Traditionally, governments have the ultimate responsibility for assuring the conditions for their people to be as healthy as they can be, assuring the human right to health. A fundamental goal is the equitable improvement in health and well-being for the population. As our understanding of the multiple determinants of health has expanded, exercising this responsibility calls for national health strategies and plans that go beyond planning for the personal health care system, address the health of communities, and deal with the full range of the determinants of health. Broader issues of political, economic, social, institutional, educational, commercial and environmental circumstances are now seen as important determinants of health.

In the face of this complexity, all countries face challenges from several global health threats. Their national health strategies may be compromised by the effects of globalization and global decision making on issues that affect health. Government leaders must not only address health problems within their borders, but those that come across their borders, for example specific diseases such as like HIV/AIDS, avian influenza, Covid-19 etc. They must also consider public policy responses to the behavioral determinants of health underlying noncommunicable diseases; the commercially driven global distribution of products such as tobacco; the pressures of the global labor market that lead to movement of health professionals seeking better pay and working conditions to high income countries; and the actions global businesses such as the tobacco, alcohol, food, and pharmaceutical industries.

After discussing the role of health in international agreements such as the Sustainable Development Goals, and the general influences of globalization on health and health equity, the course will explore the roles and responsibilities of national health leadership, including Ministries of Health and
governmental institutions, in assuring the health of their populations. It will also consider the different strategies and variable capacities of national governments in countries at different levels of income. The role of regional and local governments, professionals, civil society, communities and individuals, will also be explored.

The course will consider in some depth the role, functions and effectiveness of global organizations affecting health in the UN, NGO and business sectors, as well as multilateral and bilateral donors and how they interact with each other and with national leadership. Finally, the course will consider emerging instruments for global health governance, how they operate and their effectiveness for promoting health action at the country level.

**Learning Objectives:**

1. To understand an ecological definition of health and the standing of health as a human right as reflected in international instruments and agreements, including giving operational expression to the concept of health as a human right.

2. To understand the effects, both positive and negative, of globalization on health at country level.

3. To understand the roles and responsibilities of national health leadership and the variability of health policies and management capacities among selected countries at different levels of income.

4. To understand the role of international organizations in the governmental, NGO and business sectors and the role of donors and the effect of donor strategies on health at global and country level.

5. To understand current mechanisms for global health governance and perspectives on their impact on health and equity at country level, using selected case studies.

6. To understand the dynamics of interaction at the interface between countries and global bodies and donors working for health and potential steps that could be taken to improve the interaction.

7. To consider possible future developments in global governance for health.

**Course Prerequisites**

CORE-GP 1022 required, PADM-GP 2201 recommended. Non-health students with international concentration are welcome by permission of instructor.

**Course Requirements**

At the beginning of the course, students will be asked to choose to join one of five “regional groupings”—Africa, South Asia, Western Pacific, Latin America/Caribbean, and Newly Independent States (NIS). They will be asked to familiarize themselves with the unique characteristics of these
regions (websites will be provided for access to basic health and development documents) and to reflect on the various elements of the course “through the lens” of their region. These observations will be the basis for presentations by “teams” during the last two sessions of the course on what they see as the key challenges for their region. The group presentation will constitute 20% of the grade.

Students will also be asked to write two “response papers” to specific published papers they choose from a set that will be provided. Each “response paper” will constitute 20% of the grade. There will be a final time-limited take home exam for 30% of the grade and class participation will constitute 10 % of the grade.

Recommended reading for the course

- Social Determinants of Health: The Solid Facts, 2nd Edition at who.int/social_determinants/en (Links to an external site.)

Other possible readings

• Horton, R. 2009. ‘The global financial crisis: an acute threat to health’ Lancet. 373(9661)
• Salomon, Lester M. “The Rise of the Nonprofit Sector “in Foreign Affairs, Volume 73, No. 4, p109-122
• Hoen, E.T. 2002. ‘TRIPS, pharmaceutical patents, and access to essential medicines: a long way from Seattle to Doha’ Chicago Journal of International Law 3
• Shiffman, J. (2009)’ A social explanation for the rise and fall of global health issues’, Bulletin of the World Health Organization., 87(8): 608-613
• “The Paris Declaration on Aid Effectiveness”, High Level Forum, Paris, February 28-2 March, 2005

Course timetable

4 November 2022
1. Course Introduction and Overview
2. Globalization and Health

An ecological model of health will be presented and its implications for national health policy making discussed. The session will also explore the definitions of health in international agreements and their link to the use of human rights frameworks for national and global policy making and governance.

Globalization and its effects on health have become an increasing focus for study and debate. We will discuss the key factors in globalization and review debates about their positive and negative effects on health and health systems functioning at country level.

Recommended readings

- Globalization and Health. Labonte R. Globalization and Health Ronald Labonté’, University of Ottawa, Ottawa, ON, Canada 2015 Elsevier Ltd. All rights reserved. This article is a revision of the previous edition article by B. Chalmers, volume 9, pp. 6258–6261, 2001, Elsevier Ltd. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7152238/pdf/main.pdf

Other health and development data by country and region available at:

- www.who.int and WHO Statistical Information System (WHOSIS) at
The roles and responsibilities of ministries of health to develop national health policies, strategies and plans will be discussed. Some case presentations will explore the application of these to country experience.

The role of international organizations will also be considered. The World Health Organization is the UN specialized agency for health and plays a central role in the normative function of global health standard setting and in leadership for health technical cooperation, especially with developing countries and those in transition.

**Recommended readings**


- Daniels, Norman et al., “An evidenced based approach to benchmarking the fairness of health-sector reform in developing countries” in Bulletin of the World Health

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1 Priorityreadings appear in italics

- Sanders, David and Chopra, Mickey “Key Challenges to Achieving Health for All in an Inequitable Society: The Case of South Africa” in AJPH, January 2006, Vol96, No. 1, p.73-78


5 November 2022

5. Other UN agencies
6. International NGOs

The roles of health-related agencies in the UN system other than WHO in the context of UN reform efforts, the Millennium Development Goals for health and political realities

In recent years, non-state actors have become more critical to effective governance at country and global level. NGOs tend to refer to non-profit organizations of civil society and corporations. While their interactions with government and each other are quite variable at country level, their involvement at global level is increasingly influencing global health policy making and governance.

Recommended readings

- Haque, M.S., “Governance based on partnership with NGOs: implications for development and empowerment in rural Bangladesh” in International Review of Administrative Services, 70(2), June 2004, p.271-290

- Global Health Council Faith in Action: Examining the Role of Faith Based Organizations in Addressing HIV/AIDS. Executive Summary, p. 9-12 Catholic Medical Mission Board, 2005

- Mafunisa, M.J., “The role of civil society in promoting good governance in the Republic of South Africa” in International Review of Administrative Services,70(3), September 2004, p. 489-496

- Other UN Agencies: UNICEF www.unicef.int UNDP, UNFPA www.unfpa.int, UNAIDS
7. Other interested parties, partnerships, and the role of donors
8. The pharmaceutical industry

This segment of the course explores the role of partnerships in the global health field, as well as the specific roles of major categories of donors in health—the multilaterals—the World Bank, the International Monetary Fund and regional development banks; the bilaterals—countries through their government international development agencies; and Foundations active in international health. The session will also explore the dynamics of donor-recipient relationships. There will be a session on the role of the pharmaceutical industry, as well as the challenges facing this sector.

Recommended readings

- Newsclips: “GE Becomes a General Store for Developing Countries” (NY Times, July 16, 2005) and “Will Social Responsibility Harm Business?” in WSJ, May 18, 2005
- World Business Council for Sustainable Development: www.wbcsd.ch
- United Nations Global Compact: www.unglobalcompact.org

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9. Multilaterals: The World Bank, International Monetary Fund (IMF) and Regional Development Banks Foundations and Bilateral Agencies
These sessions will explore the roles of “multilateral donors”, with emphasis on the World Bank, the role of the “new philanthropy” i.e. foundations, as well as the role of bilateral donors.

**Recommended readings**


- “Investing in Global Health: Best Buys and Priorities for Action in Developing Countries” The Disease Control Priorities Project, April 2006, entire report available at [www.dcp2.org](http://www.dcp2.org)


- Strom, Stephanie “*Poor Nations Complain Not All Charity Reaches Victims*” in NYT, January 29, 2006

- Roodman, David, “The 2005 Commitment to Development Index: Components and Results”, Center for Global Development, Washington, D.C.


**11 November 2019**

**10. History and Emergence of Mechanisms for Global Health Governance**

These sessions will explore the evolution of mechanisms for global health governance from inter-state agreements to the development of new forms of global organizations involving governments, corporate and civil sectors — alliances, funds, public-private partnerships-- to facilitate shared action on general and disease specific health challenges.
Recommended readings

- Global health governance in the sustainable development goals: Is it grounded in the right to health? Remco Van de Pas et al. Global Challenges Volume1, Issue1 January 2017 Pages 47-60
  First published: 10 January 2017 https://doi.org/10.1002/gch2.1022


- “Global Health Partnerships: Assessing Country Consequences”, Bill and Melinda Gates Foundation, Sponsored by the High-Level Forum, April, 2005


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11. Case Studies of Mechanisms for Global Health Governance – the goals and realities

While some of these cases will have been discussed by earlier speakers in the NGO, Corporate and Donor session, 2-3 (as time allows) will be discussed in class, especially in relation to the variable impact of the mechanisms in the different regions.

Required Readings

Case #1 Health Workforce Migration

  http://www.who.int/hrh/migration/14075_MigrationofHealth_Workers.pdf


- “The Global Migration of Talent: What does it Mean for Developing Countries “Center

Case #2. Global regulation of the Pharmaceutical Industry: The TRIPS agreement on essential medicines


Case #3 -The WHO Framework Convention on Tobacco Control


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12. Student Team Presentations and Wrap Up

Guidance will be provided

Websites for Regional Background on Health and Development

- World Health Organization: http://www.who.int and WHO Statistical Information System (WHOSIS) http://www.who.int/whosis/ and websites of the regional offices of
WHO

- OECD [http://oecd.org](http://oecd.org)
- Center for Civil Society Studies at Johns Hopkins University [http://www.jhu.edu/~ccss/pubs](http://www.jhu.edu/~ccss/pubs)
- The World Health Chart [www.whc.ki.se](http://www.whc.ki.se) provides graphic displays of global health statistics and development.

**Academic Integrity**

Academic integrity is a vital component of Wagner and NYU. All students enrolled in this class are required to read and abide by [Wagner’s Academic Code](http://www.wagner.nyu.edu/academic-integrity). All Wagner students have already read and signed the [Wagner Academic Oath](http://www.wagner.nyu.edu/academic-integrity). Plagiarism of any form will not be tolerated and students in this class are expected to report violations to me. If any student in this class is unsure about what is expected of you and how to abide by the academic code, you should consult with me.

**Henry and Lucy Moses Center for Student Accessibility**

Academic accommodations are available for students with disabilities. Please visit the [Moses Center for Students with Disabilities (CSD) website](http://www.wagner.nyu.edu/student-accessibility) and click the “Get Started” button. You can also call or email CSD (212-998-4980 or mosescsd@nyu.edu) for information. Students who are requesting academic accommodations are strongly advised to reach out to the Moses Center as early as possible in the semester for assistance.

**NYU’s Calendar Policy on Religious Holidays**

[NYU’s Calendar Policy on Religious Holidays](http://www.nyu.edu/calendars) states that members of any religious group may, without penalty, absent themselves from classes when required in compliance with their religious obligations. Please notify me in advance of religious holidays that might coincide with exams to schedule mutually acceptable alternatives.

**NYU’s Wellness Exchange**

[NYU’s Wellness Exchange](http://www.wagner.nyu.edu/student-accessibility) has extensive student health and mental health resources. A private hotline (212-443-9999) is available 24/7 that connects students with a professional who can help them address day-to-day challenges as well as other health-related concerns.