

Syllabus Module 221

Module # 221	Social and behavioral sciences: Aging Societies and Public Health Policies																				
UE coordinator	Nicolas Sirven (PhD), Full Professor of Economics, EHESP. E-mail: nicolas.sirven@ehesp.fr																				
Dates	From January 25 to 29, 2021																				
Credits/ECTS	3 (1 ECTS = 25h student's work)																				
Duration	Number of days: 5																				
Module description	<p>This module gives students insights into advanced issues related to demographic aging and the way our modern societies develop public policies to cope with "the threat of aging." The consequences of aging and the related public health policies are analyzed from a health economics perspective. The role of economics in public health is major and understanding its key concepts help public health professionals. A special focus on the French health system is provided.</p> <p>Each session is divided in two. A lecture takes place in the morning (3h), where basic concepts, theoretical models, and the empirical literature related to policy evaluation are presented. In general, a research article from the speaker will be presented. Discussion with students is an essential part of the lecture. The afternoon is dedicated to applied work (3h) using Stata©. Basic econometrics models in relation to the lecture are explained to students who will use the datasets provided to carry out their own analysis and interpretation of the results.</p>																				
Prerequisites	Basic knowledge in economics and health & social policy																				
Course learning objectives	<p>Learning objectives: <i>at the end of the module, the students should be able to:</i></p> <ul style="list-style-type: none"> • Make a critical appraisal of the "threat of ageing" for modern societies • Understand the specific features of the (French) health system from an economics perspective • Handle health economics issues, and key concepts and their measures used in public health policy • Relate to them in order to build more insightful public health decisions • Use datasets and basic econometric models for health economics (using Stata©) • Select relevant research articles, understand the methodology used and critically appraise them • Build public health policy argumentation based on scientific (quantitative) evidence 																				
UE Structure details of sessions title/speaker/date/duration	<p>Each of the five days of teaching is dedicated to a single session. Each session is divided in morning lecture (3h) and afternoon applied work with Stata© (3h).</p> <ul style="list-style-type: none"> • Session 1. Aging and Health Care Expenditures – Fear of the Grey Revolution • Session 2. Frailty – The Missing Link? • Session 3. What is Prevention? – An Economist's Perspective • Session 4. How to Care for Those Who Don't Care? – Some Prevention Programs in France • Session 5. The Last Resort – Who Shall Pay for LTC? 																				
Course requirement	Students are expected to attend all Sessions. Applied work sessions of the afternoon require students to use a computer with an updated version of Stata©.																				
Grading and assessment	<p>Individual in class assignment and homework:</p> <p>Details assignments:</p> <table border="1" style="margin-left: 40px;"> <thead> <tr> <th>#</th> <th>Assignment topic</th> <th>%</th> <th>Type</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Health Care Expenditures</td> <td>25</td> <td>.Do File</td> </tr> <tr> <td>2</td> <td>The Determinants of Frailty</td> <td>25</td> <td>.Do File</td> </tr> <tr> <td>3</td> <td>The Determinants of Prevention</td> <td>25</td> <td>.Do File</td> </tr> <tr> <td>4</td> <td>Health Program Evaluation</td> <td>25</td> <td>.Do File</td> </tr> </tbody> </table>	#	Assignment topic	%	Type	1	Health Care Expenditures	25	.Do File	2	The Determinants of Frailty	25	.Do File	3	The Determinants of Prevention	25	.Do File	4	Health Program Evaluation	25	.Do File
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4	Health Program Evaluation	25	.Do File																		

Location	EHESP-MSH Avenue George Sand, La Plaine St Denis Greater Paris
Readings	<p>Articles (on electronic reserve):</p> <p><u>Articles available on REAL website</u></p> <p>Augé, E. & Sirven, N. (2020). 'Must-trade and Catch-up': Do the self-employed under-invest in their health? Mimeo.</p> <p>Carrino, L., Orso, C. E., & Pasini, G. (2018). Demand of long-term care and benefit eligibility across European countries. <i>Health Economics</i>, 27(8), 1175-1188.</p> <p>Dormont, B., Grignon, M., & Huber, H. (2006). Health expenditure growth: reassessing the threat of ageing. <i>Health Economics</i>, 15(9), 947-963.</p> <p>Garrouste, C., Paraponaris, A. & Sirven, N. (2020). When the Going Gets Tough, the Tough Get Going? Health and Self-employment in Europe. Mimeo.</p> <p>Jusot, F., Or, Z., & Sirven, N. (2012). Variations in Preventive Care Utilisation in Europe. <i>European Journal of Ageing</i>, 9(1), 15-25.</p> <p>Santos-Eggimann, B., & Sirven, N. (2016). Screening for frailty: older populations and older individuals. <i>Public Health Reviews</i>, 37(1), 1-16.</p> <p>Sirven N, & Or Z. (2011). Disparities in Regular Health Care Utilisation in Europe. in Börsch-Supan A, Brandt M, Hank K, & Schröder M. (Eds) <i>The Individual and the Welfare State. Life Histories in Europe</i>, Springer: Heidelberg: 241-254.</p> <p>Sirven, N., & Rapp, T. (2017a). The cost of frailty in France. <i>The European Journal of Health Economics</i>, 18(2), 243-253.</p> <p>Sirven, N., & Rapp, T. (2017b). The dynamics of hospital use among older people evidence for Europe using SHARE data. <i>Health Services Research</i>, 52(3), 1168-1184.</p> <p>Sirven, N., Dumontet, M., & Rapp, T. (2020). The dynamics of frailty and change in socio-economic conditions: evidence for the 65+ in Europe. <i>European Journal of Public Health</i>. Forthcoming.</p> <p><u>Other resources</u></p> <p>Baumol, W.J. et al. (2013). <i>The Cost Disease – Why Computers get Cheaper and Health Care doesn't</i>. Yale University Press</p> <p>Chevreur, K., Brigham, B., Durand-Zaleski, I., & Hernández-Quevedo, C. (2015). France: Health system review. <i>Health systems in transition</i>, (17/3).</p> <p>Norton, E. C. (2000). Long-term care. <i>Handbook of health economics</i>, 1, 955-994.</p>
Course policy	<p>Attendance & punctuality</p> <p>Regular and punctual class attendance is a prerequisite for receiving credit in a course. Students are expected to attend each class. Attendance will be taken at each class. The obligations of attendance and punctuality cover every aspect of the course: - lectures, conferences, group projects, assessments, examinations, as described in EHESP Academic Regulations http://mph.ehesp.fr EHESP Academic Regulation Article. 3). If students are not able to make it to class, they are required to send an email to the instructor and to the MPH program coordinating team explaining their absence prior to the scheduled class date. All supporting documents are provided to the end-of-year panel. Students who miss class are responsible for content. Any student who misses a class has the responsibility for obtaining copies of notes, handouts and assignments. If additional assistance is still necessary, an appointment should be scheduled with the instructor. Class time is not to be used to go over material with students who have missed class.</p> <p>Lateness</p> <p>Students who are more than 10 minutes late may be denied access to a class. Repeated late arrivals may be counted as absences (See http://mph.ehesp.fr EHESP Academic Regulation Article. 3 Attendance & Punctuality)</p>

	<p>Maximum absences authorized & penalty otherwise</p> <p>Above 20% of absences will be designated a fail for a given class. The students will be entitled to be reassessed in any failed component(s). If they undertake a reassessment or they retake a module this means that they cannot normally obtain more than the minimum pass mark (i.e. 10 out of 20)</p> <p>Exceptional circumstances</p> <p>Absence from any examination or test, or late submission of assignments due to illness, psychological problems, or exceptional personal reasons must be justified; otherwise, students will be penalized, as above mentioned. Students must directly notify their professor or the MPH academic secretariat before the exam or before the assignment deadline. Before accepting the student's justification, the professor or the MPH academic secretariat has the right to request either a certificate from the attending physician or from a psychologist, or from any other relevant person (See http://mph.ehesp.fr EHESP Academic Regulation Article 4 Examinations).</p> <p>Courtesy</p> <p><u>All cell phones/pages MUST be turned off during class time.</u> Students are required to conduct themselves according to professional standards, eating during class time is not permitted during class time, such as course or group work.</p>
<p>Valuing diversity</p>	<p>Diversity enriches learning. It requires an atmosphere of inclusion and tolerance, which oftentimes challenges our own closely-held ideas, as well as our personal comfort zones. The results, however, create a sense of community and promote excellence in the learning environment. This class will follow principles of inclusion, respect, tolerance, and acceptance that support the values of diversity. Diversity includes consideration of: (1) life experiences, including type, variety, uniqueness, duration, personal values, political viewpoints, and intensity; and (2) factors related to "diversity of presence," including, among others, age, economic circumstances, ethnic identification, family educational attainment, disability, gender, geographic origin, maturity, race, religion, sexual orientation and social position.</p>
<p>Course evaluation</p>	<p>EHESP requests that you complete a course evaluation at the end of the school year. Your responses will be anonymous, with feedback provided in the aggregate. Open-ended comments will be shared with instructors, but not identified with individual students. Your participation in course evaluation is an expectation, since providing constructive feedback is a professional obligation. Feedback is critical, moreover, to improving the quality of our courses, as well as for instructor assessment.</p>

Session 1	Aging and Health Care Expenditures – Fear of the Grey Revolution
Speakers	Nicolas Sirven (PhD), Full Professor of Economics, EHESP. E-mail: nicolas.sirven@ehesp.fr
Session Outlines	<ul style="list-style-type: none"> • Health Care Expenditures (HCE): Concepts & Measures • The determinants of HCE • From the “threat of aging” to the “red herring” • Another reason for the rise in HCE: Baumol’s Cost Disease • Applied work: The Cost Disease in 20 OECD Countries
Learning Objectives	<p>At the end of the session, students will be able to:</p> <ul style="list-style-type: none"> - Identify the main drivers of HCE - Figure out the implications of ageing on HCE - Demonstrate the economic mechanisms at play and how they differ from ‘common sense’ - Use different databases and estimates the determinants of HCE - Critically assess the results obtained
Duration	6 hours
Training methods	Lecture (3h) In class applications with Stata© (3h)
Reading	<p>Baumol, W.J. et al. (2013). <i>The Cost Disease – Why Computers get Cheaper and Health Care doesn't</i>. Yale University Press</p> <p>Dormont, B., Grignon, M., & Huber, H. (2006). Health expenditure growth: reassessing the threat of ageing. <i>Health Economics</i>, 15(9), 947-963.</p> <p>Students are expected to find additional readings on Google Scholar to complete their applied work.</p>
Validation	An individual assignment will be given during the afternoon session. Students will have to review published literature and use the provided dataset on a topic related to the morning lecture. While students are encouraged to work cooperatively in the completion of assigned tasks, all reports should reflect individual efforts. At the end of the session, the students are expected to provide a .Do File (Stata©) with their personal work to the speaker.

Session 2	Frailty – The Missing Link?
Speakers	Nicolas Sirven (PhD), Full Professor of Economics, EHESP. E-mail: nicolas.sirven@ehesp.fr
Session Outlines	<ul style="list-style-type: none"> • Frailty: Concepts & Measures • The Cost of Frailty in France • The Determinants of Frailty • Assessing Frailty in the General Population in France – La grille “FRAGIRE” • Social Prevention Programs for Frail Individuals in France • Applied work: The Consequences of Frailty on Individual Health
Learning Objectives	<p>At the end of the session, students will be able to:</p> <ul style="list-style-type: none"> - Evaluate the respective merits of various measures of frailty - Identify the main drivers of frailty in the general population - Figure out the implications of frailty on HCE - Compare the content of various social policies of old age dependency prevention - Use different databases and estimates the consequence of frailty on future health outcomes - Critically assess the results obtained
Duration	6 hours
Training methods	Lecture (3h) In class applications with Stata© (3h)
Reading	<p>Santos-Eggimann, B., & Sirven, N. (2016). Screening for frailty: older populations and older individuals. <i>Public Health Reviews</i>, 37(1), 1-16.</p> <p>Sirven, N., Dumontet, M., & Rapp, T. (2020). The dynamics of frailty and change in socio-economic conditions: evidence for the 65+ in Europe. <i>European Journal of Public Health</i>. Forthcoming.</p> <p>Sirven, N., & Rapp, T. (2017a). The cost of frailty in France. <i>The European Journal of Health Economics</i>, 18(2), 243-253.</p> <p>Sirven, N., & Rapp, T. (2017b). The dynamics of hospital use among older people: evidence for Europe using SHARE data. <i>Health Services Research</i>, 52(3), 1168-1184.</p> <p>Students are expected to find additional readings on Google Scholar to complete their applied work.</p>
Validation	<p>An individual assignment will be given during the afternoon session. Students will have to review published literature and use the provided dataset on a topic related to the morning lecture. While students are encouraged to work cooperatively in the completion of assigned tasks, all reports should reflect individual efforts. At the end of the session, the students are expected to provide a .Do File (Stata©) with their personal work to the speaker.</p>

Session 3	What is Prevention? – An Economist's Perspective
Speakers	Nicolas Sirven (PhD), Full Professor of Economics, EHESP. E-mail: nicolas.sirven@ehesp.fr
Session Outlines	<ul style="list-style-type: none"> • Concepts and Methods • The Demand for Health: Grossman's Health Capital Model • Health Insurance vs Prevention? • Is an Ounce of Prevention Really Worth? • Applied work: What Prevents Prevention?
Learning Objectives	<p>At the end of the session, students will be able to:</p> <ul style="list-style-type: none"> - Apply economic reasoning to individual health decisions and public health policies design - Identify the key economic mechanisms at play for in the demand for health and healthcare - Figure out the implications of prevention programs for specific population (e.g. older people) - Use different databases and estimate the determinants of prevention - Critically assess the results obtained
Duration	6 hours
Training methods	Lecture (3h) In class applications with Stata© (3h)
Reading	<p>Jusot, F., Or, Z., & Sirven, N. (2012). Variations in Preventive Care Utilisation in Europe. <i>European Journal of Ageing</i>, 9(1), 15-25.</p> <p>Sirven N, & Or Z. (2011). Disparities in Regular Health Care Utilisation in Europe. in Börsch-Supan A, Brandt M, Hank K, & Schröder M. (Eds) <i>The Individual and the Welfare State. Life Histories in Europe</i>, Springer: Heidelberg: 241-254.</p> <p>Students are expected to find additional readings on Google Scholar to complete their applied work.</p>
Validation	An individual assignment will be given during the afternoon session. Students will have to review published literature and use the provided dataset on a topic related to the morning lecture. While students are encouraged to work cooperatively in the completion of assigned tasks, all reports should reflect individual efforts. At the end of the session, the students are expected to provide a .Do File (Stata©) with their personal work to the speaker.

Session 4	How to Care for Those Who Don't Care? – Some Prevention Programs in France
Speakers	Nicolas Sirven (PhD), Full Professor of Economics, EHESP. E-mail: nicolas.sirven@ehesp.fr
Session Outlines	<ul style="list-style-type: none"> • Self-selection as the Main Problem for Prevention Strategies • The Opportunity Cost of Care and the Trade-off for Prevention • The Life-course Perspective on Prevention Behavior – The Case for the Self-employed • Applied work: The Economic Evaluation of a Prevention Program in France
Learning Objectives	<p>At the end of the session, students will be able to:</p> <ul style="list-style-type: none"> - Apply economic evaluation methods to public health programs - Assess the values implied in a trade-off situation involving health decision - Estimate the causal impact of a public health policy - Critically assess the results obtained
Duration	6 hours
Training methods	Lecture (3h) In class applications with Stata© (3h)
Reading	<p>Augé, E. & Sirven, N. (2020). 'Must-trade and Catch-up': Do the self-employed under-invest in their health? Mimeo</p> <p>Students are expected to find additional readings on Google Scholar to complete their applied work.</p>
Validation	An individual assignment will be given during the afternoon session. Students will have to review published literature and use the provided dataset on a topic related to the morning lecture. While students are encouraged to work cooperatively in the completion of assigned tasks, all reports should reflect individual efforts. At the end of the session, the students are expected to provide a .Do File (Stata©) with their personal work to the speaker.

Session 5	The Last Resort – Who Shall Pay for LTC?
Speakers	Nicolas Sirven (PhD), Full Professor of Economics, EHESP. E-mail: nicolas.sirven@ehesp.fr
Session Outlines	<ul style="list-style-type: none"> • Methodological issues in valuing Long Term Care • Market vs non-market provision of care: • Are Formal and Informal Care Complementary or Substitute? • Financing LTC – The French 2020 Reform • Applied work: The Consequences of Informal Care Provision on Health
Learning Objectives	<p>At the end of the session, students will be able to:</p> <ul style="list-style-type: none"> - Identify key economic and public issues related to caring disabled people - Analyze theoretical approaches to value informal care - Compare and evaluate the different methods used and their consequences in terms of policies - Identify the main drivers of informal care supply - Critically assess the results obtained
Duration	6 hours
Training methods	Lecture (3h) In class applications with Stata© (3h)
Reading	<p>Norton, E. C. (2000). Long-term care. Handbook of health economics, 1, 955-994.</p> <p>Carrino, L., Orso, C. E., & Pasini, G. (2018). Demand of long-term care and benefit eligibility across European countries. Health economics, 27(8), 1175-1188.</p> <p>Students are expected to find additional readings on Google Scholar to complete their applied work.</p>
Validation	No individual assignment will be given during this last session. In addition to the applied work, the afternoon session will provide students with an overall recap of all concepts learnt and methods used over the week module.