

Global Health Policy Studies
Fall 2015, Wednesdays, 10 am to 1 pm

Course Description

This course will explore health and health outcomes in developing countries. A large part of global health concerns mitigating diseases, improving access to health services by the poor, and strengthening health systems in the developing world. That is because the burden of disease is highest in such areas as Africa and Asia and especially among the poor globally. We will examine the challenges and key issues in global health, global health policy, the important international actors involved, funding trends, health demand and supply issues, as well as ways of strengthen health systems.

Learning Objectives

By the end of this course, students should be able to:

1. Articulate the main issues in global health as well as the key concepts and frameworks used to examine those issues.
2. Identify who key actors are in global health.
3. Analyze the positive and negative effects of globalization on health policy at the international and national levels.
4. Identify key barriers to health service delivery in developing countries and develop policy recommendations to address these challenges.

Course Policies and Expectations

Attendance and full participation is expected by all students and required in order to do well in this class. In accordance with WII guidelines, if a student incurs more than two unexcused absences, their grade will drop by one letter grade for each absence. If you know that you will not be able to come to class, you must give me notice at least 48 hours prior to the start of a class. Required readings and assignments must be completed by the start of each class. Because this course will be an interactive class, it is to your benefit to be thoroughly prepared for class so that you can be an integral part of the conversation.

Readings

There is no required book for this class. All assigned readings will be sent to you via e-mail each week so please check your e-mails.

Assignments and Grading

The final grade for this class will be based upon:

1. ***Class participation and discussions (worth 30%):*** You are expected to read all assignments before class and to come prepared to engage in lively in-class discussions. Please pay attention to the central thesis of the readings as well as supporting arguments. I will moderate all discussions.
2. ***Two Policy Memos (each worth 20%):*** An important skill for those working in global health is the ability to summarize complex issues and to articulate arguments concisely. You will, therefore, be asked to write two (3-4 page maximum) policy memos. Memo assignments will be handed out two weeks before they are due as well as a guideline for writing those memos.
3. ***A written analysis of a case study (worth 20%) and an in-class presentation of that case study (worth 10%):*** You will be given a case study to analyze as well as guiding questions for conducting that analysis. Please prepare written responses to these questions. The responses must be completed individually and will be due on the last day of class (December 9); your presentations will also be done on that day. Further instructions on this assignment will be discussed in class.

The WII uniform grading policy is as following:

A= 90-100

B= 80-89

C= 70-79

D= 60-69

F= 59 or below

If a student has not completed a certain assignment by the end of the semester, he/she will be given a "0" (zero) for that assignment, the grade for which may only be changed by agreement of the faculty member and WII.

Academic Integrity

Students are expected to familiarize themselves with WII's policy on academic integrity as they will be expected to adhere to such policies at all times as students of the Institute. Students are expected to follow standards of excellence, including respect, honesty and responsibility. This course does not tolerate violations to academic integrity, including:

1. Plagiarism
2. Cheating on an exam
3. Submitting your own work toward requirements in more than one course without prior approval from the instructor
4. Collaborating with other students for work expected to be completed individually
5. Giving your work to another student to submit as his/her own
6. Purchasing or using papers or work online or from a commercial firm and presenting it as your own work

Any case of cheating or dishonesty by students will be treated as a serious offense. Students who engage in this type of behavior will face punishment and receive a “0” for the assignment at hand. If you have any questions about this, please feel free to ask me at any time.

Course Outline

INTRODUCTION TO GLOBAL HEALTH POLICY: PROBLEMS AND SOLUTIONS

September 9: The Poor and Global Health

What is global health? Why is it important? What are the challenges and key issues? The Millennium Development Goals expire in 2015; what is the final scorecard?

Readings:

1. Dara Carr. “Improving the Health of the World’s Poorest People.” *Health Bulletin* 1 (Population Reference Bureau) (2004).
2. Adam Wagstaff and Mariam Claeson. *The Millennium Development Goals for Health: Rising to the Challenges*. Washington, DC: World Bank, 2004, **Overview, pp. 1-24.**
3. United Nations. *The Millennium Development Goals Report 2015*. New York: UN, 2015, **browse results of health-related goals.**

September 16: Global Health Policy Debates

Vertical-horizontal-diagonal approaches

Readings:

1. Laurie Garrett. “The Challenge of Global Health.” *Foreign Affairs* 86 (January-February 2007): 155-161.
2. WHO Maximizing Positive Synergies Collaborative Group. “An assessment of interactions between global health initiatives and country health systems.” *The Lancet* 373, 9681 (June 2009): 2137 –69.
3. Michael Reich, Keizo Takemi, Marc Roberts, and William Hsiao. “Global Action on Health Systems: A Proposal for the Toyako G8 Summit.” *The Lancet* 371, 9615 (March 2008): 865-869.

4. Gorik Ooms et al. "The 'Diagonal' Approach to Global Fund Financing: A Cure for the Broader Malaise of Health Systems?" *Globalization and Health* 4, 6 (2008).

GLOBAL ARCHITECTURE OF HEALTH ASSISTANCE: ACTORS AND GLOBAL HEALTH FUNDING

September 23: Important Actors in Global Health

Who are the main actors? How has the global health landscape changed? What are the implications of those changes? How do international actors influence national health priorities?

Readings:

1. Barry Bloom. "WHO Needs Change." *Nature* 473, 7346 (12 May 2011): 143-145.
2. Jennifer Prah Ruger. "The Changing Role of the World Bank in Global Health." *American Journal of Public Health* 95, 1 (January 2005): 60-70.
3. Jon Cohen. "The New World of Global Health." *Science* 311 (13 January 2006): 162-167.
4. Jeremy A. Greene. "Making Medicines Essential: The Emergent Centrality of Pharmaceuticals in Global Health." *BioSocieties* 6, 1 (2011): 10-33.
5. Jeremy Shiffman. "Generating Political Priority for Maternal Mortality Reduction in 5 Developing Countries." *American Journal of Public Health* 97, 5 (May 2007): 796-803.
6. Devi Sridhar. "Seven Challenges in International Development Assistance for Health and Ways Forward," *The Journal of Law, Medicine & Ethics* 38, 3 (Fall 2010): 459-469.

First policy memo assignment given (due October 7)

September 30: Funding Global Health

How has development assistance for global health evolved over time? Does global health funding respond to recipients' needs? Why do global actors focus on some diseases and not others?

Readings:

1. Nirmala Ravishankar et al. "Financing of Global Health: Tracking Development Assistance for Health from 1990-2007." *The Lancet* 373 (20 June 2009): 2113-2124.
2. Eran Bendavid, Andrew Duong, Charlotte Sagan, and Gillian Raikes. "Health Aid Is Allocated Efficiently, But Not Optimally: Insights From A Review Of Cost-Effectiveness Studies." *Health Affairs* 34, 7 (2015): 1188-1195.
3. Daniel E. Esser and Kara Keating Bench. "Does Global Health Funding Respond to Recipients' Needs? Comparing Public and Private Donors' Allocations in 2005-2007." *World Development* 39, 8 (2011): 1271-1280.
4. Chantal Blouin et al. "Determinants of Global Collective Action in Health: The Case of the UN Summit on Non-communicable Diseases." *Global Health Governance* 8, 1 (Spring-Autumn 2014).

5. Jeremy Shiffman. "A Social Explanation for the Rise and Fall of Global Health Issues." *Bulletin of the World Health Organization* 87, 8 (August 2009): 608-613.

October 7: Visit to Center for Global Development (tentative date)

First policy memo due (please e-mail them to me)

DEMAND, SUPPLY, AND HEALTH SYSTEMS IN DEVELOPING COUNTRIES

October 14: Demand, Supply, and Health Systems in Developing Countries

*What factors affect the demand for and supply of health care in developing countries?
What is the nature of health systems in developing countries?*

Readings:

1. Owen O'Donnell. "Access to Health Care in Developing Countries: Breaking down Demand Side Barriers." *Cad. Saúde Pública* 23, 12 (2007): 2820-28.
2. Santosh Kumar and Emily Dansereau. "Supply-Side Barriers to Maternity-Care in India: A Facility-Based Analysis." *PLoS One* 9, 8 (August 2014).
3. WHO. *Strengthening Health Systems to Improve Health Outcomes: WHO's Framework for Action*. Geneva, Switzerland, WHO, 2007, pp. 1-25.

October 21: Access to Pharmaceuticals

Readings:

1. Michael Kremer. "Pharmaceuticals and the Developing World." *Journal of Economic Perspectives* 16, 4 (Autumn 2002): 67-90.
2. John H. Barton. "TRIPS and the Global Pharmaceutical Market." *Health Affairs* 23, 3 (2004): 146-154.
3. Kenneth Gustavsen and Christy Hanson. "Progress in Public-Private Partnerships To Fight Neglected Diseases." *Health Affairs* 28, 6 (November/December 2009): 1745-1749.
4. Jonathan B. Levine. "Sharing Power How Merck and the WHO Have Sustained a Fragile Balance of Power in their Battle Against River Blindness." *Stanford Social Innovation Review* (Spring 2005): 60-67.

Second policy memo assignment given (due November 4)

STRENGTHENING HEALTH SYSTEMS AND ACCESS TO HEALTH SERVICES

October 28: Addressing Demand Issues

How can demand issues in health be addressed? Some examples: use of vouchers, social marketing, abolishing user fees, insurance

Readings:

1. S. Chandir et al. "Effect of Food Coupon Incentives on Timely Completion of DTP Immunization Series in Children from a Low-Income Area in Karachi, Pakistan: A longitudinal Intervention Study." *Vaccine* 28, 9 (26 April 2010): 3473–3478.
2. Dana Tilson. "The Social Marketing of Insecticide-Treated Nets (ITNs) in Kenya." *Cases in Public Health Communication & Marketing* (June 2007).
3. Felix Masiye, Bona M. Chitah, and Diane McIntyre. "From Targeted Exemptions to user fee abolition in health care: Experience from rural Zambia." *Social Science & Medicine* 71 (2010) 743-750.
4. Ernst Spaan et al. "The Impact of Health Insurance in Africa and Asia: A Systematic Review." *Bulletin of the World Health Organization* 90 (2012): 685-692.

November 4: Second Visit to Center for Global Development (Tentative: Massachusetts Avenue Development Seminar)

Second policy memo due (please e-mail them to me)

November 11: Strengthening Health Systems: Case Studies in Service Delivery

Readings:

1. Carol Perks et al. "District Health Programs and Health-Sector Reform: Case Study in the Lao People's Democratic Republic." *Bulletin of the World Health Organization* 84, 2 (2006): 132-138.
2. The Global Health Group. *Clinical Social Franchising Case Study Series: Sun Quality Health/Population Services International/Myanmar*. University of California, San Francisco, September 2010.
3. Nina Zhu et al. "Lady Health Workers in Pakistan." Harvard School of Public Health 2014.
4. Mwaniki Kivwanga and Isaac Chome I. "Change package for improving the quality of antenatal care services and skilled deliveries in Kwale, Kenya." Technical Report, USAID ASSIST Project. Bethesda, MD: University Research Co., 2014.

November 18: Strengthening Health Systems: Case Studies in Health Financing and Information

Readings:

1. Maurice Bucagu et al. "Impact of Health Systems Strengthening on Coverage of Maternal Health Services in Rwanda, 2000–2010: A Systematic Review." *Reproductive Health Matters* 20, 39 (June 2012): 50-61.
2. Deloitte. "Health Systems 20/20: Afghanistan End of Project Brief, January 1, 2010-August 31, 2012, USAID, August 2012.
3. Molly Strachan et al. "Strengthening Health Management Information Systems for Maternal and Child Health: Documenting MCHIP's Contributions." Baltimore: Jhpiego Corporation, December 2013.

December 2: Strengthening Health Systems: Case Studies in Health Governance and Pharmaceutical Management

Readings:

1. Management Sciences for Health. "Leadership, Management and Sustainability Program, 2005-2010 Final Report."
2. Edmund Rutta. "Increasing Access to Subsidized Artemisinin-based Combination Therapy through Accredited Drug Dispensing Outlets in Tanzania." *Health Research Policy and Systems* 9, 22 (2011).
3. Lloyd Matowe et al. "A Strategy to Improve Skills in Pharmaceutical Supply Management in East Africa: The Regional Technical Resource Collaboration for Pharmaceutical Management." *Human Resources for Health* 6, 30 (2008).

December 9 (last class): Wrap up and Presentations

Written case studies due
Presentations