The Heller School for Social Policy and Management
Brandeis University
HS276f: World Health, Spring 2016
Classroom G1, Schneider & Family Building
Wednesday 2:00 – 4:50 PM

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Office Hours: To be arranged, generally on Wednesday mornings or after class. Please send an e-mail to request an appointment.

University notices:
1. If you are a student with a documented disability on record at Brandeis University and wish to have a reasonable accommodation made for you in this class, please see me immediately.

2. Academic integrity is central to the mission of educational excellence at Brandeis University. Each student is expected to turn in work completed independently, except when assignments specifically authorize collaborative effort. It is not acceptable to use the words or ideas of another person – be it a world-class philosopher or your roommate – without proper acknowledgement of that source. This means that you must use footnotes and quotation marks to indicate the source of any phrases, sentences, paragraphs or ideas found in published volumes, on the internet, or created by another student. If you are in doubt about the instructions for any assignment in this course, you must ask for clarification. You are expected to be honest in all of your academic work. The University policy on academic honesty is distributed annually as section 5 of the Rights and Responsibilities handbook. Instances of alleged dishonesty are subject to possible judicial action. Potential sanctions include failure in the course and suspension from the University. If you have any questions about expectations, please ask.

This syllabus is subject to change in order to accommodate the class collectively, make adjustments, or to include cutting edge developments. When in doubt, please consult the Instructor.

Course Description:
As a required course within the MS Program on Global Health Policy and Management, this module provides a multi-disciplinary perspective on major issues in world health. Using illustrative examples to “drill down” we will explore the broad topic of world health through a variety of lenses: epidemiology, policy formulation and program design, health systems and systems strengthening, commerce and industry in the health sector, regulation of the health-related activity, and the institutional landscape – all from a global perspective. A multi-disciplinary perspective is essential in our complex contemporary world, as well-honed practical solutions are almost never designed using only one disciplinary lens. Along with other issues, we will also be considering the broad question of the balance of the role between the public sector (governance, policy formulation, financing, service provision, and/or regulation) and the private commercial sector which is a driving force in the health marketplace, with the health sector being a major wheel in the world’s economy. This course pulls some themes together from other courses in the MS program, fill in a few gaps, and consider some cutting-edge trends.
Students will develop skills in policy analysis, policy brief development, priority-setting, strategic planning, and advocacy. Reading assignments introduce new vocabulary, facts, ideas, foundational literature, and experts in the field (especially clear and engaging writers and publications that are not academic publications). Students will develop reading comprehension and integration skills pertinent to global health issues. The module is highly participatory, and reading assignments must be thoroughly digested in order to participate in classroom discussions.

Students will work in small groups to identify and adopt a policy or program topic, prepare a policy brief on the topic, and use the brief as an advocacy tool in a presentation during the final class of the course. The advocacy should be targeted to a specific organization, which the group will study and describe. Illustrative topics for a policy brief and possible target organizations are:

**Course Objectives:**
- Describe the role of epidemiology in considering the burden of disease and underlying determinants of disease, and how important it is for defining priorities.
- Consider how socioeconomic, cultural, and structural factors influence health status, and how they are used to establish priorities and design evidence-based interventions.
- Examine key issues and controversies in contemporary global health policy and program development.
- Compare and contrast basic elements in national health systems.
- Identify and describe the agendas and strengths of the major institutions that play a role in world health policy formulation and/or program design and implementation.
- Identify strategies and gaps in global policy formulation and implementation (e.g. regulation) that support improved world health.
- Develop reading comprehension and integration skills pertinent to global health issues.
- Develop skills in policy analysis, policy brief development, priority-setting, and advocacy related to a specific illustrative topic.

**Required Readings:**
These will be posted on LATTE prior to class.

**Evaluation and Grading:**
1. Class Participation/ Discussion 30%
2. Description of Organization (presentation) 10%
3. Policy Brief (written) 30%
4. Advocacy for Policy/Program (presentation based on brief) 30%

Page length guidance for written assignments are 3-5 pages for Description of Organization (due prior to last class), and 12-18 pages for Policy Brief (due 5 days after final class). Written materials should be in 12 point font, double-spaced with 1 inch margins on all sides, with APA citation format.

**Absence Policy:** Any absences can negatively impact the grade.
COURSE OUTLINE

Be sure to read or view anything listed on LATTE as obligatory for the session before class, and be prepared to discuss these materials in depth during class, and/or make a presentation on them.

Session 1. BURDEN OF DISEASE: THE EPIDEMIOLOGICAL LANDSCAPE

*Topic/Session, January 13*

In this session we will begin with an introduction to the course, its overall structure and learning objectives, and outline the process of developing a policy brief for use as an advocacy tool. Then we will consider the global burden of disease, contagious and non-contagious, underlying causes and basic epidemiological perspectives on diseases. In order to “drill down” will will use malaria as an illustrative disease and consider the policy and program interventions related to malaria. In contrast, we will consider a less-targeted approach to reducing the global burden of disease, focused on improving socioeconomic conditions and reducing inequity.

Discussion of these topics will be based primarily on readings. *Obligatory reading assignments will be emailed and posted on LATTE as assigned to specific groups or individuals, and they are listed below.*

**Group 1: DISEASE-SPECIFIC, MALARIA**

Definition of Epidemiology

http://www.economist.com/node/21546005


“Malaria: one more punch.” The Economist, October 31, 2015.

**Group 2: GATES FOUNDATION**

http://www.newyorker.com/magazine/2005/10/24/what-money-can-buy


Group 3: IMPROVING SOCIOECONOMIC INEQUALITY

Hans Rosling TED Talk: The Best Stats You’ve Ever Seen (20 minutes) http://www.ted.com/talks/hans_rosling_shows_the_best_stats_you_ve_ever_seen


Session 2. INTERVENTIONS: PREVENTION & TREATMENT

Topic/Session, January 27

In this session we will continue discussing the burden of disease by considering interventions intended to prolong or improve the quality of life, as measured by health status metrics. We will review global policy initiatives over past decades, e.g. population control, Alma Ata and PHC, the MDGs, the SDGs… And we will consider public health, medical, and technological interventions: e.g. family planning products, ORS, various drugs, and vaccines. By the end of this session small groups should be formed and working to select their topic for a policy brief.

Discussion of these topics will be based primarily on discussion of readings. Obligatory reading assignments will be emailed and posted on LATTE, and emailed as assigned to specific groups or individuals if appropriate.

Session 3. PLANNED & UNPLANNED: THE TYPOGRAPHY OF NATIONAL HEALTH SYSTEMS

Topic/Session, February 3

In this session we will compare and contrast two basic frameworks (WHO building blocks versus the World Bank control knobs) for looking at health systems and the health sector at the level of a nationstate, and discuss elements of national health systems or sectors (planned and unplanning) including: the ways in which financing is obtained and services are purchased, the degree to which they support primary health care versus hospital care, the ways in which they ration (explicitly or implicitly) health care and health services, their effectiveness in terms of investment versus statistics indicating health status. We’ll look at more global health systems issue by returning to the topic of the failure of the WHO-backed health systems strengthening as illustrated by the Ebola outbreak.

Discussion of these topics will be based primarily on assigned readings and a film that will be viewed in class. Obligatory reading assignments will be posted on LATTE.
Session 4. THE HEALTH SECTOR AS MARKET PLACE: THE INDUSTRIAL LANDSCAPE

*Topic/Session, February 10*

In this session, we will review market imperfections and failures in the health sector, and briefly consider some current trends that might serve as policy brief topics. (See illustrative topics as listed in Session 6.)

In order to drill down, we will analyze a teaching case study on the global pharmaceutical market, both a major wheel in the world’s economy and a key area of intervention in terms of extending and/or improving the quality of life. We will consider the shifting market challenges and growing demand for corporate responsibility from an industry as well as a public policy perspective. *The obligatory assignment is posted on LATTE as a PDF and “thinking” questions related to this teaching case study are provided below:*


1. What lessons might Merck draw from the VIOXX® experience? What implications does that experience have for research and development? For marketing? For the business model that Merck is built on?
2. What does the HIV/AIDS pandemic represent for the pharmaceutical industry? What lessons might Merck draw from experience to date with HIV/AIDS drugs? What does CIPLA represent in the role it played in the HIV/AIDS market? What do the various donors represent? What does South Africa and Brazil’s role represent?
3. How does the vaccine market differ from that of pharmaceuticals? What are some of the opportunities and threats in this market for Merck?
4. What do the Botswana and Nicaragua programs represent? How do they relate to Merck’s philanthropic activities? What changes have been taking place in Merck’s philanthropic portfolio? What role has Merck been playing in terms of corporate responsibility?
5. What are the central aspects of Merck’s business model? How well is the Merck business model working?
6. What type of decision-making is Merck’s management confronted with now? What factors have contributed to the current situation in global pharmaceutical market? What are the key strategic issues for Merck? What should the key components of Merck’s future strategy be?
Session 5. GLOBAL GOVERNANCE: THE WORLD’S REGULATORY LANDSCAPE

Topic/Session, February 24

In this session, we will consider global regulation related to the health sector, and discuss the gaps in both regulatory agreements and implementation.

In order to drill down, we will again analyze a teaching case study on the global pharmaceutical sector, with this case focused on public policy versus industrial strategy, and how well the health and safety of humans is protected through regulation of the globalized pharmaceutical supply system. The obligatory assignment is posted on LATTE as a PDF and “thinking” questions related to this teaching case study are provided below:


General study questions to consider:

1. Will the FDA be able to provide enforcement of the proposed FDA Globalization Act? Is so, how? If not, why not?
2. What other legislation might the political leaders propose to ensure continued international trade while still protecting the protection of US consumers? Should they be considering other agencies, in addition to the FDA?
3. Why are US consumers buying from internet pharmacies? Would restriction of Internet trade reduce public health dangers, or should interventions be targeted toward more public education or other interventions?
4. Are consumers demanding protection from the FDA? If not, why not? If so, what kind of protection do they expect?
5. Is the pharmaceutical industry supportive of this role for the FDA?
6. What would you recommend if you were the consultant undertaking this assignment? What are the potential barriers to acceptance of your recommendations?

Session 6. PLAYERS ON THE WORLD HEALTH STAGE: SCANNING THE INSTITUTIONAL LANDSCAPE

Topic/Session, March 2

During this session we will consider key organizational actors in world health, including some of those that were discussed in the first session (e.g. Gates and Ford Foundation), and consider both the gaps and weaknesses, as well as the strengths of the roles they play or could play. At this point in the course students will have selected an organization to which they plan to target advocacy for their policy brief. Students will use this session to explain their reasons for selecting the organization as a target for advocacy, describe their analysis of the strengths and weaknesses of the organization. Collectively, students will deepen their understanding of the
roles selected organizations can and do play in global health, by exchanging ideas and information about the organizations they have selected. Each group should provide a brief summary of their organization with a bibliography of key references used, including websites.

**Illustrative Target Organizations**

- The World Health Organization
- The World Bank and the International Monetary Fund
- The World Trade Organization
- The Global Fund
  (or another global public sector organization of development bank)
- USAID
- DFID
- CDC
  (or another bilateral or national organization)
- Merck
- Novartis
  (or another global pharmaceutical or medical company)
- BRAC (Bangladesh NGO)
- The Ford Foundation
- The Gates Foundation
- The Carter Foundation
- The Clinton Foundation
  (or another foundation or NGO)

**Session 7. POLICY BRIEFS & ADVOCACY: PROMOTING A POLICY/PROGRAM INITIATIVE**

*Topic/Session, March 9*

During this final session each group of students will present their advocacy, based on their policy brief, to the other members of the class, followed by a discussion of their presentation during which other class members and the professor will provide constructive criticism to strengthen or retarget their advocacy effort. (See above, in the general introduction to the course, for guidance on the length and due date of the written policy brief – which can be revised following the class if desired.)

**Illustrative Topics for Policy Brief and Advocacy**

- Regulation of global health workforce, including migration of health professionals
- Control of the spread of antibiotic resistance on a global scale
- Promote family planning education and access on a global scale
- Reduce Maternal Mortality Rate in resource-constrained settings
- Establish agreements and regulations to ensure the public health of refugees
- Improve the effectiveness of aid funds in improving health status
- Provide appropriate incentives for the health industry