REPORT ON THE MASTER THESIS

IEPS - International Economic and Political Studies, Faculty of Social Sciences, Charles University

| Title of the thesis: | Health care financing and economic development: A comparative study of the Czech Republic and Turkey | | |
|------------------------------|--|--|--|
| Author of the thesis: | Ayshe Ruyem Jakubcová | | |
| Referee (incl. titles): | MUDr. Petr Háva, CSc. | | |

Remark: It is a standard at the FSV UK that the Referee's Report is at least 500 words long. In case you will assess the thesis as "non-defendable", please explain the concrete reasons for that in detail.

SUMMARY OF POINTS AWARDED (for details, see below):

| CATEGORY | | POINTS |
|------------------------------|--------------|--------|
| Theoretical backgrou | nd (max. 20) | 17 |
| Contribution | (max. 20) | 18 |
| Methods | (max. 20) | 15 |
| Literature | (max. 20) | 15 |
| Manuscript form | (max. 20) | 19 |
| TOTAL POINTS | (max. 100) | 84 |
| The proposed grade (1-2-3-4) | | 1 |

You can even use a decimal point (e.g. giving the grade of 2.5 for 60 points).

Comments of the referee on the thesis highlights and shortcomings (following the 5 numbered aspects of your assessment indicated below).

1) Theoretical background:

The theoretical basis of the study is in explicit form reviewed in chapter 2. Research Design (pp. 6 to 12). Here are the concepts: policy diffusion, health policy (actors, process, content, context), functions and goals of health systems. In implicit form, the author works with other theoretical backgrounds in the introduction (first chapter: equity and efficiency, human rights related to health, the open method of co-ordination in the EU). Another theoretical knowledge is presented especially in the introductory parts of the two empirical chapters, concerned with the comparison of the Czech Republic and Turkey (health economics (Witter, Ensor 1997), global politics (Heywood 2011), neoliberalism (Steger 2010), health care market failure, market oriented health care reforms (Moran 1998)). Ayshe Jakubcová is familiar also with health systems accounts, whose data used through database WHO Health Data, resp. OECD health data.

2) Contribution:

Contribution of the work lies in the holistic methodological approach - policy analysis framework, using multidiciplinary approach in combination with the critical theory / method. The work did not focus only on the comparison of descriptive quantitative data (health and economic indicators, e.g.), as is often the case in similar comparative studies usual (see, eg, comparative analysis of the WHO / European Observatory). The author has personal experience with the health care systems in both compared countries. She could take advantage of the knowledge of the historical development of economic, political and social context of the health policy. It was also the intention of conceiving research hypotheses focused on the role of national and international actors. The research aimed to understand the impact of key drivers in terms of health policy actors. This objective was achieved. The work confirmed the important role of international actors in the process of health policy. The work, however, also reflects the causal relationships of key events, health policy and external economic changes - pressures to apply instruments of cost-containment and their consequences in the form of subsequent growing inequalities in health and access to health care services.

3) Methods:

The basic research design is a case study (p. 10), in which is used the combination of qualitative and quantitative methods (health care expenditure analysis, policy analysis, Including health legislation, historical method - event history analysis, process tracing, comparative method, policy analysis (Walt, Gilson 1994). Selected events analysis was used for the evaluation of historical development of governments and their political orientation. When comparing developments in the Czech Republic and Turkey, there were processed characteristics of health policy actors and fundamental changes in the course of reforms.

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4) Literature:

Used literature is relevant and it is primarily focused on selected research objectives. It is obvious that the author has worked with a number of books, focusing on the concept of policy diffusion (Berry, Berry), but also met with current publications in the field of neo-liberalism, political globalization (Steger, Heywood).

5) Manuscript form:

The thesis is conceived and structured logically, is divided into pre-empirical and empirical part. In pre-empirical part are successively identified: research problem and its context, objectives, research questions, methods, summary of the relevant theoretical knowledge. The empirical part consists from two comparative case studies devoted to the development of health policy in the Czech Republic and Turkey. Although the author did not use completely new publications (2011-2012), focusing on the theory of the health system and its evaluation frameworks, she was able to work with resources used to focus attention on the importance of health system functions, objectives and outcomes of health systems. But more systematic work with the theory of the health system would undoubtedly have led to a greater emphasis on the public health and health promotion. The importance of this function is not sufficiently reflected in the work. Work in this area follows the prevailing medical and economic paradigms.

| DATE OF EVALUATION: | 16.6.2013 | |
|---------------------|-----------|-----------------------|
| | | MUDr. Petr Háva, CSc. |
| | | Referee Signature |

The referee should give comments to the following requirements:

1) THEORETICAL BACKGROUND: Can you recognize that the thesis was guided by some theoretical fundamentals relevant for this thesis topic? Were some important theoretical concepts omitted? Was the theory used in the thesis consistently incorporated with the topic and hypotheses tested?

Strong Average Weak

20 10 0 points

2) CONTRIBUTION: Evaluate if the author presents **original ideas** on the topic and aims at demonstrating **critical thinking** and ability to draw conclusions based on the knowledge of relevant theory and relevant empirical material. Is there a distinct **value added** of the thesis (relative to knowledge of a university-educated person interested in given topic)? Did the author explain **why** the observed phenomena occurred? Were the policy implications well founded?

Strong Average Weak

20 10 0 points

3) METHODS: Are the **hypotheses** for this study clearly stated, allowing their further verification and testing? Are the theoretical explanations, empirical material and **analytical tools** used in the thesis relevant to the research question being investigated, and adequate to the aspiration level of the study? Is the thesis **topic comprehensively analyzed** and does the thesis not make trivial or irrelevant detours off the main body stated in the thesis proposal? More than 10 points signal an exceptional work, **which requires your explanation "why" it is so**).

Strong Average Weak

20 10 0 points

4) LITERATURE REVIEW: The thesis demonstrates author's full understanding and **command of recent literature**. The author quotes relevant literature in a proper way and disposes with a representative bibliography. (Remark: references to Wikipedia, websites and newspaper articles are a sign of **poor research**). If they dominate you cannot give more than 8 points. References to books published by prestigious publishers and articles in renowned journals give much better impression.

Strong Average Weak

20 10 0 points

5) MANUSCRIPT FORM: The thesis is **clear and well structured**. The author uses appropriate language and style, including academic **format** for quotations, graphs and tables. The text effectively refers to graphs and tables, is easily readable and **stimulates thinking**.

Strong Average Weak

20 10 0 points

Overall grading scheme at FSV UK:

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|---|-------|----------------|-------------------------------|--|--|--|
| TOTAL POINTS | GRADE | Czech grading | US grading | | | |
| 81 – 100 | 1 | = excellent | = A | | | |
| 61 – 80 | 2 | = good | = B | | | |
| 51 – 60 | 3 | = satisfactory | = C | | | |
| 41 – 50 | 3 | = satisfactory | = D | | | |
| 0 - 40 | 4 | = fail | = not recommended for defence | | | |