OVERVIEW

This seminar addresses current issues in health policy with special emphasis on health issues and policies affecting poor and disadvantaged people, and introducing the critical analysis of health problems, health care, and mental health. The primary focus is on the nature of health problems, current governmental policies/provisions/regulations, planning processes, policy analysis, and assessment of service delivery.

Topics covered include: epidemiology of specific diseases and conditions, prevention, health promotion, accessibility, cost, and systems of service delivery. Specific attention is given to the health effects of discrimination and stigmatization on vulnerable populations, especially people of color, immigrant populations, the elderly, and people with long term disabling physical and mental illnesses and conditions.

Our discussions will explore the following questions:

- How do underlying American values shape our national and policy choices and patterns of service delivery?
- How do public and private financing systems affect delivery of health and mental health services?
- How are poor and disadvantaged populations excluded from the "American Opportunity State" because of their health deficits?
- How do inequality of access and lack of holistic and social approaches to health care further disadvantage certain populations?
- How are promises of "opportunity" and civil rights played off against lack of economic rights and social protections?
- What are the implications of the rapid growth of managed care organizations (MCOs)?
- What are some promising service delivery possibilities of current interest to policy makers?

OBJECTIVES
1. To provide an understanding of the provisions for health in the American social welfare system, its policies and services, particularly those of the public sector and its contractual arrangements.

2. To introduce students to the many components of the policy making process which shape health care and services, planning and delivery, preparing them to influence policy.

3. To develop analytic skills to critically evaluate how problems are defined, solutions are proposed, and programs are designed in the health and mental health field.

4. To assess particular health problems at a societal or population level, with particular attention to the economically disadvantaged, people of color, immigrants, the elderly and people with long term care needs.

5. To critically evaluate health care programs and proposals in ways useful to real policy makers and practitioners.

6. To explore the implications of the rapid corporatization occurring in health care delivery by examining the many forms of managed care.

REQUIRED TEXTS containing key required readings:


Other readings will be handed out in class. Some documents may be on Reserve at Golda Meier Library.

COURSE FORMAT, REQUIREMENTS & EXPECTATIONS

As a graduate seminar, each session will usually include a lecture by the instructor and presentation of assigned readings by students. As time allows, students will report briefly on their own research and analyses of current health policy developments.

Expectations will be greater for the 3 credit students in terms of the number of analytic research papers, current events articles, and in class presentations; other expectations will be the same for both 2 and 3 credit students.

READINGS

All students are expected to prepare for and participate regularly in class discussion. (Absences will be noted and may affect your grade.) Reading assignments are substantial, but the presentation of assigned readings and discussion of current events (an integral part of each class session) will be used to clarify, raise questions and critique these issues. Read the articles; any student may be called upon to comment on the assigned readings for a given session. This may be challenging to some students, so if the reading gets to be too onerous, we will jointly agree on how to divide it up or reduce it. (Please be prepared to speak up on your own behalf.)

Discussion of each assigned reading from the Lee & Estes text will be guided by two students who will briefly present its highlights and pose one or two
questions for discussion. The presentation should aim to link this content to other relevant readings for that topic or current events. Each student will present at least one assigned reading for class discussion.

Students are expected to

- Digest as well as ingest the readings (reading ahead will allow you time to do this),
- Critically evaluate the author’s viewpoint,
- Connect the readings to observations of real practice (ala media or your experience),
- and Become thoughtful observers of popular media representations of health care and mental health (see below).

FOLLOWING CURRENT EVENTS

Students are encouraged to follow and bring to class news items and agency bulletins about current policy issues at the federal, state and local levels. Special attention will be given to local developments in health care, local corporations, implementation of W2, GAMP, "Badger Care," COP and Family Care, and other health care issues or controversies in your own county.

All students will write a brief critical essay on one current news item (2 credit students attach one news article; 3 credit students attach at least 2 articles). Your critical analysis must draw on one or two of our required readings, citing principles, and commenting on what you believe this "story" is "really about."

This analysis is due on or before Dec. 7.

ASSIGNMENTS

In addition to regular participation in class discussion and the current events analysis (noted above), all students will lead a discussion of at least one assigned reading and complete an analysis of a specific health or mental health problem (8 -10 pages each). In addition, three credit students will complete a 6-8 page program analysis and present two additional readings. (Examples of papers from previous classes are available from the instructor.)

The health problem analysis may be done individually or as a group; individuals/groups may present their analyses to the class. It should demonstrate the student's ability to identify and define a significant health problem in society, research and synthesize appropriate current theoretical and empirical research literature, conduct a cursory analysis of data, and consider possible directions for the resolution of this health problem, including typical protocols for prevention, treatment, and care.

Written assignments are due in class on the due date. The instructor will return them promptly and provide you with feedback; rewrites are allowable within two class periods, but only for papers initially submitted on time. The current events analysis may be submitted at any point during the semester before
December 7.

**EVALUATION**

of two credit students:

1. Analysis of a current news item (1 article) (2-3 pgs) 20%
2. Research: Health problem analysis (8-10 page paper) 50%
3. Participation/preparation for class (presentation of at least one reading) 15%
4. Policy letter 15%

100%

of three credit students:

1. Analysis of a current news item (2+ articles) (2-3 pgs) 20%
2. Research: Health problem analysis (8-10 pages) 25%
2a. Research: Program/policy analysis (6-8 pages) 25%
3. Participation/preparation for class (presentation of at least 3 readings) 15%
4. Policy letter 15%

100%

**Organization of the Sessions**

I. Introduction, Purposes & Background Regarding Study of Health Policies (1,2)

II. American Social Protection Against Illness: Provisions, Insurance & Inequities (3,4,5)

III. The Currently Competitive Environment/Delivery System (6, 7, 8, 9)

"#1 HealthProblem Analysis due Session 7, Oct. 19."

IV. Looming Issues: Mental Health, LTC, Consumer Empowerment, Ethics (10, 11, 12, 13)

"Current Events analyses due on or before Dec. 7."

V. Evaluating Policies (14, 15)

"#2 Program Analysis due Dec. 21"

"Policy letter due Dec. 21."

**TOPICS and schedule of readings**

Readings should be prepared in advance of the class discussion on which assigned.

Readings listed **BOLD** are required; those marked * are supplemental and recommended. **HO:**
I. Introduction, Purpose & Background for Policies (1-2)


   Definitions, Structures, Logic and Societal Values
   How do American's view the role of their Government?
   Our Framework:

   The Historical View: The Common Good vs. Commodification
   The Insider's View: Anthropological Perspective
   The Policy View: Structures and Criteria

   Access
   Cost
   Quality
   Efficiency and Appropriateness

Marmor. American "crisis" of the welfare state, pp 164-172 in Lee & Estes 3rd Ed.

Marmor, T., Mashaw, J. & Harvey, P. America's Misunderstood Welfare State: Ch. 1.
SW Policy under siege, Ch. 2.
The opportunity/insurance state, pp. 1-52.


   Lee & Estes. Ch. 1 Health & Health Care: Its Determinants & Inequalities, pp 1-40
   McKeown. Determinants of Health Care, 9-17.
   Adler et al. Inequalities , 8-31.
   Navarro. Race/Class Mortality Differentials, 32-36


   Lee & Estes. Ch. 3. Foundations and Future of Public Health, 56-66

Discuss Assignment 1: Health Problem Analysis (Due Oct. 19)

II. Social Protection Against Illness: the American System of Provision, Insurance, and Inequity (3-5)


Overview. A pre-test. Federal: Medicare (universal)
State: Medicaid (categorical poor)
Local: county hospital, public health

Who can get what?
Income provisions: OASDI, SSI
Medicare & Medicaid provisions: eligibility (categorical, medical necessity), coverage, amount, duration, scope of service
Other federal programs: Veterans, CHAMPUS, Black Lung
State and Local programs, eligibility & access

HO: Social Security Around the World
HO: USDHS, SSA. Social Security Programs in the United States (Federal)

Medicare and Medicaid, pp. 43-54.
Programs for Special Groups, pp. 54-67.
OASDI, pp. 5-19
SSI, pp. 64-67.
AFDC, 68-71.

Abraham. Ch. 3. The gaps in Mrs. Jackson's insurance, 44-59.
Marmor, Mashaw & Harvey. Ch. 6. Misunderstanding Medical Care, pp.175-212.

4. Sept. 28. Social Protection Against Illness: Health Insurance & Managed Care

The Milwaukee Medical Marketplace.

Who's Covered, Who's Not?

HO. Keigher. Managed Care. H&SW
Lee & Estes Ch 8. Intro, 274-282, and 9 Managed Care, 324-325.
Enthoven & Kronick, Incentive Reform, 326-333.

5. Oct. 5. Inequities in Access to Health Care
The un- and under-insured, uncompensated care and charity care, and racism.
Children's health, maternal health and poverty. Older women's health issues, homelessness, outreach, community clinics, special programs: what works?
The ER, Mental Health, Primary Care

Abraham, pp. 60-110. Ch 4. Mrs Jackson's fitful primary care; Ch 5. Mrs. Jackson's Melancholia; Ch. 6. The Inner City Emergency Room


Lee & Estes. Ch. 10, Quality and Access
Davis. Coverage of the Uninsured, 406-410
Luft. Managed Competition, 334-348.

III. The Current Competitive Environment/Delivery System (6-9)


Agenda setting processes; Role of the media
The medicalization of health problems
The Congress and its objectives.

1992 Clinton's Health Care Reform Proposal
1994

Abraham Ch. 7. One hospital's story, 111-133;

Lee & Estes. Ch 6, Health Care Politics and Policy, 196-236.
Estes. Privatization, 199-209.
Nestle. Food Lobbies, 210-222.
Glantz. Preventing Tobacco Use, 223-228.
Estes & Linkins. Long Term Care, 229-236.


1996: Kennedy-Kassebaum, & welfare block grants
State Medicaid choices, experimentation &Managed Care initiatives
The NGA Proposals to Block Grant Medicaid
Wisconsin's Policies: W2, Badger Care, GAMP

Abraham Ch. Ch. 8. Who is responsible for Tommy Markham's health? 134-145;
Ch. 9 Jackie Bane's "patient"-an example of Catch 22's in caregiving, 146-166.

Lee & Estes. 8, Health Care Reform

Prospects for a Clinton success . . . an in class debate.
What's at stake? What role for government?
Who shall finance long term care?????? . . . .


HO: Medical Savings Accounts


A Panel of medical professionals on Organizational Challenges

of nurses, social workers, ancillary health professionals
Where is Prevention and Public Health in all this?
How widely used are Outcomes Measures in practice, evaluation, and documentation?

Lee & Estes. 381-405
Brook et al. System Reform & Quality, 381-
Sackett et al. Evidence Based Medicine, 395-
Wennberg. Small Area Variation, 399-405.


IV. Looming Issues (10-13)

10. Nov. 9. Mental Health Issues: Chronic Mental Illness, and Behavioral Health Care in Medical Primary Care

Speakers re. managed care and mental health, community support programming: TBA

A continuum of mental health services for prevention, tertiary and primary care, and life long care. A seamless web? Mental health and the Kennedy Kassebaum bill. . .

- HO. Rose & Keigher. Managed care and Mental health, Health & Social Work
- HO. Anderson & Berlant, Managed MH and Substance Abuse Services, Ch 14 of Kongsvedt, Essentials of Managed Health Care.
Policy Letter assignment distributed. Due on Dec. 21


Are there philosophical approaches that entitle users to care, yet respect choice? Dilemmas among market approaches and capped public budgets.

A panel on consumer issues.

Smith & Eggleston. Medical vs. Social Care
HO. Keigher. Health care reform and LTC: uneasy political partners, H&SW.
Barnes, M. Communities, Care, and Citizens.


Societal aging and the incidence, prevalence of acute and chronic illness
Projections regarding needs for LTC, services
Government initiatives:

The Pepper Commission
OBRA 1987
Nursing home reimbursement formulas and issues: T19, SSI, MN
Clinton's LTC proposal of 1993; Medicare and pharmaceutical reform.
What future for caregiving in a stressed, fully employed society?

Abraham. Ch. 9 Jackie Bane's patient, 146-166.
HO. Osterbusch & Keigher. Community care and gender justice

13. Dec. 7. Ethics, Quality Assurance, Appropriateness, and Care in the Home

Video: Who lives, who dies? vs. The right to die
NASW video on Ethics or other recent video on Ethics of Managed Care.
Presentation on Legal Cases on Managed care?

L & S, Ethics and Managed Care

Current Events Analysis Due.

V. Evaluating Policies


Presentations of students' program/policy analysis papers. Classmates will provide feedback, questions. Authors have until next class to polish up & submit papers.


Discussion building on presentations of student program analyses last week will consider the impacts of current health programming. How adequately is society served, given our needs? What prospects for new problems, new diseases? What impacts of further privatization? Prospects for socialization of care?

- Global changes affecting health in the future
- Impacts of material inequality on health.
- Biomedical research
- A role for social work?

Due: Assignment #2. Program Analysis Paper

Policy Letter

SELECTED BIBLIOGRAPHY


Friedman, Milton. *Capitalism and Freedom*.

Friedman, Milton & Rose Friedman. *Free to Choose*. Chpt 4. "Cradle to Grave" and Chpt 8 "Who Protects the Worker."


Lindblom, C. *The Policy-Making Process*


Menzel, Paul. *Medical Costs, Moral Choices: A Philosophy of Health Care Economics in America*


University Press.


Titmus, Richard. The Gift Relationship.


Journal Abbreviations

HA. Health Affairs
H&SW Health and Social Work
JHPPL. Journal of Health Politics Policy and Law
MQ. Milbank Memorial Quarterly
SSR. Social Service Review

Journal Articles


Bloche, Gregg & Francine Cournos. Mental Health Policy for the 1990s: Tinkering at the Interstices. JHPPL 15 (2) summer 1990.

Brecher, C & Knickman, J. (1985). A reconsideration of long term care policy, JHPPL, 10 (2): 245-

Brown, L. The national politics of Oregon's rationing plan. HA, 10 (2) summer '91, pp. 28-51.


Colby & Cook. Epidemics and agendas: the politics of nightly news coverage of AIDS, JHPPL 16 (2) summer '91, pp. 215-250.

Estes, Swan, Bergthold, & Spohn. (forthcoming) Running as fast as they can: Organizational changes in home health care. Home Health Care Services Quarterly.


Fox, D & Leichter, H. Rationing care in Oregon: the new accountability, HA, 10 (2) summer '91, pp. 7-27.

Davis. K. Inequality and access to health care. MQ 69 (2) 1991, pp. 253-274 (How research shapes policy, cost containment research lead to decreased access . .)


Kane, R., Penrod, Davidson, Moscovich & Rich. (1991, June). What cost case management in
Kane, Robt. A nursing home in your future? New England Journal of Medicine 324 (1991): 627-29. P. 628 notes that "in fact the average resident receives less than three hours of care in all per day. In this context, "regulations to protect frail elderly people now restrict their options and raise costs for the very people we want to serve."


Ruggie, Mary . Retrenchment or Realignment? Mental Health Policy & DRGs. JHPPL 15 (1) spring 1990.


Assignment. Health Problem Analysis

Part I. Both 2 and 3 credit students

Purpose: To understand a current health problem affecting people at a societal level in a way that can be made relevant to a policy maker.

1. Choose from the attached list a health or mental health problem of interest to you. (Note: some topics are broad, e.g. homicide; infant mortality; depression, and you may wish to select a more narrow focus, e.g. juvenile homicide, black infant mortality, bipolar disorder).

2. Briefly describe the epidemiological aspects of the problem:
   a. The magnitude of the problem (how many people are affected; costs to society, etc.)
   b. Sociodemographic characteristics of the population affected (gender, race/ethnicity, sexual orientation, socioeconomic status, age, etc.)
   c. Etiologic factors (causes and risk factors, if known)
   d. Technology currently available to deal with the problem:
      1. Prevention
      2. Early detection and treatment
      3. Rehabilitation and/or continuing care

The purpose of this part of the paper is to familiarize you with the data base used to establish the need for policies, programs and services to deal
with a given health problem, and the appropriate content of such policies and programs.

3. Limit this report to 8-10 typewritten pages. Your analysis should provide facts and guidance to a real policy maker. At least 6 references should be cited. References must be as current as possible (i.e., 1992 or later). You may need to gather relevant research data and reports at a medical library and through contacts with experts on this subject. This assignment is due October 19.

4. Suggested references include any current professional medical, nursing, social work, or public health reference book or journal, government or foundation reports. Prof. Keigher has a large collection of government reports and can suggest other documents that are relevant.

adolescent pregnancy          lead poisoning
AIDS/HIV                       lung cancer
alcoholism                     mental retardation
Alzheimer's disease            myocardial infarction
anxiety disorders             multiple sclerosis
asthma                         war
breast cancer                  obesity
burns                          osteoporosis
cervical cancer                post-traumatic stress disorder
child abuse                    rape
cocaine use                    renal disease
communication disorder        schizophrenia
depression                     sickle cell disease
developmental disability      SIDS
diabetes                       spina bifida
Down Syndrome                 spinal cord injury
eating disorders              stroke (CVA)
emphysema                      substance abuse
epilepsy                       suicide
genetic disorders             tobacco use
homophobia                     tuberculosis
homicide                       visual impairment
hemophilia                     scleroderma
hypertension                   fibromyalgia
infant mortality               infertility
injuries/accidents             

Assignment. Program Analysis

Part II. to be done by 3 credit students

Purpose: To critically assess the adequacy of an actual care or service program relative to the social/health need for it that exists in the community.
1. Locate a program or agency that has developed to deal with the health or mental health problem you investigated in Part I.

2. Describe how the program developed: its historical background, any relevant legislation affecting it, mandates and legal authority.

3. Identify the goals of the program and describe the organization of service delivery. Are the services provided consistent with the needs you identified previously? What provision is made for prevention, if any? Is the spectrum of services comprehensive?

4. How is the program financed? Sources? Strings attached? What can you learn about its projected funding picture? Any federal/state policy struggles pending? Handsnet is a great source for such information; Dr. Keigher will provide access to this and other useful on-line sources.

5. What personnel are needed? Is this appropriate, given the needs identified previously?

6. What is the role of the social worker (goals, function, relationship to other health care professionals and providers, etc.?) What is the history of the social work position? (How was it developed? How is it funded?) What specialized knowledge or experience is necessary for this position and how has the social worker acquired it? Briefly critique the social worker position. What are its strengths and weaknesses? What suggestions would you make to enhance the position, if any?

7. What measures are employed to assure that people of color and poor people will have access to the program?

8. What provisions are made for consumer participation? How is program effectiveness evaluated?

9. How are clients’ rights protected?

10. How does the program compare on some of these dimensions with others described in the professional literature?

11. What are the major issues or problems currently facing the program?

The paper should be 6-8 typed pages, citing no fewer than 5 references, 3 of which must be current (1992 or later). References from the course readings may be used; they should be cited using the APA style (e.g., Kongstvedt, 1995, p.) and listed alphabetically at the end of the paper. Students earning 3 credits will present their findings at our class session on December 14, obtaining feedback from class members. This will permit you one more week to revise and finalize the paper. It is due at our last class on December 21.