Course Mission:

This course undertakes a strategic leadership approach in training students to lead effectively in a fast-paced, highly demanding policy environment. By integrating the students’ past coursework and work experience with the course’s chief frameworks and assignments, the student will build fluency in leadership skills exercised by practitioners heading major organizations.

The course’s chief teaching "engine" is to introduce the notion of "strategic craft," or the purposeful configuration of actions and assets that lead to desired outcomes meaningful to stakeholders. A professional craft is animated by systems of thought which embody accumulated knowledge and conventional wisdom encompassing the major dynamics of a trade or specialty. Systems of thought are encapsulated as frameworks that act as templates, or blueprints, for assessing situations and for organizing lines of action.

Global health is a topic that lends itself well to this treatment as disease and health are tangible conditions universally understood. In contrast to the topical approach used in health professional training, the emphasis here is mastering a systemic, strategic approach at the leadership point-of-view. As such, the course presumes no previous experience in the global health and development sector, and presumes most CMU DC students intend to enter an array of non-health fields.

To engage the concepts more concretely, the core experience for the class will be to examine major themes in global health diplomacy, particularly in the assembly of global health or national health campaigns. Using strategic policy design, the course will
consider how campaigns originate, how they select objectives, and how they organize themselves to meet these ends.

**Key Course Objectives:**

Through active, mindful engagement with the course and the course community, the student will gain practical knowledge within basic analytic and synthetic frameworks, such as:

**STRATEGIC / SYSTEMIC / SPECIFIC**

Using these and other approaches, the next prime objective is to organize your thoughts regarding potential courses of action by in-class analyses of cases, crafting structured policy memos and a text of a major declarative speech.

The third prime objective is to contribute to and participate in an interactive class dynamic that is professional, respectful, and purposeful.

To enrich and support these objectives, a variety of readings and videos are supplied. You are expected to read and view these materials and be prepared to discuss them. New materials may be introduced and will be incorporated into future versions of this syllabus. Any new versions of the syllabus with revised materials will be placed into the course file in Blackboard.

**SCHEDULE OF CLASSES --**

**Session 1 (January 23):**

First hour (H1)
Second hour (H2)
Third hour (H3)

Breaks: typically a 10-15 minute break at mid-point

**H1:**
- Introduction and welcome
- Course mission and overview
- Course products and grading policy
- General housekeeping items
- Filling out introduction cards
- Getting to know you

**H2:**
- Introduction of global health landscape
- The "Top Tens"
H3: The challenge ahead:

Session 2
CLASS SHIFTED FROM JAN 30 TO FEB 2
(NO CLASS MONDAY JAN 30; CLASS CONDUCTED INSTEAD ON THURSDAY, FEB 2, 6:00 -9:00 PM)

Before class, watch the following videos:

60 Minutes: Paul Farmer's mission in Haiti

Leasing the Rain: Cochabamba Bolivia's Water Wars
https://m.youtube.com/watch?v=tIH85_yoHeM (part 1)
https://m.youtube.com/watch?v=aYxsp0QcqRg (part 2)

The originating New Yorker article:
http://www.newyorker.com/archive/2002/04/08/020408fa_FACT1

H1: Understanding ground-line conditions - Specificity of problems

H2: Basic Human Needs

H3: Prime Determinants of Health or Disease

Soft Power vs Hard Power

Session 3: February 6

WRITTEN ASSIGNMENT #1 DUE:
"WARM-UP ANALYSIS ON A MAJOR GLOBAL HEALTH PROBLEM"
Initial 2-3 page assessment regarding the landscape of issues and facts regarding your prospective speech topic. Graded on check-plus / neutral / check-minus basis

H1: Sustaining pipelines - Systemic needs in healthcare delivery

http://www.who.int/healthsystems/EN_HSSkeycomponents.pdf?ua=1

H2: Hardware, Software, Mindware
Tangible resources: Infrastructure, Personnel, Finance
Intangible: ideas, education, training, envisioning solutions

https://epthinktank.eu/2015/02/10/strengthening-health-systems-in-developing-countries/


H3: Global Health Capabilities
   Tech, Tools, Techniques
   Classic interventions: diagnosis, prevention, treatment, care
   Innovative interventions:
      "Frugal science" examples:

http://www.youtube.com/watch?v=iUs-A9GPs8c   "Liter of Light"

https://m.youtube.com/watch?feature=youtu.be&v=xUzZ_01N0eE   "Folding microscopes"

https://www.ted.com/talks/josh_silver_demos_adjustable_liquid_filled_eyeglasses?language=en   "Field adjustable eyeglasses"

The new tech wave: humanitarian drones

http://foreignpolicy.com/2012/04/27/predators-for-peace/

https://www.opencanada.org/features/the-case-for-humanitarian-drones/


Session 4: February 13

H1: Assessing from the skyline: Strategic Environment
   Ahead of class, please watch the follow videos and prepare to discuss:
      Han Rosling TED talks:

https://www.ted.com/talks/hans_rosling_shows_the_best_stats_you_ve_ever_seen

https://www.ted.com/talks/hans_rosling_reveals_new_insights_on_poverty

H2: Geopolitics, Socio-economics and Interests
   Haves vs. have nots
Global health diplomacy and foreign policy
Global Fund
PEPFAR

READ and PREPARE TO DISCUSS
Oslo Declaration on Health and Foreign Policy:
http://www.who.int/trade/events/Oslo_Ministerial_Declaration.pdf

“China: The Sick Man of Asia” by Yanzhong Huang: (to be provided)

and “China’s Billion Dollar Aid Appetite” in Foreign Policy (online)
by Jack C. Chow
http://www.foreignpolicy.com/articles/2010/07/19/chinas_billion_dollar_aid_appetite

Okinawa G8 Communique:
http://www.g8.utoronto.ca/summit/2000okinawa/finalcom.htm
Examine paragraphs pertaining to health and development

Pittsburgh G20 Communique:
http://www.pittsburghsummit.gov/mediacenter/129639.htm
Compare and contrast Pittsburgh health/development items with Okinawa

H3: Constructing Strategic Goals
   The 4 Line Method of goal construction
   UN Sustainable Development Goals


http://www.un.org/sustainabledevelopment/health/

Class exercise: Justifying Health Diplomacy

Geopolitical prisms: USA, EU, Africa, private sector
   What are key goals / interests / objectives?

Session 5: February 20

WRITTEN ASSIGNMENT #2 DUE:
"Analysis of a Developing Country Healthcare System"

H1 - H3: Memo Writing Class
Session 6: February 27
Global Health Strategy - Re-action

H1: Reaction Cycle

H2: Humanitarian Disasters

Case # 1931.0 AmeriCares Engages Myanmar’s Military Government
Order through website:
http://www.ksgecase.harvard.edu/index.asp
via download/permission copy at academic rate

Democracy as a wedge for health:

https://nyti.ms/2k3Ty9O

http://foreignpolicy.com/2012/02/07/immunizing-the-body-politic/

Case: Haiti earthquake of 2010: interventions and complications

Surviving the earthquake:
https://m.youtube.com/watch?v=3l9B1dvdT-o

http://www.npr.org/sections/goatsandsoda/2015/01/12/376138864/5-years-after-haiti-s-earthquake-why-aren-t-things-better

https://www.theguardian.com/global-development/2016/dec/01/haiti-cholera-outbreak-stain-on-reputation-un-says

Case study questions to be provided

H3: Epidemics and Pandemics
Carter Foundation guinea worm eradication campaign:
http://www.cartercenter.org/health/guinea_worm/index.html
http://www.pbs.org/wgbh/americanexperience/features/general-article/carter-guinea-worm/

Gates Foundation's new vaccine initiative:

Ebola 2014 epidemic:

Interlinks with human health:
The second eradication: lessons learned from an unexpected campaign:

Session 7: March 6
Global Health Strategy - Pro-action

  H1:  READ and PREPARE TO DISCUSS
       HBS case: Hillary Clinton and the Global Cookstove Alliance

Cookstove alliance videos

http://youtu.be/J3Zsj4Lfs_o  TEDx Talk
http://youtu.be/8lhza2SULXw  Laos field testing

  H2:  Chronic or Non-communicable Diseases (NCD)

http://www.who.int/mediacentre/factsheets/fs355/en/
http://www.who.int/nmh/publications/ncd-infographic-2014.pdf?

  H3:  Wrap-Up
       Discuss prospective speech ideas

March 10 / WRITTEN ANALYSIS #3 (FINAL EXAM) DUE:
(No Class Meeting - work submitted by e-mail)

Speech Proposing a New Global Health Campaign
Guidance to be provided in Blackboard

Deadline: Speech text due by email or special arrangements by 6 PM.
Speech before the 2017 CMU Global Health General Assembly: (35% of total grade). Submit text of speech and any supporting materials by deadline and method to be determined.

Guidance: A week prior to the next session, you will be sent guidance, by email or accessible within the Blackboard course files, for the next session that will contain, to a varying degree, a landscape overview of the topic, guiding questions for you to consider, website material, and additional information that could guide your development of your country report and specialized memos.

Assignments and Grading
Writing: 65% over 3 assignments
Each week a guidance document will be made available to provide background and instructions for the upcoming weekly assignment.

That will include the following 3 elements:
1. "Warm-up" situational analysis: 3-4 pages, course weight 10%
Grading: check plus/neutral/check minus, which adds a tilting factor to a final grade)
   Report to be an early assessment on your potential speech topic from the viewpoint of a policy analyst who actively acquires, analyses and assesses both macro-trends and micro-factors, and reports to the principal

   For this "warm-up" exercise, you may use a variety of sources and emphasize issues you deem important,
   Below are some starter questions to prime your inquiry:
     What are the top 3 factors that contribute to the problem?
     What are the top 3 health organizations operating on the issue, domestic or international?
     Who are the top 3 leaders, health or political, active on the issue?
     What are 3 new ideas you believe could mitigate the problem that are implementable?
     What are the 3 major assets (capability) available for implementation?

   An additional page, not counted against the page limit, may be provided for references such as websites, books, reports, and other primary sourcing.

   The warm up is meant to spark your research into a topic that engages your interest. The primary value in this exercise is becoming familiar with components of the strategic policy design framework while engaging your curiosity towards possible topics. You may decide upon another topic for your final speech exam.
2. Health Systems Analysis: 4-5 pages, course weight 20%

You are to analyze a developing country's health system in a structured analytical manner, identifying key components such as those discussed in class, assessing that national health system's strengths and weaknesses, operational capabilities, and past performance.

Further specifications for the assignment to be provided later in an instruction guidance sheet.

3. Declarative Policy Speech: 6-8 pages, course weight 35%

The third and final written assignment is to produce a major policy speech on a global health policy topic. The scope of issues, point of view, target audience, content structure, and other elements will be elaborated in the instruction guidance to be provided near the end of the course.

For all written assignments, additional pages may be provided for reference listings such as websites, books, reports, and other primary sourcing. These reference pages do not count against the content page limit.

Due: As specified in the instruction guidance. Modality: typically by email, or by hard copy if delivered at the classroom. They will be returned, with grade and comments, the following week, or by email reply.

Academic Citizenship: 35%, of which –

15% Derived from participation, to be judged on quality of depth and breadth of discussion, reasoned argument, preparation, and demonstration of acquired skills. A loose guideline is for 3 students to make substantive contributions for each of the remaining sessions; more frequent contributions by a full mix of students are welcomed and encouraged.

10% Fostering mutual learning, to be judged on actions that benefit the learning environment as a whole. Such actions include courteous treatment of all persons in the class, respectful discussion and deliberation, sharing of insights and experiences relevant to the topic at hand, and an overall professional approach to the material, assignments, and discussions.

10% Attendance and Punctuality. On-time attendance at all sessions is expected. Unexplained absences or tardiness is subject to point deductions in this grade category.

Grading guidelines:
To ensure consistent grading of written products, a matrix that describes key expectations for each letter grade will be made available. Overall, papers will be graded for content, punctuality, and quality control.

For the first, warm-up assignment, the content will be assessed on a check plus, check, check minus scale. The intent of this assignment is to catalyze your interest and curiosity in a global health problem, and to gain a sense of your writing and analytical style.

For the second and third written assignments, the content grade will constitute the letter grade (A, B, C, D, E) and the quality control component will contribute to the +/-0/-kicker. The combined grade for that paper will be the additive effect of content and quality grades, thus an A content paper combined with superior quality control will produce an A+ grade, a B content with errors will yield B-, and so forth.

A grade matrix/template that describes the grade element and corresponding performance standard will be provided in the course blackboard file.

All assignments are to be completed and submitted by the assigned deadline. If for some substantial reason you cannot complete your assignment/exam in time you must/should contact me directly prior to the due date. All late assignments are subject to a grading penalty.

Because of the different email services students might choose to originate their emails, only the time stamp of your email submissions as received in my email inbox will serve as confirmation of either in-time or late submissions. Non-receipt will also constitute as being a late or “no-show” submission, and protestations that email was sent but not received, or that the email server system slowed delivery, will not be accepted as an excuse. It is your ultimate responsibility to send your assignments on time and to take into account the irregularities or inefficiencies of email systems. Thus, it is highly advised to send your assignments well ahead of deadline.

It is also your responsibility to insure that any attachments you might send via email are openable in the .doc or .pdf formats. PDF is the more stable, thus the preferred format. Variants such as .docx may not openable so it is advisable not to sending such variants. Should you choose to submit the assignment on hard copy, you must submit it to me by the start of class.

ACADEMIC CONDUCT AND INTEGRITY
Students are subject to Carnegie Mellon University’s policies on academic integrity. (http://www.cmu.edu/academic-integrity/plagiarism/index.html) Plagiarism is a serious offense that will result in the student failing the course. Note that all academic integrity violations will be reported to the Associate Dean. Additional penalties may be imposed.
Plagiarism includes:
• Presenting another writer’s work as your own;
• Cutting and pasting content verbatim without using quotation marks to indicate a direct quote;
• Inserting a direct quote or paraphrasing content without citing the source in-text using footnotes, endnotes, or parenthetical citations with a corresponding Works Cited, References, or Notes page – in a manner consistent with an APA, MLA, or Chicago style guide;
• Providing incomplete or incorrect information about the source cited;
• Over-relying on templates or other writers’ phrasing.

Also, submitting work written for another course is not acceptable; consequently, a failing grade will be issued for that assignment.

All submitted work for grading must be written by you, without assistance by others, unless specifically indicated for a team product. Students are encouraged to talk about the course’s lessons, insights, and methods of analysis, but the actual writing and content of your writings must be done solely by you. Facts, opinions, and analyses done by others and cited by you in your work must be referenced, either as a footnote or citation on a reference page attached to your assignment. Common, widely disseminated statistical facts such as population, disease rates, etc., or governmental organizational structure, leadership names, etc. need not be referenced. You should consult the professor for any borderline questions on what should be referenced.

Your work may be audited with the use of commercially available anti-plagiarism apps and software should there be indicators regarding the false originality of materials. The output of such analysis may be entered as evidence in a complaint alleging plagiarism.

Violations will be treated seriously and may well result in a score of zero for the assignment, a failing grade for the course, and subsequent sanctions by the university.

**Office hours:**
By appointment

**Auditing:** As auditing creates two tiers of students with different expectations and participation rates, and complicates the conduct of the class and grading of assignments, auditing of the class will not be permitted.

**Starter Websites:**

There are multitudes of websites with high quality, relevant content. Listed are home pages, through which additional sub-topical pages may be accessed. You are encouraged and expected to do pro-active searches and find/share good sites.
US
http://www.pepfar.gov/
http://www.pmi.gov/
http://www.mcc.gov/
http://www.usaid.gov/

UN and Technical Agencies
http://www.who.int/en/
http://www.unaids.org/en/
http://www.un.org/english/
http://www.un.org/millenniumgoals/

NGOs
http://www.globalhealth.org/
http://www.clintonfoundation.org/what-we-do/clinton-hiv-aids-initiative
http://www.cartercenter.org/health/index.html
http://www.gatesfoundation.org/Pages/home.aspx
http://www.data.org/

International Donors
http://www.theglobalfund.org/EN/
http://www.worldbank.org/

Selected Reference Bibliography:

Understanding Global Medicine and Health by William Markle, et al, Lange Clinical Series
    An affordable introductory text with overview chapters on key topics

Mountains Beyond Mountains by Tracy Kidder
    Narrative about Dr. Paul Farmer and his inspiring Partners in Health project in the Haitian central highlands.

World Development Reports by the World Bank Group
    Annual themes on macro-development issues

World Health Report 2012 and past reports by the World Health Organization
Contemporary and prospective thematic issues identified by WHO as needing action
http://www.who.int/whr/en/

International Health Regulations 2005 and updates by the World Health Organization
The framework for emergency health response and rules of public health engagement agreed upon by signatory nations
http://www.who.int/ihr/en/

Oslo Declaration on Health and Foreign Policy
http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(07)60498-X/abstract
Several countries who call for health to be integrated into foreign policies of nations

G8 Declarations on Health
2010 Canada: Initiative on Maternal and Child Health

2001 Italy:
http://www.g8.utoronto.ca/summit/2001genoa/finalcommunique.html
Political agreement to create the Global Fund on AIDS/TB/Malaria

2000 Japan:
http://www.g8.utoronto.ca/summit/2000okinawa/finalcom.htm
Foundation for advances in international development and health, especially infectious diseases

Bioterrorism: Guidelines for Medical and Public Health Management by Donald A. Henderson, et al. Publisher: the American Medical Association
From the former leader of the WHO smallpox eradication campaign