



CIEE Global Institute – Berlin

Course name:	Comparative Health Care Systems
Course number:	(GI) PUBH 3003 BRGE
Programs offering course:	Berlin Open Campus, Berlin Global Architecture + Design
Open Campus Track:	Global and Community Health
Language of instruction:	English
U.S. semester credits:	3
Contact hours:	45
Term:	Spring 2019

Course Description

This course explores the impact of demographics, infrastructure, political and public will, global economic conditions, and geopolitical circumstances on healthcare systems. Evidence-based health policy research points to the need to carefully assess healthcare delivery systems in individual countries 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 European Union actors with special reference to the debate on health care in the United States. 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. Visits to private and public health institutions in Berlin are included.

Learning Objectives

By the end of the course students should be able to:

- Gather information and literature on health systems, analyze and synthesize it
- Understand key health systems concepts and know how to apply and adapt them
- Provide an overview of core health systems functions and components
- Understand ways through which health systems in different countries or over time can be compared and evaluated, and give specific country examples
- Understand some of the key modern health system challenges

Course Prerequisites



None. However, an interest in community and public health issues is essential. Previous knowledge and courses related to health and health services is beneficial.

Methods of Instruction

This course is taught through lectures, discussion of assigned preparatory readings and content provided in class, and individual and group work and presentations. Excursions will offer the opportunity to visit organizations in Berlin working on or relevant to health care systems. Student responses to readings, lectures and other content will contribute significantly to discussion.

Assessment and Final Grade

Students will be assessed according to the following criteria:

1. Participation:	20%
2. Short written assignments:	20%
3. Group assignment – Poster:	15%
4. Group assignment – Presentation:	15%
5. Individual assignment – Policy brief:	15%
6. Individual assignment – Panel discussion:	15%
TOTAL	100%

Course Requirements

Short Written Assignments

Students are required to submit two 750-word essays offering analysis and interpretation of the assigned readings and/or excursions attended. Students will submit these essays to the instructor on Canvas. In addition, each student will then be required for one class to present their analysis and interpretation to the class verbally and co-facilitate with the instructor the discussion about the assigned readings or excursion. In this case, 50% of the grade will be for the written essay and 50% of the grade will be for the presentation and facilitation in class. The allocation of students to specific sessions/excursion will take place during Week 1. Late work will not be given credit.



Assignments will be graded according to thoughtfulness of analysis and argument, engagement with the material, as well as grammar, spelling, and style.

Group assignment – Poster

In groups, students will design an informative poster that gives a broad overview of the health system performance in one specific country using the WHO health system framework. There will be 3-4 students per group (depending on number of students in course) and groups will be given the option of choosing from a limited list of countries. Finding and using country specific macro data from international platforms such as The World Bank Group and World Health Organization, and micro data from the WHO Study on Global Aging and Adult Health (SAGE), the students will analyze and visualize health system performance in one specific country from the system and individual perspective. The poster will be graded according to the academic rigor and thoughtfulness of analysis and argument, engagement with the material, as well as design, structure, grammar, spelling and style.

Group assignment – Presentation

Student groups will present their posters in class during Week 3. Following the presentations, students across all groups will then engage in a discussion to explore and compare the health system performance of the different countries. All group members are required to present and participate actively in both the presentation and discussion. Of the total grade, 60% will be for the presentation and 40% for the discussion. This assignment will be graded on skill of presentation and responding to student / instructor questioning, engagement in thoughtful and critical discussion, and peer evaluation.

Individual assignment – Policy brief

Staying with the same country as for the group assignment, each student will write a policy brief (approx. 1,200 words) about one specific health topic or health system aspect of their choice relevant to that country. For example, students could choose a health topic such as diabetes, malaria, maternal health, or health equity; or a health system aspect or component, such as access to medicines, financial risk protection, health workforce, responsiveness or leadership and governance. Students will be required to research and analyze information from different sources in order to present the current situation, challenges and suggestions for lines of action that could be taken to improve or address the issue(s). This assignment will be graded according to the academic rigor and thoughtfulness of analysis and argument, engagement with the material, as well as structure, grammar, spelling and style.



Individual assignment – Panel discussion

Students will participate in panel discussions (of 3-5 students, depending on student numbers), during which time they will briefly present their policy brief and engage in a facilitated panel discussion with other students and the instructor to explore and compare the situation, challenges and potential actions across different countries and issues. This assignment will be graded on skill of presentation and responding to student / instructor questioning, engagement in thoughtful and critical discussion, and peer evaluation.

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. Students are also expected to prepare 3 – 5 questions to ask guest speakers in class and during business visits. Questions should be submitted via Canvas beforehand.

Attendance Policy

Regular class attendance is required throughout the program, and all unexcused absences will result in a lower participation grade for any affected CIEE course. Due to the intensive schedules for Open Campus and Short Term programs, unexcused absences that constitute more than 10% of the total course will result in a written warning.

Students who transfer from one CIEE class to another during the add/drop period will not be considered absent from the first session(s) of their new class, provided they were marked present for the first session(s) of their original class. Otherwise, the absence(s) from the original class carry over to the new class and count against the grade in that class.

For CIEE classes, excessively tardy (over 15 minutes late) students must be marked absent. Attendance policies also apply to any required co-curricular class excursion or event, as well as to Internship, Service Learning, or required field placement. Students who miss class for personal travel, including unforeseen delays that arise as a result of personal travel, will be marked as absent and unexcused. No make-up or re-sit opportunity will be provided.



Attendance policies also apply to any required class excursion, with the exception that some class excursions cannot accommodate any tardiness, and students risk being marked as absent if they fail to be present at the appointed time.

Unexcused absences will lead to the following penalties:

<i>Percentage of Total Course Hours Missed</i>	<i>Equivalent Number of Open Campus Semester classes</i>	<i>Minimum Penalty</i>
Up to 10%	1 content classes, or up to 2 language classes	Participation graded as per class requirements
10 – 20%	2 content classes, or 3-4 language classes	Participation graded as per class requirements; written warning
More than 20%	3 content classes, or 5 language classes	Automatic course failure , and possible expulsion



Weekly Schedule

NOTE: This schedule is subject to change at the discretion of the instructor to take advantage of current experiential learning opportunities.

Week 1

1.1 Orientation and introduction to comparative health care systems
Topics: Introduction to course, course requirements, formal aspects; introduction to health systems; introduction to comparative methods.

Recommended Reading:

- Sawyer B and Gonzales S (2017, May 22). How does the quality of the U.S. healthcare system compare to other countries? *Peter-Kaiser Health System Tracker*. Available: www.healthsystemtracker.org/chart-collection/quality-u-s-healthcare-system-compare-countries/#item-start.
- Mills, A. Health care systems in low-and middle-income countries. *New England Journal of Medicine* 370.6 (2014): 552-557. Available: <https://www.nejm.org/doi/full/10.1056/NEJMra1110897>.
- Video: NowThisWorld (2017). *Which Countries Have The Best Healthcare?* Available: <https://www.youtube.com/watch?v=UmL1jxQDuFk>.

Week 2

2.1 Components of the health system
Topic: Components of a health system; WHO health systems building blocks.

Reading:

- OECD (2017). Executive summary and Reader's guide (pg. 9-16). In: *Health at a Glance 2017: OECD Indicators*, OECD Publishing, Paris. Available: http://dx.doi.org/10.1787/health_glance-2017-en.
- UNDP (2015). Sustainable Development Goal Number 3: Good Health and Well being <http://www.undp.org/content/undp/en/home/sustainable-development-goals/goal-3-good-health-and-well-being.html>.

2.2 Methods and indicators for comparing health systems

Topic: How data can inform evaluations of and comparisons between health systems; major sources of macro level data on health systems; examples of micro level data sources.

Reading:

- Braithwaite J, Hibbert P, Blakely B, et al. Health system frameworks and performance indicators in eight countries: A comparative international analysis. *SAGE Open Medicine*. 2017;5:2050312116686516. doi:10.1177/2050312116686516.
- Video: Kaiser Family Foundation (2015). *Health of the healthcare system*. Available: www.youtube.com/watch?v=kIR7TCPQh0c.

2.3

Excursion: Organisation for Economic Co-operation and Development (OECD) Berlin Centre

Topic: The OECD is an intergovernmental economic organization with 35 member countries, and a mission to promote policies that will improve the economic and social well-being of people around the world. The OECD Health Database offers the most comprehensive source of comparable statistics on health and health systems across OECD countries. This excursion will focus recent OECD findings and policy recommendations related to health.

Reading:

- OECD (2017). Chapter 1 (pg. 17-30). In: *Health at a Glance 2017: OECD Indicators*, OECD Publishing, Paris. Available: http://dx.doi.org/10.1787/health_glance-2017-en.
- Video: European Commission (2016). *State of Health in the EU*. Available: <https://www.youtube.com/watch?v=jXD8upOFAbs>.

Due date for submission of first short written assignment

Week 3

3.1

Historical origin of contemporary health systems and why health system financing matters: Models and systems in current global debates

Topics: Historical origins of contemporary health financing systems (Bismarck- and Beveridge-models); central concepts of health systems financing (third-party-payers, pooled & prepaid funding and strategic purchasing).

Reading:

- Hurley, J (2000). An overview of the normative economics of the health sector, Chapter 3: Health care as an economic commodity. In: Culyer, Anthony J. and Newhouse, Joseph P. (2000): *Handbook of Health Economics*, Elsevier, 2000, 67-87.
- Frank A. Sloan and Chee-Ruey Hsieh: *Health Economics*. Chapters 1.3 and 1.4, 10-20. Cambridge, 2012.

3.2 Excursion to Berlin Museum of Medical History at the Charité – Universitätsmedizin Berlin (Historical origin of contemporary health systems – Part I)

Topics: The Berlin Museum of Medical History is an institution of the Charité – Universitätsmedizin Berlin and is located in the former museum building of the Pathological Institute on the traditional grounds of the Charité (Campus Mitte). The museum’s permanent exhibition “On the Trace of Life” provides a path through medical history over the past 300 years. History of the German health care situation.

Reading:

- Evans, R. G. (2009). The iron chancellor and the fabian. *Health Policy* 5(1): 16-24. Available: <https://www.ncbi.nlm.nih.gov/pubmed/20676247>.

3.3 Comparing health system performance in different countries: Student presentations and discussion on group assignments

Topics: Applying frameworks and methods for comparing health system performance.

Reading:

- *Giving Constructive Feedback on Presentations*. Duke University Center for Instructional Technology. https://learninginnovation.duke.edu/pdf/grad/constructive_feedback.pdf.

Due date for submission of group assignment posters and presentations

Week 4

4.1 Gender equality and challenges for health systems in emergency and humanitarian settings

Topics: Gender, gender inequality and its impact on health; tackling gender and health in emergency and humanitarian contexts.

Reading:

- IASC (2006). Coordination on gender equality in emergencies (pg. 27-30). In: *Women, girls, boys and men: Different needs – equality opportunities. IASC Gender Handbook in Humanitarian Action*. Available: <http://www.unhcr.org/protection/women/50f91c999/iasc-gender-handbook-humanitarian-action.html>.
- UNDP (2015). Sustainable Development Goal Number 5: Gender Equality <http://www.undp.org/content/undp/en/home/sustainable-development-goals/goal-5-gender-equality.html>.
- Video: Ted Talk (2013): *Intro to sex, gender, & health -- one size doesn't fit all*: Dr. Justina Trott. Available: www.youtube.com/watch?v=cjIqNduu1qU.

4.2 Ensuring equity in health programs: Example of strengthening maternal and child health in Indonesia

Topics: Equity, gender, human rights and social determinants of health; planning and evaluating health programs.

Recommended Reading:

- Koller TS, Saint V, Floranita R, *et al.* (2018) Applying the Innov8 approach for reviewing national health programmes to leave no one behind: lessons learnt from Indonesia. *Global Health Action*, 11:sup1, 1423744, DOI: 10.1080/16549716.2018.1423744.
- World Health Organization (2016). Introduction to applied concepts, principles and frameworks (read pg. 14-23). In: *Innov8 approach for reviewing national health programmes*. Geneva: WHO; 2016. Available: www.who.int/life-course/partners/innov8/innov8-technical-handbook/en/.

Due date for submission of second short written assignment

Week 5

- 5.1 The Kenyan health system: Achievements and challenges for a developing country
- Topics: Why some health systems do not function as they should, and the difficulties that could result, with particular focus on low and middle-income countries; Practice application of the WHO Health System Framework in describing and evaluating a health system.
- Reading:
- Kushner, J (2017, 13 February). Kenya's Health System on the verge of collapse as doctors' strike grinds on. *The Guardian*. Retrieved from: <https://www.theguardian.com/world/2017/feb/13/kenyas-health-system-verge-of-collapse-doctors-strike-pay-staffing-union-leaders-jail>.
 - Kushner, J (2017, 10 February). In Kenya, doctor's strike leaves a nation ailing. *Aljazeera*. Retrieved from: <http://www.aljazeera.com/indepth/features/2017/02/kenya-doctors-strike-leaves-nation-ailing-170209104743865.html>.
- 5.2 Contemporary health system challenges: climate change and antimicrobial resistance
- Topics: Relationship between climate change, environmental degradation and health; Antimicrobial resistance and its relationship to health.
- Reading:
- Watts, N *et al.* Health and climate change: policy responses to protect public health. *The Lancet*, 386(10006): 1861-1914. Available: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)60854-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)60854-6/fulltext).
 - WHO (2018, June 2). *The world is running out of antibiotics, WHO report confirms*. Available: <http://www.who.int/news-room/headlines/20-09-2017-the-world-is-running-out-of-antibiotics-who-report-confirms>.

- WHO, 2018. *Fact sheet: Antimicrobial resistance*. Available: <http://www.who.int/en/news-room/fact-sheets/detail/antimicrobial-resistance>.

Week 6

- 6.1 Decision making for health systems: Student presentations and panel discussion on policy briefs
- Topics: Strategizing for health (i.e. designing plans and policies to achieve a particular goal related to the health of a nation); the need for policy dialogue, inclusiveness and participation in health decision-making process.

Reading:

- WHO, 2016. Schmets, G *et al.* Introduction: Strategizing national health in the 21st century. In: *Strategizing national health in the 21st century: a handbook*. WHO; Geneva. Specifically, sections 1.1 and 1.2, page 1-16. Available: <http://www.who.int/healthsystems/publications/nhpsp-handbook-ch1/en/>.

Due date for submission of individual assignment panel discussion and policy briefs

- 6.2 The future of health care systems
- Topics: Sustainable Development Goals; Intersectoral action for health and Health in All Policies.

Reading:

- WHO, 2018. *Key learning on Health in All Policies implementation from around the world – Information Brochure*. Geneva, Switzerland: World Health Organization; 2018 (WHO/CED/PHE/SDH/18.1). Licence: CC BY-NC-SA 3.0 IGO. Available: <http://apps.who.int/iris/bitstream/handle/10665/272711/WHO-CED-PHE-SDH-18.1-eng.pdf?ua=1>.

Readings

Braithwaite J, Hibbert P, Blakely B, et al. Health system frameworks and performance indicators in eight countries: A comparative international analysis. *SAGE Open Medicine*. 2017;5:2050312116686516. doi:10.1177/2050312116686516.

Evans, R. G. (2009). The iron chancellor and the fabian. *Health Policy* 5(1): 16-24. Available: <https://www.ncbi.nlm.nih.gov/pubmed/20676247>.

Hurley, J (2000). An overview of the normative economics of the health sector, Chapter 3: Health care as an economic commodity. In: Culyer, Anthony J. and Newhouse, Joseph P. (2000): *Handbook of Health Economics*, Elsevier, 2000, 67-87.

IASC (Inter-Agency Standing Committee)(2006). *Women, girls, boys and men: Different needs – equality opportunities*. IASC Gender Handbook in Humanitarian Action. Available: <http://www.unhcr.org/protection/women/50f91c999/iasc-gender-handbook-humanitarian-action.html>.

Koller TS, Saint V, Floranita R, et al. (2018) Applying the Innov8 approach for reviewing national health programmes to leave no one behind: lessons learnt from Indonesia. *Global Health Action*, 11:sup1, 1423744, DOI: 10.1080/16549716.2018.1423744.

Kushner, J (2017, 13 February). Kenya's Health System on the verge of collapse as doctors' strike grinds on. *The Guardian*. Retrieved from: <https://www.theguardian.com/world/2017/feb/13/kenyas-health-system-verge-of-collapse-doctors-strike-pay-staffing-union-leaders-jail>.

Kushner, J (2017, 10 February). In Kenya, doctor's strike leaves a nation ailing. *Aljazeera*. Retrieved from: <http://www.aljazeera.com/indepth/features/2017/02/kenya-doctors-strike-leaves-nation-ailing-170209104743865.html>.

Mills, A. Health care systems in low-and middle-income countries. *New England Journal of Medicine* 370.6 (2014): 552-557. Available: <https://www.nejm.org/doi/full/10.1056/NEJMra1110897>.

OECD (2017). *Health at a Glance 2017: OECD Indicators*. OECD Publishing, Paris. Available: http://dx.doi.org/10.1787/health_glance-2017-en.

Sawyer B and Gonzales S (2017, May 22). How does the quality of the U.S. healthcare system compare to other countries? *Peter-Kaiser Health System Tracker*. Available: www.healthsystemtracker.org/chart-collection/quality-u-s-healthcare-system-compare-countries/#item-start.

Sloan FA and Hsieh CR. *Health Economics*. Cambridge, 2012.

UNDP (2015a). Sustainable Development Goal Number 3: Good Health and Well being <http://www.undp.org/content/undp/en/home/sustainable-development-goals/goal-3-good-health-and-well-being.html>.

UNDP (2015b). Sustainable Development Goal Number 5: Gender Equality <http://www.undp.org/content/undp/en/home/sustainable-development-goals/goal-5-gender-equality.html>.

Watts, N *et al.* Health and climate change: policy responses to protect public health. *The Lancet*, 386(10006): 1861-1914. Available: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)60854-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)60854-6/fulltext).

WHO (World Health Organization) (2016). Introduction to applied concepts, principles and frameworks (read pg. 14-23). In: *Innov8 approach for reviewing national health programmes*. Geneva: WHO; 2016. Available: www.who.int/life-course/partners/innov8/innov8-technical-handbook/en/.

WHO (2016). *Strategizing national health in the 21st century: a handbook*. WHO; Geneva. Available: <http://www.who.int/healthsystems/publications/nhpsp-handbook-ch1/en/>.

WHO (2018, June 2). *The world is running out of antibiotics, WHO report confirms*. Available: <http://www.who.int/news-room/headlines/20-09-2017-the-world-is-running-out-of-antibiotics-who-report-confirms>.

WHO (2018). *Fact sheet: Antimicrobial resistance*. Available: <http://www.who.int/en/news-room/fact-sheets/detail/antimicrobial-resistance>.



WHO (2018). *Key learning on Health in All Policies implementation from around the world – Information Brochure*. Geneva, Switzerland: World Health Organization; 2018 (WHO/CED/PHE/SDH/18.1). Licence: CC BY-NC-SA 3.0 IGO. Available: <http://apps.who.int/iris/bitstream/handle/10665/272711/WHO-CED-PHE-SDH-18.1-eng.pdf?ua=1>.