



SciencesPo.

GLOBAL HEALTH INEQUALITIES: ECONOMICS, ETHICS AND POLITICS

Political Science, Spring 2010

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Fridays, 5–7pm

Feb 19, 26; Mar 12, 19, 26; Apr 2

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Room B304

Why study health inequalities? Life expectancy and health status play an essential role in development, yet despite some remarkable improvements, especially in the second half of the twentieth century, health remains an unequally distributed resource, both on a global scale and within populations.

This course offers a **multidisciplinary approach** to the topic of health inequalities, based on three perspectives for study: an *economic dimension*, grounded in the links between health, poverty and employment; a *social dimension*, that focuses on psycho-social determinants of health and the role played by health systems; and a specifically *political dimension*, through which we will discuss the ethical foundations of state intervention against health inequality and look at how to assess the effects of policies in that area.

By design, this course will approach health inequalities through methods and concepts taken from various branches of the social sciences. How, for instance, can **health economics** measure these inequalities? What can **political philosophy** contribute to defining the ethics of global health? Even more generally, what is the overall contribution of the social sciences to the epidemiological study of health inequalities?

No previous knowledge in any of these topics is required for taking the course, but some curiosity in every of them will prove useful.

Acknowledgements: this course draws extensively on teaching material provided by Florence Jusot, who taught the course last year. All omissions and mistakes in referencing naturally remain mine and mine alone.

COURSE ASSIGNMENTS

Students are expected to be regular and active participants in the course, and to complete required readings prior to class meetings. Course sessions start with a 30-minute introduction, after which two students (or groups of students, depending on how many students registered for the course) will each give an **oral presentation** of roughly 15 minutes, followed by a 20-minute discussion in both cases. Presentations will be concise, synthetic, descriptive and explanatory, and will make extensive use of the recommended readings.

A written **policy memo** of strictly 4 pages is due at the end of the course (a precise deadline will be given at the first meeting). *In the absence of truly exceptional circumstances, there will be no time extensions.* In the memo, students are required to act as policy advisors reporting to a lead authority in a national health department or an international organisation. The memo must provide a concise, synthetic overview of a recent policy report or research document on health inequalities, and formulate realistic, structured recommendations for intervention, either declarative (public speech) or operative (policy decision). Eligible reports and research for the policy memo assignment are listed in the main readings below; feel free to suggest any other material of interest, but please make sure to submit your ideas well in advance.

Feel free to ask for additional guidance on what to read and how to structure memos and oral presentations, yet *do not wait for the very last minute to do so.* The grading policy for the course is 40 points for presentations, 40 points for memos and 20 points for attendance and participation. Further expectations about coursework will be outlined at the first meeting. Finally, students will be asked several times to provide feedback on the course.

COURSE SUMMARY

0. Global Health Inequalities and Development
 1. Poverty, Income and Employment
 2. Psycho-Social Determinants of Health
 3. Health Systems Inequalities
 4. Ethical Foundations of Public Health
 5. The Politics of Health Inequalities

Course structure: *The course starts by focusing on economics and social factors (part 1), and then turns to ethical concerns and policy interventions (part 2).*

MAIN READINGS

Reports

Commission on Social Determinants of Health. 2008. *Closing the Gap in a Generation: Health Equity Through Action on the Social Determinants of Health*. World Health Organization.

Institute of Medicine. 2008. *The U.S. Commitment to Global Health: Recommendations for the New Administration*.

Haut Conseil pour la Santé Publique. 2009. *Les inégalités sociales de santé : sortir de la fatalité*.

Marmot, M. 2010. *Fair Society, Healthy Lives. Strategic Review of Health Inequalities in England Post-2010*. [See the Black and Acheson reports for additional background.]

Research

Daniels, N. 2008. *Just Health: Meeting Health Needs Fairly*. Cambridge University Press.

Hall, P. and Lamont, M. (eds). 2009. *Successful Societies. How Institutions and Culture Affect Health*. Cambridge University Press.

Ruger, J. 2010. *Health and Social Justice*. Oxford University Press.

ADDITIONAL READINGS

Beaglehole, R. and Bonita, R. (eds). 2009. *Global Public Health*. 2nd ed. Oxford University Press.

Cash, R. *et al.* (eds). 2010. *Casebook on Ethical Issues in International Health Research*. World Health Organization.

Graham, H. (ed.). 2009. *Understanding Health Inequalities*. 2nd ed. Open University Press.

Kawachi, I. and Wamala, S. (eds). 2007. *Globalization and Health*. Oxford University Press.

Marmot, M. and Wilkinson, R. (eds). 2005. *Social Determinants of Health*. 2nd ed. Oxford University Press.

Sudhir, A. *et al.* (eds). 2005. *Public Health, Ethics, and Equity*. Oxford University Press.

Reading guide: Beaglehole and Bonita as well as Cash et al. are extensive introductions to the issue of international health intervention; Graham is a state-of-the-art collection of sociological findings on the spread of health inequalities among populations; Kawachi and Wamala is a compendium on global health; Marmot and Wilkinson summarises the basic epidemiological data on health inequalities; and Sudhir et al. covers discussions of health and social justice in the fields of philosophy and economics.

WEBSITES

Gapminder:

<http://www.gapminder.org/>

Harvard Program in Ethics and Health:

<http://peh.harvard.edu/>

SESSION 0 GLOBAL HEALTH INEQUALITIES AND DEVELOPMENT

Readings

Deaton, A. 2003. "Health, Inequality, and Economic Development." *Journal of Economic Literature* 41(1): 113–158.

Marmot, M. 2006. "Health in an Unequal World." *Lancet* 368(9): 2081–2094.

Additional readings

Cambois, E. and Jusot, F. 2007. "Ampleur, tendance et causes des inégalités sociales de santé et de mortalité en Europe: une revue des études comparatives." *Bulletin Épidémiologique Hebdomadaire* 2–3: 10–14.

Krieger, N. *et al.* 2008. "The Fall and Rise of US Inequities in Premature Mortality: 1960–2002." *PLoS Medicine* 5(2): e46.

Part 1. Economic and social aspects

SESSION 1 POVERTY, INCOME AND EMPLOYMENT

Readings

Marmot, M. 2002. "The Influence of Income on Health: Views of an Epidemiologist." *Health Affairs* 21(2): 31–46.

Smith, J. 1999. "Healthy Bodies and Thick Wallets: The Dual Relation between Health and Economic Status." *Journal of Economic Perspectives* 13(2): 145–166.

Presentations

Wealth, Work, Health and Death in France

Jusot F. 2006. "The Shape of the Relationship between Mortality and Income in France." *Annales d'Économie et de Statistique* 83–84: 89–122.

Jusot, F. *et al.* 2006. "Une mauvaise santé augmente fortement les risques de perte d'emploi." In *Données Sociales. La société française*, pp. 533–543. INSEE.

Cross-National Variations in Income Differences and Health Inequalities

van Doorslaer, E. and Koolman, X. 2004. "Explaining the Differences in Income-Related Health Inequalities Across European Countries." *Health Economics* 13(7): 609–628 [see also the guest editorial in the same issue on the ECuity project].

Wilkinson, R. and Pickett, K. 2008. "Income Inequality and Socioeconomic Gradients in Mortality." *American Journal of Public Health* 98(4): 699–704 [see also their paper in *Social Science & Medicine* 62(7): 1768–1784, 2006].

SESSION 2 PSYCHO-SOCIAL DETERMINANTS OF HEALTH

Readings

- Goldberg, M. *et al.* 2003. “Épidémiologie et déterminants sociaux des inégalités de santé.” *Revue d'épidémiologie et de santé publique* 51(4): 381–401 [warning: no proof currently available].
- House, J. 2002. “Understanding Social Factors and Inequalities in Health: 20th Century Progress and 21st Century Prospects.” *Journal of Health and Social Behavior* 43(2): 125–142.

Presentations

□ Effects of Race and Ethnicity on Screening Practices

Among Patients and Practitioners

- Balsa, A. *et al.* 2005. “Testing for Statistical Discrimination in Health Care.” *Health Services Research* 40(1): 227–252 [see also the paper in *Journal of Health Economics* 20(6): 881–907].
- O'Malley, M.-S. *et al.* 2001. “The Association of Race/Ethnicity, Socioeconomic Status, and Physician Recommendation for Mammography: Who Gets the Message about Breast Cancer Screening?” *American Journal of Public Health* 91(1): 49–54.

□ Translations of Work Exposures into Stress and Disease:

Comparative Perspectives

- Sekine, M. 2009. “Socioeconomic Inequalities in Physical and Mental Functioning of British, Finnish, and Japanese Civil Servants: Role of Job Demand, Control, and Work Hours.” *Social Science & Medicine* 69(10): 1417–1425.
- Salavecz, G. *et al.* 2010. “Work Stress and Health in Western European and Post-Communist Countries: An East-West Comparison Study.” *Journal of Epidemiology and Community Health* 64(1): 57–62.

SESSION 3 HEALTH SYSTEM INEQUALITIES

Readings

- Dourgnon P. *et al.* 2001. “L'assurance-maladie réduit-elle les inégalités sociales de santé ?” *Questions d'économie de la santé* 43.
- Ross, C.-E. and Mirowsky, J. 2000. “Does Medical Insurance Contribute to Socioeconomic Differentials in Health ?” *Milbank Quarterly* 78: 291–320.

Presentations

□ Health Sector Inequalities in High-Income Settings:

Measuring the Effects of Health Insurance (or absence thereof) in the United States

- Wilper, A. *et al.* 2009. “Health Insurance and Mortality in US Adults.” *American Journal of Public Health* 99(12): 2289–2295.
- Ayanian, J.-Z. *et al.* 2000. “Unmet Health Needs of Uninsured Adults in the United States.” *JAMA* 2061–2069.

□ **Health Sector Inequalities in Low-Income Settings:
Measuring the Effects of Household Consumption in Vietnam**

van Doorslaer, E. and O'Donnell, O. 2010. "Measurement and Explanation of Inequality in Health and Health Care in Low-Income Settings." *In* McGillivray, M. et Dutta, I. (dir.), *Advancing Health Equity*, Palgrave MacMillan [preprint].

Wagstaff, A. *et al.* 2003. "On Decomposing the Causes of Health Sector Inequalities with an Application to Malnutrition Inequalities in Vietnam." *Journal of Econometrics* 112: 207–223 [first published as World Bank Policy Research Working Paper No. 2714].

Note: this presentation requires reading some (rather light) econometrics, which can be challenging if you do not have any background in economics.

Part 2. Policy interventions

SESSION 4 ETHICAL FOUNDATIONS OF PUBLIC HEALTH

Readings

Fleurbaey, M. and Schokkaert, E. 2009. "Unfair Inequalities in Health and Health Care." *Journal of Health Economics* 28(1): 73–90.

Venkatapuram, S. and Marmot, M. 2009. "Epidemiology and Social Justice in Light of Social Determinants of Health Research." *Bioethics* 23(2): 79–89.

Presentations

□ **Collective Responsibility in Public Health Ethics:
Economic Recommendations on Health Inequalities**

Deaton, A. 2002. "Policy Implications of the Gradient of Health and Wealth." *Health Affairs* 21(2): 13–30.

Gwatkin, D. 2000. "Health Inequalities and the Health of the Poor: What Do We Know? What Can We Do?" *Bulletin of the World Health Organization* 78(1): 3–18.

Note: the purpose of the presentation is to present the viewpoint of economists on policy interventions regarding health inequalities. For the essential background in health economics, see Wagstaff, A. and van Doorslaer, E. 2000. "Equity in Health Care Finance and Delivery." In Culyer, A. and Newhouse, J. (eds), Handbook of Health Economics. Elsevier [Chapter 34, pp. 1803–1862].

□ **Individual Responsibility in Public Health Ethics:
Paying for Smoking-Induced Lung Cancer Treatment**

Roemer, J. 1998. *Equality of Opportunity*. Harvard University Press [§8, pp. 43–53.]

*Wait a second! This looks like an easy presentation, based on merely 10 pages of reading. The truth is, the content is highly formalized and requires that you can read equations. If no one is math-proficient enough with modelling to follow the argument, we will fall back on the following reading: Fleurbaey, M. 2006. "Health, Equity and Social Welfare." *Annales d'Économie et de Statistique* 83–84: 21–59.*

SESSION 5 THE POLITICS OF HEALTH INEQUALITIES

Readings

Couffinhal, A. *et al.* 2005. “Politiques de réduction des inégalités de santé, quelle place pour le système de santé ? Un éclairage européen.” *Questions d’économie de la santé* 92–93.

Mackenbach, J. *et al.* 2002. “Strategies to Reduce Socioeconomic Inequalities in Health.” in Mackenbach, J. and Bakker, M. (eds), *Reducing Inequalities in Health: A European Perspective*, pp. 25–49. Routledge

Note: see also Chapter 1, pp. 3–24, for some epidemiological background that was already presented in class. Mackenbach et al. have written plenty of reports on the reduction of health inequalities in the European Union; see his work for the Eurothine project in 2007, or his Health Inequalities: Europe in Profile report, delivered to the UK presidency of the EU in 2005, as well as the Judge et al. report, Health Inequalities: A Challenge for Europe, delivered to the same policy forum.

Presentations

□ Effects of Political Systems on Health Inequalities:

Measuring Regime Influence on Health

Beckfield, J. and Krieger, N. 2009. “Epi+Demos+Cracy: Linking Political Systems and Priorities to the Magnitude of Health Inequities—Evidence, Gaps, and a Research Agenda.” *Epidemiological Reviews* 31(1): 152–177.

Navarro, V. and Shi, L. 2001. “The Political Context of Social Inequalities and Health.” *Social Science & Medicine* 53(3): 481–491 [see also the paper by Navarro *et al.* in the *Lancet* 368(9540): 1033–1037.].

□ Policy-Making Dimensions of Health Inequalities:

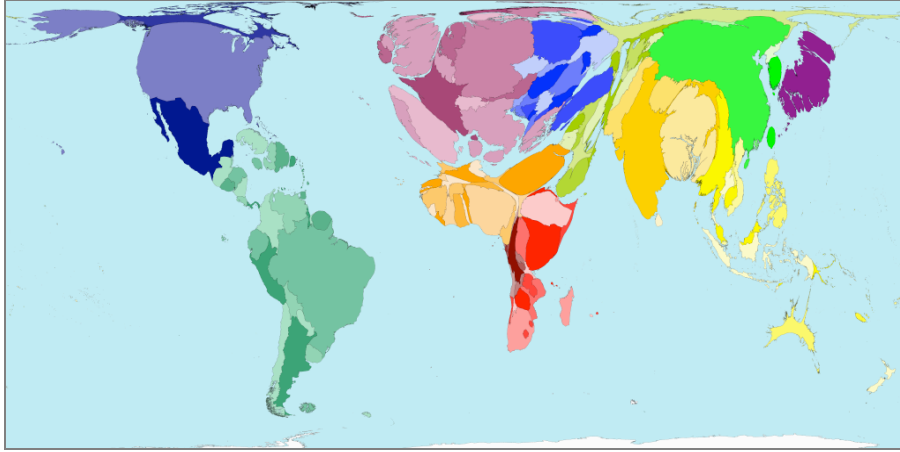
Agenda-Setting Factors and Strategies

Exworthy, M. 2002. “The ‘Second Black Report’? The Acheson Report as Another Opportunity to Tackle Health Inequalities.” *Contemporary British History* 16(3): 175–197 [see also the other papers in that issue (then published as a book edited by Berridge and Blume in 2003) for contextual data on the Black Report].

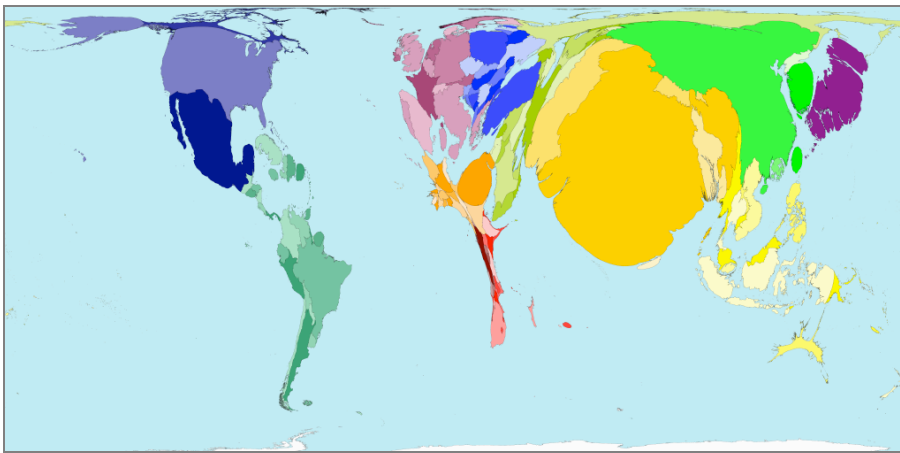
Whitehead, M. 1998. “Diffusion of Ideas on Social Inequalities in Health: A European Perspective.” *Milbank Quarterly* 76(3): 469–49.

ANOTHER VISION OF THE WORLD

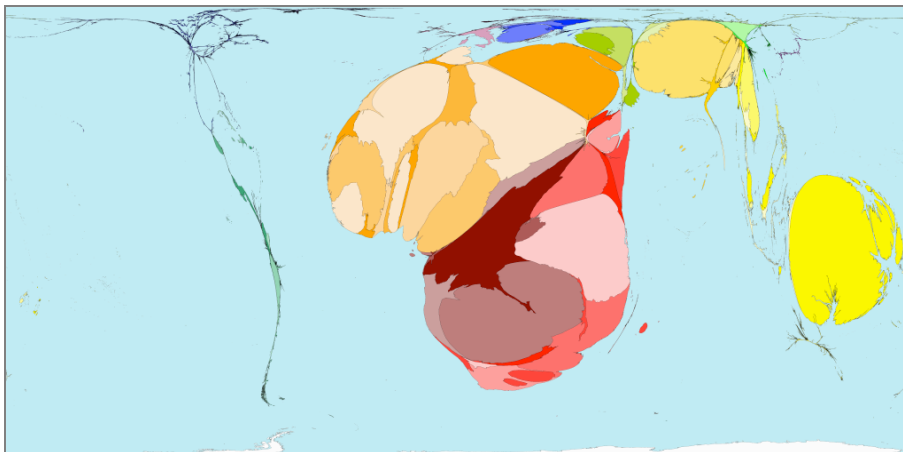
All three maps are from the worldmapper.org website, based on WHO data. On these maps, territory size has been altered from actual size to reflect the worldwide distribution of female smokers, of diabetes, and of cholera deaths. Years in brackets indicate the period of data collection.



Women smoking (1998–2003)



Type 1 and 2 diabetes prevalence for people over 15 (2001)



Cholera deaths (2004)