

<b>HPM 469 / HPM 669 - Topics in Health Policy &amp; Management</b> <b>Universal Health Care in Costa Rica</b> <b>Winter Semester 2018-19</b>	
<b>Instructor:</b>	<b>John Justino, Director of the Center for Global Health and Clinical Assoc. Professor, Dept. of Health Policy, Management and Behavior</b> <b>Phone: (518) 402-0385</b> <b>E-Mail: <a href="mailto:jjustino@albany.edu">jjustino@albany.edu</a></b>
<b>Office Hours:</b>	<b>By Appointment</b>

**Course Description/Overview:** This course will compare the health care systems of the United States and Costa Rica. Costa Rica, a middle-income country, has health status indicators, including longevity and infant mortality rates, rivalling those of the U.S. while spending much less money as measured by per capita expenditures or percentage of GDP. The Costa Rican system focuses on primary care and health promotion to improve the health of vulnerable and poor population groups resulting in improved health for all. Health is regarded as a human right in Costa Rica but not in the U.S. National histories, philosophies, and cultural influences will be examined in light of the development of each country's health care system. The course is appropriate for upper-level undergraduates majoring in the health sciences and/or public health, as well as graduate public health students. The course will be of special relevance to students interested in global health studies. The course will be taught online in BlackBoard and may include the use of new distance learning tools such as Adobe Connect and/or VoiceThread; there will also be an exchange visit to Costa Rica to experience first-hand the various topics included in the course through lectures, discussions, and site visits. Detailed information about the cost of and logistical issues associated with the study abroad portion of the course can be obtained by contacting the UAlbany Center for Global Health and on the UAlbany Education Abroad Program website.

**Competencies:** In 2011 the Association of Schools and Programs of Public Health (ASPPH) established the Global Health Competency Model for use in formal educational programs related to global health. Seven domains were selected for emphasis: (1) Capacity Strengthening; (2) Collaborating and Partnering; (3) Ethical Reasoning and Professional Practice; (4) Health Equity and Social Justice; (5) Program Management; (6) Socio-Cultural and Political Awareness; and (7) Strategic Analysis. For each domain, specific competencies were developed. It is anticipated that students completing this course will gain competency in many of the domains including the following:

- 1.2 Identify methods for assuring health program sustainability.
- 1.4 Develop strategies that strengthen community capabilities for overcoming barriers to health and wellbeing.
- 2.6 Exhibit interpersonal communication skills that demonstrate respect for other perspectives and cultures.
- 3.1 Apply the fundamental principles of international standards for the protection of human subjects in diverse cultural settings.
- 4.1. Apply social justice and human rights principles in public health policies and programs.
- 4.3. Critique policies with respect to impact on health equity and social justice.
- 5.2. Apply scientific evidence through program planning, implementation, and evaluation.
- 5.6. Develop monitoring and evaluation frameworks to assess programs.
- 6.4. Design health advocacy strategies.
- 6.5. Describe multi-agency policy-making in response to complex health challenges.

**Learning Objectives:** In addition, the specific learning objectives for this course include *the development and demonstration of* the following:

- An understanding of the **building blocks of any national health care system** (WHO);
- An understanding of the cultural diversity of population groups within various countries and regions of the world and their belief systems, values, and responses to illness and death as well as an understanding that **global health cannot be separated from issues of human rights and social justice**;
- An understanding of **the social determinants of health** and **key concepts of health disparities**;
- An understanding of the critical nature of **the national history, philosophy, and culture on the development and maintenance of its health care system, including attitudes, beliefs and practices associated with race and ethnicity**;
- An understanding of the importance of **health for economic development and productivity**;
- An understanding of **Costa Rica's health care system, including its emphasis on primary care and the promotion of health as integral to its success in providing low-cost, high quality care for all**;
- An understanding of the many ways in which **the health care system of the U.S. could learn from that of Costa Rica**;
- An **understanding of the challenges** that face all national health care systems; and
- Demonstration of **the ability to compare the health care systems of the U.S. and Costa Rica** including recommendations for improving health outcomes by applying the knowledge and understandings gained during the course.

**Course Learning Activities:** The course has been divided into online course modules in Blackboard, an exchange visit to Costa Rica, and a culminating paper. Each online module consists of one or more mini-lectures and a reading assignment. There are also two discussion questions to encourage class participation and four written assignments or exercises. There will be a final paper which will, at least in part, demonstrate your understanding of the major course learnings and competencies.

### ***Mini-lectures***

Each module is organized in a format that includes one or more mini-lectures. The lectures may contain several principles or concepts. *There will also be websites you'll need to visit. Although the web addresses for these sites were accurate at the time the course was last updated, it is the nature of websites to "disappear" or addresses to change (I've yet to discover why). I urge you to be persistent in tracking down any errant web addresses/sites and, if there have been changes, to report this to your fellow classmates and me.*

### ***Discussion Questions (20 points)***

There will be two online class discussions; the discussion questions are meant to evoke student interaction. Every student is expected to contribute to every discussion. This will require almost daily connection to the course to follow the discussion. *I see the discussion as the time when you learn from the other members of the class and, as much as possible, I try not to intervene.* My job is to monitor the discussion and, only when absolutely necessary, to enter the discussion and keep it on track. Members of the class are also required to monitor the discussion and take responsibility for keeping it on topic. I may, from time to time, offer an opinion or move the discussion along but, **for the most part, it will be up to you to keep the discussion going.**

## *DRAFT SYLLABUS – December 7, 2018*

You will be assessed on the quality, quantity, and timeliness of your discussion contributions. The frequency of your log-ins will definitely be an important factor; I expect you to log-in and contribute **at least 5 or more times to each discussion forum**. Every class member is required to submit at least one original, well-referenced response to the discussion question (i.e. start their own original response discussion thread) in a timely enough manner so that others can respond/comment on that post/thread. In addition, each class member must make at least four separate comments on the posts of/threads started by fellow classmates. These comments to other classmates should be substantive and add something new to their post/thread (new ideas, perspectives, references and resources such as scholarly articles, websites, YouTube videos, etc.).

The following criteria will guide you as you contribute to the discussions: **relevant** (your contribution should be relevant to the topic under discussion and the question raised); **important** (your responses should address a significant issue); **thought-provoking** (your response should indicate that some thought went into it and should not be a re-statement of another student's response); **original** (clearly your contribution and not that of another student); and **timely** (posted on time so that other students may have ample time to respond to it). Don't expect to "make-up" for discussions you missed. Think of this as a virtual classroom; you would not be able to come at the end of the semester to respond to a discussion held many weeks earlier.

Many ask "How many times during a module should I contribute to a discussion?" I expect you to monitor the discussion regularly and contribute at least five times during any discussion. This should include your own original post responding to the discussion question, plus at least four substantive comments made to your classmates on the discussion threads they started. Some students will contribute much more often and that will help to keep the discussion moving. All discussion postings should add meaningfully to the discussion which means that "ditto" or "I agree with Joe" won't be acceptable. Feedback and evaluations of discussions will be provided. You cannot expect to get a good grade on a discussion if you enter the discussion only toward the end of the module. The purpose of the on-line discussion is similar to a classroom discussion; you wouldn't be able to come into a classroom at the very end of the class and expect to receive a good grade on what the class has been discussing before you arrived.

The ideal discussion groups are those which become "learning communities" (see Peter Senge's The Fifth Discipline: The Art and Practice of the Learning Organization) in which individuals construct a supportive team of learners to the benefit of all group members. You must not depend on me to be the "authority." I expect to learn from you during the discussions. You may also draw upon the lectures and reading assignments as well as supplemental readings, internet resources, and personal experience when contributing to the discussion.

### ***Written Exercises (24 points)***

These four short (400-500 word) written assignments will be evaluated based on a number of criteria. The paper needs, of course, to address the topic and be supported by rigorous argument and reflective of significant thought. It should be **well organized, free of jargon, free of errors, and well documented/referenced [references should be cited per AMA (American Medical Association) Reference Citation Format]**. To get consistently high grades in these papers, you must write insightfully and complete the assignments on time. Each written assignment will be evaluated and feedback given generally within a few days following the close of the module.

### ***Exchange Program Trip (30 points)***

All students will participate in an exchange program visit to Costa Rica. During the exchange program trip the students will participate in a number of lectures, site visits, and field-based activities designed to provide first-hand knowledge of Costa Rica's universal health care system and of the cultural and historical influences that have helped to shape it.

Students will be expected to fully engage in all of the exchange visit activities and their level of participation will be assessed. In addition, students enrolled in the course will participate in daily “Group Reflection Sessions” during the exchange program visit. Participation points will be awarded for a student’s respect for the program schedule/timeliness, professionalism, eagerness to learn, individual contributions to the group’s learning through sharing personal experiences and questions, engagement during daily group reflections, etc.

**Note: Because this course is offered to both undergraduate public health majors and to graduate students, graduate students will be required to complete and be graded on the following additional activities/assignments during the exchange program travel portion of the course:**

- **Keeping a journal during the visit to Costa Rica to record daily summaries of what has been experienced and the major perspectives gained. During daily meetings to reflect on the day’s activities and learning gained, journal entries will be useful in promoting discussion among the class members; and**
- **Leading one or more daily discussions (based on concepts of reflective assessment for maximum benefit of experiential learnings; the number of sessions led per graduate student will be determined based on the number of graduate students enrolled in the course).**

### ***Final Paper and Addendum (20 points)***

The **Final Paper** will consist of two submissions: Submission 1 will be your final paper researched and written prior to the exchange program trip (see related details below) and Submission 2 will be a brief self-reflective addendum written and submitted following the completion of the exchange program trip. The grade for the final paper will only be given after the Addendum has been received and reviewed.

### **Submission 1: Final Paper (written prior to exchange program trip)**

The course's Final Paper will be a **6-8 page paper for undergraduates and a 12-16 page paper for graduate students designed to allow students to demonstrate key insights and information gained during the course. Undergraduates will select one of the following to research and write on; graduate students will select two of the four to research and write on.** The evaluation criteria is the same as for the short written assignments as described above for the short written assignments. (20 points).

1. Discuss the importance of national histories, philosophies, and culture on a country’s health care system and its outcomes; compare the histories, philosophies, and cultures of the U.S. and Costa Rica as related to their national health care systems and outcomes.
2. Discuss the importance of primary care when the goal is to meet the needs of the most vulnerable population groups; how does primary care for the most vulnerable impact the health of a nation’s total population?
3. The right to health is a concept expressed by most nations (although often not put into place as well as one might expect by national governments) but the U.S. has never adapted this philosophical and internationally recognized right; discuss why you believe the U.S. has refused to adopt the concept of health as a human right for every citizen.
4. All national health care systems face challenges; describe the challenges faced by the U.S. and Costa Rican systems; focus on the similarities and differences.

**Submission 2: Final Paper Addendum / Self Reflection (written after completion of the exchange program trip)**

All students will submit a two to three page addendum to their Final Paper in which they address the following to questions/topics:

1. What was the most valuable part of the exchange program trip to you and why?
2. Looking back on your experiences during the exchange program portion of the course, what two major changes would you make to your Final Paper submitted prior to the trip?
3. What is the most important thing you learned during your travel to Costa Rica?

**The Final Paper and the related Addendum should use 12 point font, be double-spaced with 1” margins and well referenced [references should be cited per *AMA (American Medical Association) Reference Citation Format*]. Content, appendices and references should not exceed the required page limit.**

**How You Will Be Evaluated:**

Your final grade in the course will be determined by the following:

- 6 points Meet Classmates / Sharing Motivations and Expectations for the Course (0 – 6 points)
- 20 points Discussion/Class Participation (0-10 points on each of two discussions topics)
- 30 points Exchange Program Visit Participation (0-2 daily for participation and 0–8 for in-country presentations to UCR students)
- 24 points Written assignments (0- 6 points on each of 4 written assignments)
- 20 points Final Paper and Post-Travel Reflective Learning Addendum (0 – 20)
- 100 points Total Possible

Grading scale for final grade:

Total points	Letter grade
93-100	A
90-92	A-
87-89	B+
83-86	B
80-82	B-
77-79	C+
73-75	C
Less than 75	E

**Required Readings:** Chapters and sections of chapters of selected textbooks, online technical reports and training manuals will be assigned, along with journal articles and relevant websites including, but not limited to, the following:

*Essentials of the U.S. Health Care System*; L. Shi and D.A. Singh; 4th edition; ISBN 978-1-284-10055-6; Jones and Bartlett Learning; 2017.

*Everybody business: strengthening health systems to improve health outcomes : WHO's framework for action*; World Health Organization (WHO); 2007

(available online at [http://www.who.int/healthsystems/strategy/everybodys\\_business.pdf?ua=1/](http://www.who.int/healthsystems/strategy/everybodys_business.pdf?ua=1/))

*Monitoring progress towards universal health coverage at country and global levels: Framework, measures and targets*; World Health Organization and International Bank for Reconstruction and Development / The World Bank; 2014

(available online at [http://www.who.int/healthinfo/universal\\_health\\_coverage/report/2014/en/](http://www.who.int/healthinfo/universal_health_coverage/report/2014/en/))

*Universal Coverage in a Middle Income Country: Costa Rica*; María del Rocío Sáenz, Juan Luis Bermúdez, and Mónica Acosta; World Health Report (2010); Background Paper, 11

*Universal Health Coverage Studies Series (UNICO) Studies Series No. 14: Costa Rica Case Study: Primary Health Care Achievements and Challenges within the framework of the Social Health Insurance*; Fernando Montenegro Torres; The World Bank, Washington, DC, January 2013

*The Institutionalization of Universal Health Policy in Costa Rica and Current Challenges*; Jorine Muiser, MSc; Associate Researcher, University of Costa Rica; Recibido: 04 marzo 2013 Aprobado: 01 julio 2013

**Standards of Conduct:** All students should be aware of the University at Albany's standards of conduct as described in the booklet entitled "Community Rights and Responsibilities." In addition to other standards, the standards related to academic dishonesty are defined as follows:

"Conduct including, but not limited to, plagiarism, cheating, multiple submission, forgery, sabotage, unauthorized collaboration, falsification, bribery, or the use of purchased research service reports without proper notation; and theft, damage, or misuse of library or computer resources. Attempts to commit such acts shall . . . constitute academic dishonesty. Students assume full responsibility for honesty in academic exercises" (p. 4). Appendix C of the document provides a complete definition of each type of misconduct as well as the penalties for violations of academic integrity (pp. 11 and 12).

**Reasonable Accommodation Policy:** Reasonable accommodations will be provided for students with documented physical, sensory, systemic, cognitive, learning and psychiatric disabilities. If you believe you have a disability requiring accommodation in this class, please notify the Director of the Disability Resource Center (Campus Center 137, 518-442-5490). That office will provide the course instructor with verification of your disability, and will recommend appropriate accommodations.

*DRAFT SYLLABUS – December 7, 2018*

**Schedule:**

Module 1 (December 20-21, 2018):	The Building Blocks Required for Any National Health Care System (World Health Organization)
Module 2 (December 22-23, 2018):	The Social Determinants of Health and Health as a Human Right
Module 3 (December 26-27, 2018):	Foundations and Overview of the U.S. and Costa Rican Health Care Systems
Module 4 (December 28-30, 2018):	Challenges Facing the U.S. and Costa Rican Health Care Systems (and Health Care Systems around the World)
Module 5 (Jan. 2 -6, 2019):	Final Paper (written prior to exchange program trip)
Module 6 (January 7-19, 2019):	Experiential Learning / Exchange Visit to Costa Rica / Field Presentations
Module 7 (January 20-29, 2019):	Post-Travel Reflection and Addendum to Final Paper (written after completion of the exchange program trip)