

The University of Western Ontario
School of Health Studies
Health Sciences 4044b, Section 1
International Health Systems Comparisons
January 2012

Instructor: S. Trujillo, MBA, MSC, OT Reg.(Ont), Professor Emeritus
Office Room Number: Health Sciences Building, 207
Office Hours: Fridays, 1230-1400 and by appointment

Class Time: Wednesdays, 1430-1700.
Classroom: HSB 7

Graduate Teaching Assistant contact information is on WebCT.

Prerequisite Checking

Unless you have either the requisites for this course or written special permission from your Dean to enroll in it, you may be removed from this course and it will be deleted from your record. This decision is final. You are responsible for verifying that you have the appropriate background to

All countries, whether they are developed or emerging, have created health and health care systems designed to meet their current, prevailing health objectives. Those health services have to be rationed because they must be balanced with other national priorities and the ability to pay for them. "Rationing health services" is often viewed as a harsh term because it denotes determining who gets what level of care, and conversely, who does not. The less pejorative term meaning the same thing is "health policy". Developed countries have more formalized and organized health programs while emerging countries often struggle to provide essential health services due to economic and often political turmoil. Within every country differential levels of health services are provided to various groups of their citizens due to political, cultural, social and economic reasons. Rationing of health services takes place at the national, regional, and personal levels.

It is fair to say that no country is fully satisfied with its health systems and that each is attempting to improve its management of them and contain or even reduce health expenditures, which represent the lion's share of most government ministries/departments. Ever increasing pressures result from an ageing population, expensive equipment and pharmaceuticals, patient demands and expectations, etc. For example, the Human Genome Project has spawned the development of synthetic protein drugs that are extraordinarily expensive. Economic pressures on health

systems force tough rationing decisions. It is fair to say that nearly all health systems are experimenting with ways to manage scarce resources in the face of these demands.

For these reasons it is important to study international health systems. Countries can learn from each other about best practice models. It is critical to note, however, that health systems are built upon prevailing national values and each country has historically entrenched emotional connections to their health systems. Simply traTcTc(nationalTc(is)Tj/TT3106Tc(national)Tj/TT31Tf3.3250TD0Tc0

This course is a combination of lecture and active student participation/presentation. Surveys of students who have graduated from Western have consistently demonstrated that they would have preferred to have been more actively engaged in class presentations and group participation as undergraduates because the "real world" makes these demands on them routinely. Most classes will have one portion devoted to a lecture and another to individual and/or group work. Students will be randomly assigned to a group in which they will work for the term. Students are encouraged to bring a computer/tablet to class because there will be information retrieval exercises during the class time.

Grading Methods of evaluation

Final grades will have 4 elements. A midterm examination will be worth 20% of the final grade. Students will evaluate their fellow group members with respect to their overall contribution

clinic. An SMC can be downloaded under the Medical Documentation heading of the following website: <https://studentservices.uwo.ca/secure/index.cfm>.

Documentation is required for non medical absences where the course work missed is more than 10% of the overall grade. Students may contact their Faculty Academic Counselling Office for what documentation is needed.

Whenever possible, students who require academic accommodation should provide notification and documentation in advance of due dates, examinations, etc. Students must follow up with their professors and their Academic Counselling office in a timely manner. Documentation for any request for accommodation shall be submitted, as soon as possible, to the appropriate Academic Counselling Office of the student's Faculty of registration. For

primary reasons why health systems, and even their definitions, are and always will be in a state of flux. Some primary inputs into the health system and efforts to measure outputs will be discussed in class to acquaint students with the importance of health system performance. Distinctions between health care and health systems will be presented and discussed. Students will be assigned to groups in which they will work for the remainder of the term. A short, non-marked test will be given in class to help students understand the scope of the term's content and direction.

January 18, Day 2 A brief review of the Canada Health Act (1984) will start a discussion of why health systems are in a state of flux. Prior to the class, students need to review the Act, in particular the five principles and their definitions. It is available on the Health Canada site. Students need to come to class prepared to debate which, if any, of the nearly 30 year old principles need to be retained, modified, or jettisoned into the diminishing ozone layer. Also, students need to identify some demographic, technological, economic, social and cultural challenges will likely alter health care demands and needs. Students are encouraged to review other national health systems to appreciate how they are undergoing change and trying to cope with increasing demands. Groups will review in class one country that is wrestling with ways to improve their systems. Countries will be assigned by the instructor to the groups. Reading: "Transformational trends confounding the South Asian health systems". Health Policy 2009; 90 (2/3): 230-238 (May 2009). Upcoming changes to how Canada intends to ration its systems will be presented.

January 25, Day 3 Macro influences on the health systems-ideology, economics, and technology. Left wing, right wing; recession, economic boom; high tech, primary care influences, etc. Examples of how different countries attempt to provide care for their populations' health within these parameters. Readings: 1. "European health systems face scrutiny in US debate". Lancet 2009; 374 (9899): 1407-1408 (24 October 2009). 2. "The Grass Is Not Always Greener. A Look At National Health Systems Around The World" CATO Institute Policy Analysis no. 613. Located through the CATO Institute website.

February 1, Day 4 Selection of measures to evaluate health system performance. Selection biases and measurement error will be dissected. Class time will be devoted to group selection of 6 outcome criteria that should be used to measure important health system performance. What is the evidence between cause and effect i.e., between what
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