



HL 300 COMPARATIVE HEALTHCARE SYSTEMS AND POLICIES IN GREAT BRITAIN, EUROPE, AND THE UNITED STATES

IES Abroad London

DESCRIPTION: Health care is a priority and source of concern worldwide. Every country irrespective of its private, public, or mixed health care system faces similar challenges with regard to quality, delivery and cost of services. This course examines both global health issues and health systems from a comparative perspective.

The first part of the course will introduce global health themes, including international health organizations, right to health, and major international health issues, such as HIV/AIDS and women's and children's health. The structure and function of health care systems will be defined and explored. The basic tools and conceptual frameworks needed to analyze a health system such as the role of government, goal-setting and judging performance, and allocation of resources prepares students for the second part of the course, which focuses on select health care systems in Britain, Europe and the US. The structure and functioning of their health care systems will be reviewed in detail. The course will explore country-level debates on issues such as access to care and funding. It will also highlight how a country's history has influenced the development of its health system to reach its present-day functioning. Part of one class session is devoted to Jamaica as an example of health care in a developing country, to prepare students for their extended course-related trip. We also explore the impact of inequalities, through a longitudinal exploration of these using Art as a vehicle to discuss issues and interrelated issues. You will gain an understanding of health systems and public health comparatively by examining case studies, and we cover three frameworks to analyze health systems function – WHO Health Systems Strengthening, Dahlgren and Whitehead Moel, and Value-Based Health Systems.

CREDITS: 3 credits

CONTACT HOURS: 45 hours

LANGUAGE OF INSTRUCTION: English

PREREQUISITES: None

ADDITIONAL COST: None

METHOD OF PRESENTATION:

- Group discussions
- Lectures
- Facilitated Simulation Session
- Other media such as film and documentaries
- Optional experienced guest speakers

REQUIRED WORK AND FORM OF ASSESSMENT:

Required work and forms of assessment:

- 1. Class Participation 20%** : Students are expected to attend each class having read the required material in preparation for class discussion, and participate actively in discussions that arise in class. In addition, poor attendance and lack of punctuality will reduce the final grade.
- 2. Mid-term assessment 30%:** It will consist of an individual oral presentation, recorded and uploaded to Moodle Assignment portal, on topics covered in the units (1-5) to be recorded and uploaded to Moodle and will be undertaken during Mid Term Exam week
- 3. Group Public Health Promotion Poster 25%:** to be tailored to the context and culture of Jamaica, to be used in the clinics and Academic Institutions as part of your experiential placement in Jamaica. The task will consist of a longitudinal research and preparation of small-group Public Health Promotion Posters (prepared longitudinally over the course). More details on the poster will be provided by myself and my colleague David Neita in a session early on during the course.
- 4. 2500-word Research Paper 25%:** This will consist of an individual submission of a 2500 country report on 'Individual Health System Country and Policy Analysis' on a European country of your choice.
- 5. Pop Quiz – 0% (zero %) of grade,** around halfway through the course. Formative and for students' learning.

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LEARNING OUTCOMES:

Upon completion of the semester, students will be able to:

- Describe comparative health care systems, including principal institutions, methods of financing, and health outcomes;
- Compare the influence of political, cultural and social environments on health policy and health care;
- Identify public health problems related to lifestyle factors and design interventions to address risk factors;
- Demonstrate an understanding of social determinants of health and vulnerable populations, and show sensitivity to the health care needs of underserved populations and the importance of equitable access to health care
- Examine and reflect on the roles of various stakeholders in the delivery of health care: medical professions, traditional healers, the media, international organizations, anthropologists, environmentalists, politicians, economists
- Recognize the various perspectives, challenges and needs with respect to health which represented by different populations, particularly in the West Indies.
- Explain the factors that determine the quality, delivery, and costs of health services for individuals, communities and populations in a comparative, global context.
- Identify the principal organizations, institutions and services involved in the provision of health care in health systems throughout the world.
- Evaluate methods of financing, provider payment regulation, historical, and social-cultural elements affecting the accessibility, quality, organization, performance, and outcomes of the health care system in an international comparative context.
- Describe how ethical values relate to and inform the structure and reform of health care systems
- Assess the health situation of a country through analysis of a range of epidemiologic, population, economic, environmental, and social indicators

ATTENDANCE POLICY:

Regular class attendance is mandatory. Irregular attendance may result in a lower grade in the course, and/or disciplinary action. The IES Abroad London class attendance policy does not allow for unexcused absences, and grades will be docked one-half letter grade for each such absence. Rare exceptions will be made for the following reasons:

- The student is too sick to attend class. In this instance, the student must call the IES Abroad Centre before class to notify any of the IES Abroad staff. It is not sufficient either to email, send a message with a friend or call the Centre after the class has started.
- A serious illness or death in the immediate family requiring a student to travel home. This requires written approval from the Centre Director before departure.

Arriving more than 10 minutes late to class may count as an unexcused absence. Immigration laws in the UK are extremely strict, and we jeopardize our legal status in hosting students who do not regularly attend class. Students who do not attend class regularly will be reported to the appropriate officials and risk dismissal from the program and deportation from the UK. If a student incurs absences representing 25% of the total class hours, they will be contacted by the Academic Programme Manager (APM) and Centre Director (CD). If these absences are made up exclusively of unexcused non-attendance, this will trigger a disciplinary review. If these absences are made up of excused non-attendance, a meeting will be held to discuss the underlying reasons for lack of attendance, and to discuss ways it can be maintained for the duration of the term. If the 25% threshold is reached due to a mixture of excused and unexcused absences, students will also be asked to attend a meeting to discuss.

CONTENT:

Week	Content	Readings
Week 1	Introduction: Course Overview and Requirements; Approaches to Study Comparative Health Systems Why is it important to study other approaches to financing and delivery of care? What are student interests/objectives? Why do health systems matter? Discussion of global health themes: definitions, international health organizations, right to health, significant international health issues; and definition of health systems. Framework 1 – Who Health Systems Strengthening.	- Johnson & Stoskopf (2001). Ch 1 - The World Health Report (2000). Ch 1
Week 2	Tropical Medicine, International Health and Global Health This week, we will be covering: (1) An introduction to terms and stakeholders in international and global health; (2) Key players in international health, including public-private partnerships	Please do the set readings for discussion in class below, as well as the following brief internet research projects: (1) Find one recent (i.e. last 3 years) article relating to criticisms of the World Health Organization and be prepared to present and discuss this in class (no presentation material required, just a brief oral presentation of 2-3 minutes). This can be in a newspaper, academic journal, or blog. Key search terms might be "WHO reform", "WHO and commercial interests", "WHO and pharmaceutical industry", "WHO response to Ebola" etc. You may choose this or related reports if you are more interested in structural/governance aspects - here is good organisation to get info from: Chatham House – International Affairs Think Tank Background reading: Birn, A.E., Pillay, Y., and Holtz, T., <i>Textbook of International Health. Global Health in a Dynamic World</i>. Third Edition. (New York: Oxford University Press, 2009), Ch. 3: 'International Health Agencies, Activities, and Other Actors'. (IES Library) The Right to Health. Geneva: OHCHR/WHO, 2008. Available at: http://www.ohchr.org/Documents/Publications/Factsheet31.pdf Brown, Cueto & Fee, The World Health

		Organization and the Transition from International to Global Public Health. American Journal of Public Health , 2006, Vol 96, No. 1, accessed here: The World Health Organization and the Transition From “International” to “Global” Public Health - PMC (nih.gov) Nishtar, S. 'Public – private 'partnerships' in health – A global call to action', Health Research Policy and Systems, 2:5 (2004) accessed here: Public – private 'partnerships' in health – a global call to action Health Research Policy and Systems Full Text (biomedcentral.com)
Week 3	Part 1: Health Systems Overview Health Systems Overview: Key elements, functions and goals of Health Care Systems; Configuration of International Health Systems. What resources are available to get data and information? Part 2: Evaluating Health Systems Evaluating Health Systems: Where do you start? How to assess health system performance. Comparative Financing Systems: what role does government play in design, financing and governance of health systems? Judging Performance: Ethical theory in health system analysis.	None required for this session. Additional readings on Moodle page.

Week 4	Disease Focus – Non Communicable Diseases Framework 2: Dahlgren and Whitehead.	I would like you to do some internet research about specific policy actions that have been taken by governments with respect to the four key risk factors for NCDs (tobacco, alcohol, diet, and physical activity). You may choose to search news articles, academic journal articles, (reputable) blogs or government websites in order to bring an example of policies in this area. Please bring a case study about a policy on ONE of these risk factors which has been implemented or is being considered by a government and, if available, some information on why it was chosen and how well it is working. Do try to find a policy that you can find a reasonable amount of information on, so that we can have a richer discussion (i.e. look up at least two sources that tell you about it). Great places to get started are: Diet: Diet, activity and cancer - WCRF International Tobacco: Tobacco-Trends-Report-ENG-WEB.pdf (who.int) Alcohol: https://www.iacstudy.org/?page_id=15 Physical activity: ISPAH
Week 5	Disease Focus – Communicable Diseases Communicable diseases generally use fluid exchange, contaminated substances, or close contact to travel from an infected carrier to a healthy individual.	As a background to the discussion, please identify a communicable disease to research which currently or historically presented a challenge for health systems – details on the Moodle for disease allocation.
Week 6	Humanitarian Health and Global Power Structures - Poverty Inc Documentary We will be watching the documentary Poverty Inc during class 5.30pm. It lasts just over 90 minutes. After watching the documentary, please think about the 3 prompts below. Themes for you to consider as you watch the Documentary: 1) What are some of the issues with Structural Adjustment Policies/Programmes? 2) Are (Foreign) Aid programmes/projects a business? If so, how do we best mitigate against identified issues to enable us to best support in Humanitarian contexts? 3) Revisit your thoughts on Public Private Partnerships we covered a few weeks ago. Do you	No prereading required this week.

	have any additional thoughts on them after you have watched Poverty Inc? [hint: Power and Politics in Global Health.....	
Week 7	Mid Term Task	Submission of Mid Term Assignment
Week 8	Health Systems in Developed Industrial Countries Health systems in developed industrial countries 1 – the UK and the NHS The United Kingdom system: the National Health System (NHS). Group discussion: The politics of healthcare policies in Britain. Mrs. Thatcher and the private sector.	Recent articles for issues in the NHS are on the Moodle page.
Week 9	Health Systems in Developed Industrial Countries 2: Health systems in developed industrial countries Trends in Europe. Health Care in Germany and France.	Readings: 1) D. Green and B.Irvine, <i>Health Care in France and Germany: Lessons for the UK</i> (Civitas: Institute for the Study of Civil Society, London, 2001) Only Ch 1: 'France and Germany. The consumer's view' 2) S. Thomson et al (eds), 'International Profiles of Health Care Systems, 2011'. The Commonwealth Fund, 2011. See the reports that correspond to France and Germany
Week 10	Part 1: Health Systems in Developed Industrial Countries 3: The United States: health profile, governance, financing, organisation of services, health inequalities, responsiveness, top challenges Part 2: Creating Global Health Policies using a Value-Based Health System Approach	Part 1: Flipped classroom task – see Moodle page for more details. Student presentation on specific topics of the US Health System: Activity: Prepare a whole-class group presentation to last circa 30 minutes. You have complete creative freedom as to what the presentation looks like but could range from PowerPoint slides to a dramatic dance interpretation! You should all be involved in the preparation and presentation. Be prepared to answer any questions from myself during/after your presentation.

	Objectives: 1. Review health outcomes across WHO global health regions 2. Apply value-based health system framework to address a global health outcome in a specific context 3. Determine approaches to policy development to support value-based health system 4. Framework 3: Value-Based Health Systems.	Resources: (This is a basic list - please also feel free to use US government resources, and other literature to support your group work and research - it is part of the task!) United States Commonwealth Fund United States - OECD U.S. Health Care Policy RAND Healthcare in the United States: The top five things you need to know MIT Medical Part 2: Please read the paper on the Moodle (Farmer et al, Redefining Health Systems) and be ready to use it to develop and implement your policy ahead of class. We will be working in small groups.
Week 11	Health Systems in Fragile Contexts - we will be talking about the Eastern Europe/Central Asia region and mental health services. As a contribution for the class, it would be helpful to bring a specific challenge around mental health in a country in this region to discuss. As you will notice from the readings, research in this area can be challenging because of the lack of up to date statistics/publications as well as limited materials which are available in English - and so NGO publications are really valuable resources. Accordingly, I would like you to identify an NGO working in mental health somewhere in EECA and look through its work and publication to select one issue to present to the class. Many of these will have political and human rights dimensions, so please do get as much information as possible to present the background. The more specific you can be the better - i.e., if possible, tell a story about what is happening in one country rather than describing an issue that affects several. Prepare to speak for 2-3 minutes on your Mental Health NGO.	Required readings: McKee M, Healy J, Falkingham J. Health Care in Central Asia. Buckingham: Open University Press, 2002. Available at: http://www.euro.who.int/_data/assets/pdf_file/0007/9/8386/E74484.pdf; (skim only; this is helpful background but obviously quite dated) McKee M et al. Mental Health Policy and Practice Across Europe. OUP, 2007. Available at: http://www.euro.who.int/_data/assets/pdf_file/0007/9/6451/E89814.pdf (again, skim the sections relevant to EECA regions) Read the sections on Eastern Europe in: http://ec.europa.eu/health/mental_health/docs/healthcare_mental_disorders_en.pdf Dlouhy M. Mental health policy in Eastern Europe: a comparative analysis of seven mental health systems. <i>BMC Health Services Research</i> 2014, 14:42. Available at: http://www.biomedcentral.com/1472-6963/14/42; Central Asia Regional Health Profile, at: http://www.academia.edu/4789762/Central_Asia_region_al_health_profile Optional resources Explore the WHO European Region website page on mental health, at: http://www.euro.who.int/en/health-topics/noncommunicable-diseases/mental-health. Look particularly at some of the policy and priority areas. UNDP HIV, Health and Development page at: http://www.eurasia.undp.org/content/rbec/en/home/library/hiv_aids.html (this is not specific to mental health, but does provide some information about the region) http://ec.europa.eu/health/mental_health/docs/healthcare_mental_disorders_en.pdf "Kyrgyzstan struggles with rising mental health issues" at: http://centralasiaonline.com/en_GB/articles/caii/features/main/2010/01/23/feature-02

	communities.	
Weeks 12	Synoptic Course Overview and Inequalities Roundtable Over the course, we have discussed various examples of how art can explain, visualise, critique and reflect on pertinent, embedded types of inequalities that affect health and social inequalities, and much more. Please prepare and come to this session with you own piece of art/song/poem/lyrics/film clip/your own art that resonates with you on a challenging topic in global/public/social health inequalities. We will discuss each in a group setting during class. This is a safe and supportive classroom space and participants are free to leave if anything becomes too challenging for them.	Submission of Final 2500 word report. Participation in Health Inequalities Roundtable. Some examples to think about - please review the below articles on current topical issues affecting BAME individuals in the health setting. Have a think of how we can improve this - 3 things you would like to implement. We will discuss in class. Minority Ethnic Doctors Less Likely to Get Specialty NHS Training Posts (medscape.co.uk) Rate of Maternal Mortality 3.7 Higher in Black Women Than White Women (medscape.co.uk)

REQUIRED READINGS:

NOTE: The course materials will be available electronically on Moodle

COURSE-RELATED TRIPS:

Jamaican Experiential Trip.