

**HPAM-GP 2244.001**

**Global Health Governance and Management Fall 2024**

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**Friday 1 November and Saturday 2 November 2024**

# Friday 8 November and Saturday 9 November 2024

**The classroom location will be 181 Mercer Street (Paulson Center), Room 401, Location Washington Square**

**0900 – 1700 daily**

# Course Description

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; structural determinants reflecting societal distribution of power, money and resources; the social determinants of health such as education and housing; the commercially driven global distribution of products such as tobacco and alcohol; 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 of global businesses such as the tobacco, alcohol, food, and pharmaceutical industries.

After discussing the role of health in 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 appreciate 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 reflect upon the effects, both positive and negative, of globalization on health at country level.
3. To appreciate 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 appreciate 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 analyze current mechanisms for global health governance and perspectives on their impact on health and equity at country level, using selected case studies.
6. To appreciate the dynamics of interaction at the interface between countries and global bodies and donors working for health, and consider and develop 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 take home exam for 30% of the grade and class participation will constitute 10 % of the grade.

# Recommended reading for the course

1. Social Determinants of Health: The Solid Facts, 2nd Edition at [Social determinants of health: the solid facts (who.int)Links to an external site.](https://iris.who.int/handle/10665/326568) [Links to an external site.](http://www.who.int/social_determinants/en)
2. Huynen M, Martens P and Hilderink H. The health impacts of globalization: a conceptual framework Globalization and Health 2005:  [www.globalizationandhealth.com/content/1/1/14Links to an external site.](https://globalizationandhealth.biomedcentral.com/articles/10.1186/1744-8603-1-14)
3. The TRIPS Agreement, Access to Medicines, <https://www.wipo.int/wipolex/en/treaties/details/231>
4. Governance for health in the 21st century. Copenhagen WHO Regional Office for Europe, 2011. <https://iris.who.int/bitstream/handle/10665/326429/9789289002745-eng.pdf>
5. Wipfli, H., Bettcher, D., Subramanian, C., and Taylor, A.L., “Confronting the tobacco epidemic: emerging mechanisms of global governance,” Ch.8 in McKee, M., Garner, and Stott, R., International Cooperation in Health, Oxford U, Press, 2001, p. 127-147.
6. OHCHR and the right to health <https://www.ohchr.org/en/health>
7. Marmot, M. 2006. ‘Health in an unequal world’ Lancet. 368: 2081-2094 <https://pubmed.ncbi.nlm.nih.gov/17161730/>
8. Heymann, D.L., Chen, L., Takemi, K., Fidler, D.P., Tappero, J.W., Thomas, M.J., Kenyon, T.A., Frieden, T.R., Yach, D., Nishtar, S. and Kalache, A., 2015. Global health security: the wider lessons from the west African Ebola virus disease epidemic. Lancet., 2015 385 (9980), pp.1884-1901<https://pubmed.ncbi.nlm.nih.gov/25987157/>
9. Kamradt-Scott, A., 2016. WHO’s to blame? The World Health Organization and the 2014 Ebola outbreak in West Africa. Third World Quarterly., 37(3), pp.401-418., DOI: 10.1080/01436597.2015.1112232 To link to this article: <https://doi.org/10.1080/01436597.2015.1112232>

# Other possible readings

1. Hafner, T., & Shiffman, J. (2013). The emergence of global attention to health systems strengthening. Health Policy and Planning, 28(1), 41–50 Smith,’ J. and Taylor EM (2013) ‘MDGs and NTDs: Reshaping the Global Health Agenda’, PLoS Negl Trop Dis, 7(12): e2529 <https://pubmed.ncbi.nlm.nih.gov/22407017/>
2. “The Paris Declaration on Aid Effectiveness”, High Level Forum, Paris, February 28-2 March, 2005 <https://www.oecd.org/dac/effectiveness/45827300.pdf>
3. Smith, J.H. and Whiteside, A. (2010) ‘The history of AIDS exceptionalism’, Journal of the International AIDS Society, 3:13-47

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3004826/>

1. Davies, S.E. and Bennett, B., 2016. A gendered human rights analysis of Ebola and Zika:

locating gender in global health emergencies. International Affairs, 92(5), pp.1041-1060. <https://academic.oup.com/ia/article/92/5/1041/2688120>

**Course Timetable**

**1 November 2024**

# 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

1. The United Nations Sustainable Development Goals Report 2023 <https://unstats.un.org/sdgs/report/2023/>
2. Sachs J. From Millennium Development Goals to Sustainable Development Goals Lancet 2012 379:

2206 – 11 <http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(12)60685-0/fulltext>

1. Schrecker, Ted, Labonté, Ronald & De Vogli, Roberto (2008) ‘Globalisation and Health: The need for a global vision’ , *Lancet.*, 372(9650 ): 1670-1676 <https://pubmed.ncbi.nlm.nih.gov/18994665/>

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

www.who.int and WHO Statistical Information System (WHOSIS) at www.who.int/whosis

The World Health Chart www.whc.ki.se

UNDP Human Development Report 2005 http://undp/org

The Disease Control Priorities Project at www.dcp2.org

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# 3. Health Sector Governance at Country Level: The Role of the State and Functions of Ministries of Health

# 4. Role of International Organizations in Health and Health Systems

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

1. Fryatt R, Bennett S, Soucat A. Health sector governance: should we be investing more?

BMJ Glob Health 2017;2:e000343. doi:10.1136/ bmjgh-2017-000343 <https://gh.bmj.com/content/2/2/e000343>

1. Report of the Review Committee on the Role of the International Health Regulations (2005) in the Ebola Outbreak and Response <http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_21-en.pdf?ua=1>

**2 November 2024**

# 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

1. 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 [https://www.researchgate.net/publication/](https://www.researchgate.net/publication/252772834_Governance_Based_on_Partnership_with_NGOs_Implications_for_Development_and_Empowerment_in_Rural_Bangladesh)

[252772834\_Governance\_Based\_on\_Partnership\_with\_NGOs\_Implications\_for\_Developme nt\_and\_Empowerment\_in\_Rural\_Bangladesh](https://www.researchgate.net/publication/252772834_Governance_Based_on_Partnership_with_NGOs_Implications_for_Development_and_Empowerment_in_Rural_Bangladesh)

1. 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 [https://www.academia.edu/87888833/](https://www.academia.edu/87888833/Factors_influencing_the_democratisation_of_public_service_delivery_in_South_Africa)

[Factors\_influencing\_the\_democratisation\_of\_public\_service\_delivery\_in\_South\_Africa](https://www.academia.edu/87888833/Factors_influencing_the_democratisation_of_public_service_delivery_in_South_Africa)

Other UN Agencies: UNICEF www.unicef.int UNDP , UNFPA www.unfpa.int. UNAIDS www.unaids.org WIPO www.wipo.int – review role, structure and progress reports

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# 6. Other interested parties, partnerships, and the role of donors 7. 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

1. Motari et al. The role of intellectual property rights on access to medicines in the WHO African region: 25 years after the TRIPS agreement BMC Public Health (2021) 21:490 https://doi.org/10.1186/s12889-021-10374-y

World Business Council for Sustainable Development: www.wbcsd.ch

Global Business Coalition on HIV/AIDS: www.businessfightsaids.org

United Nations Global Compact: www.unglobalcompact.org

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# 7.. 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

1. Interrogating the World Bank’s role in global health knowledge production, governance, and finance Tichenor et al. Globalization and Health (2021) 17:110 https://pubmed.ncbi.nlm.nih.gov/34538254/
2. Stiglitz, Joseph, Globalization and Its Discontents, Penguin Books, 2002, Ch. 1, “The Promise of Global Institutions,” pp.3-22 and “Ethiopia: The Struggle between Power Politics and Poverty”, p.25-36.
3. “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
4. Strom, Stephanie “*Poor Nations Complain Not All Charity Reaches Victims*” in NYT,

January 29, 2006 [https://www.nytimes.com/2006/01/29/world/poor-nations-complain-not-all-charityreaches-victims.html](https://www.nytimes.com/2006/01/29/world/poor-nations-complain-not-all-charity-reaches-victims.html)

Web sites of bilateral donors in global health: www.USAID.gov others of interest for their strategy: Canada – www.cida.ca ; Sweden – www.sida.se

Websites of key foundations in global health: www.gatesfoundation.org www.rockfound.org [www.osi.org](http://www.osi.org)

www.unfoundation.org

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# 8. 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

1. 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
2. Mwisongo A, Nabyonga-Orem J. Global health initiatives in Africa - governance, priorities, harmonisation and alignment. BMC Health Serv Res. 2016 Jul 18;16 Suppl 4(Suppl 4):212. doi:

10.1186/s12913-016-1448-9. PMID: 27454542; PMCID: PMC4959383. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4959383/>

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# 9. 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

1. Migration of health Workers. WHO Code of Practice on the International Recruitment of Health Personnel. <https://www.who.int/publications/i/item/wha68.32>
2. “The Global Migration of Talent: What does it Mean for Developing Countries “Center for Global Development, October 2005

<https://www.cgdev.org/sites/default/files/4473_file_Global_Hunt_for_Talent_Brief.pdf>

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

1. Subhan J. Scrutinized: the TRIPS agreement and public health. Mcgill J Med. 2006 Jul;9(2):1529. PMID: 18523624; PMCID: PMC2323529 [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2323529/#:~:text=Critics%20argue%20that](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2323529/#:~:text=Critics%20argue%20that%20the%20TRIPS,access%20to%20affordable%20essential%20medications)

[%20the%20TRIPS,access%20to%20affordable%20essential%20medications](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2323529/#:~:text=Critics%20argue%20that%20the%20TRIPS,access%20to%20affordable%20essential%20medications)

1. Moynihan, Ray “The making of a disease: female sexual dysfunction”, British Medical Journal, 326, 4 January 2003, p. 45-47

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1124933/>

# Case #3 -The WHO Framework Convention on Tobacco Control

1. Roemer R, Taylor A, Lariviere J, Origins of the WHO Framework Convention on Tobacco Control, American Journal of Public Health, June 2005, Vol 95< No 6< pp 936-938 http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1449287/pdf/0950936.pdf

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**11. Student Team Presentations and Wrap Up**

Guidance will be provided.

# Websites for Regional Background on Health and Development

UNDP Human Development Report 2023 https://hdr.undp.org/towards-2023-human-developmentreport

The World Bank Group http://www.worldbank.org and.

OECD http://oecd.org

# 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 . All Wagner students have already read and signed the Wagner Academic Oath . 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 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 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 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.