

Course Last Updated 3/26/2024



## Comparative Healthcare Systems

### Section I: Course Overview

**Course Code:** HLT320

**Subject Area(s):** Health Sciences

**Prerequisites:** None

**Language of Instruction:** English

**Total Contact Hours:** 45

**Credits:** 3

**Course Fees:** N/A

### Course Description

The pressures of globalization, ageing populations, increasing patient demands and the rising costs of research and medical treatments are forcing us to look more critically at how healthcare is delivered to devise changes for the future. This course is an introduction to the healthcare system in the UK and the context within which it operates, starting with an overview of the National Health System (NHS) in 1948 and key changes that have taken place right up to the present day. Drawing on a series of cases studies special attention is given to comparisons between the UK, USA and low and middle-income countries to allow students to directly relate their learning to their own educational and healthcare setting and contrasting health systems worldwide. Classroom activities, lectures and field studies explore key concepts and themes in comparative healthcare from a multidisciplinary perspective, enhance critical appraisal skills and assess the quality of evidence used to support developments in healthcare policy and practice.

### Learning Objectives

- Define the key concepts in the field of comparative healthcare.
- Discuss their relevance for the UK, USA and low as well as middle-income country healthcare systems.
- Examine social inequalities and their impact on health as related to specific examples from their field visits

- Critically review the evidence used to support the development of healthcare policies in different settings;

## Section II: Instructor & Course Details

### Instructor Details

**Name:** TBC

**Contact Information:** TBC

**Term:** TBC

**Course Day and Time:** TBC

**Office Hours:** TBC

### Grading & Assessment

The instructor assesses students' mastery of course learning objectives by using the forms of assessment below. Each of these assessments is weighted toward the final grade. The Assessment Overview section provides further details for each.

**Engagement - 20%**

**Individual Oral Presentation - 10%**

**Pair Oral Presentation - 15%**

**Guest Speaker/Field Visit Report - 10%**

**Research Paper Assignment - 20%**

**Final Exam Short questions - 25%**

### Assessment Overview

This section provides a brief description of each form of assessment listed above. Forms of assessment may be slightly modified in the term syllabus.

**Engagement (20%):** Students are expected to be engaged in class, to have read the [CEA CAPA Engagement Policy](#), and to understand the [Class Engagement Rubric](#) that outlines how engagement is graded.

Engagement in seminars will be assessed during each seminar. This is an intensive seminar class. As such, active participation in classroom discussion is an expected component of the course and will enhance students' understanding of the material for their research and online visit papers, presentation and exam. Students are expected to have completed the readings prior to each class, and to contribute to discussion in an informed manner through relevant comments, questions, and analysis. Silent attendance of class will not result in a strong participation grade. It is students' responsibility to ensure on the day that they are included on the register for classes. Grades will be based on the quality of participation in class discussions, such as taking an active role in asking questions, making comments, as well as evidence that required reading has been completed on time.

**Individual Oral Presentation (10%):** Short, individual in-class presentations of 10 minutes will allow students to investigate key themes in greater detail and share their findings with their peers. These presentations will also give students the opportunity to receive regular formative feedback from peers and their instructor.

**Pair Oral Presentation (15%):** The students will be split into pairs to produce a presentation of up to 30 minutes (including questions) based on their research into a specific health system, looking at the ways in which healthcare is funded and delivered and to identify key barriers and facilitators to the delivery of healthcare in that setting.

**Guest Speaker/Field Visit Report (2 x 500 words; 10%):** The students will submit two 500-word reports based on the guest speaker/field visit. This report will enable them to relate the findings from their visit within the broader context of key themes in comparative healthcare and to reflect on their own healthcare settings.

**Research Paper (max 4000 words; 20%):** The students will submit one 4,000-word assignment that will draw on all aspects of the module. This will allow students to demonstrate their ability to search the literature and broader resources and produce a critical, cohesive and balanced argument drawing on this research and the prevailing policy context. It will also allow students to reflect on their knowledge of their own healthcare setting and the clinical environment in which they are aiming to work.

Students must demonstrate their ability to search the literature and broader resources to produce a critical, cohesive and balanced argument drawing on this research and relevant concepts and debates in the field of healthcare. Relevant resources will be found through students' institutional online access to scholarly journals.

**Final Exam Short questions (25%):** Students will answer short questions in a final exam.

## Active Learning

Experiential learning is an essential component of education abroad, and participation in field studies is a required part of coursework. In this course, students explore the city in which they are studying using a variety of methods. This provides the opportunity to gain nuance and perspective on the host context and course content, as well as to collect information and resources for assigned papers, projects, and presentations.

- East End
- University College London Medical School and University College Hospital London

## Readings and Resources

The below readings and resources are representative of what will be assigned as required in this course but may vary slightly in the term syllabus.

All students are given access to the online library of the University of New Haven (UNH), accessible [here](#), and are expected to comply with [UNH Policies](#) regarding library usage.

Wherever possible, required readings are made accessible through the online library or Canvas. Students are responsible for obtaining all required readings.

Each course utilizes Canvas as its LMS. Students are expected to check Canvas regularly for updates and deadlines. Canvas is also the primary platform for contacting your instructor in case of questions or concerns about the course.

### Required Readings

Readings will be available on Canvas

Bandara T (2015) How can we reduce health inequality? World Economic Forum

Cylus, J., Smith, P., & Papanicolas, I. (2017). How to make sense of health system efficiency comparisons?

Friebel R (2017) Measuring Quality of Health Care in the NHS: Giving a Voice to the Patients. Blog. The Health Foundation:

Health inequities and their causes. (2018).

Hernández-Quevedo, C., & Papanicolas, I. (2013). Conceptualizing and comparing equity across nations.

Marmot, M. (2020). Marmot Review 10 Years on.

Prinja S & Kumar R (2009) Reducing health inequities in a generation: a dream or reality? Bulletin of the World Health Organization

Social Determinants of Health. (n.d.).

The NHS in a nutshell | The King's Fund. (2021).

*The World Health Report 2000 health systems: Improving performance.* (2000). Geneva: World Health Organization.

### **Recommended Reading(s)**

Aschengrau, A, Seage G III (2014) Epidemiology in Public Health. Burlington: Jones & Bartlett Learning.

Bodenheimer T & Grumbach K (2012). Understanding health policy: A clinical approach. 6th ed., New York: McGraw-Hill

Centers for Disease Control and Prevention. (2016) Strategies for Reducing Health Disparities – Selected CDC-Sponsored Interventions, United States, 2016. MMWR Suppl 2016;65 <https://www.cdc.gov/mmwr/volumes/65/su/pdfs/su6501.pdf>

European Parliament (1998) Healthcare Systems in the EU: A Comparative Study. Luxembourg: European Parliament  
[http://www.europarl.europa.eu/workingpapers/saco/pdf/101\\_en.pdf](http://www.europarl.europa.eu/workingpapers/saco/pdf/101_en.pdf)

Government Briefings <https://www.nice.org.uk/advice/lgb4/chapter/Introduction>

Koh, HK and Sebelius, KG (2010) MPA Promoting Prevention through the Affordable Care Act. New England Journal of Medicine, 363, 1296-1299.

Marmot, M. (2001) From Black to Acheson: two decades of concern with inequalities in health. A celebration of the 90th birthday of Professor Jerry Morris. International Journal of Epidemiology 30 (5): 1165-1171

Marmot, M. (2005) Social determinants of health inequalities. The Lancet, 365 (9A64), 1099-1104

National Institute for Health and Care Excellence. (2012) Health inequalities and population health. London: NICE Local

Papanicolas, I and Smith, P (eds) (2013) Health System Performance Comparison: An agenda for public information and research. European Observatory on Health Systems and Policies: New York: World Health Organisation:  
[http://www.euro.who.int/\\_data/assets/pdf\\_file/0009/244836/Health-System-Performance-Comparison.pdf](http://www.euro.who.int/_data/assets/pdf_file/0009/244836/Health-System-Performance-Comparison.pdf)

Rice, Thomas. Health Insurance Systems: An International Comparison (Cambridge, MA, Academic Press, 2021)

Roberts MJ, Hsiao W, Berman P & Reich MR (2008). Getting health reform right: A guide to improving performance and equity. New York: Oxford University Press.

The Health Foundation (2021) A whole -government approach to improving health.  
<https://reader.health.org.uk/whole-government-approach>

Toth, Federico. Comparative Health Systems: A New Framework (Cambridge, UK, Cambridge University Press, 2021)

Twaddle AC (2002). Health Care Reform around the world. Westport, Connecticut: Greenwood Publishing Group

World Health Organisation (2005). Achieving universal health coverage. Technical note No 1.  
[http://www.who.int/health\\_financing/pb\\_1.pdf](http://www.who.int/health_financing/pb_1.pdf)

World Health Organization (2000). The World Health Report 2000: Health Systems; Improving Performance. Geneva: World Health Organization. Available at:  
[www.who.int/whr/2000/en/whr00\\_en.pdf](http://www.who.int/whr/2000/en/whr00_en.pdf)

## Course Calendar

<b>Session 1</b>	
Topics	<b>INTRODUCTION TO HEALTH CARE IN THE 21ST CENTURY</b>
Activity	Lecture & Group Discussion focusing on: <ul style="list-style-type: none"> <li>• Introduction to the course.</li> <li>• Setting of personal aims and objectives: specific goals to meet individual learning needs</li> <li>• Key social, political and economic factors influencing the design and delivery of health care in the 21st Century</li> <li>• Presentation of key epidemiological data from countries including the UK, USA, France, LMIC to illustrate context</li> <li>• The realities of health care in the 21st century: the impact of the inequality of health, Marmot's 'public health timebomb' and Covid-19.</li> </ul>
Readings and Assignments	<b>Readings:</b> Institute of Health Equity (2020) Health Equity in England: The Marmot Review 10 years on: <a href="https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on?gclid=EAlaIQobChMIjs245sr_gIV1dvVCh0cHgJOEAAYASAAEgL8C_D_BwE">https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on?gclid=EAlaIQobChMIjs245sr_gIV1dvVCh0cHgJOEAAYASAAEgL8C_D_BwE</a> OECD Data on the United Kingdom: <a href="https://data.oecd.org/united-kingdom.htm">https://data.oecd.org/united-kingdom.htm</a> OECD Data on the United States: <a href="https://data.oecd.org/united-states.htm">https://data.oecd.org/united-states.htm</a> OECD Data on France: <a href="https://data.oecd.org/france.htm">https://data.oecd.org/france.htm</a> OECD Data on Mexico: <a href="https://data.oecd.org/mexico.htm">https://data.oecd.org/mexico.htm</a>

<b>Session 2</b>	
Topics	<b>COMPARATIVE HEALTH SYSTEMS</b>
Activity	Lecture & Group Discussion focusing on: <ul style="list-style-type: none"> <li>• Why are we interested in comparative health? Framing contemporary debate in context of exploring comparative health care systems as a way of improving health outcomes in individual systems.</li> <li>• What is a health system?</li> </ul>

	<ul style="list-style-type: none"> <li>• 4 key facets of a health care system: service provision, resource generation, financing, stewardship (WHO, 2000)</li> <li>• Relating to the students' own role as patients and/or individual health professionals and what they can do as part of the process of transformation.</li> <li>• Introduction to country case studies including the UK, USA, Sweden, France, LMIC for student groups to select and prepare a presentation for Week 2.</li> </ul>
Readings and Assignments	<b>Readings:</b> The King's Fund: NHS in a Nutshell: <a href="https://www.kingsfund.org.uk/projects/nhs-in-a-nutshell">https://www.kingsfund.org.uk/projects/nhs-in-a-nutshell</a>

<b>Session 3</b>	
Topics	<b>HEALTH SYSTEM - MEASURING HEALTH SYSTEMS</b>
Activity	Lecture and Group Discussion: What is the relevance of how health care systems are funded and organised? How do we measure the effectiveness of health systems? Are health care systems efficient? Are health care systems accessible? Are health care systems delivering high quality health care?
Readings and Assignments	<b>Readings:</b> Reading/resources: Chapters 3&4 (pages 47- 92): WHO (2000) The world health report 2000 – Health systems: improving performance.

<b>Session 4</b>	
Topics	<b>HEALTH SYSTEM - COUNTRY COMPARISONS</b>
Activity	Pair Presentations & Discussion Pair Presentations: 10-15 minutes on selected country case studies Group Discussion: what key comparisons are they between the different health care systems reviewed? What can we learn from other systems?
Readings and Assignments	

<b>Session 5</b>	
Topics	<b>FIELD STUDY</b>
Activity	Field Study: East End
Readings and Assignments	<b>Readings:</b> Pack to be provided

<b>Session 6</b>	
Topics	<b>HEALTH SYSTEM EQUALITY OF ACCESS – INEQUALITIES OF HEALTH &amp; SOCIAL DETERMINANTS OF HEALTH</b>
Activity	Lecture: Defining key measures of health care systems: equity of access to health. Emphasis on health as a human right; inequality has created 'public health timebomb' (Marmot, 2013) Different intersectional approaches: Ethnicity: UK patterns of health; challenges of gaps in data; policy responses Migration: Impacts on health of migratory process; barriers to accessing health care; maternal and child health; policy responses
Readings and Assignments	<b>Readings:</b>

	Conceptualising and comparing equity across nations by Cristina Hernandez-Quevedo and Irene Papanicolas (pages 183 – 222)
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<b>Session 7</b>	
Topics	<b>FIELD STUDY</b>
Activity	Field Study: University College London Medical School and University College Hospital London
Readings and Assignments	<b>Readings:</b> Pack to be provided

<b>Session 8</b>	
Topics	<b>In class Field Study debrief and discussion</b>

<b>Session 9</b>	
Topics	<b>INEQUALITIES OF HEALTH ACROSS THE UK</b>
Activity	Guest Speaker Focus: Key barriers to health care – reproductive healthcare What can we learn? How does this compare in other countries? Students to reflect on how this learning might impact their own clinical practice in the future
Readings and Assignments	<b>Readings:</b> Institute of Health Equity (2020) Health Equity in England: The Marmot Review 10 years on: <a href="https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on?gclid=EAlalQobChMIjs245sr_gIV1dvVCh0cHgJOEAAYASAAEgL8C_D_BwE">https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on?gclid=EAlalQobChMIjs245sr_gIV1dvVCh0cHgJOEAAYASAAEgL8C_D_BwE</a>  WHO 10 facts on health inequalities and their causes: <a href="http://www.who.int/features/factfiles/health_inequities/en/">http://www.who.int/features/factfiles/health_inequities/en/</a>  WHO Social Determinants of Health Focus: <a href="http://www.who.int/social_determinants/en/">http://www.who.int/social_determinants/en/</a>

<b>Session 10</b>	
Topics	<b>HEALTH SYSTEMS – EFFICIENCY &amp; QUALITY LECTURE &amp; GROUP DISCUSSIONS</b>
Activity	Defining key measures of health care systems: efficiency and quality. Quality of ‘care’, workforce responses. Political context within which the quality of health care is often measured and reactionary changes; development of IHI; Darzi fellowships in the UK; ‘never events’ fueling patient concerns around quality.
Readings and Assignments	<b>Readings:</b> Cylus J, Papanicolas I, Smith PC (2017) How to make sense of health system efficiency comparisons? Policy Brief 27. Health Systems and Policy Analysis. European Observatory on Health Systems and Policies: New York: World Health Organisation: <a href="http://www.euro.who.int/__data/assets/pdf_file/0005/362912/policy-brief-27-eng.pdf">http://www.euro.who.int/__data/assets/pdf_file/0005/362912/policy-brief-27-eng.pdf</a>  Friebel R (2017) Measuring Quality of Health Care in the NHS: Giving a Voice to the Patients. Blog. The Health Foundation: <a href="https://www.health.org.uk/blog/measuring-quality-health-care-nhs-giving-voice-patients">https://www.health.org.uk/blog/measuring-quality-health-care-nhs-giving-voice-patients</a>

<b>Session 11</b>	
Topics	<b>INEQUALITIES OF HEALTH</b>
Activity	Individual Presentations & Discussion Individual Presentations: 10 minutes Group Discussion: how do different health systems address health inequalities? What can we learn from other systems?
Readings and Assignments	

<b>Session 12</b>	
Topics	<b>SYNTHESIS AND REVIEW LECTURE &amp; GROUP DISCUSSIONS</b>
Activity	Lecture: Consolidation of Course; Strategies to improve health outcomes for <ul style="list-style-type: none"> <li>• Access to effective health care in developing countries</li> <li>• Determinants of preference for health care: culture and gender, knowledge and education, demand responses to poor quality</li> </ul>
Readings and Assignments	<b>Readings:</b> Bandara T (2015) How can we reduce health inequality? World Economic Forum: <a href="https://www.weforum.org/agenda/2015/01/how-can-we-reduce-health-inequality/">https://www.weforum.org/agenda/2015/01/how-can-we-reduce-health-inequality/</a>  Prinja S & Kumar R (2009) Reducing health inequities in a generation: a dream or reality? Bulletin of the World Health Organization 2009;87:84-84. doi: 10.2471/BLT.08.062695: <a href="http://www.who.int/bulletin/volumes/87/2/08-062695/en/">http://www.who.int/bulletin/volumes/87/2/08-062695/en/</a>

<b>Session 13</b>	
Topics	<b>Guest Lecture</b>
Activity	Guest lecture - TBC
Readings and Assignments	Bring questions for guest speaker

<b>Session 14</b>	
Topics	<b>Final Exam Review</b>
Activity	In Class review session for Final Exam
Readings and Assignments	Bring review questions to class

<b>Session 15</b>	
Topics	<b>FINAL EXAM</b>
Activity	Final Exam; Group Reflection and Next Steps 1 ¾ hr Final Exam
Readings and Assignments	

## Section III: Academic Policies and Standards

### Academic Policies

Students are expected to review and understand all CEA CAPA student policies, including our [Academic Policies](#) and [Engagement Policy](#). CEA CAPA reserves the right to change,



update, revise, or amend existing policies and/or procedures at any time. Additional requirements that may be associated with a specific course or program are addressed in the term syllabus.

### **Student Learning & Development Objectives**

CEA CAPA has identified [Student Learning and Development Objectives \(SLDOs\)](#) for all programs in all locations: content in context, navigating differences, power and equity, critical thinking and intellectual curiosity, career and professional development, and sustainability and migration.

These are meta-level learning objectives that transcend coursework and are infused across all elements of program delivery, beyond specifics of course offerings, addressing student learning holistically and framing it a larger learning context.