COURSE SYLLABUS

(1) GENERAL

(1) SEIVENAL					
SCHOOL	HEALTH SCIENCES				
	MANAGEMENT AND ECONOMICS SCIENCES				
DEPARTMENTS	■ SOCIAL WORK				
	 NUTRITION AND DIETETICS SCIENCES 				
	 BUSINESS ADMINISTRATION AND TOURISM 				
LEVEL OF STUDY	GRADUATE				
COURSE CODE	CDDA-B03		SEMESTER	В	
COURSE TITLE	Gender and Health				
INDEPENDENT TEACHING ACTIVITIES		TEACHING			
			HOURS WEEKLY	UNITS (ECTS)	
Lecturers					
Lecturers COURSE TYPE	Mandatory in speci	alizatio	WEEKLY 3	(ECTS)	
	Mandatory in speci	alizatio	WEEKLY 3	(ECTS)	
COURSE TYPE	, ,	alizatio	WEEKLY 3	(ECTS)	
COURSE TYPE PREREQUISITE COURSES:	No	alizatio	WEEKLY 3	(ECTS)	
COURSE TYPE PREREQUISITE COURSES: LANGUAGE OF TEACHING and	No	alizatio	WEEKLY 3	(ECTS)	
COURSE TYPE PREREQUISITE COURSES: LANGUAGE OF TEACHING and EXAMINATIONS:	No Greek	alizatio	WEEKLY 3	(ECTS)	
COURSE TYPE PREREQUISITE COURSES: LANGUAGE OF TEACHING and EXAMINATIONS: THE COURSE IS OFFERED TO	No Greek		WEEKLY 3 on 2	(ECTS)	

(2) LEARNING OUTCOMES

Learning Outcomes

Gender differences in health exist and are multifaceted, while the causes to which they are attributed are a complex issue whose study and interpretations may be subject to systematic error. Gender, that is, gender as a social and cultural variable, includes many dimensions, each of which affects health. Gender identity and expression, gender roles and norms, gender relations, structural sexism, power, equal opportunities, but also equal treatment are some of these dimensions. Gender socialization and masculinity norms influence boys' and men's health-seeking behaviors. Structural gender inequalities limit girls' and women's access to health services and contribute to health inequalities. Other social variables, such as race, ethnicity, socioeconomic status, and policies in place, often interact with gender to affect health, underscoring the importance of an interdisciplinary approach to the study of gender and health.

Given that gender is an important social determinant of health, it is imperative that professionals involved in health and social care systems have the ability to recognize and address gender health inequalities in their work context for the benefit of those served, as well as those own.

Therefore, the purpose of the course is for students to improve their knowledge and skills in dealing with the social and cultural factors that affect the health of individuals and groups. In this context, the course specifically examines the relationship between gender and health, highlighting the importance of interdisciplinarity and addressing gender-related barriers in health care, promoting gender equality and empowering people who experience discrimination on the basis of gender. their gender with the ultimate goal of achieving health for all.

In particular, after the end of the course, the students are expected to:

- To know gender differences in health indicators
- To analyze the concepts of biological and social gender and their multi-level effect on health

- Understand the relationship to health of gender stereotypes, the social construction of gender, gender roles and norms.
- To understand the possible causes of gender differences in health based on a conceptual model of analysis.
- To acquire skills to detect these differences in different work environments.
- To understand that equal opportunities and equal treatment of the sexes are not identical concepts, but both are needed to achieve gender equality in health.
- To integrate the perspective of gender in health matters, thus acquiring new perceptions, modes of operation and intervention in the health sector.

General Skills

- Search, analysis and synthesis of data and information, using the necessary technologies
- Autonomous work
- Teamwork
- Work in an interdisciplinary environment
- Respect for diversity and multiculturalism
- Demonstrating social, professional and ethical responsibility and sensitivity to gender issues
- Exercise criticism and self-criticism
- Promotion of free, creative and inductive thinking

(3) COURSE CONTENT

- 1. Presentation of the module and the evaluation process. A first approach to the relationship between gender and health.
- 2. Gender differences in health issues The concept of gender (biological and social sex).
- 3. Causes of gender differences: Gender inequalities in health issues Gender mainstreaming.
- 4. Psychosocial determinants in women's cancer prevention.
- 5. Sexual orientation, gender identity and health.
- 6. The phenomenon of gender-based violence: concepts, forms, effects.
- 7. SOGIESC-based violence-violence in the school community based on sexual orientation, gender identity/gender expression and gender characteristics and health implications.
- 8. Policies to prevent and address SOGIESC violence in education: Inclusive education and integrated sexuality education.
- 9. The trauma of female rape and its management through the narrative approach: A case study.
- 10. Abuse: on the part of the victim and the abuser.
- 11.Gender and dementia
- 12. Gender and dependence
- 13. Oral presentations of individual semester assignments.

(4) TEACHING and LEARNING METHODS - EVALUATION

METHOD OF DELIVERY	Face to face		
USE OF INFORMATION AND	Yes		
COMMUNICATION			
TECHNOLOGIES			
TEACHING ORGANIZATION	Activity	Semester Workload	
	Lectures	50	
	Literature study and	60	
	analysis		
	Interactive teaching	30	
	Writing an individual	48	
	work and presenting it		
	orally in class		

	Total Course	188	
STUDENT EVALUATION	At the end of the semester, in addition to the final		
	written exam, the students will also be assessed with		
	mandatory assignments (written assignment and oral		
	presentation). The overall theme of the assignments		
	will be to create short teaching examples that use		
	gender analysis and its relationship to health, while		
	developing basic public health skills. The final written		
	exam topics will be a combination of multiple choice		
	and short development questions. The ratio of final		
	written exam and assignment to the final grade will be		
	60-40. The evaluation wi	ll be done in the Greek	
	language.		

(5) RECOMMENDED-BIBLIOGRAPHY

-Suggested Bibliography:

- Cameron, D. (2018). Feminism: past and present of a movement. Heraklion: University Publications of Crete.
- Dominelli, L. (2002a). Feminist social work theory and practice. London: Red Globe Press.
- Payne, M., (2021) Modern Social Work Theory. Edited by Ratsika N & Koutra K. (2022). Contemporary Theory of Social Work, Ch. 17 Feminist practice. DISIGMA Publications
- Stratigaki, M. (2022). Gender equality policies: UN, European Union, Greece. Athens: Alexandria.
- Alvidrez, J., Greenwood, GL, Johnson, TL, & Parker, KL (2021). Intersectionality in Public Health Research: A View From the National Institutes of Health. American journal of public health, 111(1), 95–97.
- Blondeel, K., de Vasconcelos, S., García-Moreno, C., Stephenson, R., Temmerman, M., & Toskin, I. (2018). Violence motivated by perception of sexual orientation and gender identity: a systematic review. Bulletin of the World Health Organization, 96(1), 29–41L.
- Bowleg L. (2012). The problem with the phrase women and minorities: intersectionality-an important theoretical framework for public health. American journal of public health, 102(7), 1267–1273.
- Bruce, MA, Griffith, DM, & Thorpe, RJ, Jr (2015). Social Determinants of Men's Health Disparities. Family & community health, 38(4), 281–283.
- Butler-Mokoro, S. & Grant, L. (Eds.) (2018). Feminist perspective on social work practice: intersecting lives of women in the 21st century. New York: Oxford University Press.
- Fleming, PJ, Lee, JG, & Dworkin, SL (2014). "Real men don't": constructions of masculinity and inadvertent harm in public health interventions. American journal of public health, 104(6), 1029–1035
- Heise, L., Greene, ME, Opper, N., Stavropoulou, M., Harper, C., Nascimento, M., Zewdie, D., & Gender Equality, Norms, and Health Steering Committee (2019). Gender inequality and restrictive gender norms: framing the challenges to health. Lancet (London, England), 393(10189), 2440–2454.
- Krieger N. Breaking through and backlash: advancing awareness about racism, sexism, social class, and the people's health. Am J Prev Med 2022; 62(6):807-813.
- Krieger N. Discrimination and health inequities. In: Berkman LF, Kawachi I, Glymour M (eds). Social Epidemiology. 2nd ed. New York: Oxford University Press, 2014; 63-125.
- Krieger N. Methods for the scientific study of discrimination and health: from societal injustice to embodied inequality an ecosocial approach. Am J Public Health 2012; 102:936-945.
- National Academies of Sciences, Engineering, and Medicine; Division of Behavioral and Social Sciences and Education; Committee on National Statistics; Committee on Measuring Sex, Gender Identity, and Sexual Orientation, Becker, T., Chin, M., & Bates, N. (Eds.). (2022). Measuring Sex, Gender Identity, and Sexual Orientation. National Academies Press (US).
- Nielsen, MW, Stefanick, ML, Peragine, D. et al. Gender-related variables for health research. Biol Sex Differ 12, 23 (2021).
- Rapp, KS, Volpe, VV, & Neukrug, H. (2021). State-Level Sexism and Women's Health Care Access in the United States: Differences by Race/Ethnicity, 2014-2019. American journal of public health, 111(10), 1796–1805.