OVERVIEW

Because the United States is the only industrialized nation without universal health care, 46 million Americans are without health insurance, the primary resource necessary to access health care. Millions more are underinsured, and health disparities exist in low-income, minority and marginalized communities, and for people with chronic illness, disabilities, and injury. These disparities belie the notion that the United States offers the “best health care in the world.”

In a representative democracy, advocacy is the channel for consumers to influence the outcome of important policy decisions. Concepts of community health and health care, distinct from those of public health, occupy an important place in the discussion of how to resolve many of the issues confronting the equitable and socially responsible distribution of health care resources. Yet, the voice of the marginalized, disenfranchised and vulnerable, must compete with resource rich interest groups to make its voice heard by policy decision-makers. Additionally, science and social justice may be trumped by politics and ideology.

COURSE OBJECTIVES

1. Understand the complex ideological, legal and often discriminatory relationship between public health regulation and individual rights; between the common good and personal behavior.

2. Become fluent with the theoretical and practical issues of health care reform.

3. Become familiar with regulatory, legislative and budgetary processes, the role of political ideology in policy decision-making, and how policy can be influenced and created through other than legislative means.
4. Understand and practice the skills set used by community health advocates to successfully wage public awareness, issue and service campaigns, including issues of community organizing, collaboration and coalition formation and sustainability, principles of effective communications, and strategic campaign development.

COURSE REQUIREMENTS:

Class will be interactive and discussions will be based on the readings assigned for that class. Perspectives on the organization, financing and delivery of health care are dependent on the responsibilities and ideology of the stakeholder. Discussions will explore topics for which there is no “correct” answer. As future policy-makers, consumer advocates and providers of health and health related care it is important that you are able to convincingly convey and support your position. Students are expected to fully participate in class discussion. Class participation will be 1/3 of your grade, and a student who is absent from more than three classes will be deemed to have failed class participation.

Analytical skills are essential for advocacy. Reading assignments explore current topics in health care and are selected to help develop analytical capacity, critical thinking, and problem resolution. Additional readings may be assigned during the semester. Research is an important skill for advocates, and many of the readings are available on the internet. Other readings are available in journals. It is to your advantage to become familiar with methods to locate a variety of information resources and understand how to weave together interdisciplinary materials for effective policy analysis.

Minutes are often misunderstood as an administrative responsibility. They are both professional, can serve personal or agency agenda, and can be a political statement. Students will have the opportunity to prepare minutes which will be disseminated and reviewed at the following class session. Note-taking is therefore unnecessary. Calendars of community and governmental meetings will be disseminated each month. Students are encouraged to attend meetings and report their impressions to the class. Because of scheduling conflicts and competing priorities, attending community meetings is not a requirement, but does create a favorable impression with the instructor.

The mid-term exam is a take home exam for which students will receive an article or book chapter to read, summarize, and analyze. Students will brief the class on their assigned reading. Grades will take into account the substantive information in the brief. Presentations will used to discuss effective public speaking, but will not be graded. The final exam is a take home assignment. It will be distributed during the final class session and will be due via email one week later. The mid-term and final exams will each be 1/3 of your grade. **You must be in class to receive the exams. Late assignments will not be**
accepted. Students are expected to adhere to the University statement on academic integrity.

Any student attending NYU who needs an accommodation due to a chronic, psychological, visual, mobility and/or learning disability, or is Deaf or Hard of Hearing should register with the Moses Center for Students with Disabilities at 212 998-4980, 240 Greene Street, www.nyu.edu/csd.

CLASS RULES:

1- Please arrive on time.
2- Do not interrupt the speaker.
3- Be certain to support your viewpoint.
4- Please limit yourself to beverages.
5- Please turn off your cell phones and blackberries.
I. A Framework for Community Health Advocacy:

1: Sept 4  Health Care Financing and Delivery: A Broken System


3: Sept 11  The Regulation of Individual Behavior: State Interests and Individual Rights


2: Sept 18  Community Health or Public Health: Public Opinion and AIDS Policy


Bayer, Ronald, and Fairchild, Amy. “Changing the Paradigm for HIV Testing-The End of

Sternberg, Steve. “CDC Recommends AIDS Tests For Most People; Health Organization Wants Practice To Be Included In Routine Medical Maintenance.” USA TODAY September 22, 2006.


4: Sept 25 Administrative Procedure and Due Process: Balancing Deference to Public Health Authority and Protecting Individual Rights


Altman Lawrence K. “Traveler's TB Not as Severe As Health Officials Thought” NY Times July 4, 2007 p 11

5: Oct 2 Students will be allowed to use class time to attend APHA Film Festival.

II. Politics and Policy

6: Oct 9 The Community Health Agenda


Mid-term assignments will be distributed. Papers and presentations on assignments are due next class, Oct 16.
7: Oct 16  Health Policy and Reform: Improving Health Care Access and Outcomes
Briefings from Mid Term Assignments

8: Oct 23  Ideology, Influence and Science

U.S. House of Representatives Committee on Government Reform- Minority

U.S. House of Representatives, Committee on Government Reform- Minority Staff
“The Content of Federally Funded Abstinence-Only Education Programs.”
December 2004.


http://www.washingtonpost.com/wp/dyn/content/article/2005/08/31/AR2005083101271_pdf


Birnbaum, Jeffery, H. “A Growing Wariness About Money in Politics.”

9: Oct 30  A Legislative Primer: Legislation and Budgets

Coven, Martha and Kogan, Richard. Introduction to the Federal Budget Process. Center

February, 2006.
http://www.kaiseredu.org/tutorials/federalbudget/HPandFederalBudget.ppt

NYC Council. About the Budget Process.
http://www.nyccouncil.info/tools/about_budget.cfm

Independent Budget Office. “The Road to Adopting New York City’s Budget.”
http://www.ibo.nyc.ny.us/IBORoadmap.pdf
III. The Advocacy Toolbox

10: Nov 6 Developing a Strategic Campaign


11: Nov 13 Working Together: Community Organizing, Partnerships and Collaboration

Chap 2: The Fundamentals of Direct Action Organizing
Chap 3: Choosing an Issue
Chap 9: Building and Joining Coalitions
Chap 12: Planning and Facilitating Meetings
Chap 11: Developing Leadership

12: Nov 20 Targeting Audiences: Writing Good Stories, Effective Letters and Reports.

And

13: Nov 27 Using the Media: Crafting and Delivering Messages


14: Dec 4 How to Win Friends and Influence People: Effective Lobbying

Readings to be assigned.

Final exam will be distributed. Exams will be due by 9 am December 12 via email to: dberman@cfhny.org