Subject	**PUBLIC HEALTH POLICIES**			
	Type	Semester	ECTS	Code
	Elective	3	4	

Ligjëruesi i lëndës	
Asistenti i lëndës	
Tutori i lëndës	

Goals and Objectives	This course presents concepts to understand the development of principles and public health policy, and requires students to apply skills, knowledge, theories, and basic strategies in the process of developing public health policies. The main goal of the course is to support the development of a range of skills, strategies, and best practices to understand policies around public health issues, with a focus on resource-constrained environments. The course will address, among other things: 1. Policies with low income that achieve public health goals; 2. Public information, policymakers, community groups, businesses, non-profit groups, and partner organizations for the existence and rationale of public health goals; 3. Collaborative work of policymakers, community groups, businesses, non-profit groups, and partner organizations to propose and implement solutions to public health problems; and 4. Listening to community members regarding public health issues and personal knowledge of current public health practice and research, etc.
Expected Results	Upon successful completion of this course, students will be able to: - Develop a set of skills, strategies, and best practices for the development of public health policies. - Understand, formulate, and analyze policies related to public health issues, with an emphasis on resource-constrained environments. - Develop, assess, and simulate the implementation of public health policies. - Comprehend the politics behind public health policy. - Formulate relevant questions and conduct research using information from relevant theory and appropriate data and research methods towards a course essay.

Content	**Weekly plan**	**Week**
	Introduction: **• Presentation of the curriculum, and an introduction to the subject based on the work of N. Ramadan: Kosovo School of Public Health.**	1
	Structure of the healthcare system	2
	Priorities	3
	• **The Future of Healthcare in Kosovo**Strategjia jonë	4
	Health Policy and the Role of the State	5
	Health and Quality of Life	6
	Public Policy in Accordance with Health Imperatives	7
	Healthy Environmental Policy	8
	Healthcare System Policy	9
	Development and Implementation of Policies: 'Health for All'"	10
	Legislation	11
	Reforms in Stages	12
	Review, Student Presentations, and Preparation for the Final Exam	13/14
	Final Exam	15

Teaching Methods	**Aktivitety**	**Percentage (%)**
	1. **Interactive Lectures**	60%
	2. **Seminars (Research Work)**	20%
	3. **Case Studies**	10%
	4. **Role Play Simulation**	5%
	5. **Study Visits**	5%

	Assessment Activity	**Number**	**Week**	**Percentage (%)**

Assessment Methods					
	1.	Individual Project Work	1	2-15	50%
	2.	Presentations of Scientific/Professional Articles	1	2-15	10%
	3.	Participation in Lectures	15	1-15	40%

Resources and Means of Implementation	Instruments		Number
	1.	Classroom	1
	2.	Laboratory	n/a
	3.	Moodle	1
	4.	MATLAB/SPSS/SIMULINK Software	n/a
	5.	Projector	1

Workload and Activities	Type of Activity		Classes per week	Total load
	1.	Lecture	2	30
	2.	Consultations	0.5	7
	3.	Research Work	n.a	30
	4.	Indipendent Study	2-3	31
	5.	Exams	1	2

Literature/References	**Core Literature:** • Ramadani, N., *Shkolla Kosovare e Shëndetësisë Publike*. Shëndetsia Publike dhe etika: Prishtinë, 2003. • Longest Jr., Beaufort B., *Health Policymaking in the United States,* Fifth Edition, Health Administration Press, Chicago, Illinois, 2010. • Stone, Deborah, *Policy Paradox*, Third Edition, W.W. Norton & Company, New York, New York, 2011. • Sabatier P. (1999). (pp. 3-17): The Need for Better Theories. In Sabatier, Paul A. (Ed). *Theories of the Policy Process*. Boulder, Colorado: Westview Press, 1999. • Materiale tjera të shpërndara në klasë nga mësimdhënësi i lëndës. **Additional Literature:** • Weinick R, Haisnain-Wynia R. (2011). Quality improvement efforts under health reform: how to ensure that they help reduce disparities – not increase them. *Health Affairs* 2011. • Hawkes S, K Aulakh B, Jadeja N, et al. (2015). Strengthening capacity to apply health research evidence in policy making: experience from four countries. *Health Policy Plan* 2015; • Kingdon JW. (2010). Chapter 7: The Political Stream. In *Agendas, Alternatives, and Public Policies*. • Brunner W, Fowlie K, Freestone J. (2011). Using media to advance public health agendas. Contra Costa Health Services, March 2011. • Strong D, Lipson D, Honeycutt T, Kim J. (2011). Foundation's consumer advocacy health reform initiative strengthened groups' effectiveness. *Health Affairs* 2011 • Gruendel J, Aber JL (2007). Bridging the gap between research and child policy change: the role of strategic communications inpolicy advocacy. In JL Aber, SJ Bishop-Josef, M Jones, KT McLearn, and DA Phillips eds. Child development and social policy: knowledge for action. The American Psychological Association. • Hansberger A. (2001). What is the policy problem? Methodological challenges in policy evaluation. *Evaluation* 2001 • Whitley J and Community Catalyst, Inc. (2003). Strength in numbers: a guide to building community coalitions, 2003. • Richard Klein, 2010. "What Is Health and How Do You Get It?" In *AgainstHealth: How Health Became the New Morality*, 15–25. New York: New YorkUniversity Press. • Robert Aronowitz, 2001, "When Do Symptoms Become a Disease?" Annals ofInternal Medicine. • Phelan, Link, and Tehranifar, 2010, "Social Conditions and FundamentalCauses of Health Inequalities: Theory, Evidence, and Policy Implications." • Jen'nan Ghazal Read & Bridget Gorman, 2010, "Gender and Health Inequality."
Contact	muhamed.tairi@ubt-uni.net
Note	• Evaluation in this course, as explained above, consists of 3 components: individual research work, presentation of articles and other tasks distributed in class throughout the week, and

	physical and active participation in lectures.
	• Students who have 3 absences during the semester will receive a maximum grade of 7 (seven) in this course. Meanwhile, those who have 4 or more absences during the semester will receive a maximum grade of 6 (six).
	• The course instructor reserves the right to make changes and adaptations during the semester in order to achieve the course goals more effectively. Of course, students will be informed in advance about these changes.