INTERNATIONAL HEALTH POLICY AND PROSPECTS

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## INTERNATIONAL HEALTH POLICY AND PROSPECTS

#### Course Overview

The Wagner School Summer International Health Policy and Prospects brings together faculty and students from the United States and other parts of the world for an on-site exploration of international health policy and prospects in Geneva, Switzerland. The site was chosen because it is the seat of major international organizations of the United Nations such as World Health Organization (WHO), the UN High Commissioner for Human Rights (UNHCHR), and the UN High Commissioner for Refugees (UNHCR); major NGOs such as the International Committee of Red Cross (ICRC); and other intergovernmental bodies such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, all which have a direct bearing on international health.

###### Policies around trade and intellectual property, global communications, major economic and political reforms, environmental challenges such as global warming, violence and wars and the threat of bioterrorism have had enormous effects on health status and well-being. Concern for increasing rates of non-communicable diseases, the spread of infectious diseases, and the effectiveness of health systems to provide quality care, are among the daunting challenges to health leaders and health systems today.

###### High income countries and low income countries may face differing health, social and economic issues but all struggle to find ways to improve the performance of their health systems. There is no one best way for maximising the performance of health systems or the quality of the processes and outcomes they deliver. Health systems outcomes are the result of the interplay between political and social contexts, public health systems, treatment systems, financing systems, social care provision and various individual factors. Further, performance and quality are multifactorial concepts, and many of the factors that affect health are outside the control of health system actors.

The aim of the International Health Policy and Prospects course is to provide students with a variety of opportunities to understand the trends in global health, the architecture of global health governance, and the effects of globalization on global and national health policy making and health systems in countries. Study visits with the staff of key international health organizations based in Geneva will provide the opportunity to hear first-hand the challenges they face and explore their thinking on strategy and implementation of key programs to improve health worldwide.

Students will be expected to complete assigned readings, conduct internet research on the organizations being visited to develop lines of inquiry for the visit, and keep current with newspaper and journal articles of relevance to the content of the course.

Before coming to the course, students are asked to select a contemporary problem or question in international health of particular interest to them from current press reports, publications, or their own experience. Students will use the experiences of the week in Geneva to develop options for addressing the problem, and these will be the focus of a policy paper of 8-10 pages. Students will be expected to present the highlights of the paper to the class on the final day. Final papers are due no later than Friday 21 July 2017. Copies should be submitted electronically to Professor Alderslade at richard@alderslade.co.uk. Guidelines for the paper appear at the end of this note.

Course grades will be based 70% on the policy paper and presentation and 30% on preparation for and participation in classroom and site visit discussions.

###### The Faculty

Classes will be taught by Professor Richard Alderslade and international experts drawn from Geneva-based international organizations and non-governmental organizations and agencies.

Guest lecturers will be confirmed and a final schedule will be provided on the first day of class. The sample list of agencies to be visited, or speakers who will present to the class, are:

The World Health Organization (WHO)

The UN High Commissioner for Human Rights (UNHCHR)

The UN High Commissioner for Refugees (UNHCR)

The International Organization for Migration (IOM)

The International Committee of the Red Cross

# **Program Design**

This program is designed along three main themes: Health, Health Status and Development: A Global Perspective; the Impact of Globalization on Health; and the Architecture and Dynamics of Global Health Governance, including case studies in global health governance.

Depending on the topic under consideration, debates, panel discussions and experts in the area under study who bring with them extensive international experience will be invited to interact with the students.

**Learning Objectives**

At the conclusion of this course, students will have an understanding of**:**

1. the various definitions of health, including the interpretation of health as a human right, which is reflected in international instruments;
2. The interplay between the various determinants of health on health status and outcomes;

1. the effects, both positive and negative, of globalization on health at country level;
2. the role of international organizations and their relationships to governments, NGOs and the business sectors;
3. the role of donors and the debates on their effect on health at global and country level;
4. the current mechanisms for global health governance and their impact at country level; and
5. the dynamics of interaction between countries and global bodies working for health and the potential steps required to render this interaction more effective.

## Program Schedule (found on NYU Classes)

The course will be organized as follows:

The beginning of the Program is devoted to creating the learning environment including introductions, orientation and discussion of student expectations and the topic each student wishes to pursue for the course paper, plus classroom work on course themes and preparation for study visits. There will be an opportunity for 1:1 consultation with Professor Alderslade on paper topics.

The remainder of the time will be devoted to study visits, related discussions with some additional time for researching and working on presentations and papers.

The final day will be for student presentations and discussion and evaluation of the program. The schedule will be posted shortly, and may be subject to changes. Any additional changes will be posted on a revised version of the schedule, or provided on the first day of class.

**Web Sites for Agency Visits/Discussions:**

Prior to site visits or sessions with representatives from agencies in the course, please go to the organizational website and review basic organizational documents (e.g., constitution, charter, etc.); governance structure; and priority activities.

[www.un.org](http://www.un.org)

[www.who.int](http://www.who.int)

[www.icrc.org](http://www.icrc.org)

[www.unhcr.or](http://www.unhcr.orwww.iom.int)

[www.iom.int](http://www.unhcr.orwww.iom.int)

www.ohchr.org

**Readings**

**THEME #1 Health, Health Status and Development: A Global Perspective**

***Priority readings***

1. Gruskin, S. and Tarantola*,* D*. Health and Human Rights*, Cambridge FXB Center for Health and Human Rights, Working Paper #10, 2000 ([www.hsph.harvard.edu/fxbcenter/working papers.htm](http://www.hsph.harvard.edu/fxbcenter/working%20papers.htm))
2. United Nations Sustainable Development Knowledge Platform: 2015 Time for Global Action for People and Planet

(<https://sustainabledevelopment.un.org/post2015>)

3 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](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2812%2960685-0/fulltext)

4. *Social Determinants of Health: The Solid Facts*, 2nd. Edition at ([www.who.int/social\_determinants/en/](http://www.who.int/social_determinants/en/))

6. Health and Development: why investing in health is critical for achieving economic development goals. International Monetary Fund Washington DC December 2004

<https://www.imf.org/external/pubs/ft/health/eng/hdwi/hdwi.pdf>

7. Marmor, T and Wendt, C (2012) Conceptual frameworks for comparing healthcare politics and policy. Health Policy. 107:11-20

***Other readings***

1. World Health Organization, See previous *World Health Reports* at [www.who.int/whr/previous/en/index/html](http://www.who.int/whr/previous/en/index/html) See particularly: *The World Health Report 2010 Health systems financing: the path to universal coverage*. WHO Geneva 2010.
2. *The Millennium Development Goals Report 2013* United Nations New York 2011 http://www.un.org/millenniumgoals/pdf/report-2013/mdg-report-2013-english.pdf
3. Sen, Amartya “The Perspective of Freedom” Chapter 1 in *Development as Freedom*, Alfred A. Knopf, New York, 1999
4. *Primary Health Care for All.* Jeffrey D Sachs Scientific American Magazine, 16 December 2007
5. *"Advancement of global health: key messages from the Disease Control Priorities Project"* Laxminarayan R et al. Lancet

2006; 367: 1193-1208

**THEME #2 The Impact of Globalization on Health**

***Priority readings***

1. Huynen M, Martens P and Hilderink H. *The health impacts of globalization: a conceptual framework Globalization and Health 2005: 1, 14* [www.globalizationandhealth.com/content/1/1/14](http://www.globalizationandhealth.com/content/1/1/14)
2. Pang T, Guindon GE, *Globalization and risks to health* EMBO Rep. v 5. (Suppl 1). October 2004 http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1299207/
3. Lee Kelley, *Globalization: what is it and how does it affect health?* The Medical Journal of Australia Vol. 180 16 February 2004 https://www.mja.com.au/journal/2004/180/4/globalisation-what-it-and-how-does-it-affect-health

***Other readings***

1. Lee, Kelley “Globalization – A New Agenda for Health?” ch.2 in *International Cooperation in Health*, edited by Martin McKee, Paul Garner, and Robin Stott, Oxford University Press, 2001, p.13-26.
2. “*The Case for Globalization*” in the *Economist*, September 29-October 5, 2001.

### Stiglitz, Joseph, *Globalization and Its Discontents*, Penguin Books, 2002 Ch. 1 “The Promise of Global Institutions” p. 3-22 and “Ethiopia: The Struggle Between Power , Politics, and Poverty” p. 25-36.

1. Davis, K. “International Health Policy: Common Problems, Alternative Strategies,” Health Affairs (18) 3, May/June, pp. 135-143.
2. Globalization and risks to health Pang T, Guidon GE, EMBO Reports Vol 5 Special Issue 2004

(http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1299207/pdf/5-7400226.pdf)

**THEME #3 – The Architecture and Dynamics of Global Health Governance**

***Priority readings***

1. *Governance for health in the 21st century*. Copenhagen WHO Regional Office for Europe, 2011. (EUR/RC61/inf.Doc./6) (www.euro.who.int/\_\_data/assets/pdf\_file/0010/.../RC61\_InfDoc6.pdf‎)
2. The multiple meanings of global health governance: a call for conceptual clarity. Lee K, Kamradt-Scott A, Globalization and Health 2014, 10 :28

(http://www.globalizationandhealth.com/content/pdf/1744-8603-10-28.pdf)

1. *World Development Report 2004: Making services Work for Poor People*, ch.11 “Donors and Service Reform” p. 203-217, World Bank, Washington, D.C. 2003

http://www.gse.pku.edu.cn/lib/gse\_lib/edu-search/e\_publication/e\_pub/268950PAPER0WDR02004.pdf

1. Salomon, Lester M. “The Rise of the Non-Profit Sector” in Foreign Affairs, Volume 73, No. 4, p. 109-122
2. The Global Fund for HIV/AIDS, TB and Malaria A Force for Change: The Global Fund at 30 Months, ch. 1, The Global Fund, 2004

file:///C:/Users/raldersl/Downloads/Publication\_AForceForChangeTGFAt30Months\_Report\_en%20(2).pdf

***Other readings***

1. Van Kerkhoff L, Szlezak N, Linking local knowledge with global action: examining the Global Fund to Fight AIDS, Tuberculosis and Malaria through a knowledge system lens, Bulletin of the World Health Organization 2006; 84: 629-635
2. Zacher, M. “Global Epidemiological Surveillance: International Cooperation to Monitor Infectious Diseases,” and Chen, L. Evans, T. and Cash, R. “Health as a Global Public Good,” (both are in Kaul I, Grunberg I and Stern MA, eds. Global Public Goods: International Cooperation in the 21st century UNDP Oxford University Press 1999 http://web.undp.org/globalpublicgoods/TheBook/globalpublicgoods.pdf
3. United Nations Global Compact ([www.unglobalcompact.org](http://www.unglobalcompact.org/))
4. Global Business Coalition on HIV/AIDS ([www.businessfightsaids.org](http://www.businessfightsaids.org/))
5. Websites of key foundations in global health: ([www.gatesfoundation.org](http://www.gatesfoundation.org/)), ([www.rockfound.org](http://www.rockfound.org/), [www.osi.org](http://www.osi.org/) )
6. Dodgson, R., Lee, Kelley, and Drager, N. “Global Health Governance: A Conceptual Review”, Discussion Paper No. 1, Centre for Global Change and Health, London School of Hygiene and Tropical Medicine and WHO Department of Health and Development, February 2002
7. Developing Successful Global Health Alliances”, Bill and Melinda Gates Foundation, April 2002
8. The Challenge of Global Health, Laurie Garrett, Foreign Affairs January/February 2007

**Case Studies in Global Health Governance**

* + - 1. **The WHO Framework Convention on Tobacco Control**
* Wipfli, H., Bettecher, D., Subramanian, C., and Taylor, A.L., Confronting the tobacco epidemic: emerging mechanisms of global governance” ch. 8 in McKee,M., Garner,S., and Stott,R., *International Cooperation in Health,* Oxford University Press, 2001, p.127-149
* 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>
* MPOWER Tobacco Free Initiative (<http://www.who.int/tobacco/mpower/en/>)

**2. The Global Alert and Response System and International Health Regulations**

* + Trends and Directions of Global Health Surveillance, Castillo-Salgado C, Oxford Journals, Epidemiologic Reviews, Volume 52, Issue 1, pp93-109
	+ WHO Global Outbreak and Response Network (GOARN) <http://www.who.int/csr/outbreaknetwork/en/>
	+ Andrus J K, Aguilera X, Oliva O, Aldighiera S. *Global health security and the International Health Regulations* BMC Public Health 2010, 10 (Suppl 1): S2 http://www.biomedcentral.com/1471-2458/10/S1/S2
		- 1. **Global Regulation of the Pharmaceutical Industry: the TRIPS agreement on essential medicines**
* Schaeffer, E.R., et al “Global Trade and Public Health” in *AJPH* 2005, Vol.95 No.1, p.23-34
* The TRIPS Agreement, Access to Medicines, and the WTO Doha Ministerial Conference, The Journal of the World Intellectual Property Organization, Volume 5, issue 1, pp 15-52, January 2002
* Attaran, Amir “How Do Patents and Economic Policies Affect Access to Essential Medicines in Developing Countries?” *Health Affairs,* Vol. 23, Number 3, 2004
* The TRIPS Agreement and Pharmaceuticals: Report of an ASEAN Workshop on the TRIPS Agreement and its Impact of Pharmaceuticals. Jakarta 2-4 May 2000.

(http://apps.who.int/medicinedocs/pdf/h1459e/h1459e.pdf)

**Guidelines for Course Paper**

You have been asked to select a contemporary problem or question in international health of particular interest to you. These problems can be drawn from press reports, publications or your own experience (though this is a good opportunity to explore a new subject). The problem should be one of global significance and your paper should explore the role of relevant global health organizations and the relationships between involved global health organizations and country health or political leadership in addressing the problem.

The product should be an 8-10 page working paper that can be used to inform policy making. It should draw on the readings for the course and the experiences of the week in Geneva to deepen your understanding of the problem you have selected and its underlying causes. Because most options for solving complex problems are contextual, the development of solutions in the time available is probably unrealistic; however, your work could be used to inform others who are “living with the problem” as they seek to take effective action.

Your paper should include the following:

 l. A clear statement of the problem you have selected

2. An explanation of why you selected it and why you believe it to be important

3. The process you used for gathering information

4. A discussion of what you believe to be the underlying causes of the problem and why

5. Identification of the key stakeholders who would need to be involved in solving the problem and why you selected them

6. Next steps for policy makers

7. A bibliography and list of individuals interviewed (if applicable)

You will be asked to identify your selected problem during the first days of the course. Time will be available to consult with Professor Alderslade on the topic and approach you have chosen and work on your paper.

On the final day of class, you will use the class as a learning community, and each will be expected to present highlights of your findings to date to colleagues for discussion and feedback. The final written paper will be due on Friday 21 July 2017 and a copy should be sent to Professor Richard Alderslade (richard@alderslade.co.uk)

Papers should be 1 ½ spaced with font size 12.