

HEALTH POLICY IN THE INDUSTRIALIZED WORLD

POLSCI 4RR3

Winter Term 2023

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Course Description

This course challenges students to take a critical view of health policy in Canada and other industrialized countries. This policy area is a significant and sometimes contentious component of public expenditures and often citizens' main point of contact with government. This course aims to provide the necessary foundation of knowledge for engaged citizenship with regards to health policy, and possible future employment or graduate work related to health. It seeks to develop skills of critical evaluation of policy that will transfer to other areas of study by focusing on the identification of policy problems and possible solutions, and then the often more difficult task of adjudicating between solutions and understanding roadblocks to reform.

The course begins with a general introduction to health policy, and then in-depth discussion of the Canadian health system. We then discuss selected problems in health policy and compare the Canadian health system to two others (the United Kingdom and the United States).

Course Objectives

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

- demonstrate a good understanding of the key features of Canadian health systems regarding funding and decision-making, and explain how they differ from the UK and the US
- identify a specific health policy problem and describe its significance in a short policy memo
- propose possible policy solutions and discuss the costs and benefits of each in a short policy memo
- give a presentation about a health policy problem

Required Materials and Texts

- Fierlbeck, Katherine. 2011. Health Care in Canada: a Citizen's Guide to Policy and Politics. University of Toronto Press, Scholarly Publishing Division.
- All other articles and book chapters are available on the Avenue page

Class Format

- Hybrid: **Primarily in-person**, with occasional online seminar components

Course Evaluation – Overview

Component	Due Date	Percentage
Online active participation	Ongoing	15%
In person active participation	Ongoing	15%
Discussion leadership	TBD	20%
Group topic statement and bibliography	February 9 th	15%
Decision note	April 6 th	35%

Course Evaluation – Details

Online active participation (15%), ongoing

You are expected to respond to a weekly discussion question (150 words) every Thursday at 2:30 PM. You are also expected to respond to one other student post every Thursday at 2:30 PM demonstrating deep reflection and critical thinking in your original post and in your response to a classmate's post. You can skip one week's response without notice or penalty. No late submission accommodations will be provided for online learning posts.

The discussions are intended to enable learners to further their knowledge and exploration of course content. Learners are expected to follow the schedule of assigned readings, participate in scheduled online learning activities (discussions), read the discussions, and make substantive contributions to them. Logging on to the website, visiting the discussions or chat rooms is not considered participation. I strongly encourage you to think about what insights you can gain from the readings, not just what's "wrong" with them, which can be one's first inclination. Think about how the readings fit together (or don't), how they relate to readings in previous weeks, and especially how they relate to the online discussion question for that week.

General rule for everyone is: if you are in doubt, REFERENCE (APA or Vancouver). It is always a safer choice to include the reference at the end of your post if you are in doubt. The references DO NOT count towards the word limit.

In-class active participation (15%, ongoing)

One third (5%) of your participation grade will be comprised of attendance while the other two thirds (10%) will depend on the quantity (how often you participate in discussions) and quality (the degree to which your comments reflect genuine critical thinking) of your contributions in classes. Students' participation in discussions will be evaluated each week.

Students will engage in a debrief peer review commentary to student-led discussions. This will count towards the in-class active participation grade. A central feature of a seminar is that students learn from each other through discussion. As such, it is

essential that all students do the readings in advance of the seminar and come prepared to participate actively in the class discussion.

I recognize that speaking in seminar can be intimidating at times, but it is a crucial skill in academia (and life!), and my goal is for our seminar to be an open-minded and considerate place to practice.

Peer review is a crucial element of academic work. Unfortunately, poor peer review can be destructive. Shallow, inexperienced, or too gentle a critique can allow poor work to pass, which wastes resources and learning opportunities. Over time, it can degrade the value of new knowledge in the field. On the other hand, overly harsh reviews can censor excellent work or discourage excellent scholars. So please keep this in mind when engaging in classroom discussions and providing your peers with feedback.

Discussion leadership (20%, due date TBD)

In groups of 4, you will take on the role of discussion leader for one week, in some cases in collaboration with a fellow student. It will be the discussion leader(s)' responsibility to review their colleagues' responses on Avenue before their session. Student leading the discussion must prepare a 90-minute large group discussion around their assigned topic. Make sure you outline two or three learning objectives for your session.

To accommodate student's presentation preferences, students can choose a variety of strategies to deliver their assigned session. This may include a video, a poem, small group discussions, a song, case study analysis, presentation slides (I would encourage creativity in your delivery of the key health policy issues), etc. Students will be evaluated on their ability to communicate the key messages around the health policy issues in an engaging and effective manner.

Group topic statement & annotated bibliography for the decision note (15%, Due February 9th at 2:30 PM)

1 page single-spaced, 12-point font, 1-inch margins (2.54 cm), do not use point form – write in full paragraphs and include citations (if needed)

You must partner with another student and:

- 1) Provide one short paragraph describing a health policy problem in a jurisdiction of your choice (Canadian province, federal level in Canada, international jurisdiction). This statement will form the basis for your decision note, so take some time to choose a topic that interests you. The problem may be specific to a certain policy (for example, high patient copayments for prescription drugs) or related to a linked set of policies (high emergency room wait times), but it should be amenable to government action; and;

2) Provide an annotated bibliography of at least five sources all in one page. One page limit is meant to encourage you to critically consider the sources you want to include and your ability to write succinctly about a policy problem. The bibliography should contain both academic and non-academic sources (scholarly journal articles and books, news stories, information from government websites, policy documents prepared by interest groups or health professional associations). Each entry in the bibliography should include a sentence or two about the type of information contained in the source and why you think it will be useful (also note whether you think any biases are present). The goal of the bibliography is to demonstrate research effort and assess whether there is enough information available on your topic to complete the decision note.

The final mark will be applied equally across all students contributing to the assignment. Working effectively in a group setting is an important skill set I am hoping you will develop in this course. Please do not wait close to deadlines to inform me of any group dynamic issues.

Group decision note – (35%, due April 6th at 2:30 PM)

2-3 pages single-spaced, 12-point font, 1-inch margins (2.54 cm), do not use point form – write in full paragraphs and include citations (APA or Vancouver), bibliography (not included in page limit)

In the same group you worked with for the topic statement assignment, you will now work on completing the decision note. The format of the memo is similar to the standard decision memo in many Canadian governments, except it is somewhat longer (brevity is an advanced skill!) and should include citations like any academic work.

Your memo should be addressed to a specific system level stakeholder (e.g., policymakers at the political system level, health minister, humanitarian aid decisionmakers, research producers) and should be aimed at convincing them to take a specific course of action in solving the problem. It should include appropriate citations to a variety of academic and non-academic sources. I suggest aiming for 9-12 quality citations. An example of a decision note that you can use as guidance is provided on Avenue to Learn.

The final mark will be applied equally across all students contributing to the assignment. Working effectively in a group setting is an important skill set I am hoping you will develop in this course. Please do not wait close to deadlines to inform me of any group dynamic issues.

Weekly Course Schedule and Required Readings

Week 1: January 12th

What is Health Policy?

Introduction into what policies are, examining ways of defining policy analysis, and examining why health policy?

Readings:

Deber, R. B. 2018. Treating health care: how the Canadian system works and how it could work better/ Raisa B. Deber. Chapter one: Defining our terms: What is Health Policy? What is Health. Pages 7-19

Fierlbeck, Katherine. Preface Pages x - xiv

Week 2: January 19th

Restructuring primary care: Canadian healthcare system

Over the years there have been various proposals for reforming primary care in Ontario. This session examines the foundations behind the Canadian Health care system, history of reform including a couple of specific proposals, the differences in their origins and how those differences are reflected in the type of proposals.

Readings:

Textbook:

- Fierlbeck, Katherine Ch 1 Funding Health Care p.9-39

Scholarly Articles:

- Hutchison B. (2008). A long time coming: primary healthcare renewal in Canada. *Healthcare Papers*, 8(2), 10-24.
- Schoen, C., Osborn, R., Huynh, P. T., Doty, M., Peugh, J., & Zapert, K. (2006). On The Front Lines Of Care: Primary Care Doctors' Office Systems, Experiences, And Views In Seven Countries: Country variations in primary care practices indicate opportunities to learn to improve outcomes and efficiency. *Health Affairs*, 25(Suppl1), W555-W571.

Week 3: January 26th

Social determinants of health

Over the past 25 years there has been a strong push amongst Canadian policy makers to look at nonmedical determinants of health. While this position is generally accepted, there are critiques of the mainstream approach. This class looks at both sides of this issue.

Readings:

Textbook:

- Fierlbeck, Katherine Ch 1 Funding Health Care p.9-39

Scholarly articles:

- Harvey, J., Hynes, G., & Pichora, E. (2016). Trends in Income-Related Health Inequalities in Canada. *Healthcare quarterly (Toronto, Ont.)*, 18(4), 12.
- Embrett M and Randall, G. Social determinants of health and health equity policy research: Exploring the use, misuse, and non-use of policy analysis theory. *Social Science and Medicine* 2014; 108:147-155.

Government website:

- Public Health Agency of Canada (2004). What is the Population Health Approach? Public Health Agency of Canada, January 15, 2013.

Week 4: February 2nd

Chronic disease conditions and management

Canada is facing an epidemic of chronic diseases. This lecture looks at better understanding concepts of chronic disease prevention and management, their interrelationship within health system reform and a broad public health agenda

Readings:

Scholarly article:

- Lewis, R., & Dixon, J. (2004). Rethinking management of chronic diseases. *Bmj*, 328(7433), 220-222.

Government website:

- Sargious, P. (March 2007). Chronic Disease Prevention and Management.

Week 5: February 9th

Pharmacare: is there a perfect pill for that?

This session is focused on examining why Canada is the only industrialized country with a universal health coverage that lacks comprehensive drug coverage.

Readings:

Textbook:

- Fierlbeck, Katherine Ch 7 Drugs and Drug Policy, p.151-183 (omit "Regulatory Reform in Canada")

Scholarly article:

- Brandt, Jaden, Brenna Shearer, and Steven G Morgan. "Prescription Drug Coverage in Canada: a Review of the Economic, Policy and Political

Considerations for Universal Pharmacare.” *Journal of pharmaceutical policy and practice* 11.1 (2018): 28–13. Web.

Reports:

- Canada, H. (June 2019). A PRESCRIPTION FOR CANADA: ACHIEVING PHARMACARE FOR ALL. Final Report of the Advisory Council on the Implementation of National Pharmacare.

Podcast:

- “The Health Briefs: Pharmacare” – Guest speakers discuss a timely health topic. The podcast is available on Spotify and apple podcast

Notes: Group topic statement and bibliography due today.

Week 6: February 16th

Immigrant and Refugee Health

Health care policy has traditionally been developed for problems of the middle-class male. This class explores policy issues for groups that don't fit that model. The session intends to explore current key immigrant and refugee policy issues and its impacts on health.

Readings:

Scholarly article:

- Khalid, A. F., Lavis, J. N., El-Jardali, F., & Vanstone, M. (2019). The governmental health policy-development process for Syrian refugees: an embedded qualitative case studies in Lebanon and Ontario. *Conflict and health*, 13(1), 48.

YouTube video:

- IOM. (2016). IOM - Migrant People's Health. YouTube

Policy brief:

- Hassen, N., Katakia, D., Cheff, R., & Sanchez, J. (2016). The three-month wait builds inequity into our health care system. The Wellesley Institute.

Week 7: February 23rd – Reading week (no class)

Week 8: March 2nd

Cannabis and Health

On October 17, 2018, the Cannabis Act came into force which puts in place a new strict framework for controlling cannabis sale, possession, production, and distribution. This session intends to examine the debate and concerns about cannabis legalization in Canada.

Readings:

Scholarly article:

- Shover, C. L., & Humphreys, K. (2019). Six policy lessons relevant to cannabis legalization. *The American journal of drug and alcohol abuse*, 1-9.
- DeVillaeer, M. (2019). Cannabis Legalization in Canada: The Public Health Approach We Did Not Get. *Canadian Journal of Addiction*, 10(3), 51-59.

Journalistic article:

- Denis, Marie-Maude. 2018. "Licensed Cannabis Growers Have Ties to Organized Crime, Enquête Investigation Finds." *CBC News* November 02 2018.

Government website:

- Government of Canada (2019). Cannabis in Canada. Get the fact.

Week 9: March 9th

Mental Health in Canada

This session aims to examine the various health policies aimed at reducing the stigma of mental illness in Canada and how to take action on Canada's mental health strategy.

Readings:

Textbook:

- Fierlbeck, Katherine. Ch 8 Mental Health.

Scholarly article:

- Mulvale G, Abelson J and Goering P. Mental health service delivery in Ontario, Canada: how do policy legacies shape prospects for reform? *Health Economics, Policy and Law* 2007; 2(4); 363-89.

Reports:

- Mental Health Commission of Canada. (2016). *Advancing the Mental Health Strategy for Canada: A Framework for Action (2017–2022)*, Ottawa, ON: Mental Health Commission of Canada.

Notes: [ie. Assignment due, test, etc.]

Week 10: March 16th

Infectious disease surveillance in Canada

Readings:

Scholarly article:

- Heymann, D. L., & Shindo, N. (2020). COVID-19: what is next for public health?. *The Lancet*, 395(10224), 542-545.

Journalistic article:

- Vally, H. (2020). 6 countries, 6 curves: how nations that moved fast against COVID-19 avoided disaster. *The Conversation*.

Week 11: March 23rd

Indigenous Health: How to bring reconciliation to healthcare?

20 years after the Royal Commission on Aboriginal Peoples, indigenous peoples living in Canada continue to face poorer health outcomes partly because of the fundamental underlying determinants of Indigenous health. This session takes a closer look on how to move forward on this key health policy issue facing Canadian health care system.

Readings:

Scholarly article:

- Jeffrey, Charlotte Loppie, and John O’Neil. 2016. “Indigenous Health Systems Governance.” *International Journal of Health Governance* 21 (4): 222–28.

Report:

- [Truth and Reconciliation Commission of Canada : Calls to Action](#). (focus on the Health section).

Government website:

- Government of Canada (2017). [Indigenous health](#).
- Government of Canada. (August 2021). [Health](#).

Week 12: March 30th

Emergency wait times

Readings:

Scholarly article:

- Vermeulen, Marian J. et al. “The Effect of Pay for Performance in the Emergency Department on Patient Waiting Times and Quality of Care in Ontario, Canada: A Difference-in-Differences Analysis.” *Annals of Emergency Medicine* 67.4 (2015): 496–505.e7. Web.

Journalistic article:

- Vigliotti, M. Emergency department wait times on the rise in Canada: CIHI data. *Ipolitics*. (2019).

Week 13: April 6th

Health system comparisons

This session aims to examine Canada’s system in comparison to different health care systems all over the world, with a particular focus on the US and UK health care systems.

Readings:

Textbook:

- Fierlbeck, Katherine Ch 9: Beveridge Systems – Britain, Sweden and the Internal Market
- Fierlbeck, Katherine Ch 11: Mandated Private Insurance: The United States and the Long Road to Reform

Journalistic articles:

- Simpson, C. (September 24, 2017). How healthy is the Canadian health-care system? The Conversation.
- Street, A. (September 25, 2017). Britain's National Health Service: one model, four systems. The Conversation
- Haeder, S. F. (October 18, 2017). US health care system: A patchwork that no one likes. The Conversation.

Notes: Group decision note due today.

Course Policies

Submission of Assignments

Please provide your full name and student number on each assignment. Please note that an electronic copy of all your assignments must be uploaded directly onto Avenue to Learn.

All assignments should be typed using a standard 12-point font, single spaced, and standard 1-inch margins (2.54 cm). All written assignments require formal citations and a bibliography. All written assignments are to be submitted on Avenue to Learn at the specified time on their due date.

Style matters. Written assignments offer a good occasion to polish your academic writing, regardless of your stage of career or writing experience. Before submitting your written assignment, edit it thoroughly. Cover pages are not required.

Questions about Course Logistics and Course Content:

Please post questions in the Q&A forum in Avenue to Learn so that all students have access to your question and my answer. I will post answers to questions within 48 hours (Monday to Friday only). Please ensure that you do not wait until the last minute (i.e. day before a deadline) to ask a question.

Emailing the Instructor:

I will reply to your emails within 48 hours (Monday to Friday only). Please ensure that you do not wait until the last minute (i.e. day before a deadline) to ask a question.

Meeting with the Instructor:

Please email me to schedule either an in-person or zoom meeting. Emails to schedule a meeting must be sent at least 48 hours prior to the requested meeting date. A clear outline of what you would like to discuss during the meeting must be included in your email.

Grades

Grades will be based on the McMaster University grading scale:

MARK	GRADE
90-100	A+
85-90	A
80-84	A-
77-79	B+
73-76	B
70-72	B-
67-69	C+

MARK	GRADE
63-66	C
60-62	C-
57-59	D+
53-56	D
50-52	D-
0-49	F

Late Assignments

A late written assignment will be penalized by 5% (i.e., 5 marks out of 100) for each 24-hour period it is late. The first 24-hour period begins at the start of the class in which it is due. Assignments more than three days late will receive a grade of zero.

Please note that you must immediately follow up with the instructor regarding the nature of any relief for missed academic work. Failure to follow-up with the instructor immediately may negate the opportunity for relief.

Absences, Missed Work, Illness

McMaster Student Absence Form (MSAF): In the event of an absence for medical or other reasons, students should review and follow the Academic Regulation in the Undergraduate Calendar “Requests for Relief for Missed Academic Term Work”.

Courses With An On-Line Element

Some courses may use on-line elements (e.g. e-mail, Avenue to Learn (A2L), LearnLink, web pages, capa, Moodle, ThinkingCap, etc.). Students should be aware that, when they access the electronic components of a course using these elements, private information such as first and last names, user names for the McMaster e-mail accounts, and program affiliation may become apparent to all other students in the same course. The available information is dependent on the technology used. Continuation in a course that uses on-line elements will be deemed consent to this disclosure. If you have any questions or concerns about such disclosure please discuss this with the course instructor.

Online Proctoring

Some courses may use online proctoring software for tests and exams. This software may require students to turn on their video camera, present identification, monitor and record their computer activities, and/or lock/restrict their browser or other applications/software during tests or exams. This software may be required to be installed before the test/exam begins.

Authenticity / Plagiarism Detection

Some courses may use a web-based service (Turnitin.com) to reveal authenticity and ownership of student submitted work. For courses using such software, students will be expected to submit their work electronically either directly to Turnitin.com or via an

online learning platform (e.g. A2L, etc.) using plagiarism detection (a service supported by Turnitin.com) so it can be checked for academic dishonesty.

Students who do not wish their work to be submitted through the plagiarism detection software must inform the Instructor before the assignment is due. No penalty will be assigned to a student who does not submit work to the plagiarism detection software. **All submitted work is subject to normal verification that standards of academic integrity have been upheld** (e.g., on-line search, other software, etc.). For more details about McMaster's use of Turnitin.com please go to www.mcmaster.ca/academicintegrity.

Copyright and Recording

Students are advised that lectures, demonstrations, performances, and any other course material provided by an instructor include copyright protected works. The Copyright Act and copyright law protect every original literary, dramatic, musical and artistic work, **including lectures** by University instructors

The recording of lectures, tutorials, or other methods of instruction may occur during a course. Recording may be done by either the instructor for the purpose of authorized distribution, or by a student for the purpose of personal study. Students should be aware that their voice and/or image may be recorded by others during the class. Please speak with the instructor if this is a concern for you.

Academic Accommodation for Religious, Indigenous or Spiritual Observances (RISO)

Students requiring academic accommodation based on religious, indigenous or spiritual observances should follow the procedures set out in the [RISO](#) policy. Students should submit their request to their Faculty Office **normally within 10 working days** of the beginning of term in which they anticipate a need for accommodation or to the Registrar's Office prior to their examinations. Students should also contact their instructors as soon as possible to make alternative arrangements for classes, assignments, and tests.

Academic Integrity Statement

You are expected to exhibit honesty and use ethical behaviour in all aspects of the learning process. Academic credentials you earn are rooted in principles of honesty and academic integrity. **It is your responsibility to understand what constitutes academic dishonesty.**

Academic dishonesty is to knowingly act or fail to act in a way that results or could result in unearned academic credit or advantage. This behaviour can result in serious consequences, e.g. the grade of zero on an assignment, loss of credit with a notation on the transcript (notation reads: "Grade of F assigned for academic dishonesty"), and/or suspension or expulsion from the university. For information on the various types of

academic dishonesty please refer to the [Academic Integrity Policy](https://secretariat.mcmaster.ca/university-policies-procedures-guidelines/), located at <https://secretariat.mcmaster.ca/university-policies-procedures-guidelines/>.

The following illustrates only three forms of academic dishonesty:

- plagiarism, e.g. the submission of work that is not one's own or for which other credit has been obtained.
- improper collaboration in group work.
- copying or using unauthorized aids in tests and examinations.

Conduct Expectations

As a McMaster student, you have the right to experience, and the responsibility to demonstrate, respectful and dignified interactions within all of our living, learning and working communities. These expectations are described in the [Code of Student Rights & Responsibilities](#) (the "Code"). All students share the responsibility of maintaining a positive environment for the academic and personal growth of all McMaster community members, **whether in person or online**.

It is essential that students be mindful of their interactions online, as the Code remains in effect in virtual learning environments. The Code applies to any interactions that adversely affect, disrupt, or interfere with reasonable participation in University activities. Student disruptions or behaviours that interfere with university functions on online platforms (e.g. use of Avenue 2 Learn, WebEx or Zoom for delivery), will be taken very seriously and will be investigated. Outcomes may include restriction or removal of the involved students' access to these platforms

Academic Accommodation of Students with Disabilities

Students with disabilities who require academic accommodation must contact [Student Accessibility Services](#) (SAS) at 905-525-9140 ext. 28652 or sas@mcmaster.ca to make arrangements with a Program Coordinator. For further information, consult McMaster University's [Academic Accommodation of Students with Disabilities](#) policy.

Faculty of Social Sciences E-mail Communication Policy

Effective September 1, 2010, it is the policy of the Faculty of Social Sciences that all e-mail communication sent from students to instructors (including TAs), and from students to staff, must originate from the student's own McMaster University e-mail account. This policy protects confidentiality and confirms the identity of the student. It is the student's responsibility to ensure that communication is sent to the university from a McMaster account. If an instructor becomes aware that a communication has come from an alternate address, the instructor may not reply at his or her discretion.

Course Modification

The instructor and university reserve the right to modify elements of the course during the term. The university may change the dates and deadlines for any or all courses in

extreme circumstances. If either type of modification becomes necessary, reasonable notice and communication with the students will be given with explanation and the opportunity to comment on changes. It is the responsibility of the student to check his/her McMaster email and course websites weekly during the term and to note any changes.

Extreme Circumstances

The University reserves the right to change the dates and deadlines for any or all courses in extreme circumstances (e.g., severe weather, labour disruptions, etc.). Changes will be communicated through regular McMaster communication channels, such as McMaster Daily News, A2L and/or McMaster email.