Executive Update

Highlights from the Member Survey

In the past few months, considerable emphasis has been placed on developing ‘between congress’ activities and benefits for iHEA members, including the establishment of several Special Interest Groups, developing a Feedly page which draws together information on recently published health economics research in one place, and the launch of a member networking app. Two new Board Subcommittees are in the process of being established, a Professional Development and a Fundraising Subcommittee (see later newsletter item for more details), which will strengthen the development and implementation of activities to benefit iHEA members.

The preliminary results of the recently concluded member survey provide valuable insights into members’ preferences and will be an important input to the deliberations of these new subcommittees. A few of the key results from the member survey are highlighted here.

The weighted average scores across all respondents (where individual respondents gave a score of 1 to the highest priority activity, 2 to the second highest priority and so on) for activities that iHEA could undertake are as follows:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Weighted average score</th>
</tr>
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<tbody>
<tr>
<td>Hosting a biennial congress</td>
<td>2.4</td>
</tr>
<tr>
<td>Facilitating networking with other health economists with shared research, teaching and/or policy interests</td>
<td>4.4</td>
</tr>
<tr>
<td>Disseminating information on recently published health economics research</td>
<td>5.3</td>
</tr>
<tr>
<td>Disseminating information on research funding opportunities</td>
<td>5.4</td>
</tr>
<tr>
<td>Disseminating information on job opportunities</td>
<td>6.0</td>
</tr>
<tr>
<td>Circulating a regular iHEA newsletter</td>
<td>6.3</td>
</tr>
<tr>
<td>Creating a repository of health economics teaching materials</td>
<td>6.5</td>
</tr>
</tbody>
</table>
Facilitating networking between researchers and policy makers | 6.6
Providing mentoring programs | 7.9
Providing more opportunities for Doctoral students to present and receive input on their research | 8.0
Running short courses (e.g. a summer school to develop specific skills) | 8.1
Hosting regular webinars | 9.1
Developing a health economics version of ‘TED talks’ video material | 10.0

There are some differences in the ranking of these activities by respondents from each of the United Nations regions and according to years of health economics experience. For example, mentoring programs received a relatively higher ranking by early career researchers and respondents from Africa, while short courses received a higher ranking from Latin American respondents.

In terms of the preferred focus for mentoring activities, there are considerable differences across regions. While mentoring on career pathways and employment opportunities are the highest priority for respondents from Europe, North America and Oceania, support for deepening analytic skills was seen as a higher priority by respondents from Africa, Latin America and Asia.

The member survey also indicates that respondents favor webinars that focus on key debates in health economics, such as alternative methodological approaches to addressing particular research questions, or on topical health policy issues. Early career researchers also prioritized webinars on general academic skills development (e.g. writing a successful conference abstract; tips for publishing in peer review journals; writing funding proposals).

Many helpful suggestions were provided in the open-ended questions at the end of the survey, which will also be considered in planning future activities. As an international association, we will endeavour to balance the different needs and preferences of our members, which may require targeting certain activities to specific groups, such as early career researchers and different regions.

We would like to thank all members who responded to the survey; we value your inputs and they will be taken into account in our planning.

Di McIntyre – Executive Director
IHEA is the only global association devoted to health economics. We are all dedicated to the proposition that insights from economics have universal application to understand and improve health and health systems. I think there is no more timely illustration of the universal concerns of health economists then the Alma Ata Declaration. This short statement of principles turns 40 years old this year on September 12 and miraculously achieved the approval of 134 country representatives at the height of the Cold War in 1978. The declaration had input from East and West, North and South and was able to crystallize universal and timeless principles of health and health systems.

Generations of health economists have adapted the principles to their own contexts and future generations will continue to do so. The principles apply equally to settings of affluence and poverty. The declaration was the springboard for highly rationalized resource allocation models that selected high impact, low cost interventions based on economic analysis. It was also a departure point for many horizontal efforts to build integrated systems of public health, primary services, and multi-sectoral responses to the social determinants of health. The Alma Ata Declaration was the first global expression of the importance of prioritizing those most in need—a precursor to the later development of a health equity focus that remains of great concern to many IHEA members. If you haven’t reread it in a while, I would encourage you to review the original text (see excerpt). I think you will find something that resonates with your motivation to be a member of a global organization devoted to the economics of health and health systems.

Presidents Corner

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Primary health care:

reflects and evolves from the economic conditions and sociocultural and political characteristics of the country and its communities and is based on the application of the relevant results of social, biomedical and health services research and public health experience;

addresses the main health problems in the community, providing promotive, preventive, curative and rehabilitative services accordingly;

includes at least: education concerning prevailing health problems and the methods of preventing and controlling them; promotion of food supply and proper nutrition; an adequate supply of safe water and basic sanitation; maternal and child health care, including family planning; immunization against the major infectious diseases; prevention and control of locally endemic diseases; appropriate treatment of common diseases and injuries; and provision of essential drugs;

involves, in addition to the health sector, all related sectors and aspects of national and community development, in particular agriculture, animal husbandry, food, industry, education, housing, public works, communications and other sectors; and demands the coordinated efforts of all those sectors;

requires and promotes maximum community and individual self-reliance and participation in the planning, organization, operation and control of primary health care, making fullest use of local, national and other available resources; and to this end develops through appropriate education the ability of communities to participate;

should be sustained by integrated, functional and mutually supportive referral systems, leading to the progressive improvement of comprehensive health care for all, and giving priority to those most in need;

relies, at local and referral levels, on health workers, including physicians, nurses, midwives, auxiliaries and community workers as applicable, as well as traditional practitioners as needed, suitably trained socially and technically to work as a health team and to respond to the expressed health needs of the community

- David Bishai, iHEA President
Student Prize Winner

The iHEA Student Prize is to recognize excellence by students in the field of health economics. It was first awarded in 1999 and biennially thereafter to coincide with the iHEA congress. As from 2017, there has been a standing Student Paper Prize committee to award this prize annually to the Masters or Doctoral student paper judged as best in the award year. Each year the Committee will consider a short list of submitted papers evaluated by all of the committee members using similar criteria to that of the long established Arrow Award. This year, 40 papers were refereed by the Prize Committee.

On behalf of the Committee, we are very pleased to announce the 2018 Prize is being awarded to the joint student paper by Mujahed Shaikh and Tobias Muller (Austria/Switzerland) "Your retirement and my health behavior: Evidence on retirement externalities from a fuzzy regression discontinuity design". The paper presents evidence on intra-household retirement externalities by assessing the causal effect of spousal retirement on various health behaviors and health status across 19 European countries. It identifies significant increases in the frequency and intensity of alcohol consumption combined with a significant decrease in moderate physical activities as a response to partner’s retirement. They find that own retirement has significant positive effects on engaging in moderate and vigorous physical activities but also leads to a significant increase in the frequency of alcohol intake, and that subjective health is negatively affected by spousal retirement and positively by own retirement.

Honorable mentions go to the 2nd placed joint paper by Ana Maria Costa-Ramonand and Ana Rodriguez-Gonzalez (Spain) "It’s About Time: Cesarean Sections and Neonatal Health", and joint 3rd place papers by Quitterie Roquebert and Marianne Tenand (France) "Pay less, consume more? The price elasticity of home care for the disabled elderly in France"; and Adrian Rubli (USA) "Low-Cost, Limited-Service Private Healthcare Providers: Evidence from Mexico".

The 1st prize is subsidized travel, accommodation and registration for the next iHEA Congress in Basel to present the paper in a Student Prize Special Organized Session chaired by the iHEA President, or Chair of the Prize Committee, as well as a cash prize. The papers in 2nd and 3rd place each receive a cash prize and complimentary registration for the next iHEA Congress. They are also invited to give brief presentations at the iHEA Congress Student Prize Special Organized Session.

Many thanks to all those who submitted papers for consideration, and to the Prize Committee for all their hard work. The next call for submissions will be issued later in 2018.

Student Prize Committee
Chairperson: Bruce Hollingsworth (Lancaster University, UK)
Tinna Asgeirsdottir (University of Iceland)
Rachel Baker (Glasgow Caledonian University, Scotland)
Edwine Barasa (KEMRI-Wellcome, Kenya)
Nicole Black (Monash University, Australia)
Joseph Dieleman (University of Washington, USA)
Emma Frew (University of Birmingham, UK)
Toshiaki Iizuka (University of Tokyo, Japan)
Rowena Jacobs (York University, UK)
Mustafa Karakus (WESTAT)
Arturo Schweiger (Universidad Isalud, Argentina)
Peter Sivey (Royal Melbourne Institute of Technology)
Aparnaa Somanathan (World Bank, Sri Lanka)
Veronica Vargas (Alberto Hurtado University, Chile)
Call for Abstracts for ASSA

Abstract Submission for 2019 ASSA Annual Meeting

The International Health Economics Association (iHEA), the American Society of Health Economists (ASHEcon), and the Health Economics Research Organization (HERO) are soliciting papers for presentation at the 2019 annual meeting of the Allied Social Sciences Association (ASSA), which includes the American Economic Association, to be held in Atlanta, Georgia on January 4-6, 2019 (Friday, Saturday, and Sunday). Based upon submitted abstracts, papers will be selected for two iHEA-organized sessions, one ASHEcon-organized session, and five HERO-organized sessions.

iHEA seeks abstracts for sessions that will focus on international health economics research, ASHEcon seeks abstracts related to US-focused health economics topics, and HERO seeks abstracts on all issues of relevance to the health economics field.

If you would like to submit your abstract as part of a group of abstracts for consideration as a complete session, please note the other abstracts in the Notes section of the abstract submission form and provide suggested discussants for each paper. Please note that this is not a guarantee that all papers in a set would necessarily be on the program.

Parallel review will take place by distinct review committees. The iHEA review committee will be chaired by the President-Elect (Winnie Yip, Harvard University). The ASHEcon review will be performed by Past-President (Mark Pauly, University of Pennsylvania), Kate Bundorf (Stanford University), Christopher "Kitt" Carpenter (Vanderbilt University), Robin McKnight (Wellesley College), and Frank Sloan (Duke University). The HERO Review Committee is comprised of Donald Yett (USC, HERO Program Chair), Amanda Kowalski (Yale University), and Kosali Simon (Indiana University).

iHEA, ASHEcon, and HERO are independent organizations each with affiliate status in the ASSA.

You can submit your abstracts using this form.

The deadline for submissions is May 1, 2018.

Call for Expressions of Interest to Serve on New Subcommittees

The iHEA Board has approved the establishment of two new subcommittees: a Professional Development Subcommittee and a Fundraising Subcommittee.

Professional Development Subcommittee
The Professional Development Subcommittee (PDS) will advise the board on new initiatives that help Health Economists as individuals and further the interests of the health economics profession, and assess the effectiveness of those new activities approved by the board once implemented. More specifically, the PDS will identify a range of new ‘between congress’ activities that iHEA could develop and implement. The PDS will also support the implementation of activities approved by the Board and will develop and implement monitoring and evaluation mechanisms for assessing the effectiveness of new
activities. As some of these new activities will require funding, the PDS will work closely with the Fundraising Subcommittee.

**Fundraising Subcommittee**
The subcommittee will advise the board on strategies for raising money to help iHEA pursue its mission. The main objective will be to secure grants and sponsorship for specific activities, but donations that can be used to expand the profile of iHEA and advance the health economics profession more generally can also be considered. While the subcommittee will contribute to raising funds for congresses, the main focus of the subcommittee will be on making recommendations for raising funds for those ‘between congress’ activities proposed by the PDS that are approved by the board.

**Subcommittee governance**
Membership of both subcommittees will be a combination of Board members, past Board members and iHEA members at-large who have expressed an interest in being more involved in iHEA. The board will consider self-nominations as well as suggest nominees and endeavor to keep membership balanced both regionally and by gender. Terms on the subcommittees will be for 2 years with up to 2 reappointments. The size of each subcommittee will be between 8 to 10, with a Board-appointed chair. In the case of the Fundraising Subcommittee, members should have prior experience of fundraising and have networks with funding organizations.

**Call for expressions of interest**
We call on iHEA members to submit expressions of interest to serve on one of these subcommittees. Please submit your CV and a covering letter, indicating which subcommittee you would like to serve on and your reasons for being interested. Please also summarize any relevant experience that would add value to the work of the committee (please note above requirements for the Fundraising Subcommittee). Expressions of interest should be sent to ihea@healtheconomics.org by April 17th, 2018. It is unlikely that we will be able to accommodate all members who express an interest in serving on a particular subcommittee, but we will keep all information on file for future committee work and will also seek to engage you in other iHEA activities.

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**SIG News**

**Activities of EOSIG**

**Response to UK Parliamentary Inquiry:** In February 2018, the UK All Party Parliamentary Group launched an inquiry into UK obesity services. A working group acting on behalf of the SIG responded to this inquiry on the 28th March 2018. This created an interesting debate within the working group linked to if obesity should be classed as a disease and the resulting consequences for prevention and treatment strategies. [Click here](#) to view the EOSIG response that was drafted.

**SIG Organised Session at EuHEA:** An organised session titled ‘Economic perspectives on Childhood Obesity Prevention’ has been accepted at the European Health Economics Association conference in Maastricht, July 2018. This session will provide an overview of childhood obesity trends at a global level and discuss the evidence base for population-wide interventions focused on the food and the school environment. EOSIG presenters include: Bruce Hollingsworth (University of Lancaster); Paul McNamee (University of Aberdeen); Richard Smith (London School of Hygiene & Tropical Medicine); Katie Breheny (University of Birmingham). The session will be chaired by Emma Frew (University of Birmingham).
Immunization Economics SIG

A SIG on immunization economics has been approved and is in the process of being established.

Objectives:
1. CONNECT international researchers in economics and related disciplines from low- and high-income countries to work on immunization research.
2. INFORM members with the latest developments in research on immunization value, costing, financing, and efficiency, while providing a forum on the application of methods and the topic of immunization economics.
3. COLLABORATION support and encouragement to generate rigorous new evidence in immunization economics, and on projects to identify best practices in associated research methodologies and policy implementation.

Conveners:
• Christian Suhaerlim, MD, MPH
• Stephen Resch, MPH, PhD
• Logan Brenzel, PhD

SIG activities may include the development of pre-congress, organized sessions, poster presentations, and social events centered on the iHEA congress; identification and financially supporting promising young researchers through grants and competitions; as well as the development of an Immunization Economics Webinar series (with certification of completion). If you are interested in learning more about the SIG activities, please complete the form here.

New Immunization Economics Teaching Resources Available

A new resource has become available that is of relevance to both the Immunization Economics SIG and the Teaching Health Economics SIG. The Teaching Vaccine Economics Everywhere (TVEE) project has announced that three modules from its vaccine economics curriculum are now available to the public for free on the JHSPH OpenCourseWare (OCW). The modules published are Health Economics for Vaccines, Costing in Vaccine Planning and Programming, and Economic Evaluation and are available here. Anybody can now download lecture slides, syllabi and exercises from this curriculum. Instructors can freely adapt this material for their own courses with attribution under the terms of Creative Commons licensing.

Economics of Palliative and End-of-Life Care Special Interest Group

People with serious and complex medical illness are the most significant challenge facing 21st century health care, yet economic research to inform policy and practice is relatively limited. The Economics of Palliative and End-of-Life Care SIG aims to bring together iHEA members to address both the priority policy questions and intriguing analytical challenges in this field. SIG activities, including a working paper, webinar series and Congress events are all now under active discussion. We welcome all iHEA members with a current or potential interest in this field to make contact and contribute, and particularly those with an interest in low- and middle-income countries.
If you are interested in joining this SIG, please contact ihea@healtheconomics.org

**Financing for Universal Health Coverage SIG**

Examples of some planned activities for the Financing for Universal Health Coverage SIG include:

- Establishing a virtual network by bringing together a large group of health economists with an interest and commitment to health financing in Low and Middle Income Countries, spanning many different countries and institutions. Bi-annual webinars/calls will also be conducted to share research ideas and findings. Potential for joint dissemination activities will also be explored – for example, research funding may be pooled to enable multi-country results from health financing evaluations to be presented to key stakeholders at a regional level. It is anticipated that over-time this will become a web-based forum.
- Conducting bi-annual webinars on approaches for evaluating health financing in LMICs and methodological challenges.
- Organising pre-congress and/or organised sessions at iHEA Congress meetings and other national health economics meetings to discuss methodologies.
- Collaboratively developing a comprehensive list of open educational resources on health financing to be shared amongst group members.
- Establishing a shared electronic calendar indicating when group members are travelling internationally and are available to meet and give presentations at partner universities.

**iHEA SocialLink**

*iHEA’s Networking App for Members*

We are pleased to announce that the new International Health Economics Association online member community and app, SocialLink, is now live! You can expect a brand new way to easily connect with fellow members, share information across the iHEA network and manage your membership preferences. Finding member information and updates will be easier than ever thanks to this exciting new enhancement!

ihea@healtheconomics.org  |  www.healtheconomics.org
HEA members will now have quick and easy access to the following benefits:

- **Member connections.** Members can search and connect with one another within the app to help build and grow your network within the association. Automatic push notifications are triggered when connection requests are sent and received.

- **Member discussions and collaboration.** Using a central focal point of the member feed, members can obtain and interact with association content from a variety of sources at any given moment. A group will be created for each of HEA’s Special Interest Groups so those with similar interests can engage in ongoing conversations with each other.

- **Direct member actions within the feed.** Content directly from our website is funneled through members’ primary feeds so you can easily read important announcements and news from us as it goes live!

- **Promote available jobs.** Members will see a dedicated “My Career” area within the app – this will be a great way to advertise any career openings!

- **Member renewal and mobile payment.** An automatic renewal announcement will be visible at the top of your feed when it’s time to renew your membership - then you can renew and submit payment directly within the app!

For information on other highlights, please [click here](#). You can also view a brief introductory video around the new member community [here](#).

To access the the web version of the new member community:

- Login on the [HEA website](#) with your membership login. *We don’t have access to members personal passwords - If you need to reset your password, simply click on “Forgot Your Password?” in the login area.*

- OR you will see that there is now an option to login with Facebook or LinkedIn - this will only work if your membership profile has the same email address as your Facebook or LinkedIn account.

To download the app on your mobile phone or other device:

- Direct links: [Google play store](#) | [Apple store](#)

- OR search “SocialLink” in the app store on your mobile phone or other device and download.

- To login to the app, you use the same membership login from the HEA website.

- Once logged in it will ask you to confirm some of your personal preferences for the app – you can always go back and adjust these later.

- We encourage you to stay logged in to the app for easy access, however, if you do choose to sign out the app will remain on your mobile phone or other device. *If you have issues logging back in, clear the cache on your phone.*

- To view additional details about the app functionality, [click here](#)

We do hope that you will enjoy and engage in this new member community and we welcome any feedback as you begin to use the web and mobile app version of SocialLink! We encourage you to download the app and begin updating your profile right away so that you can begin engaging with other HEA members - please do feel free to start posting on the member feed as well!

We will continue to share more information and updates via email, and through the mobile app, but should you require any further assistance in getting started with SocialLink, please do not hesitate to reach out to us at ihea@healtheconomics.org.
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