

Expert Meeting

Establishing A Network of Schools of Public Health in India



MEETING
REPORT
2025

Expert Meeting

Establishing A Network of Schools of Public Health In India



Meeting Report, 2025

EXECUTIVE SUMMARY

Recognising the increasing demand for collaborative efforts in enhancing public health education, research, and practice, the Public Health Foundation of India (PHFI) organised an expert meeting on 12–13 June 2025 in Manesar, Gurugram. The main goal was to start building a Network of Schools of Public Health in India (NSPHI), which would bring together key academic leaders and experts from 13 top public health institutions nationwide.



The meeting focused on sharing insights about the current landscape, emerging trends, and future directions in public health education in India, particularly regarding the growth and diversity of Master of Public Health (MPH) programs. Discussions addressed workforce projections, program variations, and the importance of creating clearly defined career pathways for MPH graduates. A comprehensive desk review identified 21 core public health functions and several emerging roles relevant to MPH professionals, which were further refined and prioritized through collaborative exercises among participants.

Global perspectives and models of similar networks operating globally were shared by experts from international networks such as ASPPH (USA), ASPHER (Europe), and CAPHIA/APACPH (Asia-Pacific), offering valuable guidance for developing an Indian network. These insights helped shape the proposed vision, mission, and core activities of NSPHI, which aim to enhance excellence in public health education, program and policy relevant research, promote equity-driven research, and strengthen public health practice.

Participants discussed key components for the network's structure, including membership criteria, roles & responsibilities, governance mechanisms & structure, and strategies for long-term sustainability. PHFI was designated to host the network secretariat, with supporting communication and coordination mechanisms.

Following deliberations, the name **Network of Schools of Public Health in India (NSPHI)** was unanimously adopted. The network's tentative launch is planned for **January 2026**, depending on the progress of formalisation steps, including institutional consent from founding members.

This report captures the key outcomes and next steps toward building a robust and impactful national network to advance public health capacity and collaboration across India.

INTRODUCTION

In response to the increasing need for collaborative solutions to tackle complex challenges in public health education, research and practice, an expert meeting was convened to initiate the establishment of a Network of Schools of Public Health in India. The meeting brought together distinguished academicians and institutional leaders from 13 leading public health academic institutions across the country (Annexure 1), with the shared objective of fostering a cohesive and sustainable platform for collaboration in public health education, research, and practice. The list of institutions, along with the list of participants, is provided in Annexure 1.



The meeting served as a platform for sharing experiences, identifying common priorities, and exploring partnership models aimed at enhancing the quality and relevance of public health schools in the country. Participants also discussed the vital role of Schools of Public Health in addressing regional health needs, promoting health equity, and

contributing to the achievement of national and global health goals. This report summarizes the key discussions, outcomes, and recommendations from the expert meeting. It outlines the proposed next steps toward establishing a functional, collaborative, and impactful network of Schools of Public Health in India.

The agenda of the meeting is enclosed in Annexure 2.

Day 1: 12th June 2025

The meeting commenced with a welcome address by Prof. Sanjay Zodpey. He expressed his gratitude to the participants for their time and commitment to this important initiative. Prof. Zodpey underscored the significance of the effort and emphasised the crucial role of collaboration in its success. He highlighted that this is a timely opportunity to establish a network of schools of public health across India.

Current Status of PHE in India

Public Health Education in India: An overview

Prof. Himanshu Negandhi provided a comprehensive overview of Public Health Education in India, beginning with the core system building blocks of public health. He emphasized that public health workforce development serves not only as a foundational pillar but also as an essential enabler within the broader health system.

He presented insights into the supply side of public health professionals, detailing the number of institutions and their intake capacities across a range of public health programs. These included: MD (PSM/CM), DPH/DCM, MD (CHA/TM/HA), MHA (offered by medical colleges), various diploma programs (HA/HE/IH/TMH), MPH, Epidemiology, Health Administration/ Management, Hospital Administration/Management, Health and Hospital Management/ Administration, and Public Health Management (PGDPHM).

Prof. Negandhi also highlighted public health workforce projections, highlighting projected needs and existing gaps in public health professionals in India through 2026. He discussed how the National Health Policy 2017 and the introduction of the Public Health Management Cadre have contributed to the evolving landscape, shaped and accelerated the demand for trained public health professionals, and driving greater demand for MPH programs. He stressed that in addition to attracting talented students, these programs must also focus on defining clear career pathways and ensuring job opportunities for graduates.

In conclusion, Prof. Negandhi emphasized the value of inter-institutional collaboration, describing it as a mutually beneficial approach. He stressed that working together toward shared goals and resource optimisation can benefit all stakeholders. He advocated for public health institutions to **align on shared goals and resource-sharing initiatives** while **continuing to maintain competitive interest in other areas**.

The presentation is enclosed in Annexure 3.

Current Status of MPH Programs in India

Ms. Shanti Dahal gave a thorough account of the growth of Master of Public Health (MPH) programmes in India. She noted that what started as a small initiative in 1995 with just one institute has now become a much broader landscape over the past three decades. As of June 2025, there are 153 institutions offering MPH programmes, with a total intake capacity of over 3,600 seats (data available from 121 institutes). Besides MPH programmes, several institutions now offer MSc and MA degrees in public health. Overall, India currently has 162 institutions offering public health programmes at the master's level, with more than 3,700 available seats.

She highlighted the variation in program nomenclature, specializations, and modes of delivery. Some institutions now offer one-year MPH programs, while Executive MPH programs are increasingly delivered in hybrid formats. Presenting a zonal distribution analysis, she pointed out that the western region leads in the number of institutions, followed by the northern and southern regions, with the northeastern region having the fewest. Currently, 31 medical colleges offer MPH programs across the country. At present, 48 public institutions and 105 private institutions in India offer MPH programs.

Ms. Dahal also outlined the evolving admission criteria and selection processes, noting that some institutions are increasingly open to candidates from multidisciplinary backgrounds. Admission selection methods now include entrance exams, interviews, statements of purpose, merit-based evaluations, and consideration of prior work experience.

Ms. Dahal also shared insights into program affordability. She cited the lowest fee for an MPH program as Rs. 692/-, charged by a public university, and the highest at Rs.18,82,052/- (22000 USD), charged by a private university in partnership with an international institution. Some government institutes also provide stipend to students pursuing MPH programs.

Sharing research by the PHFI Placement Cell, she provided insights into career pathways for public health professionals, including employment sectors and average salary ranges for MPH graduates. Due to challenges of obtaining comprehensive placement data from all institutions, she shared specific placement statistics from the five Indian Institutes of Public Health (IIPHS).

Ms. Dahal emphasized the need for institutions to establish robust placement systems and processes. She advocated for the creation of a national consortium of public health education institutions focused on placements and career development. She also emphasized the importance of providing professional skills training to enhance students' employability.

In conclusion, Ms. Dahal introduced two key initiatives led by the PHFI Placement Cell: *Public Health Career Website* and the *eCourse on Career Development in Public Health*. Both initiatives are designed to support and guiding public health job seekers across the country.

The first session concluded with discussions regarding the requirements of public health professionals in the country.

The presentation is enclosed in Annexure 4.

Public Health Functions to be performed by MPH graduates

Prof. Rajesh Nair provided a brief overview of public health and its various definitions offered by different organizations i.e. The WHO, American Public Health Association (APHA) and Faculty of Public Health, UK to highlight the different focus to the role of public health. He then presented a desk review exercise, which analyzed 33 references obtained from a wide range of sources, including national and international public health institutions, public health associations (such as APHA, FPH, NPHF, IPHA), international and UN public health organizations, regional public health bodies, the Indian Public Health Standards (2022), and the PHMC policy document (2022).



From this review, a list of 21 core public health functions expected of MPH graduates was identified, along with six emerging functions not previously documented in the literature.

The following functions were identified:

List of key Public Health Functions based on the desk review

1. Public Health Surveillance
2. Monitoring, and Evaluation of Population Health and Public Health Programs
3. Disease Prevention and Control
4. Health Promotion and Communication
5. Empowering Communities through Community Engagement and Participation in Public Health
6. Public Health Policy Development
7. Public Health Emergency, Disaster Preparedness and Response
8. Health Protection
9. Development of a Competent Public Health Workforce (Training and Education)
10. Addressing Health Inequity and Inequality (Ensuring Equitable Access to Quality Health Services, Technologies, and Interventions)

11. Public Health Management, Leadership and Public Health Stewardship
12. Health Economics and Financing
13. Building Partnerships and Collaborations
14. Addressing Social Determinants of Health
15. Health System Governance and Service Delivery
16. Public Health Research
17. Quality Assurance and Continuous Improvement in Public Health Services
18. Public Health Planning
19. Public Health Law, Regulation and Enforcement
20. Environmental and Occupational Health
21. Public Health Security including Global Health Issue

Additional Public Health Functions identified based on emerging issues in public health

1. Use of AI and Digital Tools and Technology in Public Health
2. Addressing Commercial Determinants of Health
3. Deciphering the connect between Climate Change and Health
4. Understanding and management of Big Data Analytics
5. Global Health/Globalization of Health
6. Use and Application of Statistical Tools and Data Management

To further build on these identified functions, participants were invited to engage in the following exercises with an intent to identify public health functions which are not yet listed as part of the desk review:

Exercise 1

1. Is there any function which you feel MPH graduates should perform but is missing in the list?
2. Is there any overlap of functions, which you think should be combined?
3. Is there any function which needs to be rephrased?

Exercise 2

Please categorize the public health functions in 3 groups, based upon their requisite for MPH graduates as follows:

1. **Must Know** [Mark as K]
2. **May Know** [Mark as M]
3. **Desirable** [Mark as D]

Exercise 3

Please categorize the public health functions in 4 groups, based upon their requisite for MPH graduates as follows:

1. **Define and describe problem** [Mark as P]
2. **Design solution/interventions** [Mark as S]
3. **Implement Solution** [Mark as I]
4. **Evaluation** [Mark as E]

Exercise 4

Please classify the public health functions in following 3 groups:

1. **Assessment** [Mark as A]
2. **Policy Development** [Mark as B]
3. **Assurance** [Mark as C]

Exercise 5

Please prioritize and rank the functions as per their importance in public health. Some ranks may overlap also.

Please consider 1 as the most important function and subsequently the numbers in ascending order being the least important function

The participants actively engaged in all the exercises, contributing by rephrasing some functions and identifying new functions that were not originally included in the list.

The list of 21 public health functions identified through desk review, along with 6 additional functions based on emerging public health issues, was shared with the participants. As part of Exercise 1, participants were asked to review all 27 functions and identify: (a) any public health function that may be missing from the list, (b) any function that appears repetitive or overlapping and could be merged with another, and (c) any function that may require rephrasing for better clarity.

Participants identified a few additional public health functions that were not included in the original list. Upon review, these new functions were incorporated into the existing list, and the revised list was shared with participants for the next set of exercises. In Exercises 2, 3, and 4, participants classified the functions based on defined criteria. Finally, in exercise 5, they were asked to rank the functions in order of importance.

The presentation is enclosed in Annexure 5.

GLOBAL PERSPECTIVES

Network of Schools of Public Health

Dr. Twinkle Shokeen provided a broad overview of various networks of schools of public health, including the Association of Schools and Programs of Public Health (ASPPH, USA), the Association of Schools of Public Health in the European Region (ASPHER), the Asia-Pacific Academic Consortium for Public Health (APACPH), the Pacific Public Health Surveillance Network (PPHSN), and the South-East Asia Public Health Education Institutions Network (SEAPHEIN). She also highlighted the International Association of National Public Health Institutes (IANPHI), the Africa Academy for Public Health (AAPH), the Latin American Alliance for Global Health (ALASAG), the Council of Academic Public Health Institutions Australasia (CAPHIA), the Global Evaluation and Monitoring Network for Health (GEMNet-Health), the Africa Research, Implementation Science, and Education (ARISE) Network, the Global Network for Academic Public Health (GNAPH), and the Africa One Health University Network (AFROHUN).

Dr. Shokeen discussed the founding years of these networks, their membership compositions, and their core purposes.

The presentation is enclosed in Annexure 6.

Developing a Framework for the Network – 1

GROUP WORK

- Vision and Mission for the network
- List of activities for the network

The participants were divided into two groups, each facilitated by Prof. Rajesh Nair and Prof. Himanshu Negandhi. The groups were assigned with the task of **developing the vision and mission for the network**, as well as **identifying key activities to be undertaken**. The exercise was highly productive, and drawing on everyone's input, the following outcomes were finalized:



Vision Statement

Enhancing public health education, research & practice for Swastha Bharat/ Healthy India

Mission Statement

Through collaborations and partnerships among member institutions:

- a. Assuring excellence in public health education
- b. Promoting program, policy relevant, equity driven research
- c. Strengthening health systems public health practice and community engagement
- d. Acting as a platform for health policy dialogue

List of activities

The activities were broadly classified into 3 groups:

Public Health Education

- Co-curriculum designing
- Development of Competency Framework
- Joint development and delivery of value-based concentration to develop specific competencies
- Capacity building of public health educators and learners
- Webinars, online sessions, countrywide classrooms
- Accreditation of the programs
- Sharing of educational material
- Provision of academic credit exchange
- Provision of internships
- Recognition of Adjunct/ Honorary faculty
- Build quality assurance mechanisms for pedagogy, and student outcomes
- Facilitate faculty and student exchange, support for examiners, etc.
- Writing and publishing books for MPH programs in India

Public Health Research

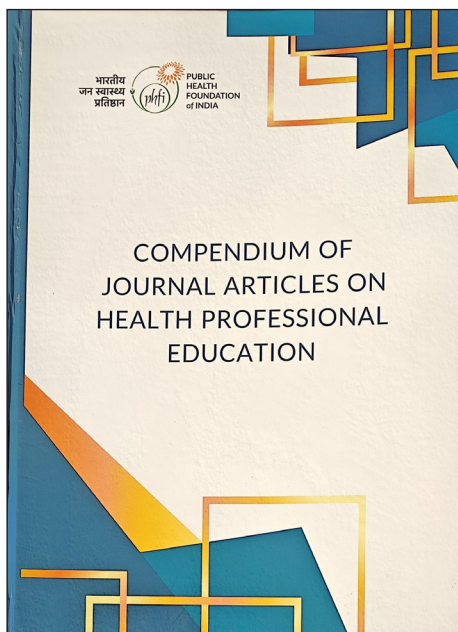
- Development of courses for research capacity building
- Capacity building through trainings, providing capacity building grants, seed grants and fellowships
- Joint research proposals, Joint publications
- To work with other global agencies/ global networks
- Students' joint research activities as a part of thesis or dissertation
- Student participation in conventions, conferences, colloquiums etc. example ACIES at IIPH-Gandhinagar
- Resource mobilization for conducting joint research

Public Health Practice

- Students participation in NHM or National Health Programs for experiential learning
- Network will work with national/ state agencies to generate evidence and improve quality of services
- Advocacy on public health issues
- Advocacy for PHMC in state and central governments
- Think tank support to agencies including government
- Observation of health and related days
- Policy inputs to relevant themes

Release of Compendium of Journal Articles on Health Professional Education

The Compendium of Journal Articles on Health Professional Education is a compilation of research in the domain of Health Professional Education. Through this journal, PHFI has attempted to highlight various dimensions of public health education, including innovative teaching frameworks and the integration of health systems strengthened within educational strategies. This compendium aims to contribute to the broader conversation about the significance of equipping health professionals with the knowledge and skills needed to address pressing public health challenges.



Dr. Rajiv Yeravedkar and Prof. Sanjay Zodpey released the *Compendium of Journal Articles on Health Professional Education*—a comprehensive compilation highlighting PHFI’s diverse range of publications in the field of health professionals’ education.

VIRTUAL TALKS

The program also included virtual talks on 3 global networks.

Asia-Pacific perspectives on Public Health Education: Collaboration, Curriculum and Capacity, by A/Prof Shailendra Sawleshwarkar



Prof. Sawleshwarkar discussed the scope of public health in the Asia-Pacific region, highlighting the triple burden of disease: communicable diseases, non-communicable diseases (NCDs), and injuries, along with additional challenges such as an aging population and climate change. He provided an overview of public health education in the region emphasizing that collaboration in curriculum development and faculty capacity building are key to preparing competent public health graduates.

He highlighted the importance of “5 Cs” framework essential for strengthening public health education: An Appropriate Curriculum, Aligned Competencies, Adequate Faculty Capacity, Community-Embedded Programs, and Collaborative Delivery.

The presentation also covered three key Asia-Pacific networks—CAPHIA (Council of Academic Public Health Institutions Australasia), APACPH (Asia-Pacific Academic Consortium for Public Health), and SEAPHEIN (South-East Asia Public Health Education Institution Network)—highlighting their establishment, specific objectives behind the establishment of these networks, core competencies, and relevance to regional collaboration.

In closing, Prof. Sawleshwarkar emphasized three critical themes for establishing a public health school network in India: **Curriculum, Capacity, and Collaboration**.

The presentation is enclosed in Annexure 7.

Association of Schools of Public Health in the European Region (ASPHER), by Dr. Sushma Acquilla

Dr. Sushma Acquilla presented an overview of the Association of Schools of Public Health in the European Region (ASPHER). ASPHER is a leading independent organization dedicated to strengthening public health across Europe through improved education, training, and professional development.

She highlighted that ASPHER was established in 1966 and currently comprises over 130 member institutions across more than 40 countries. The organization is governed by a 10-member elected Board and supported by a Secretariat based in Brussels. The annual membership fee is €2,000. ASPHER's network includes institutions beyond Europe, such as those in Israel, Palestine, and Poland.

Dr. Acquilla outlined ASPHER's establishment, its key objectives, organizational structure, core functions, and major activities. She also introduced the *ASPHER Competence and Outcomes Framework*—a comprehensive 60-page document defining essential competencies in areas such as:

- Health care
- Public health functions
- Essential medicines
- Screening programs

She also discussed ASPHER's collaboration with the World Health Organization (WHO) on the *Roadmap to Professionalize the Public Health Workforce*, which offers strategic guidance and has resulted in several significant publications, including:

- Global competency frameworks
- Operational handbooks
- Tools to map and assess national public health workforce capacity

In conclusion, Dr. Acquilla emphasized ASPHER's **commitment to equity-focused curriculum development**. The organization's curriculum and syllabi place strong emphasis on health inequities, social injustices, and diversity, aiming to equip students with the awareness and skills to address systemic biases and promote inclusive public health practices.

The presentation is enclosed in Annexure 8.



Association of Schools and Programs of Public Health (ASPPH), by Dr. Laura Magaña Valladares

Dr. Laura presented an overview of the Association of Schools and Programs of Public Health (ASPPH), highlighting its establishment in 1941 with seven founding members. Over the years, ASPPH has grown significantly and now comprises 158 member schools and programs of public health. In 2021, the association celebrated its 80th anniversary.



She spoke about the evolution of the network and its strategic vision, including the launch of *“Framing the Future 2030: Education for Public Health”* in 2020 — an initiative aimed at preparing future public health professionals to address complex global health challenges.

Dr. Laura elaborated on ASPPH's governance structure and membership engagement, which includes Primary Representatives, a 16-member Board of Directors, and a range of Advisory Committees. These committees cover thematic areas such as:

- Accreditation
- Advocacy
- Data
- Education
- Global Engagement and Partnerships
- Institutional Excellence
- Practice
- Research
- Technology

She further explained the purpose, composition, and selection processes for the governance and engagement structures. Additionally, she provided an overview of ASPPH's organizational pillars and operational departments.

She discussed the Engagement Group framework within ASPPH, which includes Task Forces, Sections, Assemblies, and Forums—each contributing to key areas of public health education, research, and practice. These groups are engaged in the following areas of work:

Sr. No.	Task Forces	Sections	Assemblies	Forums
1.	Climate Change and Health	Academic Affairs	Career Services	Continuing Professional Education
2.	Gun Violence Prevention	Data	Development and Alumni Relations	DrPH
3.	Healthy Longevity	Finance and Administration	Marketing and Communications	Environmental and Occupational Health
4.	Scholarship of Teaching and Learning	Institutional Excellence	SOPHAS and Recruitment	Faculty
5.	Framing the Future 2030	Marketing and Communication	Student Services	Interprofessional Education for Collaborative Practice
6.	Zero Tolerance for Discrimination, Harassment, and Racism	Practice		MPH
7.		Research		PhD
8.		Student Affairs		Scholarship of Teaching and Learning
9.				Technology and Education Innovations

Dr. Laura also shared a summary of the five strategic goals set by ASPPH and an overview of the ongoing efforts by the network to actively advance and achieve these objectives.

The session concluded with valuable suggestions and insights by Dr Laura for establishing a similar network of Schools of Public Health in India.

The presentation is enclosed in Annexure 9.

Day 2: 13th June 2025

Day 2 began with a recap of Day 1 activities, by Prof. Himanshu Negandhi. He provided participants with a brief overview of the key sessions and discussions from Day 1.

Developing a Framework for the Network - 2

GROUP WORK

Identify criteria for network membership

Roles and responsibilities of members

Participants were divided into two groups and assigned the task of defining the **criteria for network membership** and outlining the **roles and responsibilities of its members**.

Criteria for network membership

- Membership for public and private institutions in India
- Schools of Public Health in India offering full time MPH programs for at least 5 years without disruption, on an average of at least 5 enrolments per year
- Multi – disciplinary pool of faculty
- In case some institution stops offering MPH program, membership will be reviewed by the EC
- Membership will be reviewed in every five years
- No fees to be charged from the founding members, fees from the other institutions may be considered in future
- A consent form will be created for each institution for taking necessary approvals from the respective institution to seek the willingness to be part of the network

The following points were agreed upon unanimously:

Roles and responsibilities of members

- The network member participates in the network activities such as meetings, webinars, symposia, roundtable etc.
- Members co-operate to develop PHE related curricula, teaching material, pedagogy, programs etc.
- Organise capacity development initiatives for PH educators
- Advocacy for Public Health Education, Research and Practice
- Adherence to the guidelines of the network
- Members work towards facilitating the growth of network
- Members contribute for the greater visibility of the network
- No individual activities will be undertaken by institutions on behalf of the network without approval of the EC

Additional points

1. Network branding can only be used in activities related to the network.
2. Network need not to be used for any unethical activities.
3. Conflict of interest policy would be signed by the members.

Developing a Framework for the Network - 3

GROUP WORK

Sustainability

Governance / Communication within the network/ Role of Network Secretariat



The final activity of the day focused on group discussions around **network sustainability, governance and communication within the network**, and the **role of the Network Secretariat**.

The following points were unanimously agreed upon by all participants:

Sustainability

1. Members to explore various ways of generating financial resources
 - ♦ Generating resources for example: Royalty from books, Fees from training programs and workshops
 - ♦ Collaborative research grants
 - ♦ Fee from eCourses
 - ♦ Membership fees (in future)
 - ♦ Fee from Research Overheads
 - ♦ Donations
 - ♦ Generating endowment funds
 - ♦ Securing network strengthening grant
2. Planning and implementation of strategic plan
3. Branding and visibility – website, logo, name of the network to be decided

Governance

- Formation of society or Section 8 company – to seek legal opinion about the best way forward
- Governing council/ Governing Board
- Executive committee (three years' duration for EC members)
- Finance Committee
- Sub-committees – Public Health Education, Public Health Research, Public Health Practice (3-4 members each)
- Secretariat at PHFI with initial HR 50% role to support coordination activities
- With approval of EC some technical experts may be co-opted in the sub-committee
- ToRs of respective sub-committees will be created and shared with the members

Communication within the Network/ Role of Network Secretariat

- Spoke only model with secretariat housed initially at PHFI
- One in-person annual meeting, 2-3 virtual meetings annually
- Communication framework guidelines will be created and shared
- Communication, coordination of activities, sharing of resources, activities assigned by the EC, documentation and record keeping
- Initially a part-time person would be part in secretariat for managing communication and coordination
- Discussion points will be circulated among all founding members in the next two weeks. By July end, the document will be finalized
- Maintain list of updated dataset regarding the list of all the courses and contacts of the Program Director/ Manager for any information

NAME OF THE NETWORK

The day concluded with a discussion to decide on a name for the network. After deliberation, three potential names were considered:

- Network of Schools of Public Health in India (NSPHI)
- Schools of Public Health in India Network (SPHIN)
- Schools of Public Health Network in India (SPHNetIndia)

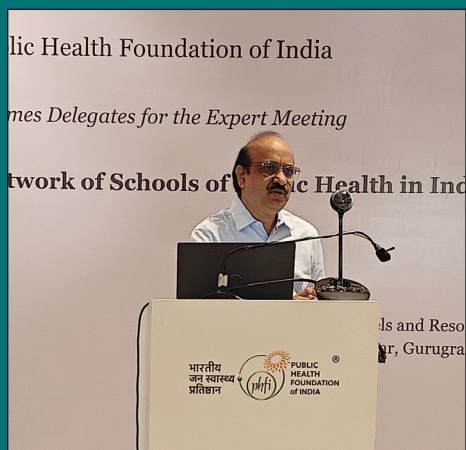
Participants engaged in a discussion on whether to use “Bharat” instead of “India”, or to incorporate a Sanskrit term for the network. However, in view of the need for global accessibility and recognition, it was collectively agreed to use the term, “India”.

Following this, participants were invited to vote on the proposed names, and **Network of Schools of Public Health in India (NSPHI)** was selected as the official name.

Way Forward

Prof. Zodpey concluded the meeting by extending warm thanks and appreciation to all participants for their active engagement. He informed the group that the minutes of the meeting would be circulated by the end of June 2025, and that the next virtual meeting is planned for August 2025. It is also proposed that the documentation and consent form will be finalized by July 2025 to facilitate the next steps in the process. The consent forms will be shared with the institutions to formally seek their approval for participation and joining the network.

He proposed January 2026 as the tentative launch timeline for the network.





ANNEXURES

Annexure 1

List of Institutions and Participants

Expert Meeting

Establishing a Network of Schools of Public Health in India

Date: 12–13 June 2025

Venue: Sunday Hotels and Resorts Manesar, Gurugram

S. No	Name of the Institution	Name of the Participant	Designation
1	Public Health Foundation of India	Prof. Sanjay Zodpey	President
		Prof. Rajesh Nair	Director – ADARSH Project
		Prof. Himanshu Negandhi	Director - Academics
		Ms. Shanti Dahal	Senior Manager - Academics
		Dr. Twinkle Shokeen	Program Associate
2	Post Graduate Institute of Medical Education and Research, Chandigarh	Prof. PVM Lakshmi	Professor of Epidemiology, Department of Community Medicine and School of Public Health
3	Sree Chitra Tirunal Institute for Medical Sciences and Technology, Trivandrum	Prof. Biju Soman	Professor & Head, Achutha Menon Centre for Health Science Studies
4	Prasanna School of Public Health Manipal, India	Prof. Cherian Varghese	Professor and Director
5	Indian Institute of Public Health Gandhinagar	Prof. Deepak Saxena	Director
6	ICMR - National Institute of Epidemiology, Chennai	Dr. Manoj Murhekar	Director
7	Jawaharlal Nehru Medical College, KLE Academy of Higher Education and Research, Karnataka	Prof. Mubashir Angolkar	Head of the Department, Public Health

S. No	Name of the Institution	Name of the Participant	Designation
8	All India Institute of Medical Sciences, Jodhpur	Prof. Pankaj Bhardwaj	Professor and Academic Head of School of Public Health
9	DY Patil Deemed to be University, Navi Mumbai	Prof. Suma Nair	Professor and Dean, School of Public Health
10	Datta Meghe Institute of Higher Education and Research, Wardha	Prof. Abhay Gaidhane	Dean, Jawahar Lal Nehru Medical College
		Prof. Zahir Quazi	Executive Director - Research
11	Symbiosis International (Deemed University), Pune	Dr. Rajiv Yeravdekar	Provost, Faculty of Medical & Health Sciences
		Dr. Anshuman Sewda	Associate Professor and Head, Department of Public Health
12	Tata Institute of Social Sciences, Mumbai	Prof. Harshad Thakur	Professor
13	Indian Institute of Health Management Research (IIHMR) University, Jaipur	Prof. PR Sodani	President
14	University of Sydney	Associate Professor Shailendra Sawleshwarkar	Director of Academic Education and Postgraduate Coursework, Sydney Medical School, Faculty of Medicine and Health,
15	Association of Schools and Programs of Public Health (ASPPH)	Dr. Laura Magaña Valladares	President & CEO
16	Association of Schools of Public Health in the European Region (ASPHER)	Dr. Sushma Acquilla	Independent Consultant

Annexure 2

Agenda

Expert Meeting

Establishing a Network of Schools of Public Health in India

Date: 12–13 June 2025 | Venue: Sunday Hotels and Resorts Manesar, Gurugram

Agenda	Time	Key person
Day 1		
Meeting Kick-off		
Welcoming the Participants and Introductions	9:30 am – 9:45 am	Prof. Sanjay Zodpey
Objectives of the Expert Meeting		
Current Status of PHE in India		
Public Health Education in India: An overview	9:45 am – 10:00 am	Prof. Himanshu Negandhi
Current Status of MPH Programs in India	10:00 am – 10:15 am	Ms. Shanti Dahal
Discussion	10:15 am – 10:30 am	All participants
Global Perspectives		
Network of Schools of Public Health	10:30 am – 10:45 am	Dr. Twinkle Shokeen
Discussion	10:45 am – 11:00 am	All participants
Tea Break and Group Photograph	11:00 am – 11:15 am	
Public Health Functions to be performed by MPH graduates	11:15 am – 12:00 pm	Prof. Rajesh Nair Ms. Shanti Dahal
Developing a Framework for the Network - 1	12:00 pm – 1:30 pm	All participants Session Facilitators: Group 1: Prof. Rajesh Nair, Ms. Shanti Dahal Group 2: Prof. Himanshu Negandhi, Dr. Twinkle Shokeen
Group work		
<ul style="list-style-type: none"> Vision and mission List of activities for the network 		
Lunch Break	1:30 pm – 2:15 pm	

Agenda	Time	Key person
Day 1		
Developing a Framework for the Network - 2 Group work <ul style="list-style-type: none"> Identify criteria for network membership Roles and responsibilities of members 	2:15 pm – 3:30 pm	All participants Session Facilitators: Group 1: Prof. Rajesh Nair, Ms. Shanti Dahal Group 2: Prof. Himanshu Negandhi, Dr. Twinkle Shokeen
Tea Break	3:30 pm – 3:45 pm	
Virtual Talks Asia-Pacific perspectives on Public Health Education: Collaboration, Curriculum and Capacity Association of Schools of Public Health in the European Region (ASPHER) Association of Schools and Programs of Public Health (ASPPH)	3:45 pm – 4:15 pm 4:15 pm – 5:00 pm 5:00 pm – 5:45 pm	Dr. Shailendra Sawleshwarkar Dr. Sushma Acquilla Dr. Laura Magaña Valladares
Dinner	7:30 pm onwards	
Day 2		
Reflection and Recap of Day 1	9:30 am – 9:45 am	Select Participant
Developing a Framework for the Network Group work <ul style="list-style-type: none"> Sustainability Governance / Communication within the network/ Role of Network Secretariat 	9:45 am – 11:15 am	All Participants Session Facilitators: Group 1: Prof. Rajesh Nair, Ms. Shanti Dahal Group 2: Prof. Himanshu Negandhi, Dr. Twinkle Shokeen
Tea Break	11:15 am – 11:45 am	
Next Action Steps for the Network	11:45 am – 12:00 pm	Prof. Himanshu Negandhi
Closing Remarks	12:00 pm – 12:15 pm	Prof. Sanjay Zodpey
Lunch	12:15 pm – 1:15 pm	

Annexure 3

PUBLIC HEALTH EDUCATION IN INDIA

An Overview





No standard norms / benchmark for PHPs

Brazil:
100 PHPs/ 100,000

ASPH benchmark of PHPs [US]:
220 / 100,000

India has approximately
11 PHPs/ 100,000 population

Policy and practice

Forecasting the future need and gaps in requirements for public health professionals in India up to 2026

Public Health Education: A Review of the Current Scenario and Future Prospects. *Journal of Public Health Education and Promotion*. 2017; 34(1): 1-10. <https://doi.org/10.1007/s10551-016-3000-0>

Abstract

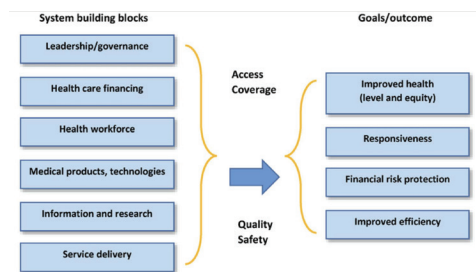
Current ambitious reforms in India mean that public health professionals (PHPs) will become an increasingly vital component of the health workforce. Despite a rapid growth in schools of public health in India, uptake of places by students without a medical background is low. This paper reports the results of an exercise to estimate the baseline supply of, and need for, PHPs in India in 2017 and to forecast possible supply–need scenarios up to 2026. Supply was estimated using the stock and flow approach and the service-target approach was used to estimate need. The additional need resulting from development of a new public health cadre, as stated in the National Health Policy 2017, was also included. Supply–need gaps were forecast according to three scenarios, which varied according to the future intensity of policy intervention to increase occupancy of training places for PHPs from a non-medical background: ‘best guess’ (no intervention), ‘optimistic’ (flexible intervention), and ‘aspirational’ (significant intervention) scenarios. In the best guess scenario in 2017, i.e. with a low non-medical place occupancy of 60%, there is a supply–need gap of around 28,000 PHPs. In the absence of any intervention to increase place occupancy, this shortfall is forecast to increase to 45,000 PHPs by the year 2026. By contrast, in the aspirational scenario, i.e. with a high place occupancy of 75% for non-medical places, the baseline gap for 2017 of around 28,000 PHPs reduces to 2026 around 21,000 PHPs. By 2026, most new PHPs will be produced by public health training programmes offered by institutions of higher medical colleges. Without significant interventions, India is likely to have a significant shortfall in PHPs in 2026. Policy-makers will have to carefully examine issues surrounding the current low uptake of non-medical public health seats and review the current framework regulating training of PHPs, in order to respond adequately to future requirements.

Keywords: India, Master of Public Health, MPH, public health, public health education, public health professional

Background

Asking health system is essential for achieving the Sustainable Development Goals (SDGs). Strengthening and monitoring health programmes is also central for delivering quality health services and ensuring universal health coverage. Health systems across the globe are dependent on the health workforce in improving health outcomes, and public health professionals (PHPs) form a key part of this workforce. A report from the Institute of Medicine notes that PHPs play a pivotal role in the development and maintenance of health systems, defining a PHP as ‘a person educated in public health or a related discipline who is committed to improve health through a population focus’ [1]. Thus, public health is a combination of many cross-cutting disciplines, including but not limited to: medicine, behavioural and social sciences, statistics, management, communication, environment, nutrition, law and public policy [2].

As estimated in a recent study, by the year 2020, global demand for health workers may rise to 80 million, which would require a doubling of the present stock of health workers [3, 4]. The health of many nations is threatened by lack of health workers and the other health aspects of the SDGs are threatened by acute shortages and inequitable distributions of skilled health workers in many low- and middle-income countries, in turn, the essential means to deliver universal health services. The health workforce in India comprises broadly eight categories, namely: doctors (physicians, dentists, medical nursing and midwifery professionals; MPHs, medical, non-medical), pharmacists, dentists, paramedical workers (allied health professionals), grass-root workers (front-line workers) and support staff. This paper focuses on one



Supply side of Public Health Professionals

Name of the Program	Number of Institutions	Annual Intake
MD [PSM / CM]	366	1713
DPH / DCM	4	7
MD [CHA / TM / HA]	16	68
MHA [Medical Colleges]	2	16
Diploma [HA/HA/HE/IH/TMH] [Medical Colleges]	7	33
MPH	106	1955
Epidemiology	16	194
Health administration/ management	45	2096
Hospital administration/ management	57	1454
Health & Hospital Management/ Administration	27	1179
Public Health Management [PGDPHM]	11	370

Annexure 4

CURRENT STATUS OF MPH PROGRAMS IN INDIA



Public Health Education in India

Traditionally, PHE in India.....

- Medical colleges
- National and regional institutes

Conscious shift towards

- Schools of public health
- Health and hospital management institutions
- Other institutions

MPH Programs in India

- In recent years, many academic programs in public health have been started, which are open for both medical and non-medical graduates, this includes MPH programs.
- However, in the absence of any formal body or council for regulating public health education in the country, there is limited information available on these programs.

Evolution of MPH Programs in India

Sr. No.	Year	No. of Institutes	Intake capacit /Seats	Reference
1	1995	1	20	Master of Public Health Programs in India- Incorporating the report of the National Consultation on MPH Program Development in India, 2011
2	1997	2	35	Master of Public Health Programs in India- Incorporating the report of the National Consultation on MPH Program Development in India, 2011
3	2005	4	75	Master of Public Health Programs in India- Incorporating the report of the National Consultation on MPH Program Development in India, 2011
4	2010	23	573	Sharma, K., Zodpey, S., Negandhi, H. & Morgan, A., 2014. Contextualizing Indian Masters of Public Health (MPH) programs – challenges and the way forward. South-East Asia Journal of Medical Education, 8(1), pp.21–30. doi:10.4038/seajme.v8i1.121.
5	2016	44	1190	Tiwari, R., Negandhi, H. and Zodpey, S., 2018. Current status of Master of Public Health programmes in India: a scoping review.WHO South-East Asia Journal of Public Health, 7(1), pp.29–35. doi:10.4103/2224-3151.228425.

Sr. No.	Year	No. of Institutes	Intake capacit /Seats	Reference
6	2021	105	1722	Public Health Education in India - A Study of Master of Public Health Programmes in the Country, March 2022
7	2024	116	Data not available	Nilgar, P., Mubashir, A., Nagmoti, J. & Zodpey, S. (2024) Mapping of MPH programs in terms of geographic distribution across various universities and institutes of India—A desk research, <i>Frontiers in Public Health</i> , 12, 01-09. doi:10.3389/fpubh.2024.1443844
8	2025	153*	3652 (121 institutes)	As on June 2025 Total seats: 3791 (127 institutes) Total institutes: 162
		112**	139 (6 Total institutes)	

*Institutes offering Programs with Title MPH, also includes MPH Hybrid, EMPH , MPHS etc.

** Institutes offering Programs with title as MA/ MSc in Public Health/ MSc Epidemiology and Public Health etc. 3 institutes are offering MPH as well as MSc/MA courses

MPH Programs: Nomenclature and Mode of Offering

Nomenclature

- MPH
- Executive MPH (EMPH)
- Masters Program in Public Health
- Master of Public Health (Honours) –3 years duration
- Master of Public Health (Blended Learning)
- Master of Public Health Sciences (MPHS)
- MPH –1 year duration

Mode of offering

- MPH (On campus)
- MPH (Online mode)
- MPH (Distance learning mode)
- MPH (Hybrid mode)

MA/ MSc / Other Masters Program offered in Public Health

- MA Public Health
- MSc Public Health
- M.Sc. in Public Health (Health Promotion)
- M.Sc. in Public Health (Maternity and Child Health)
- M.Sc. Epidemiology and Public Health
- M.Sc. Applied Public Health

MPH with specialization/ concentration: Nomenclature

- MPH (Epidemiology and Health Systems)
- MPH - Nutrition
- Master of Public Health - Public Health Nutrition
- Master in Public Health (Field Epidemiology)
- Master of Public Health (Health Administration)
- Master of Public Health (Social Epidemiology)
- Master of Public Health (Implementation Science)
- Master of Public Health in Epidemiology
- Master of Public Health in Health Economics and Outcomes Research
- Master of Public Health (Community Medicine)
- Master of Public Health in Health Care Quality and Safety
- Master of Public Health (Health Policy, Economics and Finance)
- MPH Health System Management
- MPH Health Programme, Policy and Planning
- MPH RMNCH+A
- MPH with specialisation: Occupational and Environmental Health
- MPH with specialisation: Health System
- MPH with concentration: 1. Biostatistics and Epidemiology, 2. Public Health Informatics
3. Environmental and Occupational Health, 4. Health Systems Management and Health
Financing
- MPH Programme Design and Management
- MPH Reproductive Health
- MPH Training and Communication
- MPH Health System Management
- MPH Epidemiology
- MPH (Nutritional Sciences)
- MPH Environment & Occupational Health
- MPH Epidemiology

- MPH Global Health
- MPH Health Policy
- MPH Maternal and Child Health

Types of Institutes and Zonal Distribution

Zone	Number of Institutes	Public Institutes (MPH)	Private Institutes (MPH)	MPH	MSc/ MA etc
North	43	14	29	43	-
East	16	5	11	16	2*
West	50	19	27	46	5*
South	40	9	29	38	2
North-east	4	-	4	4	-
Central	9	1	5	6	3
Total	162	48	105	153	12*

MPH offered in 31 Medical Colleges

*3 institutes are offering MPH as well as MSc/MA courses- 2 in East, 1 in West.

Eligibility and Admission Criteria

Eligibility:

- MBBS, dentistry, veterinary sciences, allied and health sciences, Nursing, life sciences, and Ayurveda, Yoga and Naturopathy, Unani, Siddha, and Homeopathy (AYUSH).
- Graduates from any non-science disciplines like economics, sociology, statistics, social work, anthropology etc
- Bachelor of Physiotherapy (BPT), Bachelor of Occupational Therapy (BOT), Bachelor of Pharmacy (B.Pharm), BSc Microbiology, BSc Laboratory Technology (BLT), BSc Radiography, etc
- Any graduate

Admission methods:

- Entrance tests
- Direct admission (in some private universities)
- On basis of educational qualifications, professional experience-relevant to the field of public health, written test and interview
- Statement of Purpose
- Personal interview

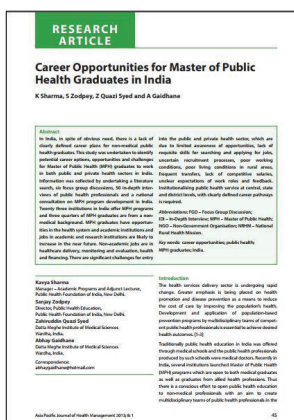
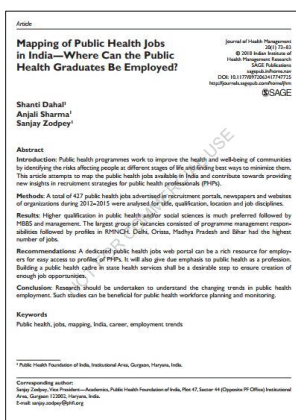
Fee: MPH and MSc/MA Programs in Public Health

Fee	MPH	MSc/ MA
Lowest	INR 692/-	INR 23,685/-
Highest	INR 18,82,052 /- (22000 USD)	INR 1,20,000/-
Median	INR 1,98,000/-	INR 1,10,000/-

As on June 2025

- **No of institutions reporting fee data: 148**
144 offering MPH program
4 institutions offering MSc/MA etc Programs

Career Opportunities for Public Health Professionals

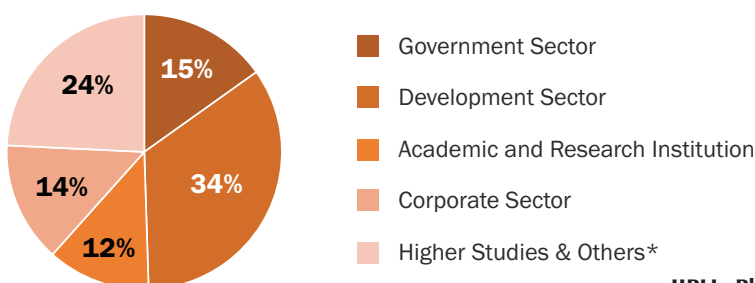


- **Domain:** Teaching and training, research, policy and programs, practice
- **Sector:** Public, private
- **Public:** Health [Union, States, LSG], Women and child welfare, Defence, Railways, PSUs, Environment, Food and agriculture, Urban development, Rural development, Road safety and transport, Coal, etc.
- **Private sector:** NGOs, health care [hospitals], corporate sector, industry, pharmaceuticals, CROs and SMOs, IT, Insurance, media and journalism, CSR initiatives, etc.
- International organizations, foundations, development sector.....
- **Subject Area:** Epidemiology, bio-statistics and data management, demography, health management, hospital management, environmental health, occupational health, social and behavioural sciences, health economics, health financing, nutrition, veterinary public health, entomology, public health engineering, health promotion, health communication, health equity and social justice, health journalism, public health laws, disease specific expertise, public health laboratory, health policy, ethics, monitoring and evaluation, international and global health, oral health, family health.....

- **Emerging Area:** Climate Change and Health, Pharmaceuticals, Health Insurance, Quality Management, Medical Tourism, Wellness, Clinical Research, Corporate Hospitals, Nutraceuticals, Devices, Data Science in Public Health, Health Technology, Digital Health, Health Informatics, Consulting firms.....
- **Niche Areas:** Disease modelling, meta-analysis, advanced statistical analysis, big data analytics, GIS, health economics, policy analysis, scientific writing, digital health, one health.....
- **Enterpreneurship:** NGOs, preventive care set ups, consultancy, etc.

Sectors in which MPH graduates are employed

MPH Sector-wise placement of MPH graduates (2016-17 till 2023-24)



IIPHs Placement Statistics

*Others include students who voluntarily denied placement support/ not applying actively/ dropped from placement/ disqualified

MPH Graduates: Salary analysis 2023-24

Mean	Median	Mode	Standard Deviation	Highest Salary	Lowest Salary
5.7 LPA	5.4 LPA	4.2 LPA	1.9 LPA	12 LPA	1.8 LPA

All annual package amounts are in INR. IIPHs Placement Statistics.

Select organizations hiring MPH Graduates

Government Sector

- National Health Mission
- Aajeevika Bureau
- National Health Systems Resource Centre
- State Health Resource Center
- National Health Authority
- National Centre for Disease Control

Development Sector

- WHO
- UNICEF
- IHAT
- The George Institute for Global Health, India
- Asian Development Research Institute
- JHPIEGO
- John Snow India Pvt Ltd
- Noora Health
- Sangath
- SEARCH

Academic and Research Institutions

- AIIMS
- PGIMER Chandigarh
- Medical Colleges
- Indian Institutes of Public Health
- IIHMR
- Indian Council of Medical Research

Corporate Sector

- Novartis Foundation
- Britannia Nutrition Foundation
- HCL Foundation
- Skyward Analytics
- Open Health
- IQVIA
- Milliman India Pvt Limited
- Evalueserve
- Market Access Transformation
- Molecular Connections
- KPMG

Systems and Processes Related to Placement of Graduates at Public Health Education Institutions in India

Shanti Dahal¹, Tapaswi Puwar² and Sanjay Zodpey³

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Abstract

It is desirable that public health education institutions should ensure the placement of their students in relevant organisations by establishing placement systems and processes. This would help them to achieve the goal of enhancing public health through capacity building. The present study was conducted using survey design, and purposive sampling was used to contact institutions delivering postgraduate level public health education programmes in India. Eighty institutes across India were contacted, out of which 26 institutions participated in the study. The study identified placement initiatives undertaken by various institutions. Institutions are engaged in establishing placement cell; engaging faculty, students, alumni and external contacts in placement process; organising alumni meet and employers' meet, campus recruitment activities and are also involved in research related to placement. However, these initiatives need to be synchronised so as to effectively strategise the placements. In order to facilitate the placement of graduates effectively, public health education institutions should establish placement systems and processes. The first step in this regard can be creating standard operating procedures (SOPs), which can be referred to as a guiding document by the placement cell. The study brings value to the public health education institutions to adopt a systematic approach towards placement of its graduates.

Keywords

Public health graduates, public health education institutions, mapping of public health jobs, skill-building training, placement systems and processes, placement of public health students

Introduction

Public health education institutions offering postgraduate-level programmes have witnessed rapid expansion in the past two decades. Conventionally, public health education was offered through medical colleges and focused on training in community medicine without any specialisation in specific domains of public health. However, in recent times, there has been a paradigm shift in this regard, with opening up of public health courses for both medical and non-medical graduates. Sharma and Zodpey (2013) mentioned that, furthermore, the public health education institutions have started offering postgraduate programmes in public health with specialisation tracks, thereby providing an opportunity for preparing a long-term career in a specialised area.




Suresh (2020) found that between 1997 and 2019, the number of institutions offering Master of Public Health (MPH) programmes increased from 2 to 60. The old-generation public health education institutions, which started their academic programmes 15 years back, have now expanded their horizons with offering not only MPH but also MBA, MBA—healthcare management/healthcare administration, etc. Many traditional management schools have now started offering MBA programmes specialising in healthcare/hospital


management/administration and other similar specialisations. According to leading educational portals in India, which are frequently referred to by students to identify and select educational institutions and courses in India, in 2022 the number of institutions offering postgraduate public health programmes, namely MPH, MHA, PGDPEM, MBA—hospital management/hospital administration, healthcare management, etc., is more than 170. This exponential growth in number of public health education institutions and courses indicates that there is a felt need for public health workforce in the country. Rangarajan et al. (2022) pointed that this need for diverse, competent and multidisciplinary public health professionals has gained momentum across the globe during the COVID-19 pandemic. Thus, with the changing scope of public health, new jobs are created in both public sector and private sector.

¹Public Health Foundation of India, Gurugram, Haryana, India
²Indian Institute of Public Health—Gandhinagar (University formed under UPSC ACT 2015, of Gujarat state), Opposite Air Force Head Quarters, Gandhinagar, Gujarat, India
³Corresponding author:
Shanti Dahal, Public Health Foundation of India, 15th Floor, Tower-1, APL Business Club, Sector 62, Gurugram, Haryana 120002, India.
E-mail: shanti.dahal@pfi.org

In order to facilitate the placement of graduates effectively, public health education institutions should establish placement systems and processes.

Creation of a consortium of public health education institutions for placements and career development will ensure systematic flow of available career opportunities, career paths available to public health graduates and eventually will help to streamline the public health employment for fresh graduates. Moreover, training for professional skills development can also be provided through this consortium to interested institutions.

 <p>प्रो. राजनीश जैन सचिव</p> <p>Prof. Rajnish Jain Secretary</p>	 <p>विश्वविद्यालय अनुदान आयोग University Grants Commission (यूपीए गवर्नर शिवाजी महाराज, नया दिल्ली-110002) (Ministry of Human Resource Development, Govt. of India) बादशाह शाह जलर बरग, नया दिल्ली-110002 Ph: (011) 2232386/22323937 Fax: (011) 22323858 E-mail: ugc@ugc2016.in</p>
<p>D.O.No. F.14-14/2018(CPP-II) 19th September, 2018</p> <p>Dear Sir / Madam,</p> <p>The Ministry of Health and Family Welfare has prepared a model course curriculum for Masters in Public Health (MPH). The course is designed to be a two years' full time program including internship and dissertation. The course intends to develop the analytical and assessment skills of candidates for collecting and interpreting information in areas of policy planning, communication, advocacy and evaluation of public health data and financial planning, leadership and management skills for running public health programs in the country. The approved model MPH course curriculum is available on the official website of M/O H & FW at https://mohfw.gov.in/sites/default/files/MPH-Model%20Course%20Curriculum.pdf.</p> <p>You are requested to adopt the course curriculum in your university and also convey relevant instructions to all the affiliated colleges/ institutes.</p> <p>With kind regards,</p> <p style="text-align: right;">Yours sincerely,  (Rajnish Jain)</p> <p>The Vice Chancellors of all Universities.</p>	

<p>Ministry of Health and Family Welfare</p> <p>2017-18</p>  <p>सत्यमेव जयते</p>
<p>Model Curriculum Handbook</p> <p>MASTERS IN</p> <p>PUBLIC HEALTH</p>

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Contact us:

Ma. Shanti Dahal
Public Health Foundation of India (PHFI)
15th Floor, Tower-1, APL Business Club Sector 62, Gurgaon, Haryana - 122 002, India
Phone: +91 124 4781400 | Email: contactus@publichealthcareer.org



An Initiative of PHFI Placement Cell



eCourse on Career Development in Public Health

A unique course to guide public health aspirants and professionals to explore career opportunities in public health and acquire necessary skills to succeed in it. By the end of the course, the students will be able to develop a broad understanding of various career opportunities; skill sets required for these opportunities; prepare a career development plan, resume and cover letter; prepare for interviews; plan to move towards entrepreneurship etc. and make an informed career decision.

DURATION OF THE COURSE: 4 MONTHS

Eligibility:

The course is open to the following candidates:

- Public health aspirants
- MD Community Medicine, Medical graduates
- Bachelor of Public Health (BPH), Master of Public Health (MPh), Post Graduate Diploma in Public Health Management (PGDPHM), Diploma in Public Health (DPH), Master of Hospital Administration (MHA)
- Students and graduates of Public health, Development studies, Life sciences, Social sciences, Social work, Nutrition
- Faculty members and placement cell members of public health academic institutes
- Junior and mid-level public health professionals
- Hiring managers in public health organisations and institutions
- Career counselors and career development practitioners

Candidates would be screened for admission based on their application meeting the eligibility criteria.

Fees:

Indian candidates

- INR 9000/- for individual applicants.
- INR 6000/- for current students of public health programs (should produce bona fide certificate).
- INR 5000/- for bulk nominations by organizations / academic institutions (minimum 5 nominations).

International candidates

- South Asian Candidates : 150 USD
- Other International Candidates: 330 USD

List of modules

- 1. Deciphering public health from the perspective of career development**
- 2. Career opportunities in public health**
- 3. Career opportunities for public health graduates in different sectors**
(Career opportunities in government sector, CSR foundations, corporate sector, pharmaceutical industry, industrial and occupational health, consulting firms, health informatics, one health etc.).
- 4. Professional skills development**
(Writing and publishing a research paper, writing proposals and grants, choosing a career in public health, career trajectory, managing a healthcare organization etc.).
- 5. Competencies needed to work in public health**
(Perspective of a mid-career public health professional and newly employed graduates, leadership and management skills for successful career in public health, engaging with program managers and policy makers etc.).
- 6. Preparing for job selection process**
(Resume writing, cover letter writing, interview skills, email etiquettes, social media branding, job search, applying for WHO positions, opportunities in national and international organisation, preparing a career development plan etc.).
- 7. Entrepreneurship in public health**
(Setting up an NGO, consulting firm, counseling centre etc.).

Ms. Shanti Dahal

Senior Manager Academics
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Program launched on: **1st June 2023**

Modules

1. Deciphering public health from the perspective of career development
2. Career opportunities in public health
3. Career opportunities for public health graduates in different sectors
4. Professional skills development
5. Competencies needed to work in public health
6. Preparing for job selection process
7. Entrepreneurship in public health

List of topics

Annexure 5

PUBLIC HEALTH FUNCTIONS TO BE PERFORMED BY MPH GRADUATES



DEFINITION OF PUBLIC HEALTH BY WHO

“All organized measures (whether public or private) to prevent disease, promote health and prolong life among the population as a whole. Its activities aim to provide conditions in which people can be healthy and focus on entire populations not on individual patients or diseases. Thus, public health is concerned with the total system and not only the eradication of a particular disease.”

Definition of Public Health by American Public Health Association

“Public health promotes and protects the health of all people and their communities. This science-based, evidence-backed field strives to give everyone a safe place to live, learn, work and play. Public health is the science of protecting and improving the health of populations from neighbourhoods to cities to countries to world regions through education, promotion of healthy lifestyles, research toward prevention of disease and injury, and detecting, preventing and responding to infectious diseases.”

Definition of Public Health by Faculty of Public Health, UK

“Public health is the science and art of preventing disease, prolonging life, and promoting health through the organised efforts of society. The public health workforce delivers a range of work to protect and improve the health of populations at local, regional, national, and global level.”

Desk review to identify key PH functions

- Literature review of sources ranged from National and International Public Health Institutions, PH Associations (APHA, FPH, NPHP, IPHA), International/UN Public Health Organisations, Public Health Regional Organisations, Indian Public Health Standards (2022), PHMC policy document, etc.
- Drawn list of key PH functions as suggested in 33 references.
- Grouped the functions based upon commonalities to find out emerging themes.
- Identified 21 Key Public Health Functions.
- Also listed few emerging new functions not reported in literature.

List of key PH functions based on the desk review

1. Public Health Surveillance
2. Monitoring, and Evaluation of Population Health and Public Health Programs
3. Disease Prevention and Control
4. Health Promotion and Communication
4. Health Promotion and Communication
5. Empowering Communities through Community Engagement and Participation in Public Health
6. Public Health Policy Development

7. Public Health Emergency, Disaster Preparedness and Response
8. Health Protection
9. Development of a Competent Public Health Workforce (Training and Education)
10. Addressing Health Inequity and Inequality (Ensuring Equitable Access to Quality Health Services, Technologies, and Interventions)
11. Public Health Management, Leadership and Public Health Stewardship
12. Health Economics and Financing
13. Building Partnerships and Collaborations
14. Addressing Social Determinants of Health
15. Health System Governance and Service Delivery
16. Public Health Research
17. Quality Assurance and Continuous Improvement in Public Health Services
18. Public Health Planning
19. Public Health Law, Regulation and Enforcement
20. Environmental and Occupational Health
21. Public Health Security including Global Health Issues

Additional PH functions identified based on emerging issues in public health

- Use of AI and Digital Tools and Technology in Public Health
- Addressing Commercial Determinants of Health
- Deciphering the connect between Climate Change and Health
- Understanding and management of Big Data Analytics
- Global Health/Globalization of Health
- Use and Application of Statistical Tools and Data Management
- Any Other?

Exercise 1

1. Is there any function which you feel MPH graduates should perform but is missing in the list?
2. Is there any overlap of functions, which you think should be combined?
3. Is there any function which needs to be rephrased?

Exercise 2

Please categorize the public health functions in 3 groups, based upon their requisite for MPH graduates as follows:

1. **Must Know** [Mark as K]
2. **May Know** [Mark as M]
3. **Desirable** [Mark as D]

Exercise 3

Please categorize the public health functions in 4 groups, based upon their requisite for MPH graduates as follows:

1. **Define and describe problem** [Mark as P]
2. **Design solution/interventions** [Mark as S]
3. **Implement Solution** [Mark as I]
4. **Evaluation** [Mark as E]

Exercise 4

Please classify the public health functions in following 3 groups:

1. **Assessment** [Mark as A]
2. **Policy Development** [Mark as B]
3. **Assurance** [Mark as C]

Exercise 5

Please prioritize and rank the functions as per their importance in public health. Some ranks may overlap also.

Please consider 1 as the most important function and subsequently the numbers in ascending order being the least important function

GLOBAL PERSPECTIVES: SELECT NETWORKS OF SCHOOLS OF PUBLIC HEALTH



ASPPH - Association of Schools and Programs of Public Health (USA)

Established: 1941 (restructured 2013)

Region: United States & Global Partners

Membership: Over 100 institutions, specifically graduate schools that are accredited by the Council on Education for Public Health (CEPH)



Purpose: ASPPH advocates for academic public health, streamlines admissions through SOPHAS, and runs fellowships with agencies like CDC. It promotes equity in education, leads global collaboration, and drives innovation through initiatives like “Public Health 2030.”

ASPHER: Association of Schools of Public Health in the European Region

Established: 1966

Region: European regional network of public health higher-education institutions

Membership: Over 100 institutions across 40 European countries

Purpose: Strengthen public health by improving education and training of public health professionals. ASPHER has strongly promoted quality assurance in public health education, first through the Public Health Education European Review (PEER) peer-review system and later by co-founding the Agency for Public Health Education Accreditation (APHEA)



APACPH - Asia - Pacific Academic Consortium for Public Health

Established: 1984

Region: Asia-Pacific

Membership: 81 member institutions in 23 countries

Purpose: APACPH has advanced public health in the Asia-Pacific through annual conferences, collaborative research grants, and training programs. It promotes education quality via an accreditation framework and recognizes excellence through awards. Its journal, Asia-Pacific Journal of Public Health, shares regional research globally. APACPH also supports policy dialogue and mobilizes cross-country collaboration during health crises.



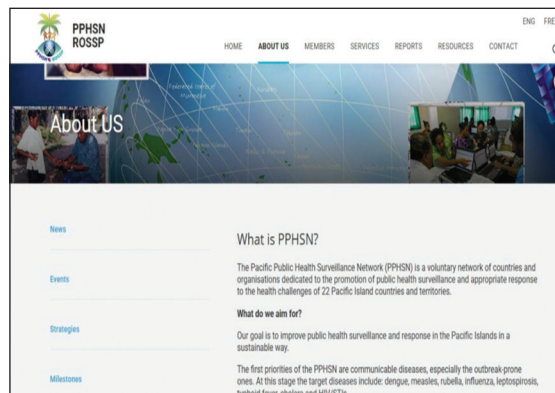
PPHSN – Pacific Public Health Surveillance Network

Established: 1996

Region: Pacific Island Countries & Territories

Membership: 22 Pacific Island countries & territories plus partners

Purpose: PPHSN has strengthened public health in the Pacific through regional disease surveillance, rapid outbreak alerts via PacNet, and lab support through LabNet. It established EpiNet teams for national outbreak response, launched syndromic surveillance systems, and improved infection control via PICNet. It also developed regional tools like the Pacific Outbreak Manual and played a key role during COVID-19. PPHSN's collaborative model has enhanced early warning, response, and capacity in resource-limited island nations.



SEAPHEIN –South-East Asia Public Health Education Institutions Network

Established: 2004 (WHO SEARO initiative)

Region: WHO South-East Asia Region

Membership: Institutions across 11 SEARO countries

Purpose: SEAPHEIN is a voluntary network of 50+ public health institutions in South-East Asia, coordinated by an elected leadership team and currently a Secretariat at IIHMR, Jaipur. It operates with flexible, collective governance, supported by WHO SEARO and national ministries, with decisions made at annual member meetings.

Website: Information about its activities and member institutions can be found through the Global Network for Academic Public Health (GNAPH) Institutional Directory

International Association of National Public Health Institutes (IANPHI)

Established: 2006 (Formally launched by 39 founding national public health institutes)

Region: Global (Worldwide network with regional groups in Africa, Asia, Europe and Latin America)

Membership: 128 member national public health institutes across 107 countries

Purpose: Builds global public health capacity by connecting, developing, and strengthening national public health institutes worldwide



Africa Academy for Public Health (AAPH)

Established: 2009

Region: Sub-Saharan Africa (based in Tanzania)

Membership: Independent organization (Collaborated with global networks)

Purpose: Address public health priority challenges in sub-Saharan Africa through innovative research, training & capacity building, and knowledge translation



ALASAG – Alianza Latinoamericana de Salud Global (Latin American Alliance for Global Health)

Established: 2011

Region: Latin America & Caribbean

Membership: Institutions across Latin America

Purpose: ALASAG has advanced global health in Latin America by promoting regional perspectives rooted in equity, human rights, and South-South cooperation. The network supports training, mentorship, and curriculum development across member institutions and fosters collaborative research on key issues like migration, indigenous health, and climate change. Through global engagement, ALASAG amplifies Latin America's voice in international health discourse.



CAPHIA – Council of Academic Public Health Institutions Australasia

Established: 2011

Region: Australasia

Membership: 39 member institutions across Australia, NZ, Fiji & Papua New Guinea

Purpose: CAPHIA promotes quality public health education in Australasia through national competency frameworks, teaching forums, and faculty development. It advocates on key policy issues, supports cross-sector collaboration, and recognized leadership during COVID-19 response efforts.



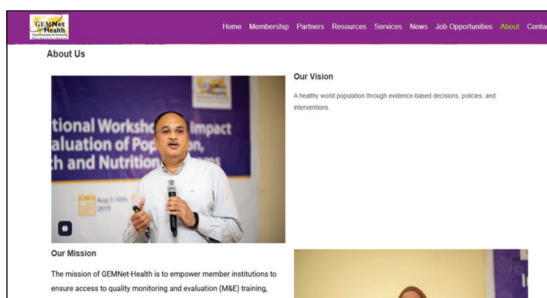
GEMNet - Health : Global Evaluation and Monitoring Network for Health

Established: 2012

Region: Global (Members Located across world)

Membership: 11 Member Institutions across Africa, Asia and North America

Purpose: Fosters organizational growth, collaboration, and peer-to-peer support for monitoring & evaluation (M&E) of health programs globally; serves as a global resource for M&E technical assistance and capacity building



Africa Research, Implementation Science, and Education (ARISE) Network

Established: 2014, Co-founded by AAPH and Harvard T.H. Chan School of Public Health

Region: Sub-Saharan Africa (10 Countries, with additional partners in USA and Germany)

Membership: 22 member institutions in 10 Countries, with additional partners in USA and Germany

Purpose: Enhance public health capacity in Africa through a collaborative platform for groundbreaking research, transformative education, and implementation of solutions addressing shared health challenges



GNAPH – Global Network for Academic Public Health

Established: 2020

Region: Global

Membership: 7 regional associations representing 400+ schools/programs

Purpose: Alliance of regional associations to advocate and strengthen academic public health worldwide. GNAPH has united public health academia globally, advocating on issues like COVID-19 vaccine equity, humanitarian crises, and global peace. It fosters cross-regional collaboration through joint statements, global webinars, and an institutional directory.



AFROHUN -Africa One Health University Network

Established: 2020 (formerly OHCEA)

Region: East & Central Africa

Membership: 24 universities in 10 African countries

Purpose: AFROHUN has pioneered One Health education in Africa, integrating cross-sector training in university curricula, launching joint field programs, and training faculty. It supports outbreak response, policy input, and research on zoonoses and AMR. Through partnerships like USAID's One Health Workforce, it has built a skilled, interdisciplinary health workforce across the region

The screenshot shows the AFROHUN website. The header features the OHWA logo and a language selector set to 'English'. The navigation bar includes links for ABOUT US, TRAINING, CERTIFICATION, INDUSTRY RESOURCES, STUDENTS, CAREERS, and NEWS/EVENTS. The main content area displays the AFROHUN logo. Below this, there are three dropdown menus for course selection:

- Veterinary Clinical Diagnosis**
1) Please select Network (AFROHUN/2)
AFROHUN - Please select OHUN or
Country (ETHIOPIA/2) (ETHIOPIA - Please
select a University (Jimma University,
- Infectious disease management (IDM)**
1) Please select Network (AFROHUN/2)
AFROHUN - Please select OHUN or
Country (ETHIOPIA/2) (ETHIOPIA - Please
select a University (Jimma University,
- Introduction to OH**
1) Please select Network (AFROHUN/2)
AFROHUN - Please select OHUN or
Country (DEMOCRATIC REPUBLIC OF
CONGO/2) (DEMOCRATIC REPUBLIC OF
CONGO - Please select a



THE UNIVERSITY OF
SYDNEY



THE UNIVERSITY OF
SYDNEY

Sydney Infectious
Diseases Institute

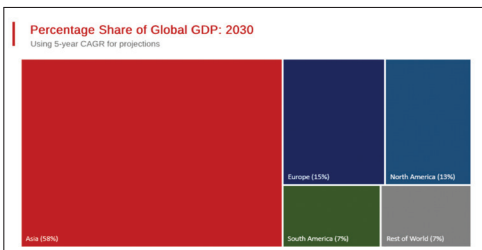
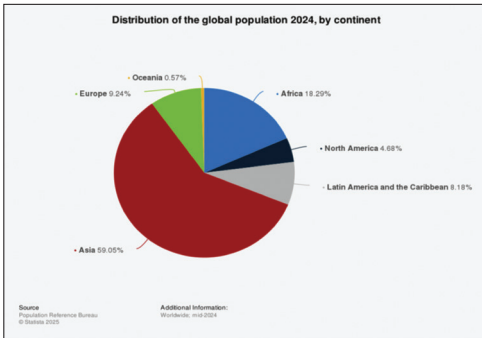
ASIA-PACIFIC PERSPECTIVES ON PUBLIC HEALTH EDUCATION: COLLABORATION, CURRICULUM AND CAPACITY

A/Prof Shailendra Sawleshwakar
Director Academic Education
and Postgraduate Coursework

Public health in Asia Pacific: Why Asia matters?

- Sheer population size and disease burden make Asia intrinsically important to global health.
- Asia accounts for nearly 60 percent of the total world population.
- The world economy has radically changed over the past decade. The Asian share of global GDP has risen and is likely to be around 58% by 2030.
- Asia-Pacific GDP is over twice that of the Americas, 3 times that of Europe and 8 times Africa.

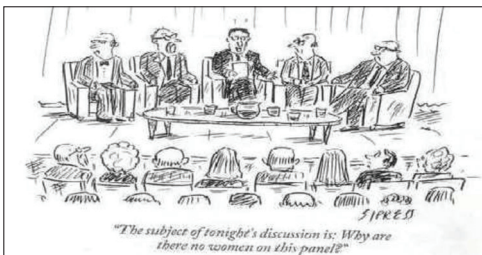
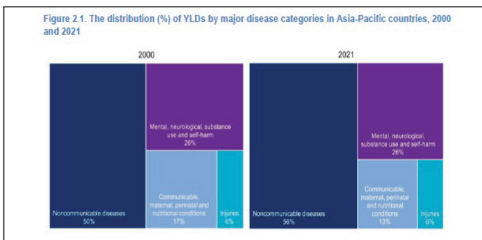
The University of Sydney



Public health in Asia Pacific: Why Asia matters?

- Asia's high disease burden influences global health: Triple burden – Communicable diseases, NCDs and injuries along with ageing population and climate change
- Within health, there is a compelling case for the 'Asian-Pacific perspective' and for Asia to have a seat at the table in the discourse on global health governance.
- Region's public health challenges are complex and diverse, primarily due to its large population, economic disparities, and varied health care infrastructures.

The University of Sydney



Public health in Asia Pacific: Education Perspective - The Five 'C's

- Public health education in the Asia-Pacific must respond to challenges by:
 - ♦ **design and delivery of relevant curriculum,**
 - ♦ **incorporating innovative pedagogy, and**
 - ♦ **integrating suitable education technologies**
- Significant opportunity for **cooperation** in public health and health professional education.

- Health systems in the countries in this region are at different stages of progress, but it offers opportunities for sharing diversity of experiences and expertise for mutual benefit. **Collaboration in Curriculum through Capacity building of faculty** is critical to ensure public health graduates are **Competent** to serve the **Community**

Global Charter for Public health: Implications for public health education

- Appropriate **Curriculum**
- Aligned **Competencies**
- Relevant **Capacity**
- Optimised and Innovative Design
- **Community** embedded
- **Collaborative** Delivery



Borisch B, Lomazzi M, Moore M, Krech R. Update on the Global Charter for the Public's Health. Bull World Health Organ. 2018 Jun 1;96(6):439-440. doi: 10.2471/BLT.17.198820.

Asia - Pacific Academic Networks of Public Health Institutions



Council of Academic Public Health
Institutions Australasia



The University of Sydney

CAPHIA Council of Academic Public Health Institutions Australasia

CAPHIA is the peak organisation that represents public health in universities that offer undergraduate and postgraduate programs, research and workforce development in public health throughout Australasia.

Purpose:

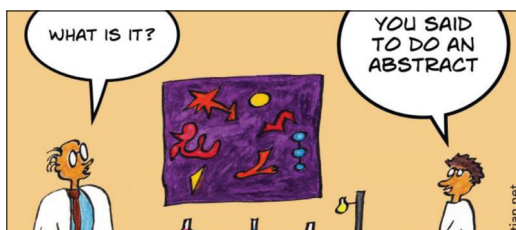
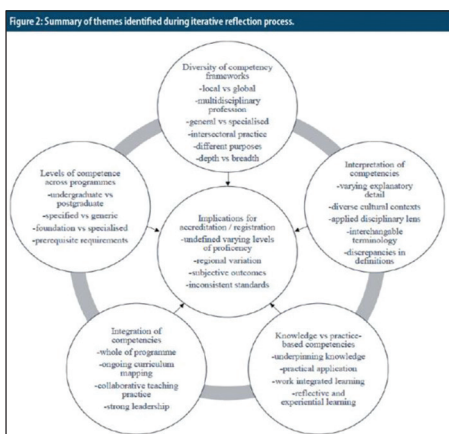
- maintain high quality academic standards in the education and development of public health practitioners and researchers,
- lead and represent public health education in the tertiary sector and
- to be a respected voice and advocate for the development of public health professionals and researchers within Australasia.

CAPHIA Activities

CAPHIA Activities:

- CAPHIA Competencies: Third Edition is currently under development
- CAPHIA Networks: to foster collaboration and expertise in specific areas of academic public health: AI, Design Thinking, Climate, Teaching Epidemiology
- Annual Teaching & Learning Forum: community of practice to create education which equips the public health workforce with the skills and knowledge.
- CAPHIA Internship Program
- Early Career Academics: develop and deliver programs and events.
- CAPHIA awards: recognise, celebrate and promote innovation and excellence in public health teaching in Australasia.
 - ♦ CAPHIA Medal
 - ♦ Teaching and Learning – Individual, Early Career and Team
 - ♦ Research – Individual, Early Career and Team

Mapping competency frameworks: implications for public health curricula design



- Local Vs Global
- Level – Bachelor/Master/Executive
- Multidisciplinarity
- Knowledge Vs Practice

Aus NZ J of Public Health, Volume: 46, Issue: 5,
Pages: 564-571, First published: 12 May 2022,
DOI: (10.1111/1753-6405.13253)

CAPHIA CAPHIA Networks

Things to consider for development of networks:

- Purpose and contribution
- Structure and leadership
- Sustainability
- Communication

Examples of Networks:

- Artificial Intelligence in Public Health Network
- Biostatistics Educational Excellence in Public Health Network
- Climate and Public Health Education Network
- Design Thinking in Public Health Education Network
- Teaching Epidemiology Joint Network (CAPHIA & AEA)
- Qualitative Methodologies and Methods Network

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- **Vision:** promote the translation of Public Health education and research into evidence-based policies and programs to improve the health and well-being of populations in the Asia-Pacific Region.
- **Mission:** provide thought leadership in the translation of Public Health through education, research, and collaboration with public stakeholders.

Objectives:

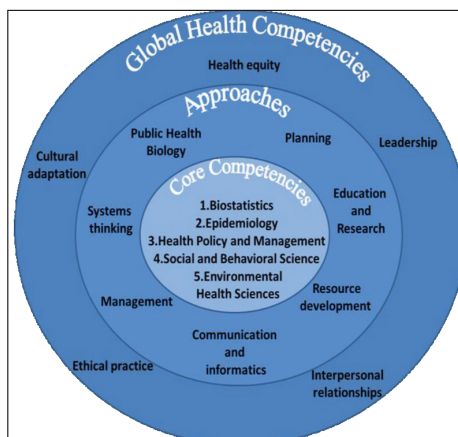
1. To enhance the quality and relevance of educational and training programs in public health;
2. To expand knowledge, improve skills and demonstrate effective interventions;
3. To raise awareness of current, emerging, and re-emerging public health issues and develop programs of action for their resolution;
4. To enhance the capacity and sustainability of public health systems; and
5. To assist in policy and leadership development for health;

The University of Sydney

APACPH activities

1. Asia-Pacific Journal of Public Health (APJPH) is a peer-reviewed, quarterly journal that focuses on health issues in the Asia-Pacific Region
2. Annual APACPH - Public Health Conference
3. The International Cyber University for Health
4. Early Career Network: provides a platform for networking and developing these young professionals into future leaders.
5. Conferral of Awards to outstanding organisations, groups, and individuals who have contributed to the development of public health in the region.
 - ♦ Leadership Achievement Award
 - ♦ Public Health Recognition Award
 - ♦ Excellence in Leadership Medallion
 - ♦ Medal of Merit
 - ♦ Young Investigator Traveller Award

APACPH Competencies: The 'Super Generalist' Professional



South-East Asia Public Health Education Institution Network (SEAPHEIN)



SEAPHEIN:

- Created by the WHO South-East Asia Regional Office to establish a knowledge-sharing base among the member countries of the region centered around public health education and training.
The Network (SEAPHEIN) was established at the Faculty of Public Health, Mahidol University, Bangkok, Thailand in 2004, with thirty-five founding members.
- Promotes the use of core competencies as guidelines, educational standards, and institutional accreditation among its members.
- At present, the SEAPHEIN secretariat is based at IIHMR University, Jaipur India and member countries have individual networks – IndiaPhein, ThailandPhein

South-East Asia Public Health Education Institution Network (SEAPHEIN)



Objectives:

- To promote public health education and training in the academic institutions and universities in the member countries;
- Role of public health education institutions/universities in advancing public health education;
- To improve and sustain the quality and relevance of public health education to address the increasing challenges of health and development.

South-East Asia Public Health Education Institution Network (SEAPHEIN): Activities

SEAPHEIN Leadership Awards:

- Lifetime Achievement Award for Contribution in Public Health Education in the South-East Asia Region
- Public Health Education Leadership Award for Institutions for Promoting Public Health Education
- Public Health Education Leadership Award for Individuals for Significant Contributions in Promoting Public Health Education in South-East Asia Region

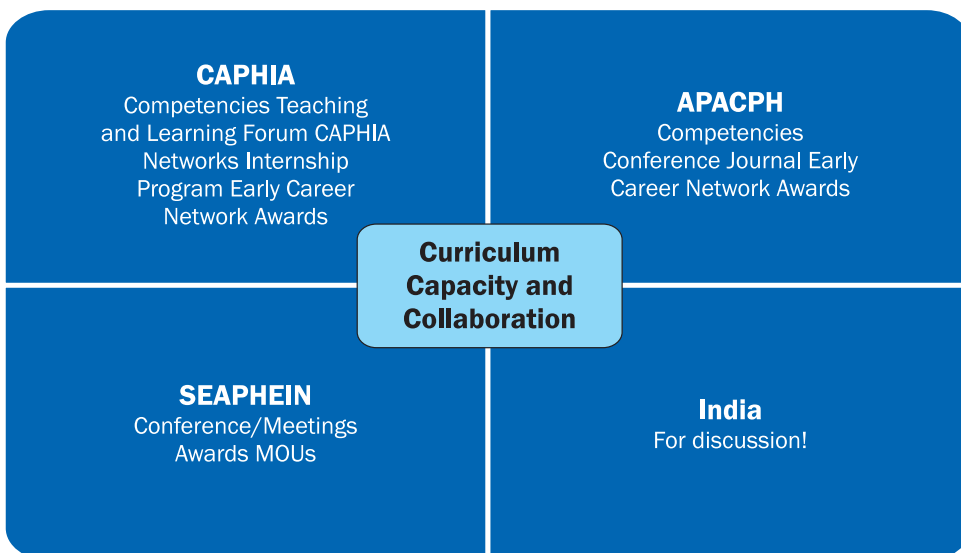
MOUs

- SEAPHEIN facilitates MOUs between member institutions

Biennial Meetings

Other relevant networks

- International Association of National Public Health Institutes (IANPHI): links and strengthens the government agencies responsible for public health. IANPHI improves the world's health by leveraging the experience and expertise of its member institutes to build robust public health systems.
- Several specific networks:
 - ♦ South Asia Infant Feeding Research Network (SAIFRN)
 - ♦ Southeast Asia One Health University Network (SEAOHUN)
 - ♦ ASEAN University Network - Health Promotion Network
 - ♦ South Asian Public Health Forum (SAPHF)
 - ♦ Sexual and Reproductive Health Matters Regional Hub (SRHM Regional Hub)
 - ♦ Asia-Pacific Parliamentarians Forum (APPF)
 - ♦ Equity in Asia Pacific Health Systems (EQUITAP)



How can we prepare current and future public health practitioners for global challenges?: Themes to consider

Curriculum

- Accreditation Frameworks
- Competency Frameworks and EPAs
- Online and Blended Learning
- Digital Technologies and AI
- Placements/Fieldwork

Capacity

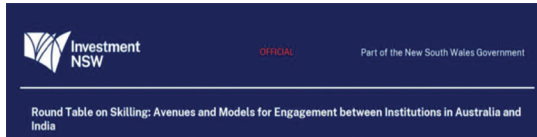
- Faculty Development
- Early career networks
- Teaching and learning forums
- Exchanges, student and staff mobility
- Awards

Collaboration

- Conferences
- Networks: Educators, Researchers, Thematic, MOUs
- Joint degree/Double degrees: MBA/ MD
- Journal

Thank you!

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sydney.edu.au



Annexure 8

EXPERIENCE AND LEARNING FROM ASPHER DR. SUSHMA ACQUILLA



ASPHER

- The Association of Schools of Public Health in the European Region (ASPHER) is the key independent European organisation dedicated to strengthening the role of public health by improving education and training of public health professionals for both practice and research.

Mission of ASPHER

- The Association of Schools of Public Health in the European Region (ASPHER) is the key independent European organisation dedicated to improving and protecting the public health by strengthening education and training of public health professionals for both practice and research.

Functions of ASPHER

- To support the professionalisation of the public health workforce in Europe, whilst respecting the diversity of national and regional contexts in which each school of public health operates, and thus:
- To sustain capacity building in public health, so that it balances with national and European population health challenges and threats and is supported by best standards of public health education and training, scientific research, and practice.

Objectives of ASPHER

- To sustain, in theory and practice, member schools in achieving their missions of education, training, scientific research and service
- To develop models for public health education and training at all academic and professional levels, and the interaction of education and training with population health, health systems and services
- To promote structured processes of sharing evidence-based public health models of innovation and good practice
- To build coalitions with other programmes and public health organisations whose mission is to improve public health, specifically towards an effort to put forth high standards in and strengthen public health education and training and to improve the quality of the public health workforce in Europe and its competitiveness globally.

Structure and Organisation of ASPHER

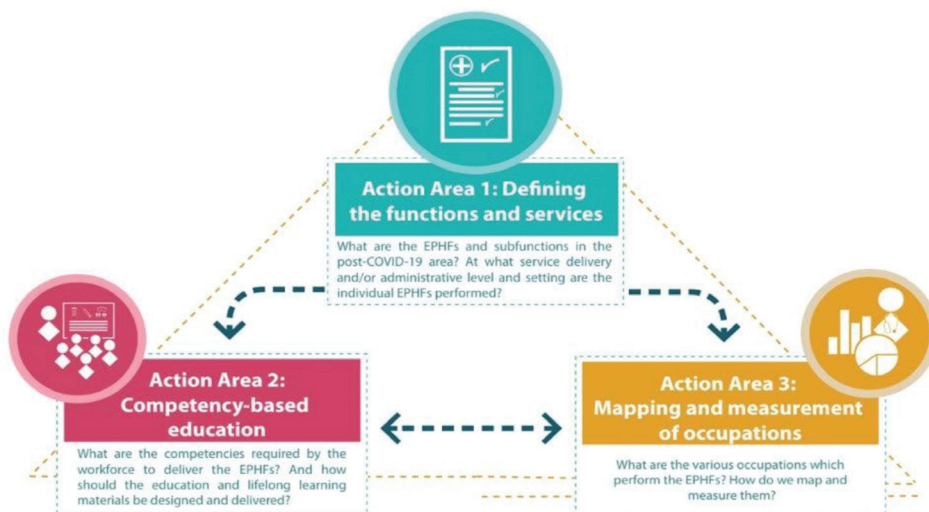
- ASPHER is a membership organisation of institutions, spread across EU and wider across WHO European Region, which are collectively concerned with the education and training, and professionalism, of those entering and working within the public health workforce.
- Founded in 1966, ASPHER currently has over 130 member organisations in over 40 countries in Europe.

ASPHER organisation and Functions

- ASPHER has a Board comprising 10 elected members (no more than 2 from same organisation)
- President elected for 2 years: effectively 4 years term as Vice and Immediate Past President
- Different leads are appointed e.g. Ethics, Curriculum, Emergency
- Membership not tied to European Region only
- Poland, Palestine and Israel are also members
- Member organisation pay for membership 2000 Euros per year
- Task Force : Emergency (Covid), War, Climate Change
- Secretariate: 3 paid members including Director based in Brussels, Communication and newsletter
- Independent accountant and Lawyer for functions as necessary

Activities of ASPHER

- Plan written for 1995-2005
- Fellowship programs paid by others
- Digital Health
- Diverse Health
- Vaccination
- Andrija Stampar School of Education and Tutoring Summer School : PBL based summer school
- Global consortium for Education
- Run the accreditation program for members
- Also have contracts for vaccination training
- Have young professionals working on projects



ASPHER competence and outcomes framework

- 60 page document - Based on
- Health care Public Health functions
- Health Care Essential Medicines
- Health care Public Health Screening programs
- Competence and outcome for 5 different types of Public Health functions

National workforce capacity for essential public health functions: A roadmap

- Achieving and sustaining progress towards global health goals such as universal health coverage and health security requires a health and care workforce that can deliver the full range of essential public health functions, including emergency preparedness and response.
- As countries recover and turn attention to investments in health systems to meet diverse challenges, now is an opportune time to bolster the public health workforce, including those personnel charged with emergency preparedness and response functions.
- The roadmap is the result of joint efforts across leading public health and emergency response experts, organizations and associations.

Essential Collaboration with the WHO through steering committee

<https://www.who.int/teams/health-workforce/PHEworkforce>

Roadmap to professionalise the Public Health Workforce

- ASPHER and WHO have launched the Road Map to Professionalizing the Public Health Workforce. This Road Map offers pragmatic recommendations for action to professionalize the public health workforce as a response to growing public health needs; it puts forward levers that can be engaged to do so. It embraces, by necessity, a cross-sectoral and cross-disciplinary approach that provides clarity about the scope and the specific competencies required, identifies key action areas for professionals and identifies the roles of the various actors.

Useful Publications jointly with WHO

- Operational handbook: for country-led contextualization and implementation of Public Health Functions
- Defining essential public health functions and services to strengthen national workforce capacity
- Global competency and outcomes framework for the essential public health functions
- Essential public health functions: A guide to map and measure national workforce capacity

Contents of Syllabi

- These syllabi provide hands-on material for people engaged in public health education on health inequities, social injustices and diversity enabling students to:
- identify mechanisms of privilege and oppression related to social identities
- determine awareness of one's own social identities and their relevance in the public health landscape
- learn how to determine biases within public health structures (and oneself)
- address and change biases in their practices to ultimately reduce health inequities.

Annexure 9

AN OVERVIEW OF ASPPH



ASPPH

ASSOCIATION OF SCHOOLS & PROGRAMS OF PUBLIC HEALTH

ASPPH is the voice of academic public health, representing schools and programs accredited by the Council on Education for Public Health (CEPH).



Vision: Improved health and wellbeing for everyone, everywhere.

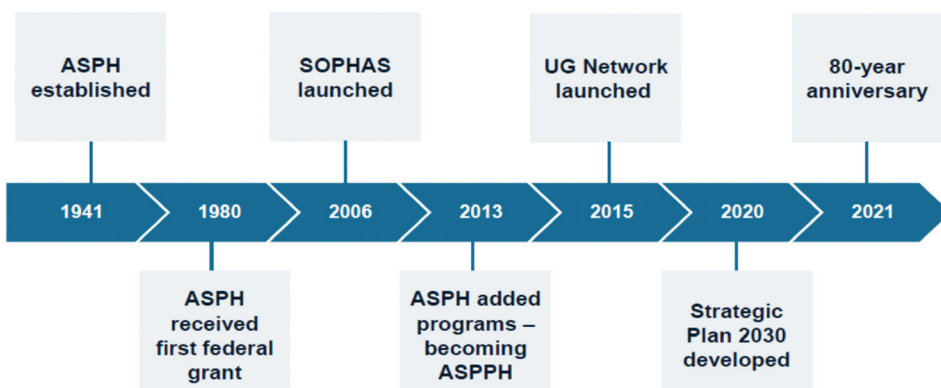


Mission: To advance academic public health by mobilizing the collective power of our members to drive excellence and innovation in education, research, and practice.



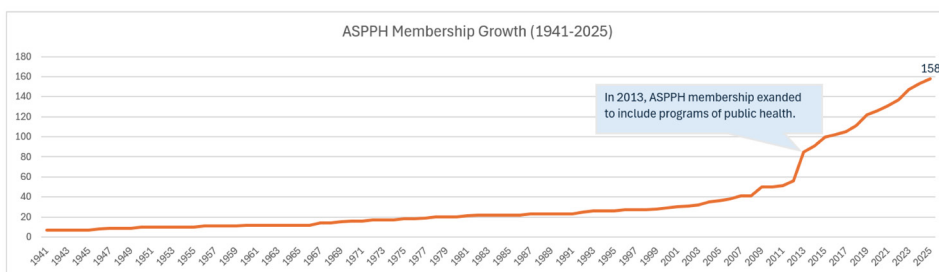
Values: Diversity, Equity, Inclusion, and Social Justice; Collaboration; Excellence; Innovation; Commitment to Public Health; Agility

ASPPH History

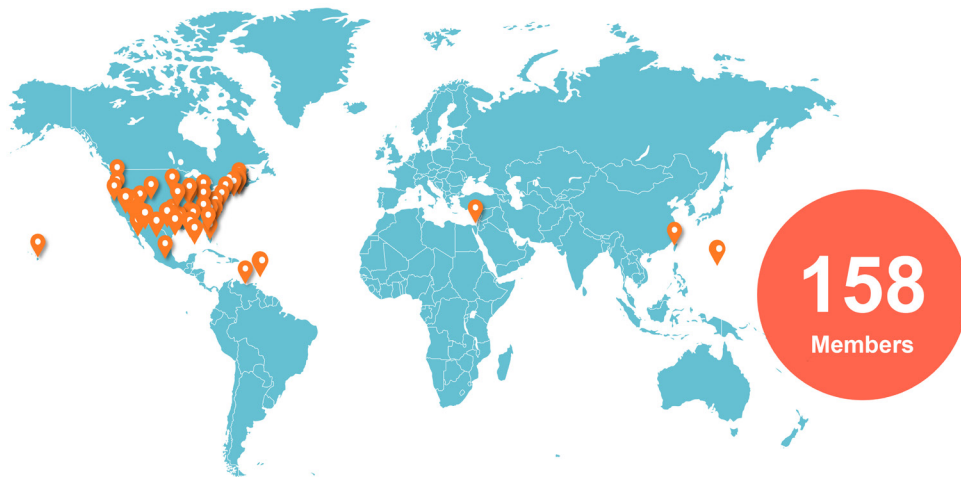


ASPPH Growth (1941-2025)

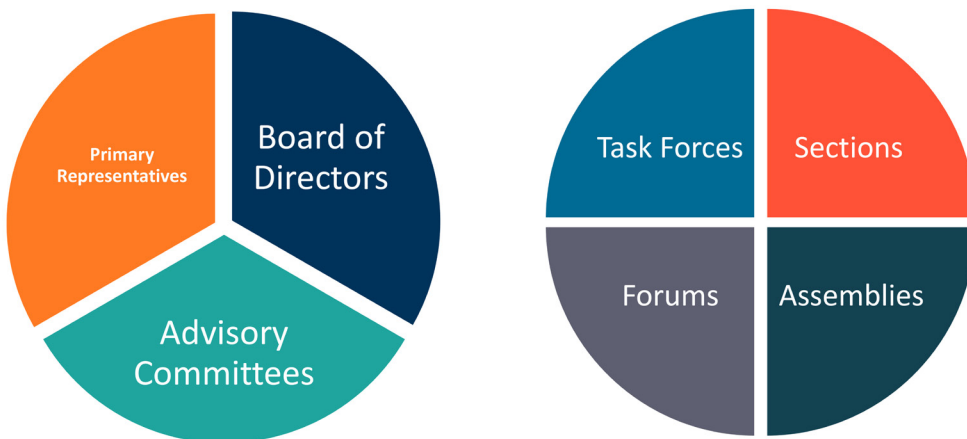
ASPPH launched with seven founding members in 1941. We now have 158 member schools and programs of public health.



ASPPH Membership



Governance Structure and Membership Engagement



Governance Group: Primary Representatives

Purpose: Represent their institution within ASPPH, votes on changes to bylaws and elects members and to the Board of Directors.

Composition: One primary representative from each member institution.

Selection: The dean of each member school or a senior institutional leader from each member program.

Governance Group: Board of Directors

Purpose: Serves the membership, sets association policy & strategy and provides fiduciary oversight.

Composition: Limited size (15-17). Only primary representatives are eligible. Minimum representation requirements per membership type. ASPPH's President & CEO is a non-voting member.

Selection: All board members are elected. At-Large members elected to a 3-year term and may serve a maximum of 2 terms.

2025 Board of Directors



Governance Group: Advisory Committees

Purpose: Advise the Board of Directors on organizational policies, provide oversight and leadership on critical issues related to ASPPH activities.

Composition: Limited size up to 20. Primary reps, faculty, and staff are eligible. Must include a board liaison. Two-year terms with a 3-term max.

Selection: Committee chairs are appointed by the Board of Directors. The ASPPH Executive Committee, in consultation with advisory committee chairs, makes the final selection of members.

Advisory Committees



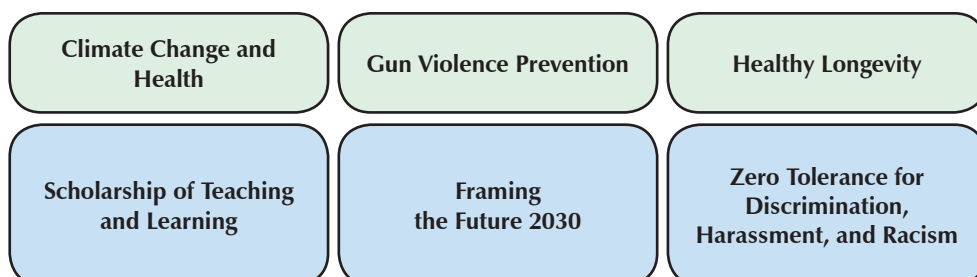
Engagement Group: Task Forces

Purpose: Serves to execute a specific scope of work with a time-limited charge.

Composition: Size dependent on specific taskforce needs. Board liaison not required. Disbands upon completion of defined task.

Selection: Chair(s) appointed by the executive committee. Members are invited and approved by taskforce chair(s) and staff.

Task Forces



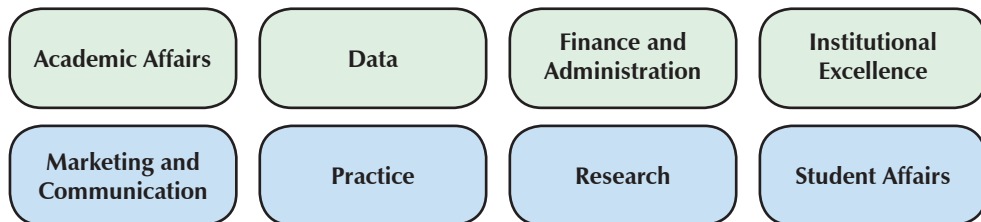
Engagement Group: Sections

Purpose: Provides opportunities for leadership development and networking.

Composition: Individuals with primary responsibility for the function applicable to each section. One individual per member institution per section. Requires minimum representation from 25% of member institutions.

Selection: Chair(s) elected by section members. Members appointed by primary representative.

Sections



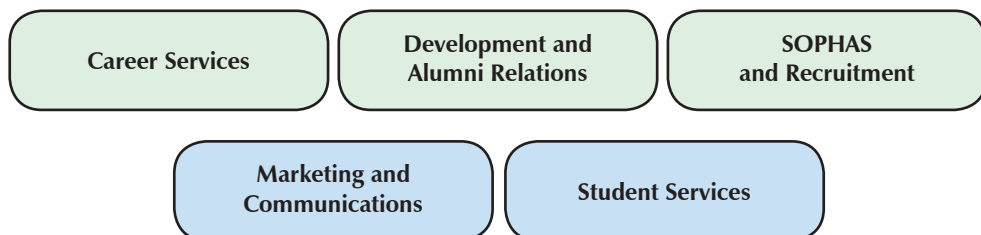
Engagement Group: Assemblies

Purpose: Provides opportunities for professional engagement and sharing between members with similar interests and/or responsibilities.

Composition: Unlimited size. Primary reps, faculty, and staff are eligible. Requires minimum representation from 25% of member institutions

Selection: Chair(s) elected by assembly members. Members self-select based on expertise and interests.

Assemblies



Engagement Group: Forums

Purpose: Online-only, member-driven discussions around common topic and interest areas.

Composition: Unlimited size. Primary reps, faculty, and staff are eligible.

Selection: Members self-select based on expertise and interests.

Forums

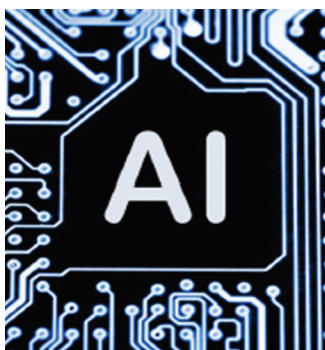
Continuing Professional Education	DrPH	Environmental and Occupational Health
Interprofessional Education for Collaborative Practice	MPH	Scholarship of Teaching and Learning
Technology and Education Innovations	Faculty	PhD

Goal 1:

Advance solutions to the critical public health challenges facing society.

ASPPH has established task forces to address critical public health challenges, including:

- Racism
- Climate change
- Gun violence
- Healthy longevity
- Public health education for the future
- AI in public health



Goal 2:

Champion the development of a competent and exceptional public health workforce.

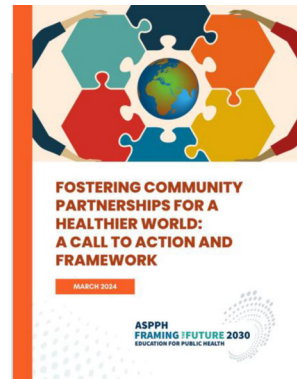
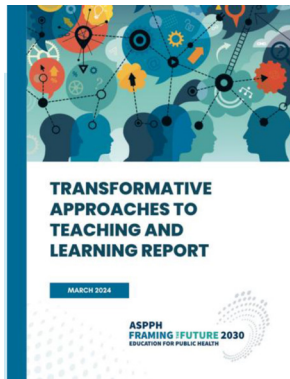
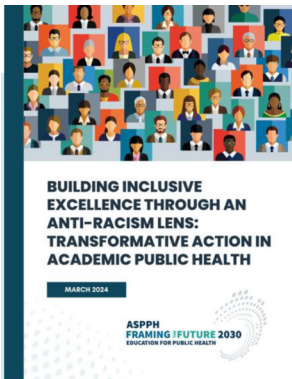
ASPPH established the Center for Public Health Workforce Development to focus on academic and practice partnerships to advance workforce recruitment, training, credentialing, and retention.



CENTER FOR PUBLIC HEALTH
**WORKFORCE
DEVELOPMENT**
ASPPH

Goal 3:

Uphold and advance excellence and innovation in teaching, research, and practice.



Goal 4:

Be the leading voice and authority on academic public health.

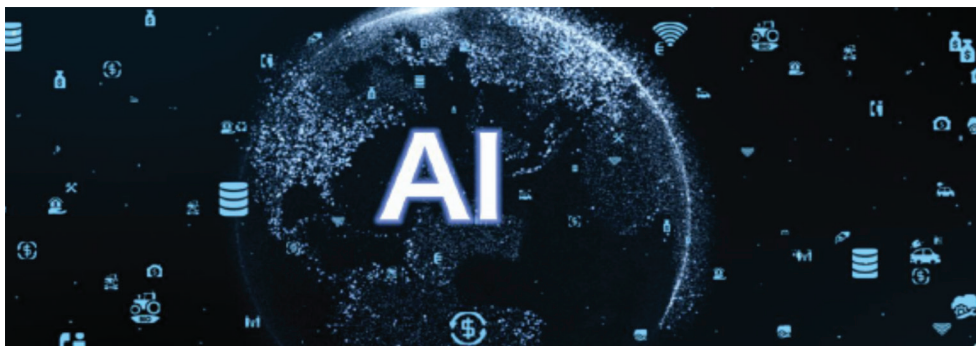
ASPPH advocates for funding and key policy initiatives to support public health programs and the work of our members to improve population health.



Goal 5:

Position ASPPH for long-term success and sustainability.

ASPPH IT focuses on developing deeper understanding of generative AI and increasing in-house expertise.



Guidance for Creating a New Association



- Start small
- Work on activities together
- Develop a strategic plan
- Be visible
- Identify membership benefits

Network of Schools of Public Health in India (NSPHI)

SECRETARIAT

Public Health Foundation Of India

House No. 60, Ground Floor, Lane 2, Part of Saidulajab Extension,
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