



## CIEE Paris, France

<b>Course title:</b>	Comparative Health Care Systems
<b>Course code:</b>	(GI) PUBH 3003 PAFR
<b>Programs offering course:</b>	Arizona State University Global Flex - Course + Internship, Arizona State University Global Flex - 3 Credit, Arizona State University Global Flex - 6 Course Credits, Paris Open Campus Block
<b>Open Campus Track:</b>	Global and Community Health
<b>Language of instruction:</b>	English
<b>U.S. semester credits:</b>	3.00
<b>Contact hours:</b>	45.00
<b>Term:</b>	Spring Block III 2023

### Course Description

This course explores the impact of demographics, infrastructure, political and public will, global economic conditions, and geopolitical circumstances on health care systems. Evidence-based health policy research points to the need to carefully assess health care delivery systems in individual countries in order to identify initiatives, patterns, and mechanisms that have most likely contributed to successful reforms and sustainable financing arrangements. Comparisons will be made among the different regional actors with special reference to the host environment and USA healthcare systems. Different countries commonly have different goals and motivations for introducing certain health care policies and interventions. Students will learn about, assess, and understand these unique interests, needs, and historical experiences that shape current health care at the national level.

### Learning Objectives

By completing this course, students will:

- Gather, analyse and synthesize specific data
- Critically assess the quality of data
- Combine qualitative and quantitative approaches and triangulate data
- Work in an interdisciplinary team
- Understand the unique interests, needs and historical experiences that shape current health care in a country
- Articulate correlation, causality and scientific approaches used in differentiating factors
- Critically compare health systems
- Speak thoughtfully to make recommendations for health system changes

### Course Prerequisites

Student should have completed one course in public health.

### Methods of Instruction

Among other techniques, the methodology used throughout this course includes field visits to private and public health institutions, debates with econometricians on the advantages and limits of quantitative analysis, introductory lessons and classroom discussions, collaborative peer-work, and the incorporation of class discussions, meetings with experts, and independent work into written analysis.

### Assessment and Final Grade

1.	Individual Presentation	20%
2.	Critical Review	15%
3.	Group Project	20%
4.	Final Discussion Paper	25%
5.	Participation	20%
	TOTAL	100%

## **Course Requirements**

### **Individual Presentation**

The individual presentation will be on a "Topical issue in Healthcare". The student is free to choose a topic of their choice but this is subject to approval by the course lecturer(s). This in class presentation must be 10 minutes long and must include PowerPoint slides (or equivalent). The presentation can include video material but this must take up no more than 3 minutes of the allocated time. The presentation will be judged using 5 criteria: Structure; Research content; Delivery; Powerpoint/Visual aids; Conclusions.

### **Critical Review**

Critical reviewing and its importance for healthcare research will be discussed in class during Week 2. You will be provided with information how to conduct a critical review and we will practice this skill in class to prepare you for the assignment. The assignment should be no more than a 1000-words.

### **Group Project**

The class will be divided into groups of 3 students. This project will involve comparing the healthcare systems of two different countries (excluding the host country or The US as these will be discussed in class). Further details on study group allocation and the assignment will be provided in class. All students need to participate, contribute and present.

### **Final Discussion Paper**

A 2000-word paper analyzing the healthcare system of a country of choice. The paper must utilize the six domains of health care quality as a tool to discuss the healthcare system.

### **Participation**

Participation is valued as meaningful contribution in the digital and tangible classroom, utilizing the resources and materials presented to students as part of the course. Meaningful contribution requires students to be prepared in advance of each class session and to have regular attendance. Students must clearly demonstrate they have engaged with the materials as directed, for example, through classroom discussions, online discussion boards, peer-to- peer feedback (after presentations), interaction with guest speakers, and attentiveness on co-curricular and outside-of-classroom activities.

### **Attendance**

To encourage engaged learning, regular class attendance is required throughout the program. This includes any required co-curricular class excursion or event, as well as internship, service-learning, or other required field placement.

An excused absence in a CIEE course will only be considered if approved by a CIEE Center Director/Academic Director (not the Instructor), and:

- it is a self-certified absence for illness (only once per course, requires formal request before or within 24 hours, cannot miss assessment worth more than 5% of final course grade)
- a doctor's note from a local medical professional is provided
- evidence of a family emergency is provided
- it is a pre-approved observance of religious holiday

Unexcused absences include personal travel and/or travel delays, as well as missing more than 25% of a single class period (including tardiness and early departure). Assessments missed due to unexcused absences will be marked as zero. Students with over 10% unexcused absences will be contacted by CIEE staff. Students with over 20% unexcused absences will be contacted by CIEE staff, receive a formal warning letter (shared with their home institution) and lose 10% of the final course point total (e.g., a final A grade of 93% will be lowered to a B grade of 83%).

For more detail, please consult your CIEE Academic Manual.

### **Academic Integrity**

Academic integrity is essential to a positive and inclusive teaching and learning environment. All students are expected to complete coursework responsibilities with fairness, respect, and honesty. Failure to do so by seeking

unfair advantage over others or misrepresenting someone else's work as your own can result in grade penalties or disciplinary action. See the CIEE Student Academic Manual for further information on academic integrity.

***N.B. Course schedule and co-curriculars are subject to change. The final duration and distribution of content and assignments will be determined and presented to students at the onset of the course.***

## **Weekly Schedule**

### **Week 1**

Class: 1.1 Orientation Week / Introduction to Class

This session will form the introduction to the class; we will outline the course requirements and formal aspects of participation and engagement in class. This will be followed by the introduction to comparative health, providing basic facts and concepts, and defining health care systems.

**Reading:** European Observatory on Health Systems and Policies (2018). *Health Review Systems (HiT Series)*, World Health Organization.

### **Week 2**

Class: 2.1 Basics of Research Designs

This session will outline the basics of research designs, by specifically focusing on approaches that measure quantitative and qualitative empirical evidence.

**Reading:** Morgan, D. (2014). *Integrating Qualitative and Quantitative Methods: A Pragmatic Approach*. California, USA: SAGE Publications.

Class: 2.2 Data Assessment & Causality

Students will learn about different data assessment methods and approaches to analyse data, such as regression, correlation and question causality in data. Students will gain practical experience using a data set and published reports.

**Readings:** Brady, H. (2011). *Causation and Explanation in Social Science in The Oxford Handbook of Political Science*. Oxford, UK: Oxford University Press UK.

Class: 2.3 Survival Data in Health Assessment

Students will learn how longitudinal designs can aid in providing more robust information and pathways of health data such as incidence of disease states. The session will outline the use and benefit of survival data and teach how to critically consider covariates and confounding factors in health assessments.

**Reading:** Kartsonaki, C. (2017). Survival Analysis. *Diagnostic Histopathology* (22)7, pp. 263- 270.

### **Due Date for Submission of Individual Presentations**

### **Week 3**

Class: 3.1 Epidemiology & Social Determinants of Health Inequalities

This session will outline the basics of public health and epidemiology and demonstrate how epidemiological studies have provided baseline work for health assessments. The social determinants of health will be explored and brought into context with health inequalities. Health indicators will be introduced that are the building blocks for comparative assessments of quality of healthcare.

**Reading:** Fleming, M & Parker, E. (2015). *Introduction to Public Health*. 3rd Ed.

Class: 3.2 Global Treatment of Mental Health

Students will learn about the stigma of mental health and the disparities in knowledge, acceptance, diagnoses and treatment of mental health worldwide.

**Reading:** Wainberg, M.L., Scorza, P., Shultz, J.M., Helpman, L., Mootz, J.J., Johnson, K.A., Bradford, J.E., Oquendo, M.A., & Arbuckle, M.R. (2017). Challenges and Opportunities in Global Mental Health: A Research-to-Practice Perspective. *Current Psychiatry Reports*. (19)5, p 28.

### **Due Date for Submission of the Critical Review**

#### **Week 4**

Class: 4.1 The U.S. & France Healthcare Systems

This session provides the overview of the USA and France healthcare systems and evaluates evidence-based policy and evaluations.

#### **Reading:**

Class: 4.2 Public Health Interventions

Students will learn about public health interventions and effectiveness that has been developed and implemented to improve healthcare systems and performance.

**Reading:** Fleming, M & Parker, E. (2015). *Introduction to Public Health*. 3rd Edition

#### **Week 5**

Class: 5.1 Healthcare Systems: Frameworks for Comparing Systems

This session outlines the principles of comparative healthcare systems by evaluating analyses of health status, expenditure and resources. Different analytical frameworks will be explored, such as the 6 pillars of comparative healthcare assessment.

#### **Reading:**

Class: 5.2 Healthcare Scandals & Guidelines

Students will learn about healthcare scandals and politics and compare guidelines, such as nutritional guidelines.

**Readings:** Hamlin, R & McNeill, L. (2016). Does the Australasian "Health Star Rating" Front of Pack Nutritional Label System Work? *Nutrients*. (8)6, p 327.

Berman P, Bitran R. (2011). 'Health Systems Analysis for Better Health System Strengthening'. World Bank Health, Nutrition, and Population (HNP) Discussion Paper, May 2011. p 10.

Class: 5.3 Patient Outcomes

This session focuses on patient outcomes as a metric of healthcare success.

**Reading:** Black, N. (2013). Patient Reported Outcome Measures Could Help Transform Healthcare. *British Medical Journal*, p 346.

### **Due Date for Submission of the Group Project**

#### **Week 6**

Class: 6.1 Economic Evaluation & Decision-Making

This session will focus on the economic evaluation and decision-making in health systems. Students will learn about quality-adjusted life years and critically evaluate decisions based on these measures.

**Reading:** Bhattacharya J, Hyde T. & Tu, P. (2013). *Health Economics*. Basingstoke: Palgrave-Macmillan.

Class: 6.2 Cost-Benefit & Cost-Effectiveness Analyses

Students will learn about cost-benefit and cost-effectiveness analyses as used in health care systems and understand how these concepts relate to efficiency and policy settings. Site visit: Menzies Centre for Health Policy

**Reading:** Porter M, Teisberg E. (2006). *Redefining Health Care – Creating Value-Based Competition on Results*. Boston: Harvard Business School Press.

## **Due Date for Submission of the Final Paper**

### **Course Materials**

#### **Readings**

- Berman P, Bitran R. "Health Systems Analysis for Better Health System Strengthening." World Bank Health, Nutrition, and Population (HNP) Discussion Paper, May 2011.
- Bhattacharya J, Hyde T. & Tu, P. (2013). *Health Economics*. Basingstoke: Palgrave- Macmillan.
- Black, N. (2013). Patient reported outcome measures could help transform healthcare'. *British Medical Journal*, p 347.
- Brady, H. (2011). Causation and Explanation in Social Science in *The Oxford Handbook of Political Science*. Oxford, UK: Oxford University Press UK.
- Dörner D. (1996). *The logic of failure: Recognizing and avoiding error in complex situations*. New York: Basic Books.
- Fleming, M & Parker, E. (2015). *Introduction to Public Health*. 3rd Edition. NSW, Australia: Elsevier.
- Hamlin, R & McNeill, L. (2016). Does the Australasian "Health Star Rating" Front of Pack Nutritional Label System Work? *Nutrients*. (8).6, p 327.
- Kartsonaki, C. (2016). Survival Analysis. *Diagnostic Histopathology*. (22)7, pp 263-270.
- Morgan, D. (2014). *Integrating Qualitative and Quantitative Methods: A Pragmatic Approach*. California, USA: SAGE Publications.
- Porter M, Teisberg E. (2006). *Redefining Health Care – Creating Value-Based Competition on Results*. Boston: Harvard Business School Press.

#### **Online Resources**

<http://www.euro.who.int/en/about-us/partners/observatory/health-systems-in-transition->