Graduate Studies in Health Policy
University of Sydney
Menzies Centre for Health Policy

Presented by
Carmen Huckel Schneider
Andrew Wilson
Master of Health Policy

- 2 – year full time
- 8 Units of Study

- Taught by staff at the Menzies Centre for Health Policy

- Mix of on-campus 2-day workshops plus online learning

- Grad Cert and Grad Dip options available
Is this program for you?

– The is designed to increase capacity and value of anyone working – or planning to work – in health services, policymaking, leadership or health policy research.

– It builds the skills in policy analysis essential for shaping the health systems of the future.

– Upon completion of this course, you will be equipped to work at a high level across the health sector.
Menzies Centre for Health Policy

- Leading independent scholarly voice on health policy in Australia.

- Brings together scholars and practitioners with broad expertise in health policy, economics and health services research to produce high-quality analyses of current health policy issues, deliver annual public seminars, education programs and undertake comprehensive research projects.
By the end of the Master of Health Policy…

– A comprehensive and practical understanding of health systems and the policy making process
– Be confident in the critical use of evidence
– Be practiced in policy analysis, evaluation and research, including economic evaluation
– Understand health financing and budgets
– Have a theoretical and practical understanding of power, politics and agenda setting
– Have the tools and skills able to develop and implement new policies
– Have professional confidence to work across the health sector in innovation and leadership
## Masters Program

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<th>Course</th>
<th>Description</th>
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<td>5000</td>
<td>Introduction to health policy</td>
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<td>5001</td>
<td>Economics and finance for health policy</td>
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<td>5003</td>
<td>Analysing health policy</td>
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<td>Health policy project capstone</td>
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**Elective**
- 6 – credit point elective

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Admission requirements

Direct entry to the Master of Health Policy
(a) a bachelor’s degree with first or second class honours from the University of Sydney, or equivalent qualification and a minimum of 1 year of work experience in a health or policy related field; or

(b) completion of the requirements of the embedded graduate certificate

Entry to the embedded graduate certificate
(a) a bachelor's degree from the University of Sydney, or equivalent qualification, and a minimum of 1 year of professional work experience in health or in a policy-related area;

or

(b) A minimum of 5 years professional work experience in a policy related field or pass a preliminary examination(s) as prescribed by the Faculty.
Some of our core units
Introduction to Health Policy

– Aims to develop a critical and comparative understanding of the history, theory and practice of health policy.
– Gives an overview of the political choices and frameworks - national and global - that shape policymaking.
Economics & Finance for Health Policy

- Uses the main concepts and analytical methods of health economics, political economy and finance to examine the workings of health systems in Australia and comparable countries.

<table>
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<th>Health economics</th>
<th>Finance and budgeting</th>
<th>Political economy</th>
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| • Economics fundamentals  
  • Economic evaluation  | • Funding health systems  
  • Analyzing budgets  
  • Universal health coverage  | • Trade policy and health  
  • Financial policy instruments  |
Analysing Health Policy

— What is policy success? (Hint: not just health outcomes)

• Undertaking policy research and analysis.

• Multidisciplinary approach to familiarise students with fundamental frameworks and methodologies that can be applied to analyse policy from public health, social and political sciences, public policy and history.

<table>
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<th>McDonnell: Three Dimensions of policy success</th>
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<td><strong>Process Success</strong></td>
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<tr>
<td>Preserving government policy goals and instruments</td>
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<td>Conferring legitimacy on the policy</td>
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<td>Building a sustainable coalition</td>
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<td>Symbolizing innovation and influence</td>
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Global Health Policy

- Equip students with the knowledge and skills to identify and articulate political and policy processes at the global level.
- Learn about organisations, institutions and actors involved in global health policy, and utilize strategies for influencing policy making at the global level.
Evidence into policy and practice

– Build skills for making an evidence based case for change and implementing evidence based policy.
– Critically appraise evidence for policy
– Learn about the links, barriers, limits and opportunities for getting evidence into policy and practice

**What is the problem?**

What is wanted?
Preferences

What works?
Experiments

For whom?

What has been done before?

Under what circumstances?

Applied research

**What is the solution?**

What is likely?
Statistical Models

What is feasible?
Economics

Ethics

What is acceptable?

Cost-benefit, cost-utility and cost effectiveness analysis

Dialectic Justification

Public consultation; surveys; debate; historical analysis

Trials; study replication

Description; case studies; evaluation; data mining; comparative analysis

Linear and logical regression

Linear and logical regression

Linear and logical regression

Linear and logical regression
Health Policy Project

— An independent research project and develop a complete policy for implementation in the real world.
Contact for more information

- Carmen Huckel Schneider
  Director, Master of Health Policy

- Carmen.huckelschneider@Sydney.edu.au

- Definitive web source of information
- Menzies Centre for Health Policy Website
Gain a critical perspective on how health systems operate and the forces that shape the health policy environment.

Our Health Policy program is practical and industry focused. We provide our students with the ability to work closely with professionals in the private, public and non-government sectors to gain an understanding of roles in the health system and build professional networks.

You will be exposed to national and international health policy networks through flexible, face-to-face learning and blended delivery. Upon completion of this course, you will be equipped to work at a high level across a range of areas in the health sector.

**Why study health policy with us?**
- This course equips students to work at a high level across the health sector, with exposure to high-level national and international health policy networks.
- Our program is industry-focused, so our students work closely with policy professionals in the private, public and non-government sectors, to gain an understanding of roles in the health system and build professional networks, and
- Flexible study options are available with face-to-face and blended delivery, designed to suit busy professionals.

"My fellow students come from such diverse backgrounds. This has enriched our learning from each other as well as from our lecturers. I've now got greater insight and stronger skills to understand how health policy affects different sectors of health, and how these sectors can work better together to affect more positive change."

**CONTACT US**

Email Dr Carmen Huckle-Schneider, Course Director
Master of Health Policy: Why?
Its More than shaking and baking!

Presented by
Professor Andrew Wilson
What is good health policy?
The Basis of Policy

- Values
- Ideology
- Politics
- Evidence

  - Not usually the main influence on policy, but worth fighting for!
Components For Effective Health Care Policy

Health Care Governance

Supportive Payment
Regulatory Monitoring Environment

Supportive Organisational Structures and Systems

High Performing Patient Centred Teams

Outcomes Safe Effective Efficient Timely Equitable
Better Health Policy

Where Evidence meets Kevin, Julia, Tony and now Malcolm!
Health Policy and Research

☐ Decisions will be made, regardless of the quality of the supporting evidence
☐ Some evidence is better than no evidence
☐ Too little evidence can be misleading (bias, not the full picture)
☐ Evidence can always be used selectively
☐ Epidemiology can provide criteria for critical appraisal of the relevant evidence
THE REAL WORLD?
The Wilson Principles

☐ Decisions will be made! How do we best inform them?
☐ Some voices are heard more then others! Whose carrying your messages?
☐ The Government of the Day is the Government. There are options for all situations.
☐ Evidence and Information are Critical but not Sufficient.
☐ Timing is an essence of influence!

Wilson A. J Bleeding Obvious
2022
The Challenges of Health Policy
Challenges in Health Policy Development in Australia

- 6 states, 2 territories, 1 commonwealth (+ local) govts
- Public, insurance and personal funding
- Public, private, non-government providers
- Multiple vested interested parties including professional groups, specific condition/disease interest lobby groups, health industry suppliers and their lobbyists
- Communities for non-health related reasons
Drivers for Change: International Context

- Poverty and Insecurity
- Violence
- Population Ageing
- Changing morbidity particularly growth in chronic disease and HIV
- Advances in Medical Technology
- Inequities in health outcomes and access to basic health services
Drivers for Change

- Medical Success and Increased Care
- Population ageing (increased life expectancy is a win, not a loss).
- Strength of particular interest groups
- Health services are geared towards treating acute illness, yet chronic diseases account for 80% of the burden of disease.
- Community and Patient Expectations
- Health workforce issues (distribution, skills mix, 24/7).
- Cost of health care and health technology.
Ongoing National Issues in Health Policy

- Lack of national informed discussion on what is expected from our public health system?
  - What should be subsidised?
  - When should individuals contribute additionally for health care?
  - What is the role of private health insurance?
  - Are there other models of funding that would deliver the same or better benefits?
  - What value do we place on health benefits? (what does the community understand by cost-effectiveness?)
Universal Issues in Health Policy

– Is health and health care a human rights issue?
– What is universal health care?
– How do you fund universal health care, for example, when a country doesn’t have effective taxation systems?
– How much should be spent on health cf with other services which may also contribute to health eg education, housing?
– How do you address inequity in health and health care?
Ongoing Issues in Health Policy

- Non health care determinants of health
  - Environment
  - Education
  - Housing
- Promoting health
  - individual and collective responsibilities
  - ‘nanny state’
- Emerging communicable disease
  - Zika virus
  - Ebole
Evidence and Policy
The “half-life” of knowledge

Of 100 systematic reviews:
Median time to a change that would effect clinical decisions was 5.5 years.
7 out of date when published


The immediate decrease in survival at time zero reflects the 7 systematic reviews for which signals for updating had already occurred at the time of publication. The low number of reviews at risk after 10 years reflects the fact that the sample spanned 1995 to 2005 and censoring occurred on 1 September 2006. Thus, only reviews published before September 1996 and having no signals for updating could have more than 10 years of observation.
Evidence Relevance

“Different types of policy and different stages in the process call for different types of evidence.

Contrast, for example, the kinds of evidence that are available (or can be sought) in the case of structural change in the NHS, on the one hand, and coping with new phenomena such as AIDS or BSE, on the other hand.

In the former case, little or no scientific evidence in the strict sense is available: at best, there will be inferential knowledge drawn from previous attempts to change the structure of the NHS or from the experience of other countries.”

From efficacy to community and equity effectiveness

From Efficacy to Effectiveness

Efficacy 80%
→ X Access x 80%
→ X Targeting Accuracy x 80%
→ X Provider Compliance x 75%
→ X Consumer Adherence x 75%

Effectiveness
Equity Effectiveness

17. August 2011

29%
Pragmatics of Policy Making
Research Informed Policy Making: An Ideal World

- Ideological Inspiration
- Evidence
- Experience
- Research
- New policy
- Common sense
- Old Policy
- Change in circumstances
- Regular sense
- New situation

Change in circumstances
But Real Policy is Messy!
Policy Opportunities
Competing Interests & Concerns
Why a Masters of Health Policy?

– Develop an analytic framework that is applicable regardless of the health (or broader) issue
– Understand evidence use in real world including finding and applying the relevant evidence in a timely way
– Communicate policy options in a succinct and informative way
– Understand the major health policy issues nationally and globally
Thank-You for Participating

Questions?