



ACADEMIC SERVICES

MODULE SPECIFICATION

Part 1: Basic Data					
Module Title	Public Health Economics				
Module Code	UZVSMP-15-M	Level	M	Version	1
Owning Faculty	Health & Applied Sciences	Field	Health Community & Policy Studies		
Contributes towards	MSc Public Health				
UWE Credit Rating	15	ECTS Credit Rating	7.5	Module Type	Project
Pre-requisites	None		Co- Requisites	None	
Excluded Combinations	Health Economics UZVS58-10-M		Module Entry requirements	None	
Valid From	September 2013		Valid to		
CAP Approval Date	May 29 th 2013				

Part 2: Learning and Teaching	
Learning Outcomes	<p>On successful completion of this module students will be able to:</p> <ol style="list-style-type: none"> 1. Understand the ethical basis of the way of thinking and the tools and techniques of economic approaches and the limitations of economic evidence, as a basis for formulating policy and public health guidance. 2. Understand and assess alternative theoretical approaches in health economic practice. 3. Critically examine the trade-off between efficiency and equity in the organisation of international health systems and the provision of public health programmes. 4. Reflect upon and critically appraise the validity and reliability of economic evidence for primary prevention interventions in the built environment where environmental factors are important to behaviour change. 5. Critically examine approaches to estimating economic efficiency where social capital and community assets are important. 6. Reflect upon the factors that allow inequalities in the distribution of health and health care to persist and critically examine prioritisation and commissioning of public health interventions in communities.
Syllabus Outline	<ul style="list-style-type: none"> • The ethical perspective of health economics and its relationship to the allocation and distribution of resources in public health. • The importance of context in public health interventions and community groups, the nature of the relationship between public health interventions and outcomes and the factors influencing behaviour change. • Examination of the welfarist, extra welfarist and capability models within health

	<p>economics and understand the alternative approaches to assessing cost effectiveness.</p> <ul style="list-style-type: none"> • Inequalities in the distribution of health and health care – social and physical environments, household factors and individual motivation. Marmot Review. • Trade-off between equity and efficiency in resource allocation for primary prevention, health systems and health policy – legislation, regulation, nudging population intervention and targeted intervention to improve population health. • The nature of the evidence base for economic analysis of public health programmes. • Measures of economic efficiency in the allocation of resources for public health – cost-benefit ratios, cost per QALY, ICER, Social Return on Investment. • Commissioning public health programmes and services. Priority setting, rationing and decision making in public health. • Public health guidance – behaviour change interventions effectiveness and cost-effectiveness. • Spatial planning and health: effectiveness and cost-effectiveness of including health in built environment planning.
Contact Hours	There will be a total of 30 hours of contact time delivered through lectures, seminars and on-line activities
Teaching and Learning Methods	<p>Teaching & Learning Strategy.</p> <p>This project module utilizes a blended learning approach, embedding structured learning from lectures and workshops into formative independent learning based on reading, use of online support materials and tasks available via Blackboard. Technology Enhanced Learning supplements all taught sessions, where students are provided with access to essential and supplementary learning materials via Blackboard. Module support is provided via email and via Blackboard. Podcasts or video are used to supplement lecture input. During the module, students maintain a reflective diary of observations for each session connected with scheduled and independent learning provided via Blackboard. It is expected that for each hour spent in workshops students spend two hours in independent learning for their project assignment.</p>
Reading Strategy	<p>Core and further readings</p> <p>Students will be directed to this reading which is available electronically. Essential texts will be clearly indicated and digitised and provided via Blackboard wherever possible. Students will be expected to read more widely by identifying relevant material using the Module Guide, the Library Catalogue and a variety of bibliographic and full text databases and Internet resources. Many resources can be accessed remotely. The purpose of this wider reading is to ensure students are familiar with current research, classic works and material specific to their interests from the academic literature.</p> <p>Key references will be provided on blackboard before each session to enable students to start thinking about the particular topics in the context of learning from previous sessions before attendance. Learning from readings will be used during the sessions. These readings will be complemented by the indicative reading below.</p> <p>Access and skills</p> <p>Additional support is available online via the UWE Library Services web pages, including interactive tutorials on literature searching skills and the use of electronic library resources. Workshops are also offered by the library. These can be accessed via the UWE Library Services web pages http://www1.uwe.ac.uk/library/.</p> <p>Indicative reading list</p> <p>The following indicative reading list is offered to provide validation panels/accrediting bodies with an indication of the type and level of information students may be expected to consult. As such, its currency may wane during the life span of the module specification. However, as indicated above, <i>current</i> advice on readings will be available via the Module Guide.</p>
Indicative	Barendregt, J. (2006) Economics and Public Health: An Arranged Marriage. <i>European</i>

Reading List	<p><i>Journal of Public Health</i>. 17(2) p.124.</p> <p>Bevan, G. Helderman, J. and Wilsford, D. (2010) Changing Choices in Healthcare: Implications for Equity, Efficiency and Cost. <i>Health Economics Policy and Law</i>, 5(3), pp. 251-267.</p> <p>Chalkidou, K., Culyer, A., Naidoo, B. and Littlejohns, P. (2008) Cost-effective Public Health Guidance: Asking Questions from the Decision-maker's Viewpoint. <i>Health Economics</i>. 17(3) pp. 441-448.</p> <p>Coast, J. Smith, R. and Lorgelly, P. (2008) Should the Capability Approach be Applied in Health Economics? <i>Health Economics</i>, 17 (6) pp. 667-670.</p> <p>Donaldson, C., Gerard, K., Mitton, C., Jan, S. and Wiseman, V. (2004) <i>Economics of Health Care Financing: the Visible Hand</i>. 2nd ed. London: Palgrave Macmillan</p> <p>Great Britain, Cabinet Office (2012) <i>A Guide to Social Return on Investment 2012</i>, London: Cabinet Office.</p> <p>Kelly, M., McDaid, D., Ludbrook, A., Powell, J. (2005) <i>Economic Appraisal of Public Health Interventions</i>. [online] Health Development Agency. Available from: http://www.cawt.com/Site/11/Documents/Publications/Population%20Health/Economic%20of%20Health%20Improvement/Economic_appraisal_of_public_health_interventions.pdf [Accessed 8 March 2012].</p> <p>Lorgelly, P., Lawson, K., Fenwick, E., Briggs, A. (2010) Outcome Measures in Economic Evaluations of Public Health Interventions: A Role for the Capacity Approach? <i>International Journal of Environmental Research and Public Health</i>. 7(5) pp.2274-2289.</p> <p>Mooney, G. (2012) <i>The Health of Nations: Towards a New Political Economy</i> [online] London: Zedbooks. [Accessed 8 March 2013].</p> <p>Morris, S., Devlin, N. and Parkin, D. (2012) <i>Economic Analysis in Health Care</i>. Chichester: John Wiley.</p> <p>Ogilvie, D. Bull, F. Powell, J.E. Cooper, A. Mutrie, N. Preston, J. Rutter, H. (2011) An applied ecological framework for evaluating infrastructure to promote walking and cycling : the iConnect study. <i>American Journal of Public Health</i>. 101(3). pp. 473-481.</p> <p>Powell, J. E. (2007) Health economics in public health. In (Eds) Orme, J. Powell, J. Taylor, P. & Grey, M. (2007) <i>Public Health in the 21st century: new perspectives on policy participation & practice</i>, Maidenhead: Open University Press.</p> <p>Sassi F. Archard L. Le Grand J. Equity and health care economic evaluation, <i>Health Technology Assessment</i>, 2001;5(3):1-138.</p> <p>Wright, J. (2001) Assessing Health Needs. Pencheon, D. Guest, C. Melzer, D. Muir Gray, J.A. eds. (2001) <i>Oxford Handbook of Public Health Practice</i>. Oxford: Oxford University Press.</p>
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Part 3: Assessment	
Assessment Strategy	<p>Students are required to undertake a project, which involves searching the economic evidence base to locate a small number of published economic evaluations of interventions in a chosen area of primary prevention. They are required to critically review and summarise the selected papers and construct a generic argument relating to how decision makers could allocate resources for health improvement and reduce health inequalities in that area of primary prevention. Project plans are submitted to the module team for feedback before students proceed with their project assignment. The final project submission comprises a systematic review of economic evidence from the chosen area of primary prevention. This assessment assesses all the module learning outcomes. The assessment details are published in the module handbook and on Blackboard at the start of the module.</p>

Identify final assessment component and element	Project Component A 100%
First Sit	
Component A	Element weighting
Project (3000 words)	100%

Resit (further attendance at taught classes is not required)	
Component A	Element weighting
Project (3000 words)	100%
If a student is permitted an EXCEPTIONAL RETAKE of the module the assessment will be that indicated by the Module Description at the time that retake commences.	