



**CENTRE FOR HEALTH ECONOMICS  
AND POLICY ANALYSIS  
ANNUAL REPORT**

**2006-2007**

# CHESA

- CHEPA was reorganized in 2006, with membership now falling under the two distinctive programs of Health Economics and Health Policy. The change responds to the growth and increasing prominence of academic scholarship in both areas.
- Julia Abelson was appointed Director of CHEPA and Jeremiah Hurley was appointed Associate Director. Abelson also oversees the Centre's health policy program, and Hurley oversees health economics.
- The Centre's membership expanded to 21 faculty, spanning six departments, three faculties and two schools across the University.
- Fiona Miller received a five-year CIHR New Investigator Award, and was appointed to the Senator William McMaster Chair in Health Policy for Innovative Technologies.
- John Lavis was renewed for a further five-year term as the Canada Research Chair in Knowledge Transfer and Exchange.
- CHEPA faculty members continued to be very successful in external grant competitions, receiving more than \$1.8 million in 2006/07 as principal investigators on grants from the Canadian Institutes of Health Research, Canadian Health Services Research Foundation and the Social Sciences and Humanities Research Council.
- Stephen Birch and John Eyles received a \$1.6 million grant from the Global Health Research Initiative to lead an international research project that pairs Canadians with researchers in developing nations to find solutions to global health problems.
- CHEPA faculty Ivy Bourgeault, Mita Giacomini and Michel Grignon each received grants from CIHR to lead research projects in their areas of expertise.
- A final report on the need for a different model of capitation payments for primary care physicians was submitted to the MOHLTC.
- CHEPA members played key roles in several conferences including the Better Analysis for Better Decisions conference, the annual conference of the Canadian Health Economics Study Group, and the 6<sup>th</sup> International Conference on Priorities in Health Care.
- CHEPA emeritus member George Torrance won a lifetime achievement award from the International Society for Pharmacoeconomics and Outcomes Research, and was inducted into the McMaster University Faculty of Health Sciences' Community of Distinction.

# Mission

To promote a collegial and supportive interdisciplinary environment that fosters excellence in acquiring, producing and communicating socially relevant knowledge in the fields of health economics and health policy analysis.

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CHEPA is an interdisciplinary health research centre that fosters excellence in acquiring, producing and communicating socially relevant knowledge in the fields of health economics and health policy analysis to inform decision-making at all levels of the health system.

Based at McMaster University, it is home to the largest concentration of health economists and health policy analysts in Canada, with 21 faculty members from three faculties, two schools and six university departments.

CHEPA distinguishes itself from other Canadian health services and policy research centres by the breadth and depth of its expertise in the growing fields of health economics and health policy.

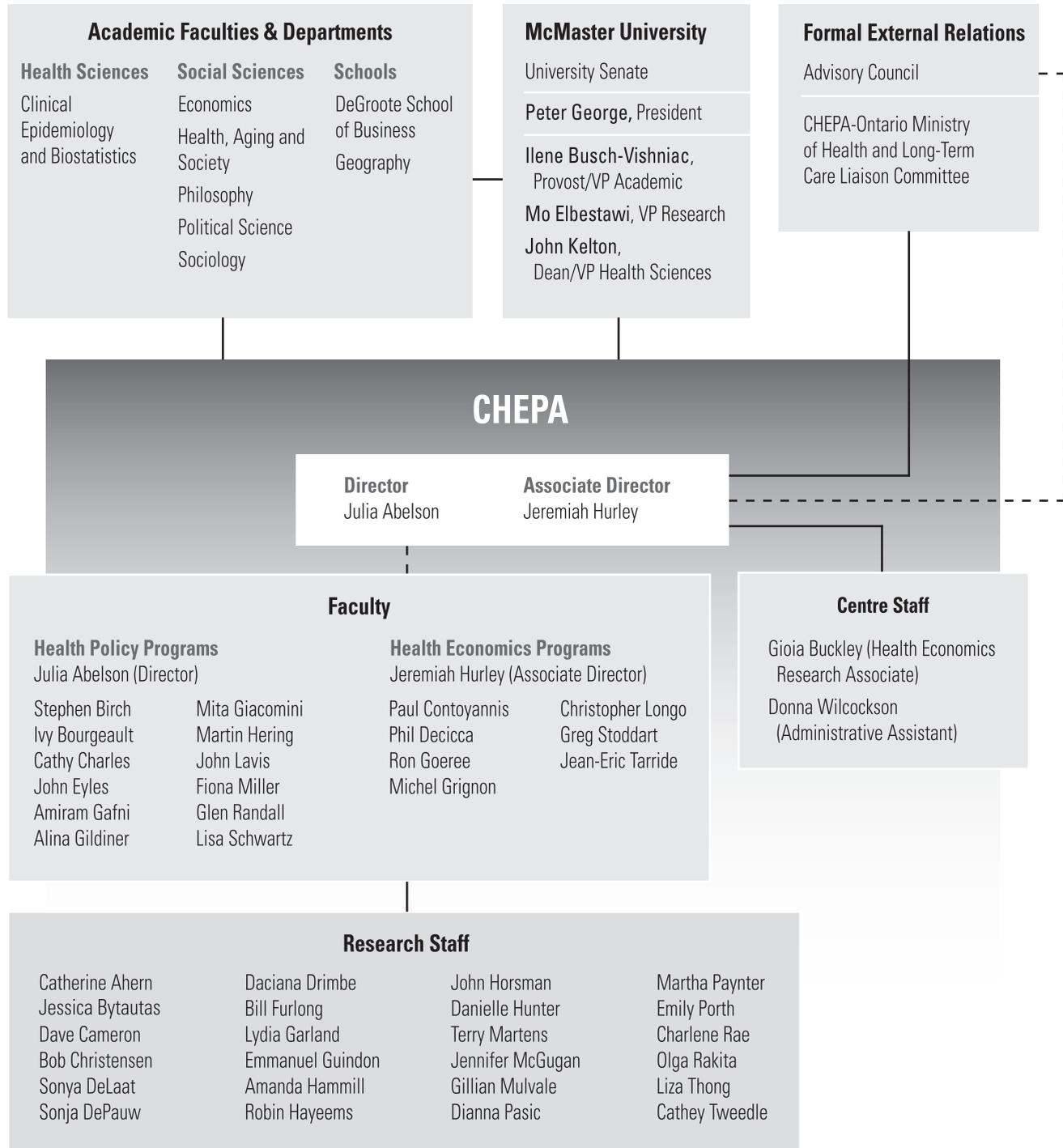
Its large talent pool of discipline-based and interdisciplinary researchers addresses a broad range of health, health care and health system problems through independent and collaborative research programs.

CHEPA researchers bring together a rich set of intellectual resources to tackle complex health and health care problems from a variety of perspectives such as economics, political science, ethics and sociology.

The development of new methods and the evaluation of health, health care and health systems are prominent features of CHEPA research. The centre has conducted pioneering work in the areas of knowledge transfer and exchange, economic evaluation and health technology assessment, and made notable contributions in health human resources and needs-based and primary care funding models.

# Organizational Chart

Who We Are



———— Reporting Relationship      - - - - Advisory Relationship

## Faculty

CHEPA welcomed six new members in Fall 2006. They are:

**Phil DeCicca**, assistant professor in the Department of Economics. He received his PhD in economics from the University of Michigan in 2005. In a broad sense, he is interested in the impact of incentives in public policies and programs on individual behaviour. His work focuses on topics in health economics and labour economics and the intersection of the two fields. DeCicca's current work in health economics builds on an existing interest in the impact of excise taxes on smoking behaviour. He is also involved in work on the relationship between economic conditions and health, as well as the existence and extent of competitive spillovers in public health insurance programs.

**Martin Hering**, assistant professor in the Department of Political Science and the Department of Health, Aging and Society. He studies the development of welfare states and the politics of welfare state reform, and is particularly interested in analysing stability and change in the two largest social programs in advanced industrialized countries: health care and pensions. He seeks to understand why health care systems are more resistant to fundamental change than pension systems, how policy-makers' ideas about health care shape policy alternatives, and how political parties and electoral competition facilitate or constrain health care reforms. His current research focuses on policy drift in the Canadian health care system and on policy initiatives of provincial governments that either reinforce or reduce inequities in health care utilization.

**Christopher J. Longo**, assistant professor in the DeGroote School of Business. He has 16 years of industry experience in clinical research, economic evaluation, and market access strategies for pharmaceuticals. He has published both clinical and economic research in a number of therapeutic areas including diabetes, cancer, sepsis and central nervous system disorders. His research interests include the economic and quality of life evaluation of pharmaceuticals in the areas of cancer, diabetes and sepsis, global pharmaceutical pricing strategies, the public/private mix in the financing of healthcare, the evaluation of factors influencing patients' financial burden for health care services, and factors that lead to higher individual consumption of health care resources. Longo has consulted with numerous provincial and federal agencies related to economic evaluation of pharmaceuticals.

**Glen E. Randall**, assistant professor in the DeGroote School of Business. He has more than 20 years of experience working with leaders in government, regulatory agencies and health care organizations. His current research includes an assessment of recent reforms to the delivery of home care services in Ontario and the impact of these reforms on the autonomy of health professionals. He is also the principal investigator of a study examining the evolution of mental health policy in Ontario as services shift from institutionally based to community-based delivery. This study focuses on variations among Assertive Community Treatment Programs in terms of compliance with program standards and approaches to the delivery of services.

**Lisa Schwartz**, associate professor in the Department of Clinical Epidemiology and Biostatistics and an associate member in the Department of Philosophy. She holds the Arnold L. Johnson Chair in Health Care

Ethics. She is a founding member of the Ontario Cancer Research Ethics Board (OCREB), and served as a consultant to Cancer Care Ontario (2001-2005), advising on issues of clinical ethics. Schwartz has been involved in the development of an ethics and moral reasoning stream of Professional Competencies for the undergraduate medical education program at McMaster, has led workshops to build faculty and staff knowledge in health ethics and has created a website on ethics in health care. Her research interests include health care ethics and ethics in health care education, research ethics, privacy and access to biosamples, patient advocacy, and measurement and effectiveness of ethics education.

**Jean-Eric Tarride**, assistant professor in the Department of Clinical Epidemiology and Biostatistics, and an associate member in the Department of Economics. He is also an investigator with the Program for Assessment of Technology in Health (PATH) and a member of both the Centre for Evaluation of Medicines and the Father Sean O'Sullivan Research Centre at St. Joseph's Healthcare. His primary research interests are in methods for the economic evaluation of health technologies, and treatment of uncertainty in health technology assessments (HTAs) and the decision-making process. Other areas of research include the longitudinal analysis of healthcare utilization data and the valuation of indirect costs in HTAs. Before coming to McMaster University, he was a consultant and manager of pharmacoeconomics and outcomes research for 10 years.

The six new members joined 15 existing members. They are:

**Julia Abelson**, Director of CHEPA, an associate professor in the Department of Clinical Epidemiology and Biostatistics and associate member of the Department of Political Science. She holds a Canadian Institutes of Health Research New Investigator Award and was a past recipient of an Ontario Ministry of Health and Long-Term Care Career Scientist Award. Her research interests include democratic participation in health system governance; the evaluation of innovations in the organization, funding and delivery of health services; and the analysis of the determinants of health policy decision-making. Through her research, education and service activities, Abelson works closely with decision-makers at provincial, regional and local government levels.

**Stephen Birch**, professor in the Department of Clinical Epidemiology and Biostatistics. His main research interests are in methods for economic evaluation of health interventions, equity in health care resource allocation and the relationship between health and environments. He is senior editor, health economics for Social Science and Medicine and a member of the Board of Directors for the Hamilton Niagara Haldimand Brant Local Health Integration Network. Birch also has academic appointments in the School of Medicine at the University of Manchester, UK and the Centre for Health Economics Research and Evaluation, at the University of Technology Sydney, Australia. He is a previous recipient of a research scholarship award under Health Canada's National Health Research and Development Program.

**Ivy Lynn Bourgeault**, Canada Research Chair in Comparative Health Labour Policy. She is an associate professor in the Department of Sociology and the Department of Health, Aging and Society. The focus of her CRC is a comparative examination of the migration of health care providers into and out of Canada, the U.S., the U.K., and Australia. Bourgeault is a member of the National Steering Committee on Rural and Remote Women's Health and of the Canadian Interdisciplinary Network for Complementary and Alternative Medicine Research. In addition to her research comparing health occupations, she also studies rural health care issues, with emphasis on women's health and health care, and health care providers' views of complementary and alternative medicine.

**Cathy Charles**, professor in the Department of Clinical Epidemiology and Biostatistics. She is also a Research Collaborator in the SPARC (See, Plan, Act, Refine, Communicate) Program at the Mayo Clinic in Rochester, Minn. Her research interests include public and patient participation in health care and treatment decision-making, physician-patient communication, and the use of research information to improve decision-making in the clinical encounter. She is currently undertaking a variety of collaborative studies, both in Canada and internationally, on the above issues in different clinical contexts. She is a member of the editorial boards of two international journals: *Health Expectations* and *Patient Education and Counselling*.

**Paul Contoyannis**, associate professor in the Department of Economics. He has conducted research focused on the causes and consequences of inequalities in health, considering both theoretical and empirical issues relating to addiction, obesity and wage and income inequality. His main methodological interest is estimation and inference in complex microeconomic models. His research interests include health dynamics, determinants of health and health inequalities, the effects of childhood characteristics such as abuse and poor health on adult economic outcomes, and intergenerational transmission of income and health inequality.

**John Eyles**, social and policy scientist and a University Professor. He is a Fellow of the Royal Society of Canada, and a former director of the McMaster Institute of Environment and Health. He is also a professor of geography, and an associate in the departments of clinical epidemiology and biostatistics and sociology. He is author or co-author of some 200 books, peer-reviewed journal articles and technical reports in the health and social sciences fields. He has carried out work for national and provincial organizations and governments in Canada. His research interests include evaluation of health care systems and programs, the role of science and other factors in health and environment settings, and health and science policy.

**Amiram Gafni**, professor in the Department of Clinical Epidemiology and Biostatistics. He is also a research associate with the Research Institute for Quantitative Studies in Economics and Population, in the Faculty of Social Sciences at McMaster. His research interests are in the area of economic evaluation of health care programs (both methods development and empirical applications), modelling of consumers' health-care behaviour, models of patient-physician decision-making (e.g., shared decision-making), policy analysis and risk and decision analysis in health. He has been involved in research projects covering topics ranging from the

care of premature babies to end of life care. He is involved in numerous ongoing research projects, examining subjects related to cardiovascular disease, hypertension, HIV/AIDS, breast cancer, complex continuing care and patient values.

**Mita Giacomini**, associate professor in the Department of Clinical Epidemiology and Biostatistics. Her publications have addressed topics such as ethical and political reasoning in health technology assessment, health care rationing, interdisciplinarity in health research, the idea of “values” in Canadian policy rhetoric, and the clinical uses of qualitative evidence. Current research projects focus on argumentation and evidence in health technology coverage decisions, values and ethics in Canadian health policy, and life support technologies in intensive care. She is a member of the Ontario Health Technology Assessment Committee. Research interests include social and ethical dimensions of health technology assessment, health resource allocation and ethics and values in health policy analysis.

**Alina Gildiner**, assistant professor in the Department of Political Science and the Department of Health, Aging and Society. Her research interests deal with the politics and meaning of privatization, particularly how historical legacies have shaped these and how they continue to change in new historical contexts. Empirical work to date has focused on the impact of the organization of policy decision-making on public-private change, drawing largely on historical-institutionalist approaches. Other research interests include social and public policy in welfare states, the implications of social policy development and regimes in developed countries for those in developing countries, and public and private insurance for health and disability.

**Ron Goeree**, associate professor in the department of Clinical Epidemiology and Biostatistics, and Director of the Program for Assessment of Technology in Health (PATH) Research Institute. PATH consists of a series of educational and research programs focusing on the evaluation of new and existing health care technologies. This research fosters an evidence-based framework for assessing the value of new health technologies and builds valuable research partnerships between users, payers and researchers. Goeree has recently developed a new course in Advanced Decision Analytic Modelling. He has extensive experience as a consultant on research activities of government bodies, agencies and corporations. His research interests include health technology assessment, applied economic evaluation and development of new methods and techniques for economic appraisal.

**Michel Grignon**, assistant professor in the Department of Economics and the Department of Health, Aging and Society, and an adjunct scientist at the Institute for Work & Health in Toronto. Grignon has extensive experience at an international level in research projects and activities in the areas of health economics, health-related policies, health insurance and aging. His current research projects cover a broad range of topics, including how an aging society impacts health care expenditures in Canada and in France, and links between age and workplace absenteeism. He is also involved in research examining inequities in health care utilization and health policy in Canada, as well as exploring equity and efficiency by using experimental economic methods for financing health care.

**Jeremiah Hurley**, Associate Director of CHEPA, a professor in the Department of Economics and an associate member of the Department of Clinical Epidemiology and Biostatistics. He has conducted research on physician behaviour and physician payment systems; resource allocation and funding models for health care; financial incentives in health care; prescription drug programs and normative frameworks for economic analysis in the health sector. His current work focuses on public and private roles in health care financing, resource allocation, needs-based capitation funding, and equity in health care utilization. He has published in leading health economic and health services research journals and has acted as a consultant to regional, provincial, national and international agencies.

**John Lavis**, Canada Research Chair in Knowledge Transfer and Exchange, an associate professor in the Department of Clinical Epidemiology and Biostatistics, and an associate member of the Department of Political Science. His principal research interests include knowledge transfer and exchange in public policy-making environments and the politics of healthcare systems. He directs the Program in Policy Decision-Making, a research program affiliated with CHEPA. He is president of the Pan American Health Organization (PAHO) Advisory Committee on Health Research, a member of the Alliance for Health Policy and Systems Research (AHSPR) Scientific and Technical Advisory Committee, and a member of the Cochrane Collaboration's Effective Practice and Organization of Care (EPOC) Review Group.

**Fiona Miller**, assistant professor and holder of the Senator William McMaster Chair in Health Policy in the Department of Health, Aging and Society. She is an associate member of the Department of Clinical Epidemiology and Biostatistics, and holds a New Investigator Award from the Institute for Health Services and Policy Research of the Canadian Institutes of Health Research (CIHR). Miller leads a broadly based research program centred on health technology policy, particularly for genetic and genomic technologies, and including the social organization of health services, social and ethical issues in resource allocation, genetic screening and genetic research, and innovation creation in health biotechnology.

**Greg Stoddart**, professor in the Department of Clinical Epidemiology and Biostatistics, and an associate member of the Department of Economics. His current research interests address topics from both the economics of health care and the economics of health, including the public-private mix in health care finance, the development and application of conceptual frameworks for studies of the determinants of health and knowledge transfer to inform policy-making about health and health care. He has developed several new courses and programs during his 30-year teaching career at McMaster. He has served as a consultant to the World Health Organization, the World Bank, and several Canadian ministries of health and task forces.

## Advisory Council 2006-2007

The members of CHEPA's Advisory Council represent key target audiences for CHEPA's research and leaders in the health sector in Canada. The Advisory Council and its members provide CHEPA with strategic advice, facilitate linkages with health decision-makers and stakeholders, and inform CHEPA's knowledge exchange activities.

**Betty Muggah (Chair) \***

Vice-president  
Grants and Community Initiatives  
Hamilton Community Foundation

**Julia Abelson**

Director, CHEPA  
McMaster University

**Terry Albert**

Executive Director  
Corporate Affairs  
Canadian Medical Association

**Lillian Bayne**

Independent consultant in health policy,  
planning and research  
Lillian Bayne and Associates  
BC Regional Officer, CHRSF

**Charlyn Black**

Director  
Centre for Health Services and Policy  
Research  
University of British Columbia

**Sheree Davis**

Executive Lead  
Strategic Directions  
Ministry of Health and Long-Term Care

**Jeremiah Hurley**

Associate Director, CHEPA  
McMaster University

**Shan Landry**

Vice-President, Primary Health  
Saskatoon Health Region

**Ginette Lemire Rodger**

Chief of Nursing  
Ottawa Hospital – General Campus

**Mary Catherine Lindberg**

Executive Director  
Ontario Council of Teaching Hospitals

**Sandra MacDonald-Rencz**

Acting Executive Director  
Office of Nursing Policy  
Health Canada

**Maureen A. Quigley**

Health Strategies Facilitator and Adviser  
Maureen Quigley and Associates Inc.

**John Ronson**

Partner  
Courtyard Group, a professional services  
firm specializing in the health care field

**Noralou P. Roos**

Professor, Community Health Sciences,  
University of Manitoba  
Manitoba Centre for Health Policy  
Canada Research Chair in Population Health

\* Betty Muggah resigned from the Advisory Council at the end of the 2006/07 term.

## Ministry Responsive Research

Research responding to specific health system management and policy priorities as determined by the Ontario Ministry of Health and Long-Term Care is among the work conducted by CHEPA. During the 2006/07 fiscal year, CHEPA researchers launched two new projects and submitted two final and two draft research project reports as part of their ministry responsive research program.

Two new projects were launched early in 2007:

*Primary Care Needs of Rural and Northern Physician Group Agreement Practice Populations:* Led by CHEPA emeritus member Brian Hutchison, this project is designed to assess the current funding for physicians in rural and northern Ontario, and examine alternative funding methods related to a measure of need for primary health care. The results will inform the next round of negotiations between the ministry and the Ontario Medical Association, regarding physician payment.

*Impact of Fee Schedule Changes and Other Financial Incentives on Physician Behaviour:* CHEPA Associate Director Jeremiah Hurley is the principal investigator on this project that is analysing the impact of selected changes in the physician fee schedule and of selected special payments on the delivery of services by Ontario doctors.

Final reports were submitted during the year for the following projects:

*Needs-Adjusted Primary Care Capitation Payment: Development and Comparison of Models:* This project examined the need for and the validity and feasibility of incorporating factors beyond age and sex into primary care capitation payment models. It examined whether demographic, health status and socioeconomic characteristics of individuals and regions should be factored into capitation payment models.

*Literature Review on Economic Evaluation of Early Hospital Discharge/Clinical Pathways:* This report identifies literature on methods used to estimate the economic impact of early discharge, and examined data on the health and economic effects of early discharge programs associated with congestive heart failure, chronic obstructive lung disease and hip/knee replacements.

Draft reports have been submitted on two projects:

*Funding and Provider Payment for Interdisciplinary Primary Health Care Organizations:* This literature review and policy analysis examines the feasibility and desirability of developing a capitation funding model for interdisciplinary primary health care.

*Assessing Ontario's Capacity to Use Research Evidence:* This project assessed Ontario's and Canadian efforts to link research to action in public policy-making and health system management.

## Working Papers and Publications

Research conducted by CHEPA members and staff can be found in a range of journals, books and other publications that deal with health economics, health policy analysis and health treatments and care. The research can also be published as Working Papers on the CHEPA website. The Working Papers Series provides a means to circulate polished, but not yet published reports. The aim of the Working Papers is to stimulate discussion on analytical, methodological and policy issues in health economics and health policy analysis. All Working Papers are available on the CHEPA website ([www.chepea.org](http://www.chepea.org))

The most recent Working Papers are:

06-04 Crossley TF, Hurley J, Jeon S-H.

*Physician Labour Supply in Canada: a Cohort Analysis.*

07-01 Hurley J, Guindon GE, Rynard V, Morgan S.

*Publicly Funded Medical Savings Accounts: Expenditures and Distributional Impacts.*

07-02 Mulvale G, Abelson J, Goering P.

*Mental Health Service Delivery in Ontario, Canada: How Do Policy Legacies Shape Prospects for Reform?*

Examples of other work published by CHEPA researchers in 2006/2007 include:

Abelson J, Giacomini M, Lehoux P, Gauvin FP. *Bringing 'the public' into health technology assessment and coverage policy decisions: from principles to practice. Health Policy.* 2007; 82(1):37-50.

Abelson J, Forest PG, Eyles J, Casebeer A, Martin E, Mackean G. *Examining the role of context in the implementation of a deliberative public participation experiment: results from a Canadian comparative study. Social Science and Medicine.* May 2007; 64(10):2115-28.

Birch S, Gafni A. *The biggest bang for the buck or bigger bucks for the bang: the fallacy of the cost-effectiveness threshold. Journal of Health Services Research and Policy.* January 2006;11(1): 46-51.

Birch, S, Kephart, G., Tomblin-Murphy, G., O'Brien-Pallas, L., Alder, R., MacKenzie, A. *Human Resources Planning and the Production of Health: A Needs-Based Analytical Framework. Canadian Public Policy,* 2007, 33 (sl):1-16.

Charles C, Gafni A. *Can I accurately predict the impact of an illness and its treatment on my future subjective well-being? A complex question that does not have a simple answer. Health Expectations,* September 2006; 9(3):252-4.

Giacomini M, Cook D, DeJean D, Shaw R, Gedge E. *Decision tools for life support: a review and policy analysis. Critical Care Medicine.* March 2006; 34(3): 864-70.

Jeon, S, Hurley J. *The Relationship between Physician Hours of Work, Service Volume and Service Intensity. Canadian Public Policy. Vol. 33 (Supplement)* January 2007: 17-30.

Lavis JN, Lomas J, Hamid M, Sewankambo N. *Assessing country-level efforts to link research to action. Bulletin of the World Health Organization 2006; 84(8): 620-628.*

Tarride JE, Gordon A, Vera-Llonch M, Dukes E, Rousseau C. *Cost-effectiveness of pregabalin for the management of neuropathic pain associated with diabetic peripheral neuropathy and postherpetic neuralgia: a Canadian perspective. Clinical Therapeutics.* November 2006; 28(11):1922-34.

## Knowledge Exchange Program

Ensuring that the knowledge generated through the work of CHEPA members is effectively communicated to health system decision-makers and other stakeholders is a vital aspect of the organization's role.

Relevant research in user-friendly formats is important to planners, policy-makers and practitioners at the administrative and clinical level, as well as to others working in health systems research.

John Lavis, Canada Research Chair in Knowledge Transfer and Exchange, oversees CHEPA's Knowledge Exchange program, which includes various strategies for communicating and sharing knowledge created by or relevant to the goals of CHEPA.

These include web-based and print publications, as well as regular seminars.

Visit the website at [www.chepa.org/KnowledgeExchange/](http://www.chepa.org/KnowledgeExchange/) for more information.

## Website and Newsletter

The CHEPA website at [www.chepa.org](http://www.chepa.org) serves as a gateway for information on CHEPA's research and educational activities, and details on seminars, publications and presentations by CHEPA faculty. It includes a searchable literature database, current to 2006, of all publications by CHEPA members, plus a Working Papers section where members circulate papers that are polished but not yet accepted for journal publication. Faculty profiles, information and application forms for student awards and the annual Year In Review publication are also available on the site.

An electronic newsletter that highlights CHEPA developments and lists new publications by members is published three times a year. You can view the newsletters on the website, or sign up to have it sent directly to your e-mail address. Go to [www.chepa.org/newsletter](http://www.chepa.org/newsletter)

## Seminar Series

CHEPA organizes a Seminar Series that involves invited speakers, usually from universities or research centres outside of McMaster University. The seminars cover a broad range of topics, and are generally held once a month, on the third Wednesday. The series attracts attention from a large audience, drawn from both the University and the wider community interested in health and health care issues. During the 2006-2007 academic year, CHEPA hosted eight seminar speakers. Advance notice of the presentations is published on the CHEPA website.

### 2006-2007 Seminar Series Speakers

#### Re-thinking 'Neighbourhood Effects' in Research on Health and Childhood Development

Jim Dunn, Research Scientist, Centre for Research on Inner City Health, St. Michael's Hospital, Toronto, and Associate Professor, Departments of Geography and Public Health Sciences, University of Toronto

#### Ethics, Drugs and the Developing World: What Should We Expect of the Pharmaceutical Industry?

Joel Lexchin, MD, Professor, School of Health Policy and Management, York University, Toronto, and Emergency Physician, University Health Network, Toronto

#### A Strategy to Improve Priority Setting Within and Between Health Systems

Douglas Martin, Member of the Joint Centre for Bioethics, and Assistant Professor, Department of Health Policy, Management and Evaluation, University of Toronto

#### 'Embodied trust' meets 'scientific evidence': Exploring the dynamics in health care systems

Ellen Kuhlmann, Senior Researcher, Centre for Social Policy Research, University of Bremen, Germany

#### Surviving SARS, Preparing for Pandemics: Ethics, Infectious Diseases and Modern Health Care Organizations

Ross Upshur, MD, Director, Joint Centre for Bioethics, University of Toronto, and Canada Research Chair, Primary Care Research

#### Evidence-based lies: Estimating health care spending

François Béland, Professor, Health Administration Department, University of Montreal, and Co-director, SOLIDAGE Research Group, Jewish General Hospital

#### Purchasing health services in a regionalized health system: some tales from the Antipodes

Toni Ashton, Associate Professor in health economics, Centre for Health Services Research and Policy, School of Population Health, University of Auckland

#### Taking policy ethnography abroad: Methodological challenges in a study of Thailand's universal coverage health reforms

David Hughes, Professor, Institute of Health Research, Swansea University and Fellow of the National Centre for Public Policy

## Labelle Lectureship

Roberta Labelle was a founding member of CHEPA who died unexpectedly in 1991, when broad recognition for her research in health economics was just starting to emerge. In her memory, CHEPA and the Department of Clinical Epidemiology and Biostatistics collaborated in establishing the Annual Labelle Lectureship Series. Every October, a health services researcher with emerging recognition and an interdisciplinary approach to research, gives a general interest lecture on a topic in the broadly defined areas of health economics and/or health policy analysis. An endowment was established to assure the ongoing funding of the Lectureship.

### 2006 Labelle Lecture, October 4, 2006

#### Technology Innovation in Health Care: Who's Calling the Shots?

**Pascale Lehoux**, associate professor, Department of Health Administration, University of Montreal, and Canada Research Chair on Innovation in Health

With the continual push towards the development of new and better drugs, devices, services and other health interventions, health care systems are faced with the ongoing challenge of adapting to the new technologies and the ensuing rising cost of health care. But while new health technologies are constantly emerging, only some of them are promoted and funded for use in the general population.

At the 2006 Labelle Lectureship, Pascale Lehoux discussed the factors that play a role in determining which health technology innovations become part of the health care system. Lehoux described the findings of her research examining the "upstream" factors that have an impact on the ultimate use and dissemination of health technology innovations. Innovations can be anything from more user-friendly packaging of health products to complex diagnostic or treatment devices.

Lehoux said there are many factors and people that come into play before a health innovation ever makes it into the public domain. Business, researchers, health care professionals, patients and governments all play a role at various levels in the complicated process that starts with an idea to improve, change, or introduce something completely new in the health care field. She explained factors such as needs analyses, the design process, market constraints and opportunities, and the perception and practices of all those involved in the development of health technologies.

While some people believe pharmaceutical companies hold the lion's share of the power in health technology innovation, others think the government decision-makers who hold the purse strings are the key factor in what gets approved. Lehoux's research shows that there is no one group with the most influence. Each stakeholder group in health care technologies has an influential role in the process, and there is a major interdependency between all such players.

Lehoux obtained her PhD from the University of Montreal in 1996. She is a researcher with the Groupe de Recherche Interdisciplinaire en Santé, and the Canadian director of an International Master's Program in Health Technology Assessment.

## Courses

CHEPA's faculty members are committed to education and training, and active in teaching numerous programs and courses related to health economics and policy analysis. Their expertise crosses several departments in the Faculty of Health Sciences, the Faculty of Social Sciences and the DeGroot School of Business.

### Undergraduate

Students working towards degrees in a variety of disciplines can take courses being taught by CHEPA members. Examples include

- John Lavis' BSc 3GG3 Health Systems and Health Policy course
- Alina Gildiner's 3rd year Health Policy course (in Health Studies or PoliSci)
- Michel Grignon's 2CC3 Health Economics course

For information on undergraduate courses and programs taught by CHEPA faculty, visit the McMaster Undergraduate website at <http://registrar.mcmaster.ca/external/>

### Graduate

CHEPA faculty participate as course co-ordinators and instructors, thesis supervisors and academic advisers to master's and doctoral students in economics, geography, health research methodology, nursing, political science and sociology, and in the MBA program's health services management stream. In addition, a new PhD in Health Policy has been developed, and will start accepting students in 2008. For more information on graduate courses and programs, please visit the McMaster School of Graduate Studies website at [www.mcmaster.ca/graduate/](http://www.mcmaster.ca/graduate/)

## Activities

### Polinomics

Named after a merging of the terms policy and economics, Polinomics is a monthly seminar series that provides CHEPA members and others working or studying in the area of health economics and policy analysis the opportunity to present and gain feedback on work such as research papers that have not yet been published, or proposals for grants. A broad range of topics attracts individuals representing various disciplines from McMaster, and occasionally from outside universities or organizations. The seminars take place on the first Wednesday of the month. For more information on Polinomics, please e-mail Donna Wilcockson at [wilcocks@mcmaster.ca](mailto:wilcocks@mcmaster.ca)

## Awards and Fellowships

### CHEPA Studentship

The Studentship Award provides McMaster University students who are enrolled in a graduate program and have an interest in health economics and/or health policy analysis, with an opportunity to gain research experience and skills in an interdisciplinary environment. Students can either work on their own projects or on other ongoing projects run at the Centre or by its faculty.

### 2006/2007 Academic Year Studentship Recipient

**Jen Hunter** is a PhD candidate in the Health Research Methodology program at McMaster University. Working under the supervision of CHEPA members Cathy Charles and Amiram Gafni, she undertook a document analysis of the literature available on how medical treatment risks are communicated to patients, specifically as it applies to decision-making in practice. The analysis focuses on the ways in which health care providers are being advised to present risk probabilities to patients, and appraises the communications methods that are being recommended. The project also involves evaluating existing decision aids that are designed to help communicate probable treatment outcomes to patients, and aims to provide rationale and recommendations to improve such communications. Hunter, who previously worked as a research assistant at the University of Michigan's Center for Behavioural and Decision Sciences in Medicine, prepared a paper outlining the rationale, procedures and findings of the research project, and offered recommendations on communications practices as well as future research in this area.

### CHEPA Fellowship

The CHEPA Doctoral Fellowship is intended to provide income support for graduate students enrolled in a PhD program at McMaster University, whose field of research is health economics or health policy analysis. Candidates must be entering their first year of doctoral study at McMaster, be supervised by a CHEPA faculty member, and be nominated by the chair of their graduate program. The award carries an annual stipend of \$16,000.

### 2006/2007 Academic Year Doctoral Fellowship

**Jennifer Boyko** is a PhD student in Health Research Methodology, who worked under the supervision of CHEPA member John Lavis. She is conducting research to determine how information on the social determinants of health (SDOH) is, or can be, utilized by policy-makers in the field of primary health care. Through an overview of systematic reviews of SDOH intervention studies, she gathered knowledge to ensure the research is based on an understanding of effective interventions. Her thesis involves surveying researchers and policy-makers across Canada to examine the influential factors in knowledge translation involving SDOH and primary health care, followed by a case study of the knowledge-translation processes.

Education

As the final stage, she will convene a panel of researchers and policy-makers to discuss the provisional interpretation of the research findings, and derive implications that are sensitive to the two different fields. The research project aims to strengthen the role of public health research in health policy making, and improve collaboration between the key players in the knowledge translation process. Boyko previously earned a Master of Health Science degree from the University of Toronto.

# CHIEF PA





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