research	-	Posses the knowledge and skills to uphold the integrity of informed consent in specific contexts, such as resource poor settings and in different cultures, and with vulnerable populations, for example, children, rural women, the mentally ill and institutionalized populations	

Code	Area of specialisation	Module/unit 1st layer	Topic 2nd layer	Description with gender content 3rd layer	Representation
	Health promotion	Sexual and reproductive health	-	To familiarize students with the historical development of the reproductive health concept; to expose students to contemporary issues and debates in the field, to help them develop the ability to apply a reproductive health perspective to research strategies, policy analysis, programme planning and or evaluation design. To equip students with both the social science and biomedical approaches to understanding reproductive health issues, and will enable students to gain a deeper understanding of the social and biological factors that shape sexual and reproductive health To understand the genesis of the ICPD and Beijing and specifically to understand the historical development from population control to the current rights approach and the significance of this to the promotion of equity. Identify and discuss the current issues and debates in sexual and reproductive health and rights based on the life cycle approach To understand the social, cultural, political and biomedical dimensions of sexual and reproductive health The ability to plan specific preventive, educational and management strategies as well as plan and implement research in sexual and reproductive health that are gender sensitive and culturally sensitive Recognize the need for multi-sectoral approaches to sexual and reproductive health problems. Confront problems in maternal, adolescent and child health with comprehensive and integrative approaches	Implicit
2200	Areas of specialisation have no gender content	No course with gender content	-	-	Absent

Code	Area of specialisation	Module/unit 1st layer	Topic 2nd layer	Description with gender content 3rd layer	Representation
2400	Maternal and child health	-	-	The MPH in the field of Maternal and Child Health is designed to prepare professionals working in government departments, NGOs, the private sector or academic institutions for leadership positions in the field of Maternal and Child Health. The four modules include Child Health I and II, Maternal and Reproductive Health and Perinatal and Paediatric HIV. The course focuses on developing student's competencies in areas such as critical and analytic thinking, management and communication, policy and advocacy, working with others (including community), and ethics and values. The course is designed to integrate the achievement of these diverse skills into the coursework and assignments. Although the course includes clinical issues (such as diarrhoeal disease, child disability or maternal mortality), the emphasis is on the programmatic dimensions of the critical issues affecting women and children, particularly in resource constrained settings.	Implicit
2500	Maternal and child health and nutrition	-	-	Advocacy for maternal and child health nutrition MTCT programmes for HIV infected pregnant women	Implicit

Appendix 10: Layering and representation of gender within the core courses

Code	Core course	Module/unit 1st layer	Description with gender content 2nd layer	Representation
1200	Principles of Public Health	Principles and key concepts in public health	Gender and empowerment	Explicit
	Principles of epidemiology	Descriptive epidemiology	Sex	Implicit
	Social dimensions of health	*Gender and health	Men, women and children's health, gender aspects in the health profession	Explicit
		Moral philosophy	Ethical consideration of abortion	Implicit
1500	Special public health issues	Reproductive health and family health	Historical background, activities and organization of maternal and child health services Breastfeeding, lactation and management Women's health and gender issues: female genital mutilation, violence, income generation and empowerment of women, family planning services, family planning and breastfeeding	Implicit Explicit
		Health of school age and adolescence	Adolescence: definition markers significance, adolescent sexuality and related sexual and reproductive health consequences, cultural and biological factors which put adolescents at risk for sexual and reproductive health problems, reaching the out of school of adolescents with health promotion interventions	Implicit
1600	Family and reproductive health	-	Awareness of maternal, child health and family public health issues	Implicit
	Demography and population dynamics	-	Fertility indices, effect of fertility, mortality and migration on age distribution, reproductive health surveys,	Implicit
	Environmental health	-	Gender and environment	Explicit
1700	No gender content in core courses	-	-	Absent
1800	Community nutrition in relation to population and development and reproductive health	-	Nutrition education in child development, maternal nutrition and reproductive health	Implicit
2100	No gender content in core courses	-	-	Absent

Code	Core course	Module/unit 1st layer	Description with gender content 2nd layer	Representation
2200	No gender content in core courses	-	-	Absent
2400	No course descriptions for core courses	-	-	Absent
2500	No gender content in core courses	-	-	Absent

* Gender and health appears in the official curriculum but is not taught due to lack of gender expertise.

Appendix 11: Layering and representation of gender within elective courses

Code	Elective modules/units	Description with gender content	Representation
1200	*Gender, sexuality and health	The principal theory underpinning our understanding of gender/sex, sexual identity and sexual health. Theories: Biological; psychoanalysis and psychology; feminism and political science; philosophy and social construction theories. Health: The relationship between sex and health; sex behaviour surveys, epidemiology of HIV/AIDS and other sexually transmitted diseases, prevention and control of AIDS in relation to gender the importance and place of community based response in relation to gender and health. The unanswered questions: Gender power, notions of desire, social and sexual networks, personhood and power of language and community.	Explicit
1500	No electives	-	-
1600	No electives	-	-
1700	Global perspectives in health promotion	The course is designed to help the student examine the challenges associated with the implementation of Health Promotion activities around the globe with special reference to developing country contexts. It also provides insights into how to design effective strategies within severe resource constraints. Health Promotion interventions have contributed to substantial improvements in the health status of many nations. Systematic motivations of families clearly helped bring about the reductions in mortality rates recorded in many countries. In recent years, these impressive gains in maternal and child survival have levelled off in some countries; while in others, the positive trends have even reversed. Important lessons learned will be discussed.	Implicit
	Theories and models of gender and health	Several theories and models explain the concept of gender and give meaning to gender constructs and terminologies. This course examines, in detail, theoretical frameworks of feminism and masculinity, patriarchy and matriarchy and how these apply to gender health and development in the gender particularly those that apply to gender, health, development and gender research.	Explicit
	Ageing and health	This course aims to impel the recognition of health of ageing women and men and a major public health and development issue, based on the fact that the numbers of ageing women are increasing worldwide. Women's life course beyond age 50 extends for a significant period and is increasing everywhere in the world; that there is a very significant scope for improving the health of ageing women and thus ensuring that they remain a resource for their families and communities, Currently, more than half of the world's women aged 60 years and over are living in developing regions, 198 million compared with 135 million in the developed regions. The percentage of older women and men living in developing regions will grow dramatically in the future, since two-thirds of the women in the age group 45-59 currently live in developing countries as compared with only one third in the developed countries.	Implicit

Code	Elective modules/units	Description with gender content	Representation
	Women's health in Sub-Saharan Africa	The focus of this course is to present a critical review of the various factors that determine women's health in sub-Saharan Africa. Specifically the course will analyse the various constructs on population growth, early marriage, family size, population control (methods of child spacing and decision-making processes), women's situation and rights, and share of changing lifestyles and associated health problems. The course will cover the impact of cultural and religious beliefs on reproductive health and contraception, effects of structural adjustment programs, gender empowerment and changing health care systems in sub-Saharan Africa, theoretical frameworks. Feminist theories, social constructionist theories, Health and illness issues specific to women such as Pregnancy and childbirth, maternity services, fertility in relation to women, reproductive technologies, menopause. ·.Public health and women's health. ·Public health and men's health, Use of antenatal and postnatal health services, Risk of sexually transmitted infections, including HIV/AIDS. The main goal of the course is to let students understand a variety of health problems faced by sub-Saharan African women which are often compounded by cultural values and religious principles that undermine decision-making processes on reproductive and other health issues. The course will also emphasize some of the emerging changes that have been brought about by the current economic crises as well as changes in gender perspectives in sub-Saharan Africa. Students will have the opportunity to compare the situation of sub-Saharan African women with women from other parts of the world including the United States.	Implicit
	Gender and violence	The main aim of this course is to analyse the impact of cultural and religious beliefs on gender issues as they relate to violence. Topics to be treated in this course include , prevalence of violence by intimate partners, physical, emotional and sexual violence, women's coping strategies and responses to physical violence, demographic factors associated with violence, women's violence against men, women's attitudes towards violence, sexual abuse in childhood, association between violence by intimate partners and women's physical, sexual and reproductive health, women's self-reported health and physical symptoms, injuries caused by physical violence by an intimate partner and , Mental health.	Explicit
1800	Family planning policies and programs.	Introduces issues and programmatic strategies related to the development, organization and management of family planning programs, especially in developing countries. Topics include social, economic, health. and human rights rationale for family planning, identifying and measuring populations in need of family planning services; social, cultural, political and ethical barriers; contraceptive methods and their programmatic requirements; strategic alternatives including and vertical programs and public and private sector services information; education and communication strategies; management information systems and the use of computer models for program design	Implicit

Code	Elective modules/units	Description with gender content	Representation
	Public health problems in mother and newborn; prevention of mortality and promoting the health of women, infants and children.	Maternal and prenatal morbidity. Health care practices utilised to prevent, diagnose and treat the morbidity/mortality. Review of fundamental components of strategies to reduce maternal/prenatal morbidity/mortality including behaviour change intervention. Development of community level intervention including of Chew Tabs etc. Policy and programmatic interventions.	Implicit
2100	Principles of chronic disease epidemiology	Describe the epidemiology of common chronic diseases and the relationships between socio-economic status, age, gender, ethnicity and chronic disease occurrence	Explicit
	Critical issues in women's health research.	Equip students with an awareness and understanding of the ethical issues associated with gender inequity in research as a violation of the principle of justice and also as an affront to women's rights to self determination. Assist researchers and learners to recognize and understand the challenges to informed consent in vulnerable communities of women Equip students with an awareness and understanding of the ethical issues associated with gender inequity in research as a violation of the principle of justice and also as an affront to women's rights to self determination. Assist researchers and learners to recognize and understand the challenges to informed consent in vulnerable communities of women Help learners to and understand the ethical issues associated with research during different physiological stages in the women's life. Identify the ethical issues that from the basis for the inclusion of both genders in biomedical or behavioural research in a way that reflects a thorough understanding of the distributive justice system Identify and develop an understanding of the different cultural and social frameworks diverse communities of women carry in the context of their participation in research Identify and discuss the ethical issues associated with the conduct of research in pregnant and lactating women Identify and discuss the ethical issues associated with studies in women for the development of agents for conception and contraception Identify and discuss challenges to recruitment and retention of diverse and vulnerable communities of women in the research process. Explain gender discrimination in research from a historical perspective and demonstrate an understanding of how world views shape people's conception of gender bias in health research Explain the ethical issues in research in vulnerable and diverse populations of women and demonstrate means whereby unscrupulous and unethical research in this class of women can be prevented Display fair knowledge of the barriers to recruitment and retention of women to participating in research trials and must be able to demonstrate that recruitment remains one of the most challenging and underestimated phases of the research process in women Display a fair knowledge of the different ethical issues associated with research at the different physiological phases in a woman's life	Implicit

Code	Elective modules/units	Description with gender content	Representation
		Display a sound knowledge of local and international guidelines and regulations regarding the inclusion of women in clinical research trials. Formulate a clinical trial protocol which would ensure similar representation of both genders and which is prospectively designed to evaluate potential gender differences	
	Reproductive health epidemiology	Introduce epidemiological principles to reproductive health problems. Topics covered will include determinants of reproductive health. Maternal health epidemiology, relations between maternal reproductive health and child health, common sexually transmitted infections, male reproductive health epidemiology, public health interventions for the promotion of reproductive health, Apply basic concepts of epidemiology and surveillance to reproductive health problems; calculate and interpret measures of disease frequency in reproductive health; develop and assess a reproductive health surveillance system; understand the basic principles of maternal health epidemiology; understand the basic principles of the epidemiology of sexually transmitted infections; understand the determinants of maternal health; understand the public health strategies for the promotion of maternal health.	Implicit
2200	Gender and health	To understand issues of gender and its impact on health and health care. Global patterns in Gender and Health; Gender and Health in South Africa; Men, Gender and Health ; Gender Theory ; Changing practices and mainstreaming gender: Strategic and practical approaches Specific topics will be used to examine the impact of gender on health. These include: • Gender and HIV/AIDS • Women, work and health • Gender-based violence • Termination of pregnancy • Gender and work • Gender and mental health	Explicit
2400	No electives	-	-

2500	*Gender and health	To understand issue of gender and their impact on women's and men's health; to discuss key issues in providing gender-sensitive health services, with a special emphasis on developing countries and South Africa.
		The course will consist of the following areas:
		• Understand the difference between sex and gender
		• Understand the impact of gender on the health of women and men:
		   - Variation in patterns of health and illness
		   - Inequalities in health status and access to health care between women and men
			Explicit

Code	Elective modules/units	Description with gender content	Representation

		• - How the processes shaping these biological and social realities are created and sustained
		• Analyzing health problems from a gender perspective
		• Changing practices – mainstreaming gender
		• Specific topics will be used to examine the impact of gender on health and on the delivery of gender-sensitive health-care services. These include:
		  - HIV
		  - Cancer of the cervix
		  - Gender-based violence
		  - Termination of pregnancy
		  - Gender and work	

	Maternal and child health	A comparative policy analysis of US and South African policies and their impact on maternal and child health will be covered, including but not limited to the following issues in maternal and child health: • Family planning • Child welfare grants, and other social welfare and poverty alleviation programmes • HIV/AIDS, prevention of child to mother transmission, aids orphans • Maternal and child nutrition (over and under nutrition) • Foetal alcohol syndrome and other alcohol related problems • Maternity services • Children with developmental disabilities.	Implicit
	Women's health and well-being	You will explore the concept of well- being and the values associated with it, in relation to women's physical, social and mental health. This exploration is intended to give the opportunity to gain a gendered perspective about health issues and how health issues intersect with power relations in different cultural contexts. You will have the opportunity to compare your views and experiences on this topic with those of other participants from your own geographic location as well as from other geographic locations. The module will culminate with a collaborative group project in which you will analyze and reflect upon how a particular aspect of women's health and well-being is enhanced or compromised in a local context. Some of the topics covered include the following: • Definitions and personal as well as comparative perspectives on women's health and well-being • Ways in which women's health can be enhanced or compromised • Conceptualizing and analyzing women' health and well-being in relation to parameters of: race, class, age/generation, geographical context, historical context, cultural contexts and sexual orientation. You will be working in a small group collaboratively to deepen your knowledge of women's health and well being in terms of the points listed above: mental health issues, HIV/AIDS, reproductive health and sexuality, women's bodily integrity and social well-being.	Implicit

*   Although Gender and health modules appear in the official curriculum but they are not taught due to lack of gender expertise.

Appendix 12: Naming of women as gendered category

Code	Women as a gendered category	Course
1200	Demographics, health needs, indicators of health status and health care use, interactions among <u>women's</u> social, the recursive relationship between <u>women's</u> reproductive and productive roles and their health and status, economic and health rationale for family planning, implications for policies and programs on <u>women health</u>	Health Services Management
	<u>Women</u> in management	Human Resource Management
	Vulnerable groups: <u>women</u>	Rehabilitation and Resettlement of Displaced Persons
1500	<u>Women's health</u> and gender issues, female genital mutilation, violence, income generation and empowerment of women	Special Public Health Issues
1700	<u>Women's</u> coping strategies and responses to physical violence, <u>women's</u> attitudes towards violence, <u>women's</u> physical, sexual and reproductive health, <u>women's</u> self-reported health and physical symptoms, injuries caused by physical violence by an intimate partner.	Gender and Violence
	<u>Women's</u> life course beyond age 50 extends for a significant period and is increasing everywhere in the world; that there is a very significant scope for improving the health of <u>ageing women</u> and thus ensuring that they remain a resource for their families and communities. The numbers of ageing women are increasing worldwide. Currently, more than half of the world's <u>women</u> aged 60 years and over are living in developing regions.	Ageing and Health
	The focus of this course is to present a critical review of the various factors that determine <u>women's health</u> in sub-Saharan Africa. Specifically the course will analyze … <u>women's situation and rights</u>, <u>health and illness issues specific to women</u> such as pregnancy and childbirth, maternity services, fertility in relation to women, reproductive technologies, menopause, <u>public health and women's health</u>. The main goal of the course is to let students understand a variety of health problems faced <u>by sub-Saharan African women</u> which are often compounded by cultural values and religious principles that undermine decision-making processes on reproductive and other health issues. Students will have the opportunity to compare the situation of <u>sub-Saharan African women</u> with <u>women from other parts of the world including the United States</u>.	Women's Health in sub-Saharan Africa
1800	Educational issues in pregnancy and <u>women's health</u>.	Population and Reproductive Health

Code	Women as a gendered category	Course
2100	Equip students with an awareness and understanding of the ethical issues associated with gender inequity in research as a violation of the principle of justice and also as an affront to women's rights to self-determination. Explain the ethical issues in research in vulnerable and diverse populations of women and demonstrate means whereby unscrupulous and unethical research in this class of women can be prevented.	Public Health, Ethics and Human Rights.
2200	Women, work and health.	Gender and Health

Appendix 13: Naming of mother and child

School	Area of specialisation	Course	Content
1200	Maternal and child health (MCH)	Social and family aspects of MCH Applied clinical practice in MCH	Maternal education and child health Maternity benefits Research in family and social aspects of MCH Maternal health indicators: maternal nutrition, maternal mortality, care of the mother during delivery and puerperium, care of the mother
1500		Special public health issues	Historical background, activities and organization of MCH
1800		Population and reproductive health nutrition	Public health problems in mother and newborn: prevention of mortality and promoting the health of women, infants and children Maternal and prenatal morbidity and mortality Review of fundamental components of strategies to reduce maternal/prenatal morbidity/mortality including behaviour change intervention HIV infection in Women, Children and Adolescents: Policies. Right Issues and management: Epidemiology of HIV and AIDS: risk factors and social context for women, children and adolescents; Biological, political linkages between the epidemic in the three groups Women's status/work roles and child care/health
2100	Maternal and child health (MCH)	Critical issues in informed consent Sexual and reproductive health	Vulnerable populations: children, and rural women Maternal reproductive health and child health

Appendix 14: Naming of family as a gendered category

School	Area of specialisation	Course	Content
1200	Maternal and child health (MCH)	Social and family aspects of MCH	Influences: Family violence, parenting; Legal: work and women, maternity benefits, maternal education and child health. Research in family and social aspects of MCH.
	Disaster management & preparedness	Health planning	Health services for displaced persons: Care for women and children: Family health care.
1500		Special public health issues	Gender Issues: Reproductive health and family health.
1700	Social and behavioural sciences	Women's health in Sub-Saharan Africa	Specifically the course will analyze the various constructs on population growth, early marriage, family size, population control (methods of child spacing and decision-making processes

Appendix 15: Naming of men as a gendered category

School	Area of Specialisation	Course/core/elective	Content
1200		Gender, sexuality and health	Men, gender and health
1700	Social and behavioural aspects of health	Gender and health	Gender and men's health
1700		Women's health in Sub-Saharan Africa	Men's health in relation to public health
2100		Reproductive epidemiology	Male reproductive epidemiology

Appendix 16:   The use of "*rights*" in the curriculum

Code	Course	Content
1700	Women's Health in Sub-Saharan Africa	Specifically the course will analyse … women's situation and rights…
1800	Population and Reproductive Health Nutrition	Family planning policies and programme: Topics include economic, health and human rights rationale for family planning… HIV infection in Women Children and Adolescents: policies, rights issues and management
2100	Sexual and Reproductive Health	To understand the genesis of the ICPD and Beijing and specifically to understand the historical development from population control to the current rights approach and the significance of this to the promotion of equity; Identify and discuss the current issues and debates in sexual and reproductive health and rights based perspectives on the life cycle approach
	Public Health, Ethics and Human Rights*	Understand and accommodate special situations; vulnerable populations, gender and health. Be able to argue for and against ethical dilemmas in resource allocation, gender and environmental health
	Ethical Issues in Women's Health Research	Equip students with an awareness and understanding of the ethical issues associated with gender inequity in research as a violation of the principle of justice and also as an affront to women's rights to self determination
2200	Public Health and Society	The social analysis of patterns of disease and death: vulnerable groups, human rights and health

*The word "rights" appears in the course name but not in the course description.