PUPB 758 and its companion PUPB 757 are components of the School of Public Policy Certificate, Concentration and Masters in Science of Health and Medical Policy programs.

**Instructor:** Arnauld E. Nicogossian, M.D., Center for the Study of International Medical Policies and Practices, School of Public Policy, George Mason University
anicogos@gmu.edu

**Teaching Assistant** Ms. Yinyue Hu, SPP Doctoral Student,
yhu5@masonlive.gmu.edu

Website: csimpp.gmu.edu

**Program Director (s) Health and Medical Policy Program**
SPP: Salim Habayeb, MD
CHHS: Dr. PJ Maddox,
Purpose of PUPB 757/758

PUPB 758 and its companion PUPB 757 courses are components of the School of Public Policy Certificate, Concentration, and Masters of Science in Health and Medical Policy Programs. PUPB 757/758 also intends to accommodate students interested in international medical and health policy development in a globalizing world. The content is updated annually to reflect the biomedical progress and changing global policy landscape. The intent is to:

1. Provide insights into medical policies, processes, and interdependencies.
2. Explore principles applicable to the planning, management, and priority setting for international health programs/projects.
3. Develop familiarity with the design and evaluation processes addressing cost and performance of medical and health programs.
4. Understand policies and practices that could violate human rights and/or promote health disparities and inequalities.

PUPB 757/758 Expectations

At the conclusion of the semester student should be able to

1. Identify major medical and health policy global challenges
2. Evaluate the relevance of the biomedical literature to policy formulation, and
3. Apply the three major principles (tenets) of the process for policy development:
   a. scientific evidence,
   b. political trends and
   c. ethical considerations

These important “tenets” are emphasized throughout the semester; underpin class discussions and final semester research papers.

Throughout the semester each student is expected to

1. Get familiar with the assigned reading materials. These materials will be included in the class presentations by the faculty,
2. Comment or discuss specific questions during sessions and at the conclusion of the faculty presentations (questions are shown for each session), and
3. Ensure that all class assignments (including final semester research papers) conform to the prescribed format and include
   a. Relevant scientific and technical reference materials
   b. Scientific evidence (if published as evidence based materials),
   c. Ethical considerations of proposed policies, and
   d. Political considerations (see diagram below)
PUPB 758 Specific Learning Objectives

1. Provide an understanding of comparative aspects of global medical policies, processes and practices,
2. Address global medical/public health policies, needs, practices, and interdependencies,
3. Understand elements of the planning and management of medical/ public health organizations for bioterrorism; emerging and reemerging infectious diseases, including influenza as a recurring pandemic threat,
4. Review principles for designing evaluation processes of programs costs and performance, and
5. Become familiar with the formulation of policies and analyze practices that could violate human rights, undermine ethics, and/or create disparities in health services.

Overview and Context PUPB 758

Information technology and advances in molecular biology are revolutionizing medical and public health practice globally. The interdependencies created by globalization and
international commerce continue to shape the health care concepts and policies at an accelerated pace. The G-8/20 politics and interests continue to influence the global health landscape. Our health threats are still being shaped by the September 11, 2001, the anthrax mail attacks, the SARS and avian influenza pandemics, and natural disasters readiness, response and recovery (or resilience) of the global community.

Medical and public health sector, are beginning to play a more preeminent role in global affairs. Timely implemented health and medical policies driven by good understanding of their global implications is essential to ensure nations and communities health, wellbeing and security. Global economic, social, political and environmental considerations drive such policies.

Socioeconomic disparities in a globalizing world are challenging the existing public health systems and practices. Health disparities, or divides, among and within nations affect relationships, trade and even peace keeping and humanitarian activities. Social justice is becoming an agenda and a political focus.

Most countries, developed and developing, have difficulties controlling the rising costs of health care. Governments tend to focus on the supply side of health care economics, while struggling with the demand, quality, affordability, accessibility and outcomes factors of the equation.

Medicine is becoming more politicized, used as a tool of foreign diplomacy and requires evidence based knowledge to demonstrate its value during difficult economic times. Understanding and preventing chronic diseases, addressing infections, implicated in cancers genesis, preparing for health threats and environmental challenges, is an essential ingredient of the policy formulation of the 21st Century.

**Course Delivery**

1. A series of interrelated global medical policy topics exploring the impacts of globalization on populations’ health.
2. Presentations and discussions by expert faculty in specific areas of emphasis, highlighting current problem areas faced by the stakeholders and policy makers. These topics usually address major perceived health or medical security threats to global stability and communities’ well-being.
3. Questions related to the assigned readings discussed at the end of each session.
4. Medical/health policy formulation case studies (total 3 case studies during and at the end of the semester)

**Pass/Fail Criteria**

*The students are required to:*

1. **Participate in the class discussions (30% of the final grade: 5% for each of the 2 sessions during the semester, and 20% for the final semester discussion. Additional information is discussed below)**

2. **Select a research topic, discuss with the instructor, and submit on time at the end of the semester (70% of the final grade). The research paper topic can be selected from one of the class subject areas. The topic is chosen by the student and approved by the
class instructor. The student is responsible for the research materials and the content of the paper. The contents, the depth, and scope of the literature search and citations, the relevance of the discussion and conclusions, including impacts and outcomes (social, economic, international, etc.) and potentials for policy development, will determine the grade of the paper. The semester research paper together with the class discussion grades will result in the final semester grade.

Class Discussions
The students will be divided into two groups. One of the group will present the pros, and the other the cons for implementing the policy.

1. End of each class discussions use the questions provided in the syllabus. These discussions serve as training/practice in preparation for the three major class group discussions.

2. Two forty-five minutes discussion sessions will be held during the semester. The class instructor will provide an actual topic (germane to the class topics) at least 2 weeks before the scheduled event. The students will research the evidence supporting or refuting the health and/or medical policy needs. The class will be divided into two groups to discuss the issues and develop a consensus position.

All students are expected to participate in discussions and provide the instructor with a one page, single-spaced, discussion summary (electronic version preferred), highlighting the three tenets of policy formulation: evidence, ethics and politics.

Each session will contribute a 5% toward the final semester grade.

3. The last class will contribute 20% toward the final grade. The students will be provided with a discussion topic at least four weeks prior to the event. Each student is required to prepare a position paper (to be submitting to the instructor in an electronic format). Papers should not exceed three single spaced pages. The following is a suggested content
   a. Statement of the problem or issue addressed (the question selected
   b. A short introduction addressing the knowledge base and historical background and the strength of the evidence (how robust is the evidence: 100 words and the robustness will be defined by a qualifier such as: robust, good, fair, poor or not available)
   c. The prevailing political climate (globally and in the region/country under consideration)
   d. The ethical considerations associated with policy solutions offered
   e. A conclusion describing the adequacy of the evidence and/or applicability to support a policy/standard of practice
   f. Four up-to-date major peer reviewed references on the subject matter.
Class Reading Assignments

Required reading are from the following textbooks (identified at the end of each session as Ref. followed by numbers for Chapters or Sections)

a. Primary Textbooks
   (1) M.H. Merson, R. E. Black, and A. J. Mills: Global Health: Diseases, Programs, Systems and Policies (Jones & Bartlett Learning 2011)
   (2) Kelly Lee, Kent Buse and Suzanne Fustukian: Health Policy in a Globalizing World Cambridge, 2002

b. Secondary textbooks

[Note that each lecture topic is followed by the faculty name, affiliation and their bio will be forwarded prior to the lecture] and (Reading references= Ref 1 for example refers to the M.H. Merson textbook and so on)] Faculty bios can also be viewed by accessing policy-csimpp.gmu.edu under faculty and staff.

The following Journals are recommended for additional class reading

1. World Medical and Health Policy Journal
2. Journal of Travel Medicine
3. Journal of Preventive Medicine
4. Journal of Biosecurity and Bioterrorism
5. American Journal of Public Health

Other materials and assignments will be provided during the classes for student references.

Course Outline

Each class session is a combination of lectures and class discussions. A guest lecturer, an experienced practitioner in the subject matter, will teach some classes.

Lecture 1
(1-22) Introduction to the Course: Review of Global Trends in Medicine and Public Health Policies (A. Nicogossian) (Reading: Ref 1, Chapters1 & 2; Ref 5: Chapter 1)

Learning objective: Explore the development of major international medical and health policies

Class Discussion
1. Identify the four most important achievements in public health and trace their origins
2. Discuss what you consider as evidence-based public health policy
3. What are the indicators of health and what do they measure?

Lecture 2

(1-29) Natural and Human Made Disasters and Impact on Health/Medical Policy Formulation (A. Nicogossian) (Reading: Jeanne Daly, Judith Lumley, 2005: The public health implications of natural and human- disasters. Australian and New Zealand Journal of Public Health 29 (5), 403–404; Ref. 1, Chapter 11; Ref. 3, Part IV; Ref 5, Chapter 8)

Learning objective: Understand the type and impact of disasters and associated policy and practices

Class Discussion

1. Compare the economic and human impacts from natural and human made disasters
2. Discuss strategies to reduce the impacts from disasters
3. What do you consider critical infrastructure?
4. Discuss the post disasters chronic health problems

Lecture 3

(2-5) Humanitarian Assistance, Policies and Practices (A. Nicogossian) (Reading: Ref 1, Chapter 11; Ref 2, Chapter 13)

Table top exercise: transportation and illness

Learning objective: Review the prevailing practices and shortcomings in complex humanitarian assistance

Class Discussion

1. Review the difference between CHI and complex political crisis
2. Describe a humanitarian intervention in the aftermath of a complex emergency
3. Explain how the policy saves lives or alleviated suffering.

Lecture 4

Learning objective: Address the complexity of protecting critical infrastructure designed for rapid and mass access

Class Discussion

1. What are the potential legal and ethical issues of not developing emergency response and recovery plans for Health Care Facilities
2. Is commitment by the hospital administration and staff a prerequisite for a successful planning and participation
3. What role should the media play in disaster preparedness? Provide some examples of when the media has been beneficial and detrimental for disaster response and recovery.

Lecture 5 (Case 1-study Class discussion)
(2-19) Comparative Occupational and Health Policies and Systems Practices (Arnauld Nicogossian and Yinyue Hu) (Reading: Ref 1, Chapter 10; Ref. 2, Chapter 12)

Learning objective: Address and compare worker’s health, safety and injury prevention practices

Class Discussion

1. Discuss why occupational health is important
2. Describe the economic ramifications of occupational health
3. Present an example of offshore outsourcing because of the occupational health laws
4. Discuss the major concerns of US health care system compared to other countries: is the concern an important economic driver?

Lecture 6
(2-26) Special Topic: Federal disaster response and lessons learned: from 9/11 to Katrina (Richard Williams, NASA) (Reading: Ref 1, Chapter 11, Ref.3, Part 1)

Learning objective: Explore the strengths and gaps in federal disaster preparedness and response

Class Discussion
1. Discuss how the federal response was shaped by the 911-terrorism attack
2. How did the letters laced with anthrax spores affect the legislation designed to protect against bioterrorism

Lecture 7

(3-5) Preventing bioterrorism threats: Vaccine development, administration, international agreements: Public Health Policy, Politics and Commerce (Allan Morrison, Hospital Epidemiologist, and INOVA Health Care System)
(Reading: Ref 1: Chapter 5; Ref.3, Part 3, Chapter 15)

Learning objective: Review the significance and impact of vaccination on community and populations health

Class Discussion
1. Which infections are considered to be class A bioterrorism agents
2. Describe the issues surrounding the childhood immunization controversy
3. Can you present an example of a global eradication of an infection

(March 11-17) Spring Break - No Class

Lecture 8

(3-19) Implication of knowledge gained from prior Chemical, Radiological and Biological events to Terrorism Response and Emergency Preparedness (Dan Hanfling, Director Emergency Preparedness, INOVA Health Care System)
(Reading: Ref 3, Part 3)

Learning objective: International implications of techno-disasters and terrorism

Class Discussion
1. Discuss the health and political impacts of large oil spills
2. Discuss long term psychological and societal consequences from human made disasters
3. Cite an example of international or national legislation following human made disasters

Lecture 9 (Case-study 2 Class Discussion)

(3-26) Special Issues in Bioterrorism: Emerging and Reemerging Zoonotic Diseases and Agro-Terrorism (A. Nicogossian) (Reading: Ref 3, Chapter 16; also PUPB 758 summaries)

Learning objective: Explore the security and vulnerabilities of the agricultural industry
Class Discussion

1. Discuss the types of policies, both national and international, which could improve food security, safety, and enhance public confidence.
2. Review all pertinent information and present a set of policies and actions addressing two of the following:
   - livestock and crops safety and health
   - labeling and services (hygiene and safety),
   - training food industry workers is vigilance and hygiene,
   - consumer education,
   - inspections and food quality testing, and surveillance.

Lecture 10

(4-2) Special Topic: Aging and Population Needs: Comparison of International Research Practices and Policies (Andrew Monjan, Chief Neurobiology of Aging Branch NIA/NIH) (Reading: Ref. 1, Chapter 7; Ref 2, Chapter 11; Ref 4, Chapter 14)

Learning objective: The aging world implication to public health policies and practice

Class Discussion

1. What are the public health implications of global aging?
2. Discuss preventive programs which could help reduce the long term cost of chronic diseases

Lecture 11


Learning objective: Explore security and technology transfer policies pertaining medical technology commerce

Class Discussion

1. Discuss how global research or service corporations cope with the different export control regulations
2. Explain what you consider a good export control policy, which can protect critical medical technologies.
Lecture 12
(4-16) Special Topic: Pharmaceuticals and Micro Resistance (A. Nicogossian)
(Reading: Ref 1- Chapter 14 and csimppcourse)

Learning objective: Discuss the process of drug development, distribution and hazards of inappropriate uses

Class Discussion
1. Discuss access problems to needed medications
2. Explore potential regulatory policies and practices to address counterfeit medications
3. Address legislations and practices to reduce medications misuse or abuse

Lecture 13
(4-23) Culture, Behavior, Ethics and Public Health Policy in a Globalizing World
(A. Nicogossian) (Reading: Ref 4, Part 2 & 3: Ref 5, Chapter 2, 3 and 4)

Learning objective: Discuss the societal implications of the medical and public health practices and policies.

Class Discussion
1. Discuss the best approach to resource allocation
2. Explain why health care services rationing is beneficial to the community and individual patients
3. Discuss important examples of cultural beliefs and practices in health care

(4-30) Semester class discussions (mandatory participation)

(5-5) Last day for student’s final semester paper submission (no extensions)

A Final Research Paper is Required

The proposed outline for the paper and explanations are presented below. The suggested organization of the paper will help with critical thinking when evaluating and developing health/medical policies. It will help to evolve a scientific/technical basis for the policy find, critically evaluate, and use the literature. The paper length including references should be 15 to 30 pages (double spaces).

1. Suggested format:
   i. Title page (include student name and course)
   ii. Table of Contents
iii. Abstract ½ page  
iv. Purpose: 1 paragraph  
v. Introduction and Background: 2 to 6 pages  
vi. Methodology: 3 pages  
vii. Results: 3 to 6 pages  
viii. Discussion: 3 to 5 pages  
ix. Conclusions: 2 to 4 pages (include policy recommendations)  
x. Bias and limitations (one paragraph)  
xi. Supporting Bibliography

2. **Format Content**  
   **Table of Contents** (organization of the paper and heading page number)  
   **Abstract** (A summary of the body of the paper: should reflect and summarize individual headings)  
   **Introduction/Background** (Explain the objective/problem addressed and reasons for selecting the topic based on the published literature)  
   **Methodology** (Evidence gathering and sources of information cited in the paper. All materials should be in the public domain)  
   **Results** (interpretation of findings)  
   **Discussion & Conclusions** (Understanding the policy context, Originality, Maturity)  
   **Policy Context** (Political, Scientific, and Ethical implications of proposed plan of action)  
   **Bias and limitations** (knowledge gaps and opinions not supported by published evidence)  
   **Citations** (depth of research: please minimize the use of websites and try not to cite Wikipedia)

3. **Explanation of the topical relevance** (*the topics below are not all inclusive but should always relate to policy and are presented in priority order; policy is the underpinning factor; global means that you could choose any country*)  
   a. Public/Medical Policy  
   b. Health and/or Bioterrorism Policy  
   c. International or Global considerations Policy  
   d. Disasters and/or humanitarian assistance Policy or Practices  
   e. Economic and Societal Impacts Policy


**SPP Policy on Plagiarism and the GMU Honor Code**

*It is imperative that all university rules and regulations for citing and presenting the work from the published literature are adhered to during the preparation of the class assignments and especially the semester papers. Sensitive or other materials from sources not in the public domain or have not been officially cleared for public dissemination should not be used.*
The profession of scholarship and the intellectual life of a university as well as the field of public policy inquiry depend fundamentally on a foundation of trust. Thus, any act of plagiarism strikes at the heart of the meaning of the university and the purpose of the School of Public Policy. It constitutes a serious breach of professional ethics and it is unacceptable.

Plagiarism is the use of another’s words or ideas presented as one’s own. It includes, among other things, the use of specific words, ideas, or frameworks that are the product of another’s work. Honesty and thoroughness in citing sources is essential to professional accountability and personal responsibility. Appropriate citation is necessary so that arguments, evidence, and claims are critically examined.

Plagiarism is wrong because of the injustice it does to the person whose ideas are stolen, but it is also wrong because it constitutes lying to one’s professional colleagues. From a prudential perspective, it is shortsighted and self-defeating, and it can ruin a professional career.

The faculty of the School of Public Policy takes plagiarism seriously and has a zero tolerance policy. Any plagiarized assignment will receive an automatic grade of “F.” This may lead to failure for the course, resulting in dismissal from the University. This dismissal will be noted on the student’s transcript. For foreign students who are on a university-sponsored visa (e.g. F-1, J-1 or J-2), dismissal also results in the revocation of their visa.

To help enforce the SPP policy on plagiarism, all written work submitted in partial fulfillment of course or degree requirements must be available in electronic form so that it can be compared with electronic databases, as well as submitted to commercial services to which the school subscribes. Faculty may, at any time, submit student’s work without prior permission from the student. Individual instructors may require that written work be submitted in electronic as well as printed form. The SPP policy on plagiarism is supplementary to the George Mason University Honor Code; it is not intended to replace it or substitute for it. ([http://www.gmu.edu/facstaff/handbook/aD.html](http://www.gmu.edu/facstaff/handbook/aD.html))

**Students with special needs**

If you are a student with special needs or a disability and you need academic accommodations, please see the instructor as soon as possible and contact the Disability Resource Center (DRC) at 993-2474. All academic accommodations must be arranged through the DRC.

**Student/Faculty Meeting Schedules**

1. 15:00 – 16:00 every Tuesday prior to class  Room 549, Arlington Campus
2. 19:00 – 19:45 Tuesdays after class by prior arrangements.
3. Other times can be arranged by mutual agreement (Please make appointments during classes or email at least 3 days in advance to anicogos@gmu.edu or yhu5@gmu.edu)
Contact

1. Arnauld Nicogossian, MD, FACPM, FACP
   Distinguished Research Professor,
   Director, Center for the Study of International
   Medical Policies and Practices,
   School of Public Policy,
   George Mason University
   Founders Hall, Room 549
   3351 Fairfax Drive
   Arlington, VA 22201, U.S.A.
   Off. (703) 993 8217
   Cell (703) 728 7277
   Fax (703) 993 2284
   Email: anicogos@gmu.edu
   http://policy-csimpp.gmu.edu
   Senior Editor
   World medical and Health Policy Journal
   www.psocommons.org/wmhp

3. Ms. Yinyue Hu (yhu5@gmu.edu) Teaching Assistant