

Wharton Health Care Management Department

HCMG 868 - 001:

“Private Sector Participation in Global Health Development”

Course Prospectus, Spring, 2015

THIS COURSE MEETS ON MONDAYS THROUGHOUT THE SEMESTER FROM 4:30 PM TO 5:50 PM. THE FIRST SESSION, HOWEVER, IS ON WEDNESDAY, JANUARY 14. THE SECOND SESSION WILL BE ON MONDAY, JANUARY 26 (OWING TO MLK DAY), AND ON ALL MONDAYS THEREAFTER THROUGH THE END OF THE SEMESTER, EXCEPT FOR SPRING BREAK

THIS SYLLABUS AND SESSION AGENDA IS PROVIDED AS A GUIDE FOR COURSE SELECTION. THE 2015 SESSION AGENDA IS IN PREPARATION. THE 2014 SESSION AGENDA IS INCLUDED AS AN INDICATION OF TOPICS AND SPEAKERS.

UNDERGRADUATE AND GRADUATE STUDENTS FROM OUTSIDE THE WHARTON MBA PROGRAM ARE ELIGIBLE TO REGISTER FOR THE COURSE. PLEASE SEE MRS. JANICE SINGLETON IN THE HEALTH CARE MANAGEMENT DEPARTMENT OFFICE ON THE SECOND FLOOR OF COLONIAL PENN CENTER, LOCUST WALK.

This is a 0.5 cu course

Instructor: Steve Sammut

Senior Fellow and Lecturer, Wharton Health Care Systems and Entrepreneurship

Office hours: Sign-up sheet posted on webcafe or by special appointment

Location: Vance Hall – Room # 422

Classes: Mondays throughout the semester: 4:30 to 5:50 PM

E-mail: smsammut@wharton.upenn.edu

By snail mail or over-night courier: please sign to authorize “drop-off:

300 East Lancaster Avenue, Suite 1002

Wynnewood, PA 19096

Course Units: 0.5 cu

Prerequisites: General knowledge of Health Care Systems or life sciences and an interest in global health

Eligible Students: Students in graduate or professional programs University-wide. Instructor welcomes undergraduate and graduate students from all Schools of the University who are passionate about the challenges of global health

Course materials: Text book (*Global Health: Diseases, Programs, Systems and Policies*, 3rd edition by Merson, Black and Mills)
Scientific American Lives: New Answers for Global Health (will be distributed for free in first class)
Course pack
Web Café Postings

Learning Objectives:

The purpose of this course is to describe entrepreneurial and business approaches that the private sector can implement in addressing the issues of global health, especially in developing countries. In particular:

1. The course does not attempt to duplicate a conventional international public health course, but builds upon what is conventionally known and taught in such courses from a managerial perspective. The course will address a range of means of managing medical services and related businesses—public and private—in underserved areas for underserved populations in emerging markets and developing countries, and where appropriate, in underdeveloped parts of developed countries.
2. The descriptive focus will be on how these services currently are managed or otherwise handled, especially with regard to care for or control of key disease such as malaria, HIV/AIDS, tuberculosis, parasitic diseases, or other indigenous diseases that have broad debilitating and destabilizing social and economic effects.
3. It is the case that best practices and equitable, effective access to care are largely non-existent. Students and participating faculty will collaborate in the discovery and creation of service models. Field-testing of these models will depend on available grant resources or collaborations developed with USAID, World Bank, the World Health Organization, or other NGOs or foundations, such as the Bill & Melinda Gates Foundation, The Wellcome Trust, The Rockefeller Foundation, Doctors of the World, and others. The class will develop a system of benchmarks and other measures to determine effectiveness.
4. Examination of the criteria used by international development agencies for the allocation of resources to different regions and the possible conversion of these distributions into the capitalization, funding or advance purchase contracts for entrepreneurial enterprises.
5. Origination and launch of structured programs and effective organizations: the determinants and role of public and private entrepreneurship, public-private partnerships and other approaches to addressing the issues.
6. Creation and development of specific entrepreneurial solutions to such needs as drug manufacture and availability, the management and tracking of drug distribution, health

finance and insurance, cost-effective services, health systems optimization and the like.

The above topics will be explored through a series of specific themes that will be addressed in separate sessions, often by a guest speaker. The themes are:

- **Private Sector Role in GH**
(The intersection of GH needs and private sector initiatives)
- **Private Public Partnerships**
- **Health Care Financing in the Developing World**
 - o Global Fund / PEPFAR
 - o Int'l Agencies/Foundations (USAID/Gates)
 - o Insurance Programs
 - o Domestic Governments
- **Medical Tourism**
- **Globalization and Health Care:**
(Assess cross-border risks/opportunities in securing health)
 - o Trade Policies
 - o IP issues: Licensing of products to the developing world
 - o Bioprospecting
- **Economics of Essential Medicines**
(Define essential meds - e.g., childhood vaccines, HIV/TB/Malaria meds)
 - o Pricing
 - o Distribution
 - o Wastage
- **Access Barriers Beyond Price**
 - o Distribution: Channels, cold chains, wastage
 - o Provider education/supply
 - o Follow-up to care and long-term coverage
- **Innovation in Global Health**
 - o Private Sector Initiatives to address Unmet Medical Needs
 - o Funding Innovation
 - o AMC's
 - o VC's / PE's
 - o Innovative Capabilities of Developing Countries
- **Health Technologies for Developing Countries**
(Consumables, Medical Devices, Diagnostics)

Course Requirements:

Grading will be based on:

- Class discussion and course blog postings: 20%
- Individual Take-Away submission: 10%
- Course Project (individual or team): 70%

Class Discussion Criteria:

Active contribution and enrichment of class discussion, e.g. by drawing upon and sharing your professional, field and clinical experiences and relating these to the subjects at hand. The webcafe will include a special blog for contributions – postings will factor into the class contribution grade.

Individual Take-Away Submission:

This is a brief written analysis of a key class theme as it is covered by a given speaker and corresponding readings. It must be completed individually. You will discuss and assess a topic (e.g., Private Public Partnerships) by drawing on points from at least 1 speaker and at least 2 readings.

Process: Sign up on Webcafe for the theme you would like to cover. There are the following 8 themes and each theme can be chosen by a maximum of 5 students:

1. Private Public Partnerships
2. Health Care Financing in the Developing World
3. Medical Tourism
4. Globalization and Health Care
5. Economics of Essential Medicines
6. Access Barriers Beyond Price
7. Innovation in Global Health
8. Health Technologies for Developing Countries

Length: 1-2 pages

Content: Must cite specific points from at least 1 speaker and at least 2 readings.

Due date: To be announced

Course Project: Guidelines and Submission Schedule

Students—alone or in teams—will be free to propose their own relevant projects to the instructor. These projects should in a major way address private sector solutions to global health. *Generally, the instructor is happy to accept a deliverable built around a Wharton Health International Volunteer Project. Students expecting to participate in a winter break or spring break project should consult with the instructor **prior to the start of the field project**. Teams should have no more than 4 people per team. The final paper is to be a maximum of 20 double-spaced pages, excluding exhibits.*

The following deadlines are to help the students manage their time throughout the semester and must be met accordingly.

By Sunday, February 1, 2014, 11:59 PM: Post to Canvas>Assignments your one-page project proposal and names of team members with e-mail addresses (if any).

Between sessions 3 and 5 the instructor will meet with teams to discuss the projects, determine scope and define the deliverables. See Canvas for Sign-up information

By Sunday, February 22, 11:59 PM: Post to Canvas>Assignments a two page detailed, annotated outline with bibliography.

By Saturday, April 25, 11:59 PM: Upload to Canvas>Assignments a succinct PowerPoint summary of the project that you will present on the final day of class, Monday, April 28th. The standard length and allowed time for each presentation will be announced to the class by mid-semester once the final number of projects is determined (though will probably be about 5 to 10 minutes per presentation).

By Wednesday, April 29, 2015, 5:00 PM. Post your final project to the Final Project Assignment Folder on Canvas. Instructor will advise students on the format for their deliverable during the appointments to discuss project proposals.

Reading Materials

1. *Reimagining Global Health: An Introduction*, Paul Farmer, Jim Yong Kim, Arthur Kleinman and Matthew Basilio, University of California Press, 2013
Available in hard copy and as an e-book.
2. *Scientific American Lives: New Answers for Global Health* (will be distributed for free in first class)
3. Course pack
4. Canvas Postings (under Files)

The instructor has selected case studies, articles, book chapters and monographs that address the issues in the course provided in the Course Pack.

One or more readings are designated as preparation for each session. The instructor will announce the appropriate reading module as the speaker schedule is solidified. The number of readings is long for each module and the amount of reading voluminous.

Remember that you must select readings for the “Individual Take-Away Submission” reports (10% of grade) as described above.

The Reading Modules are designed to tie-in with the themes. The modules are:

1. The Scope of the Problem
2. The Context of Global Health and Private Sector Involvement
3. Public Private Partnerships
4. Health as a Human Right, Ethics and Health Equity
5. Health Care Finance in the Developing World
6. Globalization and Health Policy
7. Essential Medicines Availability

Professor Sammut

8. Innovative Capability of Developing Countries
9. Funding Innovation for Global health Needs
10. Trade Policies, Intellectual Property and Bioprospecting
11. Programs and Interventions

About the instructor

Mr. Sammut is Senior Fellow, Wharton Health Care Management and Lecturer, Wharton Entrepreneurship. He is former Venture Partner, Burrill & Company, a San Francisco based life science venture capital fund and merchant bank. At Burrill & Company, Mr. Sammut focused on international activity, with a special focus on global health venturing. He is currently an advisor to the Africa Health PE Fund operated by the Abraaj Group.

At the Wharton School, and periodically in the University of Pennsylvania School of Applied Science and Engineering, School of Law and School of Medicine), he teaches venture capital management, corporate development, mergers and acquisitions, biotechnology entrepreneurship, intellectual property strategy, and private equity in emerging markets, Israeli innovation, health care systems, and a special seminar on private sector participation in international health. He is faculty advisor to student-alumni organization called the Wharton Health International Volunteer Program (WHIVP) that provides *pro bono* consulting services to public health services and clinics in the developing world. WHIVP was awarded the Health and Human Rights Leadership Award by Doctors of the World for its decade long work in developing world health systems.

Mr. Sammut is also Founder and Chair of the International Institute for Biotechnology Entrepreneurship, a non-profit organization offering intensive training programs throughout the world for managers of biotechnology companies. He actively conducts research under a grant from the Bill & Melinda Gates Foundation, in collaboration with the McGlaughlin-Rotman Center for Global Health at the University of Toronto on the capability of emerging market countries in the biotechnology and pharmaceutical industries. He is also on the faculty of the World Intellectual Property Organization/UN executive education program.

Mr. Sammut has been involved in the creation or funding of nearly 40 biotechnology, Internet, and information technology companies globally. He is on numerous Boards of Directors and Advisory Boards including Doctors of the World USA, Mitsubishi Corporation Life Sciences Business Group, the Royal Bank of Canada Technology Venture Fund, the Cornell University Research Foundation, Combinent BioMedical Systems, Dynamis Pharmaceuticals, Gentis, Biowizard.com, the Center for Medicine in the Public Interest, Red Diamond Capital (a mid-market buyout fund), the Asia-Alpha Venture Fund, and several other organizations. He is also on the editorial board of the European Venture Capital Association Publications, The Private Equity Review, and the Journal of Commercial Biotechnology.

He is also active with the International Finance Corporation/World Bank Group where he co-authored a report on venture capital in China, serves as the principal consultant in the IFC's Technology Transfer Facility, and advises the health care section of the World Bank in program implementation in the developing world.

Mr. Sammut previously held the positions of Vice President of Development of Teleflex Incorporated where he created and managed acquisitions and alliances, and at S.R. One, Ltd., GlaxoSmithKline's venture capital fund. He was also Managing Director of Access Partners, a venture fund focused on formation of companies around university technologies and capitalized by corporate strategic investors.

Earlier in his career, he was Managing Director of the Center for Technology Transfer at the University of Pennsylvania, where he spun out over one dozen companies over a two-year period. He held a similar position at Jefferson Medical College. He is also co-founder and former CEO of the Philadelphia Organ Transplant Program, the largest transplant organ bank in the United States. He holds degrees in biology and humanities from Villanova University, attended Hahnemann Medical College for two years and holds an MBA from the Wharton School of the University of Pennsylvania.

<p style="text-align: center;">SESSION AND SPEAKER SCHEDULE 2014 Wharton HCMG 868: The Private Sector in Global Health Prof. Steve Sammut smsammut@wharton.upenn.edu Mondays, 4:30 to 5:50 PM F-60 Huntsman Hall, Locust Walk between 37th Streets and the “Bridge”</p> <p style="text-align: center;">THIS IS THE SCHEDULE FROM 2014 AND IS INCLUDED AS AN ILLUSTRATION OF CONTENT AND SPEAKERS. THE 2015 SCHEDULE IS IN PREPARATION</p>			
Sess	Date	Guest and Topic	Preparation and Readings
1	<p>WED JAN 14</p> <p>All other classes are on Mon</p>	<p>Course Introduction and Lecture: “Fundamental Challenges of Global Health” Part 1</p> <p>Session Objectives:</p> <ol style="list-style-type: none"> 1. Acquire a definition of global health 2. Identify the principle issues in global health 3. Understand the fundamentals of how health is measured in populations 4. Understand the global transnational factors affecting health 5. Reach an understanding of the problems of health equity 6. Define demographic and epidemiologic transitions 7. Gain an appreciation for the challenges of measuring health and disease 8. Identify the barriers to measuring disability 9. Be familiar with key terms such as: burden of disease, disability adjusted life year, and Risk factors 10. Understand the concept of the health gradient and how it is measured 11. Understand the relationship between social determinants and health 12. Discuss the challenges of improving health for all populations 13. Be familiar with the most common measures of social differences 	<p>Required Reading from course text:</p> <p>Farmer, et al. Chapter 1: Introduction: A Biosocial Approach to Global Health</p> <p>Required Readings from Course Pack:</p> <p>Reading 1. Global Health Definition from the Lancet</p> <p>Reading 20: What is a Health System?</p>

2	Mon Jan 27	<p>“Fundamental Challenges of Global Health” Part 2</p> <p>Session Objectives:</p> <ol style="list-style-type: none"> 1. Identify the key elements and typologies of health systems 2. Review the concepts of efficiency and equity in the context of health system performance 3. Discuss the objectives and impact of health care reform 4. Review the key elements in resource management 5. Discuss the values that underpin management decisions 6. Be familiar with organizational structures and how they impact the role of management 	<p>Required reading from course textbook:</p> <p>Farmer et al. Chapter 2: Unpacking Global Health: Theory and Critique</p> <p>Required readings from course pack:</p> <p>Reading 11: Rich-Poor Differences in Health Care Financing</p> <p>Reading 12: Financing for Global Health</p>
	Sun Feb 2	<p>Post one page project proposal (include team members with e-mails) to Canvas>Assignments by 11:59 PM</p> <p>Sign up for an appointment to discuss proposal on Canvas.</p>	
3	Mon Feb 3	<p>Private Sector Responses to Global Health Challenges: Part 1</p> <p>The lecture will focus on how the private sector can participate in global health through innovative approaches to drug access, focused research and other programs.</p>	<p>Required reading from course textbook:</p> <p>Farmer et al. Chapter 3: “Colonial Medicine and its Legacies”</p> <p>Course Pack:</p> <p>Reading 6: Global Approaches to Private Sector Provision: Where is the Evidence</p> <p>Reading 13: Financing Health in Low Income Countries</p>

	Sun Feb 9	Select and sign up for topic for Take-Away Exercise. Sign-up on Canvas>People>Groups	
4	Mon Feb 10	<p>Private Sector Responses to Global Health Challenges: Part 2</p> <p>Session Objectives:</p> <ol style="list-style-type: none"> 1. Learn the steps of performing evaluation of large-scale health programs 2. Understand the IRIS Impact Model 3. Learn to create a conceptual framework of factors affecting health for the purpose of evaluating an intervention 4. Be familiar with different evaluation design models and data collection methods 5. Learn how to report results, including measuring impact and costs. <p>Learn about methods for data analyses, and types of process, intermediate, and outcome indicators</p>	<p>Required reading from course textbook: Chapter 5 “Redefining the Possible: The Global AIDS Response”</p> <p>Canvas:</p> <p>Case Study to be provided</p> <p>Required reading from course pack:</p> <p>Reading 7: Business in Partnership with the Non-Profit Sector</p>
5	Mon Feb 17	<p>Private Sector Responses to Global Health Challenges: Part 3</p> <p>The Role of Public Private Partnerships in Meeting Global Health Needs</p> <p>Case Questions:</p> <ol style="list-style-type: none"> 1. What public value was created and how would it be sustained by Lilly’s initiative? 2. What were the risks of transferring pharmaceutical manufacturing technology to partners in a variety of countries? 3. What were the motivations of the partners in this case? 4. What could the ministers of health for each country do to make the 	<p>Required reading from course textbook: Chapter 8 “The Unique Challenges of Mental Health and MDR-TB: Critical Perspectives on the Metrics of Disease”</p> <p>Case From Coursepack: The Eli Lilly MDR-TB Partnership: Creating Private and Public Value</p> <p>Required Reading from course pack:</p> <p>Reading 3: The Legitimacy of Business</p> <p>Reading 4: The Options for</p>

		<p>Partnership more effective?</p> <p>5. What were the benefits and risks for a company of Lilly's stature to initiate and manage a partnership of this complexity?</p> <p>6. Were there lessons from the Lilly partnership that could be applied to other global health challenges?</p>	<p>Business Contributions</p> <p>Reading 5: The Private Sector in the Fight Against Global Poverty</p>
	Sun Feb 23	Post two-page detailed outline with bibliography to Canvas>Assignments	
6	Mon Feb 24	Class was canceled owing to instructor illness.	<p>Required reading from course text book:</p> <p>Farmer et al. Chapter 4. "Health for All? Competing Theories and Geopolitics"</p>
7	Mon Mar 3	<p>The Development of the Rotavirus Vaccine</p> <p>Dr. Paul Offit, Chief, Division of Infectious Diseases Director, Vaccine Education Center Children's Hospital of Philadelphia And the Maurice R. Hilleman Professor of Vaccinology and Professor of Pediatrics at the University of Pennsylvania School of Medicine</p> <p>And</p> <p>Mark B. Feinberg, MD, PhD Vice President Chief Public Health and Science Officer Merck Vaccines</p> <p>Dr. Offit is Chief of Infectious Diseases at The Children's Hospital of Philadelphia and the Maurice R. Hilleman Professor of Vaccinology and professor of Pediatrics at the University of Pennsylvania School of Medicine. He is an internationally recognized expert in the fields of virology and immunology and was a member of the</p>	

		<p>Advisory Committee on Immunization Practices to the Centers for Disease Control and Prevention. Dr. Offit is a member of the Institute of Medicine and co-editor of the foremost vaccine text, <i>Vaccines</i>. Dr. Offit has published more than 130 papers in medical and scientific journals. He is the author or co-author of several books including:</p> <ul style="list-style-type: none"> • <i>Breaking the Antibiotic Habit: A Parent's Guide to Coughs, Colds, Ear Infections, and Sore Throats</i> (Wiley, 1999) • <i>The Cutter Incident</i> (Yale University Press, 2005) • <i>Vaccinated: One Man's Quest to Defeat the World's Deadliest Diseases</i> (Smithsonian Books, 2007) • <i>Autism's False Prophets</i> (Columbia University Press, 2008) • <i>Deadly Choices: How the Anti-Vaccine Movement Threatens Us All</i> (Basic Books, 2011) • <i>Vaccines and Your Child: Separating Fact from Fiction</i> (Columbia University Press, 2011) • <i>Killing Us Softly: The Sense and Nonsense of Alternative Medicine</i> (Harper Collins, in press) <p>Mark Feinberg - Mark Feinberg is Vice President and Chief Public Health and Science Officer, Merck Vaccines at Merck & Co., Inc., where he focuses on global efforts to implement vaccines and infectious disease therapies to achieve the greatest individual and public health benefits. In this role, he is also responsible for developing initiatives and partnerships that accelerate the global availability of Merck's drugs and vaccines, and that enable Merck's R&D expertise to help address health challenges impacting resource-poor countries. Prior to joining Merck in 2004, Dr. Feinberg worked for over 20 years in</p>	
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		<p>both academia and government where he was actively engaged in basic and clinical research, patient care and health care policy--with a primary focus on HIV/AIDS pathogenesis, treatment and prevention research. Dr. Feinberg is a Fellow of the American College of Physicians, and a member of the Council on Foreign Relations and the Association of American Physicians. He is the recipient of an Elizabeth Glaser Scientist Award from the Pediatric AIDS Foundation and an Innovation in Clinical Research Award from the Doris Duke Charitable Foundation.</p> <p>Dr. Feinberg has also served as a member of several committees of the Institutes of Medicine and the National Academy of Sciences, and on the National Vaccine Advisory Committee (NVAC). Dr. Feinberg currently serves as a member of the Institute of Medicine's Forum on Microbial Threats, the Board of Trustees of the National Foundation for Infectious Diseases (NFID), the Board of Directors for the African Comprehensive HIV/AIDS Partnerships (ACHAP) Program, the External Advisory Board of the HIV Vaccine Trial Network (HVTN), and the Scientific Advisory Board of the US President's Emergency Plan for AIDS Relief (PEPFAR).</p>	
8	Mon Mar 17	Private Sector Responses to Global Health Challenges: Part 4: Is there a role for Venture Capital and Innovative Finance?	<p>Required reading from course textbook: Chapter 7 “Scaling Up Effective Delivery Models Worldwide”</p> <p>Case from Coursepack: Acumen Fund and Embrace: From the Leading Edge of Social Venture Investing</p> <p>Reading 16: Venture Capital for Development</p> <p>Reading 17: Venture Capital</p>

			and Global Health
9	Mon Mar 24	<p>Completion of discussion on Innovative Finance and Venture Capital</p> <p>Case Discussion: Merck Global Health and Access to Medicines (from coursepack)</p>	<p>Required Reading from course textbook:</p> <p>Farmer et al. Chapter 9 “Values and Global Health”</p> <p>Prepare Case: Merck Global Health and Access to Medicines</p>
Make-up for Session 6 during regular class time	Mon Mar 31	<p>Private Sector Responses to Global Health Challenges: Part 5: The Problem of Drug Access</p> <p>Gilead Sciences- Stanford A Case</p> <ol style="list-style-type: none"> Does Gilead have responsibility to make its drugs available to people who cannot afford it? How far does this responsibility extend? Does Gilead’s responsibility extend to developing distribution networks and supervising the proper use of its drugs? Is it wise to rely on Axios for distribution of Viread in Africa? Should Gilead register Viread in each country or attempt to expedite the process by relying on import waivers? Are the government agencies in the developing countries likely to expedite approval of the sale of Viread? Are the media and AIDS activist groups likely to monitor and critique the success of the Gilead Access Program? What, if anything, should Gilead attempt to accomplish with the WHO, and how successful is it likely to be? In designing its Access Program with whom should Gilead work or consult? How significant are the risks to Gilead’s intellectual property rights for Viread, specifically those posed by compulsory licensing and Indian generic manufacturers? 	<p>Case Discussion: Reading 19 Gilead Sciences, Inc: Access Program</p> <p>Course Pack:</p> <p>Reading 9: Economics of Essential Medicines</p> <p>Reading 15: Setting Cost Effectiveness Thresholds</p>

		<p>9. How significant are the risks of drug reimportation and counterfeits? What strategy should Gilead develop to deal with these risks?</p> <p>10. What other problems or obstacles not mentioned above should Gilead be worried about? How should Gilead mitigate them?</p> <p>11. How should Gilead price Viread in each of the income tiers? Defend your pricing scheme based on strategic and/or normative principles.</p> <p>12. What are the lessons learned?</p>	
10	Mon Mar 31	<p>Special Symposium on Pharmaceutical Access in Light of IP Laws</p> <p>Featured Guests: Merck & Company Cipla Dr. Roman Macaya</p> <p>NOTE: THIS CLASS WILL BEGIN AT 6:00 PM in the LAW SCHOOL</p>	Required reading from course textbook: Farmer et al. Chapter 10: “Taking Stock of Foreign Aid”
	Sun Apr 6	Post Take-Away Exercise Submission by 11:59 PM. Post to Canvas>Assignments	
11	Mon Apr 7	<p>Guest Speaker:</p> <p>Wendy Woods Partner and Global Leader—Social Impact Practice, Boston Consulting Group</p> <p>Wendy is a partner and managing director in BCG's Boston Office. In addition to leading the firm's Social Impact practice, she is the topic leader of BCG’s global health work, as well as a member of the Health Care practice.</p> <p>In leading BCG’s social impact and global public health efforts, Wendy has built deep expertise in developing countries around the world, and she works extensively with foundations, public-private partnerships, and multilateral organizations. Teaming with these organizations, she has helped develop strategies, create</p>	<p>Required reading from course textbook: Farmer et al. Chapter 11: “Global Health Priorities for the Early Twenty-First Century”</p> <p>Reading 10: Health and Human Rights, Mann et al</p> <p>Reading 14. An Introduction to Global Health Policy, Lee et al</p>

		<p>partnerships, strengthen operational capabilities, and improve approaches to delivering health interventions. She has led numerous projects that focus on HIV, tuberculosis, malaria, diarrheal disease, pneumonia, and oncology, across the primary intervention areas of drugs, vaccines, and diagnostics.</p> <p>Before BCG, Wendy was a consultant to the Organization for Economic Cooperation and Development (OECD), and she also worked as a senior economist for the U.S. Bureau of Labor Statistics. She has a degree in economics from the University of Michigan, and she earned her MBA from the Kellogg Graduate School of Management at Northwestern University.</p>	
12	Mon Apr 14	<p>Guest speaker: Dr. Felix Olale CEO and Executive Chairman, Excelsior Firm</p> <p>Dr. Felix Olale is the CEO and Executive Chairman of Excelsior Firm, where is the sector leader for healthcare and specializes in the use of public-private partnerships (PPPs) to finance large scale, high growth projects in Sub-Saharan Africa. Dr. Olale is also a Special Advisor to the International Finance Corporation, a member of the World Bank Group, in their Healthcare for Africa Initiative.</p> <p>Until recently, Dr. Olale was an Associate Partner at McKinsey & Company in New York and a leader in McKinsey's Pharmaceutical and Medical Products and Global Public Health Practices. Dr. Olale's has advised clients across the entire healthcare value chain in the private and public health sectors and his healthcare work spans North America, Europe, Asia and Africa.</p> <p>Dr. Olale also sits on the Kenya Government's Planning Committee for Diaspora Affairs and is an Advisor to the Ministry of Industrialization on improving</p>	<p>Required reading from course textbook: Chapter 6 “Building an Effective Rural Health Delivery Model in Haiti and Rwanda”</p> <p>From Canvas (see Session 4): McKinsey Health in Africa Report (read sections of interest to you)</p>

		<p>the business climate for entrepreneurs to enhance Kenya as a global investment destination. He is a member of the African Leadership Network and Africa 2.0, both prestigious groupings of the most dynamic young leaders in Africa.</p> <p>Dr. Olale received his Medical Degree and Doctorate from New York University's School of Medicine and completed his Bachelor of Arts degree (Hons.) from the University of Pennsylvania where he was a University Scholar, recipient of the Phi Beta Kappa Award for Best Senior Thesis, and the Deans Award for Outstanding Undergraduate Research.</p>	
13	Mon Apr 21	<p>Private Sector Responses to Global Health Challenges: Part 4: The Case of Vaatsalya</p> <p>Questions to consider:</p> <ol style="list-style-type: none"> 1. What is the need that Vaatsalya Hospital address? 2. Why is this need satisfied by the market or commercial enterprises? 3. Why does Vaatsalya need to be a social enterprise? 4. What are the key drivers of Vaatsalya's business model? 5. What are some of the reasons that have led to Vaatsalya being able to establish a financially sustainable business even while meeting a social objective? 6. Is this model scalable? What are the enablers and constraints? 7. Does Vaatsalya need to do anything different from its current practices? 8. How does their model compare to that of other socially conscious private hospitals? Will they pose a competitive threat to Vaatsalya as it extends its reach? 	<p>Required reading from course textbook: Farmer et al. Chapter 12: "A Movement for Global Health Equity? A Closing Reflection"</p> <p>Reading 18: Prepare the Case Vaatsalya Hospital: Affordable Care in Proximity</p>

	Sat April 26	By Saturday, April 26, 11:59 PM: Upload to Canvas>Assignments a succinct PowerPoint summary of the project that you will present on the final day of class, Monday, April 28th. The standard length and allowed time for each presentation will be announced to the class by mid-semester once the final number of projects is determined (though will probably be about 5 to 10 minutes per presentation).	
14	Mon Apr 28	Student Presentations Student teams will have a designated period of time to present a summary of their course projects Instructor Summation	
	Weds April 30	By 5:00 PM post your final project to the Final Project Assignment Folder on Canvas	

