Reasonable Rationing: International Experience of Priority Setting In Health. Chris Ham and Glenn Robert (eds.). Maidenhead, England: Open University Press, 2003, 200 pp. \$31.95 (softcover).

Reasonable Rationing is, contrary to its title, a book about the intra-national experience of priority setting in health in five countries: Canada, The Netherlands, New Zealand, Norway, and the United Kingdom. It is certainly not an accident that the countries considered are all relatively rich countries with essentially universal coverage for health services. In a rich nation such as the United States, where a person is entitled to all the care he or she can afford, the question of priority setting rarely is addressed explicitlywith the exception, as the book notes, of Oregon. In the vast number of poor countries in the world, priority setting also is not addressed explicitly. Since there generally is neither revenue nor providers for such basic services as immunization or well baby care, deciding on the use of sophisticated and expensive procedures or technologies is just not on the radar screen.

However, for those interested in the issues surrounding priority setting in wealthy countries with relatively universal access to medical care, this book provides five excellent case studies. What these case studies all confirm is that despite the efforts to develop "rational" priority setting mechanisms in all five countries, the actual decisions about available services are made at a variety of levels, by a variety of actors with motivations only rarely determined by costs and benefits. In short, priority setting in all these countries is a highly political process that involves much more than simply the rational consideration of whether a particular procedure will add more years to life than some other procedure that costs the same amount or less.

The book is an easy read and, for the student of priority setting, it brings together the experience of the five countries in one volume. Having done so, it provides substantial information about how these experiences have played out and how successful the efforts have been. However, the book raises two considerably larger and different questions that are never explicitly stated, nor discussed. These are the importance of medical services per se, and the question of why rationing is important in the first place.

In regard to the first issue—the importance of medical services—it is useful to note that in their discussion of Canada, Douglas Martin and Peter Singer point out that the Canadian health system has been rocked by a number of crises, including closings of facilities, reductions in lengths of stay due to lack of funds, longer waiting times for services, and declining reputation. They also say: "However, despite these 'crises' the health status of Canadians continues to improve—the infant mortality rate is 5.8 per 1,000 births, the life expectancy of Canadians is 79 years (second only to the Japanese)" (p. 44). Medical services are clearly important for some specific people in a valetudinarian state. But their importance for improving the health of populations is far outweighed by a number of other societal-level factors, such as the education of women, the gross national product, the availability of potable water, diet, television viewing, and travel by automobile.

There have been few efforts to address the broader issues of priority setting in the expenditure of either public or private funds as this relates to the relative value of medical services compared to other reasonable interventions. Perhaps it is true that many medical interventions are available for use against specific disease, while few interventions exist, for example, to improve people's diets. But perhaps this reflects the lack of attention that has been given to nutrition as a determinant of national health, or to the many other nonmedical determinants of national health.

The second issue, it seems to me, is even more important. Why discuss rationing in the first place? The five countries considered are some of the richest in the world. Clearly, there is never enough money for everything that might be done. And these countries are not as rich individually, or even collectively, as a nation like the United States. Yet as exists in the United States, there is a vast reservoir of money in all of these countries. If priorities need to be set, it is not because the money for some particular medical procedure is not available, but because the decision has been made at some level not to spend the money on that procedure.

The argument about the inability to pay for all care in the United States, in particular, seems to be based on a premise that a certain surgery or medical procedure will actually use up the available money—as if the dollars for the surgery's cost will be taken behind the hospital and burned

Chris Ham, Robert Glenn

EBOOK: Reasonable Rationing Chris Ham, Robert Glenn, 2003-05-16 Reasonable Rationing is must reading for those interested in how to connect theory about fair rationing processes to country level practices. The five case studies reveal a deep tension between political pressures to accomodate interest group demands and ethically motivated efforts to improve both information and institutional procedures for setting fair limits to care. The authors frame the issues insightfully Professor Norman Daniels Harvard School of Public Health How are different countries setting priorities for health care. What role does information and evidence on cost and effectiveness play How are institutions contributing to priority setting. What are the lessons for policy makers Priority setting in health care is an issue of increasing importance. Choices about the use of health care budgets are inescapable and difficult A number of countries have sought to strengthen their approach to priority setting by drawing on research based evidence on the cost and effectiveness of different treatments. This book brings together leading experts in the field to summarize and analyse the experience of priority setting in five countries Canada. The Netherlands New Zealand Norway and the United Kingdom Drawing on literature from a range of disciplines it makes a significant contribution to the debate on the role of information and institutions in priority setting Reasonable Rationing has been written with a broad readership in mind. It will be of interest to policy makers health care professionals and health service managers as well as students of health and social policy at advanced undergraduate and postgraduate levels.

Reasonable Rationing Ham, Chris, Glenn, Robert, 2003-05-01 Health care rationing is a reality in much of the world and priority setting is an issue of increasing importance Choices about the use of health care budgets are inescapable and difficult This study look at priority setting in the health services of several countries Rationing in Health Care Iestyn Williams, Helen Dickinson, Suzanne Robinson, 2012 A clearly written and well structured textbook providing an introduction to decision making and priority setting this title brings together theories practice and evidence from a wide range of disciplines

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about the direction of health care In addition in an engaging and lively style it provides essential guidance for students of health policy who seek to understand the labyrinthine processes and the wide ranging unintended consequences for good and for bad of EU policy making Professor Naomi Chambers Head of Health Policy and Management Manchester Business School In this insightful book Scott Greer describes how European health policy has long been developed in a secret garden where a small number of people find pragmatic solutions to immediate problems while avoiding the fundamental questions Yet the logic of European integration is tearing down the garden's walls creating a public park where pragmatism takes second place to principles Something must be done but it is not clear what Greer's book will be essential reading for anyone who is responsible for organising how health care is delivered in Europe Martin McKee CBE London School of Hygiene and Tropical Medicine UK This important new book explains how European Union EU developed policies shape and constrain health services It answers the key questions asked of EU health policy What is it Why did it happen What does it take to influence it and how can it be changed Using extensive new data Greer discusses how EU policy is influenced by lobbies in Brussels and by four big member states France Germany Spain and the United Kingdom Shaping EU health policy takes information coordination nimbleness and focus The book examines the ways that the successful health lobbies and member states work identifies weaknesses and emphasizes the challenge to health policymakers if they do not influence EU health policies they will lose influence over their own health systems The Politics of European Union Health Policies will be of great interest to students and academics of EU policy and politics as well as health policy makers **Health Policy And Economics: Opportunities And Challenges** Smith, Peter, Sculpher, Mark, Ginnelly, Laura, 2004-11-01 Health economics has made major contributions to the development of health policy in many countries. This book describes those successes and looks forward to the major contributions that health economics can bring to bear on emerging policy issues in health and health care With contributions from internationally recognized researchers this book addresses generic policy issues confronting health systems across the developed world The coverage progresses from micro patient level issues to macro whole system issues including Determining cost effective treatments Fair distribution of health care Regulatory issues such as performance measurement and incentives Revenue distribution Decentralization and internationalization of health systems Health Policy and Economics identifies the major contributions that health economics makes to important policy issues in health and health care It is key reading for policy makers and health managers as well as students and academics with an interest in health policy and health services research Contributors Ron L Akehurst Karen E Bloor Martin Buxton Karl P Claxton Richard Cookson Diane A Dawson Paul Dolan Mike Drummond Brian Ferguson Hugh Gravelle Maria Goddard Katharina Hauck John Hutton Andrew M Jones Rowena Jacobs Paul Kind Rosella Levaggi Guillem Lpez Casanovas Alan K Maynard Nigel Rice Anthony Scott Rebecca Shaw Trevor Sheldon Andrew D Street Mark Sculpher Matthew Sutton Peter C Smith Adrian Towse Aki Tsuchiya Alan H Williams **Restructuring The Medical Profession: The Intraprofessional**

Relations Of Gps And Hospital Consultants Baeza, Juan, 2005-11-01 What is the relationship between general practitioners GPs and hospital consultants in the United Kingdom How does government health policy impact upon GPs and hospital consultants What influence does the medical profession have upon policy makers in the United Kingdom The medical profession occupies a dominant position within the British health care system and as such is able to influence the development and implementation of health policy. The main division within the medical profession lies between general practitioners and hospital consultants This book provides a comprehensive analysis of British health policy over the past twenty five years Drawing on data from case studies it provides empirical evidence of the impact of recent health policies upon the National Health Service in general and the medical profession in particular The case studies provide an analysis of the impact of the 1991 NHS reforms as well as examining the ongoing influence of the post 1999 NHS reforms upon these intraprofessional relations What emerges is that the relationship between GPs and hospital consultants is transforming from a collegial to a more managerial relationship This book sheds light on the resulting development of intraprofessional relations between GPs and hospital consultants within the NHS Restructuring the Medical Profession is key reading for undergraduate and postgraduate students researchers and professionals in the fields of social policy and health policy. It is also of interest to The European Patient Of The Future health service practitioners health service researchers and health policy makers Coulter, Angela, Magee, Helen, 2003-06-01 This book reports the results of a major study carried out in eight different European countries to look at health policy dilemmas through the eyes of the patient Drawing on literature reviews focus groups and a survey of 1 000 people in each of the eight countries the book addresses how patients no longer see themselves as passive recipients of care increasingly they expect to be involved in all decisions that affect them The New Health **Policy** Gauld, Robin, 2009-06-01 This book analyzes the issues that form the nucleus of the emerging new health policy agenda Robin Gauld brings together in one volume a comprehensive picture of the health policy challenges facing contemporary developed world health systems as well as the strategies for tackling these The book highlights the importance to policy makers of each subject overviews research into it and discusses policy responses in Britain New Zealand and the United States The New Health Policy is essential reading for all students of health policy and health care along with policy makers and health care professionals Book Jacket Remaking Policy Carolyn Hughes Tuohy, 2018-06-03 One of the most persistent puzzles in comparative public policy concerns the conditions under which discontinuous policy change occurs In Remaking Policy Carolyn Hughes Tuohy advances an ambitious new approach to understanding the relationship between political context and policy change Focusing on health care policy Tuohy argues for a more nuanced conception of the dynamics of policy change one that makes two key distinctions regarding the opportunities for change and the magnitude of such changes Four possible strategies emerge large scale and fast paced big bang large scale and slow paced blueprint small scale and rapid mosaic and small scale and gradual incremental As Tuohy demonstrates these strategies are determined not

by political and institutional conditions themselves but by the ways in which political actors individually and collectively read those conditions to assess their prospects for success in the present and over time Drawing on interviews as well as primary and secondary accounts of ten health policy cases over seven decades 1945 2015 in the US UK the Netherlands and Canada Remaking Policy represents a major advance in understanding the scale and pace of change in health policy and beyond

Constructive Conversations About Health Marshall Marinker, Fritiof Capra, 2018-08-15 Current health policy is required to respond to a constantly changing social and political environment characterised particularly in Europe by ageing populations increased migration and growing inequalities in health and services With health systems under increasing strain there is a sense that we need to seek new means of determining health policy Much political debate focuses on managerial issues such as the levels of health funding and the setting and missing of targets Meanwhile our moral imperatives our values and principles go relatively unexamined What are these values Can we agree their validity and salience How do we manage the paradox of competing goods Can we find new ways of talking about and resolving our conflicting values and competing priorities in order to create sound appropriate and just health policies for the 21st Century Written by leading health policy makers and academics from many countries Constructive Conversations about Health examines in depth the underlying values and principles of health policy and posits a more enlightened public and political discourse The book will be invaluable for those involved in health policy making and governance politicians healthcare managers researchers ethicists health and social affairs media health rights and patient participation groups The literature on health policy is vast On offer are models of health services economic theory management theory disquisitions on ethical principles social analyses literally thousands of publications In a globalised and electronically networked world this literature has already generated its own particular language a policy jargon replete with terms that look deceptively familiar terms that will be much in evidence in what now follows terms whose meanings require our closest attention Marshall Marinker The health debate 2nd edition Hunter, David J., 2008-09-24 Health care systems across the world are in a state of permanent revolution as they struggle to cope with multiple pressures arising from changing demography new technologies and limited resources Focusing on the British NHS this book offers a fresh look at how it has coped with such pressures over its 60 year history and considers what the future holds The book explores the complexity of health policy and health services offering a critical perspective on their development The health debate offers a lively and accessible reassessment of successive reforms of the NHS and their cyclical nature The book will appeal to all students of health care and health policy and to policy makers and health care Ethics Leathard, Audrey, McLaren, Susan, 2007-01-10 While ethics has been addressed in the health care professionals literature relatively little attention has been paid to the subject in the field of social care This book redresses the balance by examining theory research policy and practice in both fields The analysis is set within the context of contemporary challenges facing health and social care not only in Britain but internationally Contributors from the UK US and Australia

consider ethical issues in health and social care research and governance interprofessional and user perspectives ethics in relation to human rights the law finance management and provision key issues of relevance to vulnerable groups such as children and young people those with complex disabilities older people and those with mental health problems and lifecourse issues ethical perspectives on a range of challenging areas from new technologies of reproduction to euthanasia This book is intended for academics students and researchers in health and social care who need an up to date analysis of contemporary issues and debates It will also be useful to practitioners in the public private and voluntary sectors including social workers community workers those working in the fields of disability and mental health and with older people Handbook of Governance David Levi-Faur, 2012-03-29 The Oxford Handbook of Governance presents an authoritative and accessible state of the art analysis of the social science literature on governance The volume presents the core concepts and knowledge that have evolved in the study of governance in different levels and arenas of politics and policymaking In doing so it establishes itself as the essential point of reference for all those studying politics society and economics from a governance perspective The volume comprises fifty two chapters from leaders in the field The chapters are organized in nine sections dealing with topics that include governance as the reform of the state democratic governance European governance and global governance Access to Care, Access to Justice Kent Roach, Lorne Sossin, Colleen M. Flood, 2005-01-01 Edited by Colleen Flood Lorne Sossin and Kent Roach the collection explores the role that courts may begin to play in health care and how this new role is of crucial importance to the Canadian public and their governments Health Care Coverage Determinations: An International Comparative Study Jost, Timothy, 2004-12-01 A ground breaking set of case studies about how health care coverage decisions are made Robert A Berenson M D Senior Fellow at the Urban Institute Washington D C and former Director of the Center for Health Plans and Providers of the Medicare program Developed countries are facing rapidly rising health care costs and one of the major factors driving health care cost growth is the continual development and diffusion of new generally more expensive health care technologies This book contains A description of the institutions procedures and criteria used by eight countries for assessing technologies for public insurance coverage An analysis of the role of interest groups and of the public interest in these decision making processes An examination of how particular technologies are treated differently by different countries and why Based upon research from Australia Canada Germany The Netherlands Spain Switzerland the United States of America and the United Kingdom the contributors argue that although each of these countries is committed to evidence based scientific assessment of technologies in fact adoption of technologies is significantly affected by political considerations and in particular by the influence of interest groups Moreover it offers recommendations as to how technology assessment for coverage policy can be improved to serve better the public interest Health Care Coverage Determinations is essential reading for health policy makers managers researchers and students with an interest in health economics health care provision and the politics affecting health care legislation Contributors Liliana

Bulfone Tanisha Carino Peter C Coyte Anna Garca Alts Colleen M Flood Stefan Gre Felix Gurtner Anthony Harris Timothy Stoltzfus Jost Eric Nauenberg Christopher Newdick Dea Niebuhr Guillaume Roduit Heinz Rothgang Frans F H Rutten Dominique Sprumont Juergen Wasem The Health Debate 2nd Edition David J. Hunter, 2008-09-24 Health care systems across the world are in a state of permanent revolution as they struggle to cope with multiple pressures arising from changing demography new technologies and limited resources Focusing on the British National Health Service NHS this book offers a fresh look at how it has coped with such pressures over its 60 year history and considers what the future holds The book explores the complexity of health policy and health services offering a critical perspective on their development A number of tensions are evident in contemporary health policy and the book is organised around a selection of these including the funding of health systems and the changing mix of public and private arrangements the capture of medicine by management the imbalance between health and health care and the growing emphasis on markets and competition in health care systems The health debate offers a lively and accessible reassessment of successive reforms of the NHS and their cyclical nature Two unique features of the book are its breadth and the assembly in one publication of a range of interrelated and largely unresolved policy puzzles It will appeal to all students of health care and health policy and to policy makers and health care professionals BOOK JACKET Prioritization in Medicine Eckhard Nagel, Michael Lauerer, 2015-10-30 The gap between a rising demand for health care services on the one side and scarce resources on the other is leading to a growing pressure on decision making processes Hence prioritization in medicine has become an increasingly important issue for assuring stability of health systems and improving the capability of health care The present volume addresses normative dimensions of methodological and theoretical approaches the legal basis behind priority setting as well as international experiences concerning the normative framework and the process of priority setting It also examines specific criteria for prioritization and discusses economic evaluations Contributing authors from a broad range of scientific disciplines discuss prioritization within an international dialogue **The Health Debate** David J. Hunter, 2016-01-13 Focusing on the British NHS this book reviews some of the key contemporary debates concerning health systems and how they have shaped the way that health care has and is evolving Mindfulness-Based Treatment Approaches Ruth A. Baer, 2015-07-14 Eastern spiritual traditions have long maintained that mindfulness meditation can improve well being More recently mindfulness based treatment approaches have been successfully utilized to treat anxiety depressive relapse eating disorders psychosis and borderline personality disorder This book discusses the conceptual foundation implementation and evidence base for the four best researched mindfulness treatments mindfulness based stress reduction MBSR mindfulness based cognitive therapy MBCT dialectical behavior therapy DBT and acceptance and commitment therapy ACT All chapters were written by researchers with extensive clinical experience Each chapter includes the conceptual rationale for using a mindfulness based treatment and a review of the relevant evidence base A detailed case study illustrates how the intervention is implemented in real life exploring the clinical and practical issues that may arise and how they can be managed This book will be of use to clinicians and researchers interested in understanding and implementing mindfulness based treatments Comprehensive introduction to the best researched mindfulness based treatments Covers wide range of problems disorders anxiety depression eating psychosis personality disorders stress pain relationship problems etc Discusses a wide range of populations children adolescents older adults couples Includes wide range of settings outpatient inpatient medical mental health workplace Clinically rich illustrative case study in every chapter International perspectives represented authors from US Canada Britain Sweden Medical Proofs, Social Experiments Catherine Will, Tiago Moreira, 2016-04-22 Clinical trials have become key technologies for decision making in the contemporary world Their results shape medical practice and determine priorities across health care systems but the work that goes into producing credible data is often hidden Medical Proofs Social Experiments draws upon detailed case studies to argue that to understand their value we need to pay more attention to the contexts for these modern medical experiments recovering the diverse ways in which they involve doctors patients and the public the local practices that contribute to their completion and the complex negotiation of their results in professional and statutory institutions Presenting research from the UK USA Sweden and The Netherlands the ethnographic perspective adopted by the authors provides a space to explore the investments of different state market professional and other actors in particular forms of evaluation and the ways in which trial methodologies may be re designed or re imagined to satisfy social and political expectations As such this volume will be of interest to those working in the fields of science and technology studies the sociology and anthropology of medicine and researchers of policy and organisation in health care

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