

PUBLIC HEALTH POLICY AND MANAGEMNT PROGRAM
under
International Public Health Management Development Program (IPHMDP)

(ITEC) Scheme
FY 2025-2026

A proposal from the Department of Community Medicine and School of Public Health, Post Graduate Institute of Medical Education and Research (PGIMER) Chandigarh

A. Context and Need for intervention

Public health is the art and science of preventing disease, prolonging life and promoting human health through organized efforts and informed choices of society, organizations, public and private, communities and individuals. It is an important part (and driver) of economy which ensures healthy and economically productive population of a country. In recent decades, practice of public health has been increasingly challenged with emergence of newer diseases. The ITEC countries, like India, are struggling with dual burden of emerging and re-emerging infectious diseases (T.B, Malaria and HIV) and non-communicable diseases (diabetes, cardiovascular diseases and Stroke). Further, many diseases (Ebola, yellow fever, filiovirus, Vibrio cholerae O139, and penicillin-resistant Streptococcus pneumonia etc.) including Neglected Tropical Diseases which are uncommon in other countries exists in epidemic proportion in these countries. As a region, Africa, Latin America and many parts of Asia is characterized by the greatest infectious disease burden and, overall, the weakest public health infrastructure among all regions in the world.

Despite the dismal scenario, many good practices exist in these countries which are being effectively used for containment of diseases and promoting health. There is an urgent need to share and adapt these practices for improvement in quality of life of citizens through effective attainment of Sustainable Development Goals (SDGs). Policymakers in the 21st century need to be informed about these best available evidences so that they are equipped with the necessary skills to navigate nuanced public health issues and challenges faced by their countries. In this way, they will be able to make effective decisions for improving effectiveness and efficiency of health care delivery system in their countries. In their routine administrative capacity, they normally address a series of difficult questions when choosing between different programs and policies. For e.g. Which programs and policy options are more likely to provide tangible improvements in health? What potential solutions are appropriate,

feasible and cost-effective for a specific situation? Which strategy will work in their community context considering various other issues like political and technical feasibility, equity etc.

A better understanding of the good practices by policy makers of ITEC nations through case-based approach, peer-to-peer learning and hands-on experience sharing during the proposed training program would ensure its adaptation and replication in their country. This 5 day capacity building module on public health policy and management will provide a hands-on experience by showcasing various best practices in India. It will also focus on developing a critical thinking and applied problem-solving skills among the global delegates for warranting their eventual adaptation in their country to effectively manage the existing and emerging public health challenges for overall strengthening of health systems.

B. Prior experience of conducting the program

Department of Community Medicine and School of Public Health, Post Graduate Institute of Medical Education and Research, India has been conducting several health management training programs for national and international participants for over four decades. It has conducted more than 1000 training programs/ workshop/seminars, which are supported by national and international agencies. In this series, the department has also conducted almost 31 IPHMDP courses for Mid and Senior level program managers, Public health and policy and management program for senior policy makers, and Nursing Leadership and Management program for Nurses and online courses on various domains to public health. These programs aim to enhance the understanding of public health and the best practices in field for addressing contextual public health challenges for overall attainment of Sustainable Development Goals.

Our training programs are entirely on No- Profit Basis. **Being the first program of its kind in the country being conducted in government set-up**, these programs seek to enhance management competencies which are absolutely essential for a good health manager for improving the performance and productivity of organizations. The current program for nursing professionals complements the earlier program (IPHMDP) as it has been designed to showcase the best practices in Public Health, public health nursing models in India, hospital administration practice in India and other related professional development modules for participants of different countries

C. Program Goal

To enhance the understanding of senior level policy makers about best practices in Public Health Policy and Management of India for addressing contextual public health challenges for overall attainment of Sustainable Development Goals (SDGs)

D. Program Objectives

1. To sensitise and equip senior program delegates on appreciating gaps in current global public health scenario and envision future trends in health care management for effective decision making.
2. To showcase the favourable impact of healthy public policy implementation in India on quality of life of its citizens through illustration by relevant case studies.
3. To provide exposure to visiting global delegates to best practices of public health policy and management in India.
4. To explore the opinion of program delegates about the potential of replication of models of best practices in public health management in their country settings.

E. Key Highlights of the Program

The key highlights of the program are;

- *Judicial mix of learning methods* through traditional formal learning methods (lecture, power point presentations, group discussions, role plays) and informal learning methods (case studies, exercises, videos, real case scenarios, and field visits).
- *Application based learning* in which the participants will prepare an action plan during the program to be implemented within 3 months of completion of program.
- *Facilitation of experience based learning* by an elite panel of leaders and experts (technocrats, bureaucrats and legislators)
- *Cross-cultural learning* through sharing of best practices of health promotion by the participants through integration with Indian culture and tourism and presenting exposure to local ethnicity and cuisine along with hosting a cultural event with gala dinner.

The main goal of the program is to ensure that the learning during the program are translated to implementation at workplace in real life settings.

F. Target Audience

This program is designed for policy makers, the persons responsible for or involved in formulating or implementing health (or health related) policies at regional or national level. The program capacity is 25-50 participants only.

G. Program Content

- Health Care Delivery System of India- Focussing on different levels (primary, secondary and tertiary) and types (Allopathic and Complementary and Alternative Medicine) of care. Concept of 'wellness centres' in India.
- How 'Healthy City concept' can ensure good health- master plan of Chandigarh city with every residential area (sector) as self-contained unit explaining role of good architecture in promoting health of people. The concept of parks and markets in every sector, building designs, people friendly pavements, arterial roads and cycle tracks, pedestrian crossings, drainage, transportation and *Swatch Bharat Abhiyan* (Clean India Campaign).
- Best practices in hospital like Regional Organ and Tissue Transplant Organisation (ROTTO)- one of the largest organ donation centre
- Health promotion at different settings (Health promoting hospital, school, workplace, home)
- Role of Indian culture (folk media etc.), tradition (transcendental meditation and yoga, Faith-based organisation) and philosophy in health.
- Use of user-friendly technology for improving health.
- Action Plan Development for their country based on the learning during the program.

The total duration of the program shall be five Days (including field visits, Yoga and meditation session in early mornings)

H. Program Schedule for FY 2025-26

16th -20th March 2026

I. Program Outcomes

At the end of the program, the participants will be able to

1. Understand the best practices in Public Health Policy and Management of India.
2. Appreciate the need for policy shift, if so required, in their country.
3. Choose the select best practices and strategies shared during the program for replication in their country.
4. Create a framework for future action of innovative strategies based upon the contextual public health challenges.
5. Undertake informed decision in routine and crisis situations faced by their country.

J. Program evaluation and follow-up



During the program, the participants will be evaluated (short term evaluation) on the basis of increase in their knowledge in various areas of public health policy and management taught during the program. For this purpose, a pre and post-test questionnaire shall be designed covering different components of public health policy and management. In addition, it shall be assessed based upon the participant's feedback about the program. The long term impact of the program shall be assessed based upon the activity accomplished after 3 months post-completion viz. a viz. those planned during the program.

We will submit a detailed Scientific Report of the program along with Utilization certificate within a span of two months post-completion of program.

K. Program utility for ITEC participants

ITEC scheme will make it more affordable for the participants who have the ability but not resources to fund their education. Further, this collaboration will boost cultural (Chandigarh being a beautiful cultural destination) and medical tourism besides promoting aviation sector. In addition, senior policy makers will learn from other's experience and expertise in public health policy and management of respective countries, which is of utmost importance in emerging area of public health. Summarily, it will help in establishing relations of mutual concern and inter-dependence which is the ultimate goal of ITEC Scheme. We are also open to any modifications in the program as per need of international participants or requirements under ITEC Scheme.

L. Schedule

<u>TENTATIVE PROGRAM SCHEDULE</u>			
 PUBLIC HEALTH POLICY AND MANAGEMENT PROGRAM 			
Day & Date	Time	Topic of Presentation	Resource Persons
Day 1	09:00-09:30 AM	REGISTRATION	
	09:30-11:00 AM	INAUGURAL SESSION AND HIGH TEA	
	11:00-11:30 AM	Tea Break and single photos	
	11:30-12:15 PM	Introductions and Pre test Management and Leadership Demonstration Task	Organisers

	12:15-01:00 PM	Registration on study portal and filling one questionnaire Social media friends FRRO	
	01:00-02:00 PM	Lunch Break	
	02:00-02:30 PM	Game and Interview	
	02:30-03:15 PM	Health Policy & Frameworks	Dr. Sanjiv Kumar Chairman, Three domains leadership foundation, New Delhi
	03:14-04:00 PM	Assignment	
	04:00-04:15 PM	Participant Forum	
	04:15-04:30 PM	Discussion and Feedback	Participants
Day 2	09:00-09:30 AM	Recap Session	Participants
	09:30-10:15 AM	Health Policy actors and globalization	Dr. Sanjiv Kumar Chairman, Three domains leadership foundation, New Delhi
	10:15-11:00 AM	Assignment	
	11:10-11:30 AM	Tea Break	
	11:30-12:15 PM	Policy content and policy context	Maj. Gen. Prof. Atul Kotwal, Former Director NHSRC, New Delhi
	12:15-01:00 PM	Assignment	
	01:00-02:00 PM	Lunch	
	02:00-02:30 PM	Game and Interview	
	02:30-03:15 PM	Policy process and agenda setting	Dr. Pankaj Bhardwaj, Director, National Institute of Implementation Research (NIIRNCD) Jodhpur
	03:15-04:00 PM	Assignment	
	04:00-04:15 PM	Participant Forum	
	04:15-04:30 PM	Discussion and Feedback	Participants
	09:00-09:30 AM	Recap Session	Participants
	09:30-10:15 AM	Research Forum- Motivation, HR	IPHMDP team
	10:15-10:45 AM	Solo interviews	
	10:45-11:00AM	Social media check-In	Participants
	11:00-11:30 AM	Tea Break	
	11:30-12:00 PM	Out of Box thinking	IPHMDP team
	12:00- 12:15 PM	Photos with country flags	Participants

Day 3	12:15-01:00 PM	Participant Forum: Health Policy questionnaire	IPHMDP Team
	01:00-02:00 PM	Lunch	
	02:00-05:00 PM	Demonstration of best practices in patient care settings at PGIMER (Visit to PGIMER, Chandigarh-an institute of national excellence)	
	7:00- 10:00 PM	Cultural Night	
Day 4	09:00-09:30 AM	Recap Session	Participants
	09:30-10:15 AM	Policy Implementation	Dr. Upendra Bhojani, Faculty at Institute of Public Health, Bengaluru
	10:15-11:00 AM	Assignment	
	11:10-11:30 AM	Tea Break	
	11:30-12:15 PM	Policy analysis	Dr. Mona Gupta, Advisor, Health Policy and Integrated planning, NHSRC
	12:15-01:00 PM	Assignment	
	01:00-02:00 PM	Lunch	
	02:00-05:00 PM	Showcasing of India's "Smart city concept"- Translating policy into Action (Visit to Smart City of Chandigarh)	
Day 5	09:00-09:30 AM	Recap Session	Participants
	09:30-11:30 AM	Action plan presentation, Leadership tool	Participants
	11:30-12:00 AM	Tea Break	
	12:00-01:00 PM	Game/ energiser	Participants
	01:00-02:00 PM	Lunch Break	
	02:00-03:00 PM	VALEDICTORY CEREMONY	Participants

Annexure ‘1’

Organizational Capacity

The Postgraduate Institute of Medical Education and Research (PGIMER) is based in Chandigarh and was established in 1962 by then Prime Minister of India, Pt. Jawahar Lal Nehru. It was declared as an “Institute of National Importance” by an Act of Parliament of India on 1st April 1967 and is currently an autonomous body functioning directly under the Ministry of Health and Family Welfare, Government of India. PGIMER has almost all specialities and super-specialities departments. PGIMER has completed over 1000 research projects and more than 500 research articles are published every year in national and international indexed journals.

The Department of Community Medicine was instituted in 1977 with the purpose of developing effective models of health service delivery for rural communities and for providing community health orientation to public health professionals. To address emerging challenges in public health education and research, the Department was upgraded to School of Public Health (SPH) in the Tenth Five Year Plan of India (2002-06). It has a WHO supported Learning Resource Centre within the premises. SPH also offers regular PhD, MD, Post Graduate Diploma in Public Health Management (PGDPHM), and Master of Public Health (MPH), Bachelors in Public Health (BPH) along with various short-term courses in areas of epidemiology, health management, health promotion, communicable and non-communicable diseases. SPH is also involved in several research projects in collaboration with national and international organizations and state governments. Each year nearly 45 training programs are conducted with an average attendance of 30 participants per course. Department also works in coordination with several leading national and international agencies such as DBT, ICMR, WHO, UNICEF, UNFPA, DFID, MOH&FW, and MOE&F that financially support research and training projects covering most public health areas.

Annexure-‘2’

Executive Summary of Last PHPM physical course at PGIMER, Chandigarh

Resource-constrained countries often face immense public health challenges, which demand skilled professionals capable of designing and executing evidence-based policies. To address this need, the International Public Health Management Development Program (IPHMDP) was conceptualized in 2016 by the Department of Community Medicine and School of Public Health, PGIMER, Chandigarh. Its primary aim is to strengthen the leadership skills of middle and senior-level program managers so they can effectively respond to public health challenges and improve organizational efficiency in limited-resource settings. As part of this initiative, the Department of Community Medicine and School of Public Health at PGIMER, Chandigarh, organized the 6th Public Health Policy and Management Program (PHPM) from 2nd to 6th September 2025. This pioneering program, the first of its kind in a public setting in India, brought together 44 participants from 28 countries across Asia, Africa, East Europe, Latin America, the Caribbean, and Pacific and Small Island nations.

The program was fully sponsored by the Ministry of External Affairs, Government of India, under the Indian Technical and Economic Cooperation (ITEC) Scheme. This five-day program combined theory with practical exposure. Participants engaged in modules covering global public health priorities, Indian health system, health policy frameworks, agenda setting, governance, and the role of stakeholders in the policy process. Special emphasis was given on policy implementation in the context of globalization and strategies for effective policy analysis. Each participant also gathered health statistics from their home country and contextualized public health issues, which formed the basis for interactive learning. A key highlight of the program was the policy triangle exercise, during which participants analyzed their respective countries' health policies.

The program also encouraged application-based learning participants created action plans tailored to their own organizations, which they will implement in the next three months. The program design balanced traditional methods such as lectures, presentations, and expert talks with interactive approaches including role plays, simulations, management games, and group exercises. Distinguished facilitators from leading academic and management institutions not only led the sessions but also inspired meaningful dialogue and learning. To deepen understanding beyond the classroom, participants were taken on field visits that highlighted India's strong public health practices in real settings. They visited the Municipal Corporation of Chandigarh, where they learned about flagship programs and smart city initiatives shaping community well-being. They also explored key departments at PGIMER, including the largest organ donation facility (ROTTO) and the Green Hospital Building. These visits offered a first-hand experience of innovative approaches to patient care and health system management, allowing participants to see ideas come to life and connect theory with real-world practice. Beyond academics, the program strongly emphasized cross-cultural exchange and networking. A cultural evening brought participants together through music, dance, and games, while early morning yoga and bhangra sessions provided a taste of India's cultural richness.

Three participants stepped forward as Cultural Night Directors, gaining hands-on experience in leadership and event planning while adding warmth and creativity to the program. The meals were thoughtfully curated to honor the diverse cultural backgrounds of all participants, helping create an atmosphere of respect, belonging, and shared connection. To encourage engagement, the program also featured the “PHPM Contest”, such as Most Participatory Participant, Out of Box Thinking Award, Cultural Maestro Award, Emerging Leader Award etc. Participants were also given the opportunities to share daily reflections, take part enthusiastically in management games, and express their perspectives through interactive

discussions. Throughout the week, activities and highlights were widely shared on social media platforms using hashtags like #ITECNetwork, #MEA_INDIA, #MOHFW_INDIA, #PHPM, #IPHMDP, #PGIMER, ensuring visibility and global outreach. By the end of the program, participants expressed heartfelt appreciation for the well structured, knowledge rich and practical training experience. They valued the opportunity to learn not only from experts but also from one another through peer-to-peer exchange. Most importantly, they left with concrete action plans and a shared commitment to scaling up the program's learnings within their own countries and organizations. The 6th PHPM once again demonstrated the power of collective learning, cultural exchange, and policy-focused training in building resilient health systems for the future. 6th Public Health Policy and Management Program