



MINISTRY OF EDUCATION AND SCIENCE OF THE RUSSIAN FEDERATION
Federal state autonomous educational institution
of higher education
«Far Eastern Federal University»
(FEFU)

SCHOOL OF BIOMEDICINE

«AGREED»

Head of education program
«General medicine»



(signature) Khotimchenko Yu.S.
(Full name)
«09» of July 2019

«APPROVED»

Director of the Department of Clinical
Medicine





(signature) Geltser B.I.
(Full name)
«09» of July 2019

WORKING PROGRAM OF ACADEMIC DISCIPLINE (WPAD)

« International Public Health »

Education program

Specialty 31.05.01 «General medicine»

Form of study: full time

year 2, semester 3
lectures 18 hours
practical classes 36 hours
laboratory works not provided
total amount of in-classroom works 54 hours
independent self-work 18 hours
control works ()
pass-fail exam year 2, semester 3
exam not provided

The working program is drawn up in accordance with the requirements of the Federal state educational standard of higher education (level of training), approved by the order of the Ministry of education and science of the Russian Federation from 09.02.2016 № 95.

The working program of the discipline was discussed at the meeting of the Department of fundamental and clinical medicine. Protocol No. 8, 09 of July 2019

Author: c.m.sc. docent Singur O.A.

ANNOTATION

The discipline “International Public Health” is intended for students enrolled in the educational program of May 31, 01 “Medical care”, is included in the variable part of the curriculum as a compulsory discipline, and is implemented in the 2nd year in the 3rd semester. The total complexity of the discipline is 72 hours, 2 credits

In developing the work program of the discipline, the Federal State Educational Standard of Higher Education in the specialty 31.05.01 “General Medicine” (level of specialty), the curriculum for preparing students were used.

The course program is based on the basic knowledge gained by students:

the ability to analyze the main stages and patterns of the historical development of society for the formation of citizenship (GCC-3);

readiness to work in a team, tolerantly perceive social, ethnic, confessional and cultural differences (GCC-8);

the ability to use the basics of economic and legal knowledge in professional activities (GPC-3);

The purpose of the development of the discipline: participation in the formation of competencies, including measures to preserve and strengthen public health, the elimination of risk factors and the formation of a healthy lifestyle, organization, management and workflow in the field of health; analysis of information on public health indicators, assessment of the quality of medical care, to form knowledge and skills in the field of public health and health care and its defining; systems ensuring the preservation, strengthening and restoration of the health of the population as a whole and of certain homogeneous groups of the population; organizational medical technologies and management processes, including economic, administrative and organizational; trends in health care in foreign countries.

Objectives of the discipline:

- the study of various systems of organization of health, medical and social assistance
- the acquisition by students of skills in the study and analysis of indicators characterizing the health status of various age-sex, social, professional and other groups of the population internationally;
- knowledge of the theoretical foundations of health care, the international legal framework of health and medical activities;
- familiarization of students with the principles of organization and work of medical institutions in various countries of the world;

As a result of the study of this discipline, students form the following professional competencies

Code and formulation of competence	Stages of competence formation	
the readiness to work in a team, to perceive social, ethnic, religious and cultural differences tolerantly. (GCC -8)	Knows	Knows the social and ethical norms of behavior in the team
	Is able to	Is able to tolerate social, ethnic, confessional and cultural differences in the team
	Possesses	Team working skills
the ability and willingness to implement a set of measures aimed at the preservation and promotion of health. It includes the formation of a healthy lifestyle, the prevention of occurrence and (or) the spread of diseases, their early diagnosis, the identification of their causes, as well as this set is aimed at elimination of harmful effects of environmental factors on human health (PC - 1)	Knows	The concept of forming a healthy lifestyle, preventing the occurrence and (or) spread of diseases, their early diagnosis, identifying the causes and conditions of their occurrence and development, as well as aimed at eliminating the harmful effects on human health of its habitat factors
	Is able to	Implement a set of measures aimed at maintaining and strengthening health
	Possesses	Skills of application of the complex of the actions directed on preservation and strengthening of health including formation of a healthy lifestyle, prevention of emergence and (or) distribution of diseases, their early diagnostics, identification of the reasons and conditions of their emergence and development, and also directed on elimination of harmful influence on human health of factors of environment of its dwelling

The following methods of active/ interactive training are used to form the above competencies within the discipline "International healthcare": lectures, lectures together, seminar - discussion.

I. STRUCTURE AND CONTENT OF THEORETICAL PART OF THE COURSE (18 HRS.)

Module 1 Comparative analysis of health systems (18 hours)

Theme 1. General characteristics of the health system. (2 hours)

Modern international health and the challenges of globalization

Infection problems

Problems of science and education

Problems of medicine in emergencies and armed conflicts

World health organisation

What is a health care system?

Analysis of international experience in the formation of theories of health and medicine.

Health organization in countries with economies in transition.

Health in developing countries.

Health features of economically developed countries.

International cooperation in the field of health, development history, prerequisites, tasks, directions.

International health councils.

International health regulations

International Committee of the red cross, other organizations

League of Nations health organization

Theme 2. Healthcare in Russia. (2 hours)

The history of health care in Russia-its inextricable link with the socio-cultural characteristics of the country.

Use of the principles of Zemstvo medicine in the countries of the world (Cuba, China, great Britain).

Regional approach to the assessment of historical trends in the development of public health.

Healthcare in Russia.

The system of public health protection in the Russian Federation.

Problems of the health care system at the present stage. Ways to solve them.

Theme 3. Basics of medical geography (2 hours)

Determinants of life expectancy in the world.

Modern conditions of functioning of health systems.

The concept of medical geography, subject, object of study.

Natogeorgia (natogeorgia infectious and non-infectious diseases, meningitis belt, etc.).

Medical landscape science.

Medical geography

Medical cartography

Medical geography in the structure of Sciences

Introduction to geographical pathology

Methods of medical and geographical research.

Human environmental factors and health

Medical and geographical zoning.

Theme 4. International medical and humanitarian law (2 hours)

Sources of law (narrow sense, broad sense)

Rule of law

Types of legal acts

Law and by-laws

Types and classification of laws and regulations

General principles of law. Roman public law

Relationship between international and national law

Legal systems-continental (Romano-German), countries with continental legal system (Russia, Germany, France) practice of court decisions in health care.

The legal system is based on the customs of (country of Africa). Practice of law enforcement in the health care system. The role of customs in the Ebola epidemic.

Religious legal system (Afghanistan, Iran). its fundamental difference from the Roman-Germanic system. The role of religious teachings as factors in the development of the health care system.

Anglo-Saxon legal system (UK, Canada, USA, Australia). The American legal system as the Foundation of the American model of health care.

International agreements in the health care and medical education system.

"Declaration on the rights of the mentally retarded" (1971), "Declaration on the rights of persons with disabilities" (1975), "Declaration of the rights of the child" (1989).

Geneva (1948) and Helsinki (1964) Declaration of the world medical Association, international code of medical ethics (1949), Declaration on child health policy (1983).

International humanitarian law. History of creation and application. Basic principles. Geneva Convention.

Theme 5. Financing health care in the world (2 hours).

The concept of health Economics

Spending on health and basic demographic indicators

Distribution of countries by health expenditure as a percentage of GDP

The Central idea of economists is the rational use of limited financial resources and its implementation in the countries of the world.

Sections (or levels) of the health economy (macroeconomics, microeconomics).

The dependence of life expectancy on the features of the state economy

Per capita health care costs and lost years of life (PYLL)

Population policies in the countries of the world

Features of the international market of medical services

Health expenditure out of pocket (% of total health expenditure)

The Rand corporation experiment in the 70's

Is there a link between health indicators and expenditure?

How to evaluate the effectiveness in health care?

Health system financing models

Typology of health financing systems

Typology of health financing functions

The actual practice of implementation of the functions of financing (foreign and domestic experience)

Main characteristics of CHI systems

Main characteristics of budget systems

"CHI is better than the budget system" is it Right?

Theme 6. Us health care system 2 hours (lecture together)

US health care system as a reflection of socio-cultural and regional characteristics of the country.

Structure of the us health care system.

Health insurance.

Us health care reform.

State program.

Theme 7 Health care System of Canada. (2 hours)

The history of the health care system in Canada.

The structure of the medical service.

Private medicine.

Rationing and control in health care.

Medical personnel.

Financing and payment system.

Theme 8. Health system of Cuba. (2 hours)

Medical education in Cuba.

Preventive orientation of Cuban medicine.

Health problems in Cuba.

Prerequisites for the benefits of the Cuban health model.

Theme 9. The UK health care system. (1 hour) Lecture together

The history of the UK health care system.

The structure of the medical service.

Private medicine.

Rationing and control in health care.

Medical personnel.

Financing and payment system.

The similarities and differences between the health systems of the UK and Russia.

Theme 10. China's health care system. (1 hour) Lecture together

General characteristics of health in China

Dynamics of development

Health system transformation - people's Republic of China

Traditional Chinese medicine and pharmacology

Reforming the health care system in China

Priority areas of health system reform

Actual problems of health care in China

China's health problems

II. STRUCTURE AND CONTENT OF PRACTICAL COURSE PART

(36 hours)

Module 1 Comparative analysis of health systems (36 hours)

Topic 1. General characteristics of the health system as a system. (4 hours).

The definition of the health system.

Health care in different countries.

International cooperation in the field of health

The emergence and development of public health and health (public medicine) in Russia and foreign countries.

Characteristic features of the development of modern public health and health practice abroad.

International medical law.

International organizations and international cooperation in the field of health.
International medical law.

Topic 2. Healthcare in Russia. The system of public health protection in the Russian Federation. (4 hours)

Branches of Russian law as guarantors of ensuring the rights of citizens in the field of health care.

The main stages of formation and development of medical law in modern conditions of development of Russian society.

The history of medicine.

International cooperation in the field of health, development history, prerequisites, tasks, directions.

The emergence and development of public health and health (public medicine) in Russia.

Topic 3. Basics of medical geography (4 hours)

Determinants of life expectancy in the world.

Modern conditions of functioning of health systems.

The concept of medical geography, subject, object of study.

Natogeorgia (natogeorgia infectious and non-infectious diseases, meningitis belt, etc.).

Medical landscape science.

Medical geography

Medical cartography

Medical geography in the structure of Sciences

Introduction to geographical pathology

Methods of medical and geographical research.

Human environmental factors and health

Medical and geographical zoning.

Topic 4. Financing health care in the world (4 hours).

The concept of health Economics

Spending on health and basic demographic indicators

Distribution of countries by health expenditure as a percentage of GDP

Rational use of limited financial resources and its implementation in the countries of the world.

Sections (or levels) of the health economy (macroeconomics, microeconomics).

The dependence of life expectancy on the features of the state economy

Per capita health care costs and lost years of life (PYLL)

Population policies in the countries of the world

Features of the international market of medical services

Health expenditure out of pocket (% of total health expenditure)

The Rand corporation experiment in the 70's

Is there a link between health indicators and expenditure?

How to evaluate the effectiveness in health care?

Health system financing models

Typology of health financing systems

Typology of health financing functions

The actual practice of implementation of the functions of financing (foreign and domestic experience)

Main characteristics of CHI systems

Main characteristics of budget systems

"CHI is better than the budget system" is it Right?

Topic 5 The US health system. (2 hours)

Structure of the us health care system.

Health insurance.

Us health care reform.

Structure of the us health care system.

State program.

Doctors the United States.

Medical expenses.

Health insurance.

Justify the pros and cons of the US health Care system.

What positive components of the us health care system could be imported for the development of Russian health care.

Topic 6. Health care system of Canada. (2 hours)

The history of the health care system in Canada.

The structure of the medical service.

Private medicine.

Rationing and control in health care.

Medical personnel.

Financing and payment system.

Topic 7. Cuba's health care system. (4 hours seminar-discussion)

Historical features of the development of Cuban health

Comparative characteristics of health care in Cuba and the UK

Cuban health care system-the best in the world

Institute of family doctors

Medical education in Cuba

Preventive focus of Cuban medicine

Health problems in Cuba

Care for the health of citizens in other countries

Prerequisites for the benefits of the Cuban health model

Budget spending on health care.

Justify the pros and cons of Cuba's health Care system.

What positive components of the health care system of Cuba could be imported for the development of health care in Russia.

Topic 8. The UK health care system. (4 hours seminar-discussion)

The history of the UK health care system.

The structure of the medical service.

Private medicine.

Rationing and control in health care.

Medical personnel.

Financing and payment system.

The similarities and differences between the health systems of the UK and Russia.

Topic 9. China's health care system. (4 hours)

General characteristics of health in China

Dynamics of development

Health system transformation - people's Republic of China

Traditional Chinese medicine and pharmacology

Reforming the health care system in China

Priority areas of health system reform

Actual problems of health care in China

Justify the pros and cons of China's health Care system.

What positive components of China's health care system could be imported for the development of Russia's health care.

China's health problems

Justify the pros and cons of China's health Care system.

What positive components of China's health care system could be imported for the development of Russia's health care.

Topic 10. Japan's health care system. (2 hours seminar-discussion)

Insurance system in Japan.

Features of the Japanese health care system.

Health care in Japan and technological progress.

III. TRAINING AND METHODOLOGICAL SUPPORT OF INDIVIDUAL WORK OF STUDENTS

The working program of an academic discipline (WPAD) presents the main content of lectures and lessons, evaluation tools: terms and concepts necessary for mastering the discipline.

In the course of mastering the course "International healthcare" the student will have to do a lot of independent work, which includes preparation for practical classes and writing an essay.

The test helps students to learn more deeply the educational material: the history of Zemstvo medicine, its traditions; the influence of Russian medicine on the development of health systems in the world; the analysis of various health systems; the advantages and disadvantages of different health systems.

Plans of offset, subjects of questions, recommended literature, the purpose and objectives of its study are reported by the teacher at introductory lectures, practical classes or in the curriculum in this discipline.

Before you begin to study the topic, you should be familiar with the materials of lectures, the main issues of the WPAD and a list of recommended literature.

Starting preparation for the test, it is necessary, first of all, to refer to the lecture notes, materials of practical classes, sections of textbooks and manuals, to get a General idea of the place and importance of the topic in the course. Then work with additional literature, make notes on recommended sources.

In the process of studying the recommended material, it is necessary to understand the construction of the studied book (topic), to highlight the main provisions, to trace their logic and thus to understand the essence of the studied problem.

It is necessary to keep records of the studied material in the form of an abstract, which, along with the visual includes motor memory, allows you to

accumulate an individual Fund of auxiliary materials for rapid repetition of the read, to mobilize the accumulated knowledge. The main forms of recording: plan (simple and detailed), statements, abstracts.

In the process of preparation, it is important to compare sources, think over the studied material and build an algorithm of actions, carefully consider your oral presentation.

Monitoring and evaluation of the results of independent work of students is carried out in the framework of practical training in the form of the current survey, group discussion and lectures together, writing an essay, analysis of specific situations, performing creative tasks and group research projects, presentations, testing.

The practical lesson provides not only an assessment of the level of self-training of students, but also the formation of skills and abilities to speak to the audience, as well as the protection of their point of view. The task of the listener is not just to present, but also to justify his point of view using concrete facts and examples.

A significant result of the preparation for the practical lesson is the presentation of the speaker with the display of individual or group presentation.

As part of the evaluation of the results of independent work, the readiness of the listener, the list of worked literature, the use of domestic and foreign periodicals, presentation visibility, the use of multimedia and materials, completeness and correctness of answers to the questions are evaluated.

The methodological basis for the construction of practical and lectures involves the use of a flexible and creative approach to the implementation of the pedagogical process. This ensures an increase in the efficiency of the formation of the required competencies within the framework of Federal educational standards.

Flexibility in conducting classes, while maintaining the conceptual integrity of the course and the implementation of the goals and objectives of the development of the discipline, allows you to fully take into account the characteristics of the student group and the research interests of the teacher.

Accordingly, taking into account the existing level of competence, life and professional management experience, individual characteristics, as well as actual requests and specific needs of students, it is possible to adjust the topics for discussion and implementation of individual and group tasks, as well as the use of other methods of active learning.

At the competition, each participant must be ready to speak on all issues raised in the plan, to be as active in their consideration. The speech should be convincing and reasoned, and simple reading of the abstract is not allowed. It is important to show your own attitude to what is being said, Express your personal opinion, understanding, justify it and draw the right conclusions from what has been said. In this case, you can refer to the notes of the abstract, directly to the primary sources, use the knowledge of monographs and publications, facts and observations of modern life, etc.

Educational and methodological support of independent work of students in the discipline "International health" is presented in Appendix 1 and includes:

- schedule of independent work on the discipline, including the approximate norms of time for each task;
- characteristics of tasks for independent work of students and guidelines for their implementation;
- requirements for the presentation and execution of the results of independent work;
- criteria for evaluating the performance of independent work.

CONTROL OF ACHIEVEMENT OF COURSE GOALS

№ p/p	Controlled modules / sections / themes of academic discipline	Codes and stages of the formation of competencies	Evaluation tools - name		
			Current control		intermediate evaluation
1.	Module 1 Comparative	the readiness to work in a team, to perceive social, ethnic, religious and cultural differences tolerantly. (GCC -	Knows	Interview	Test

	analysis of health systems	8)	Is able to	Interview	Essay
			Possesses	Test	Individual task
2	Module 1 Comparative analysis of health systems	the ability and willingness to implement a set of measures aimed at the preservation and promotion of health. It includes the formation of a healthy lifestyle, the prevention of occurrence and (or) the spread of diseases, their early diagnosis, the identification of their causes, as well as this set is aimed at elimination of harmful effects of environmental factors on human health (PC – 1)	Knows	Inter-view	Test
			Is able to	Interview	Essay
			Possesses	Test	Essay

Control and methodological materials, as well as criteria and indicators necessary for the assessment of knowledge, skills and characterizing the stages of formation of competencies in the process of development of the educational program are presented in Appendix 2.

V. СПИСОК УЧЕБНОЙ ЛИТЕРАТУРЫ И ИНФОРМАЦИОННОЕ ОБЕСПЕЧЕНИЕ ДИСЦИПЛИНЫ

Primary

1. International Journal of Public Health / Springer International Publishing 2016 <https://link.springer.com/journal/38>
2. International Collaboration for Global Public Health / Springer, Cham 2018 https://link.springer.com/chapter/10.1007/978-3-319-23847-0_8
3. Public Health and International Epidemiology for Radiology / Springer, Cham 2019 https://link.springer.com/chapter/10.1007/978-3-319-98485-8_15

Additional

1. International Public Health Strategies in Dermatology / Springer, Cham 2017 https://link.springer.com/chapter/10.1007/978-3-319-33919-1_2
2. Public Health Research / Springer, Cham 2016 https://link.springer.com/chapter/10.1007/978-3-319-23847-0_9

Electronic resources

1. 2014 World Development Indicators: Health systems
<http://wdi.worldbank.org/table/2.15#>
2. 2014 World Development Indicators: Incidence of tuberculosis (per 100,000 people)
<http://data.worldbank.org/indicator/SH.TBS.INCD/countries?display=default>
3. 2014 World Development Indicators: Mortality
<http://wdi.worldbank.org/table/2.21#>
4. Edward W. Campion, M.D., and Stephen Morrissey, Ph.D. A Different Model — Medical Care in Cuba N Engl J Med 2013; 368:297-299 January 24, 2013 DOI: 10.1056/NEJMp1215226
<http://www.nejm.org/doi/full/10.1056/NEJMp1215226>

5. Health Insurance: General Characteristics
<http://www.pacificprime.com/country/>

6. Nicholas D. K Health Care? Ask Cuba Published: January 12, 2005
http://www.nytimes.com/2005/01/12/opinion/12kris.html?_r=0

7. Tara Weiss Reasons Not To Become A Doctor Причины не становиться врачом // Reasons Not To Become A Doctor (англ.)
http://www.forbes.com/2008/05/05/physicians-training-prospects-lead-careers-cx_tw_0505doctors.html

8. UNESCO Santiago offered a workshop on health literacy in Cuba22.04.2014 - UNESCO Office in Santiago
http://www.unesco.org/new/en/member-states/single-view/news/alfabetizacion_en_salud_la_unesco_santiago_imparte_taller_en_cuba/#.U5rISPI_uCk

9. Всемирная организация здравоохранения: <http://www.who.int/ru>

10. Данные о расходах на национальное здравоохранение (США), по данным Министерства здравоохранения // National Health Expenditure Data (U.S.) from United States Department of Health and Human Services (CMS)
http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/index.html?redirect=/NationalHealthExpendData/01_Overview.asp

11. Сайт Всемирной организации здравоохранения <http://www.who.int/ru/> (режим доступа свободный, круглосуточный)

LIST OF INFORMATION TECHNOLOGIES AND SOFTWARE

The location of the computer equipment on which the software is installed, the number of jobs	List of licensed software
Multimedia auditorium Vladivostok Russian island, Ayaks 10, building 25.1, RM. M723 Area of 80.3 m2 (Room for independent work)	Windows Seven enterprice SP3x64 Operating System Microsoft Office Professional Plus 2010 office suite that includes software for working with various types of documents (texts, spreadsheets, databases, etc.); 7Zip 9.20 - free file archiver with a high degree of data compression; ABBYY FineReader 11 - a program for optical character recognition;

	Adobe Acrobat XI Pro 11.0.00 - software package for creating and viewing electronic publications in PDF; WinDjView 2.0.2 - a program for recognizing and viewing files with the same format DJV and DjVu.
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In order to provide special conditions for the education of persons with disabilities all buildings are equipped with ramps, elevators, lifts, specialized places equipped with toilet rooms, information and navigation support signs.

VI. GUIDELINES FOR DEVELOPMENT OF THE DISCIPLINE

The purpose of practical training is to consolidate the knowledge gained by students in lectures, modeling of practical situations, as well as checking the effectiveness of independent work.

The practice session usually includes an oral survey of participants on the seminar. This reveals the degree of students' knowledge of the material of the lecture course, basic textbooks, knowledge of current problems and the current situation in the modern educational space. Next, the ability of students to apply their theoretical knowledge to solving a practical or problem is revealed.

Preparation for practical training is advisable to start with a repetition of the material of lectures. It should be borne in mind that the lecture course is limited in time and does not allow the lecturer to consider in detail all aspects of the issue under study. Therefore, it is required to expand knowledge both theoretical and practical. At the same time, lectures give a good guide to the student to find additional materials, as they set a certain structure and logic of studying a particular issue.

In the course of independent work, the student must first study the material presented in the recommended Department and/or teacher of educational literature and monographs. The student should pay attention to the fact that the library list includes not only basic textbooks, but also more in-depth sources on each topic of the course. Consistent study of the subject allows students to form a stable theoretical base.

An important part of the preparation for practical training is the work of students with scientific articles that are published in specialized periodicals. They allow you to broaden your horizons and get an idea of current problems, possible ways to solve them and/or trends in the study area.

As a final step in preparing for the practical lesson, the student should be encouraged to review the results of research relevant to each topic.

LOGISTICS DISCIPLINE

For practical work, as well as for the organization of independent work, students have access to the following laboratory equipment and specialized classrooms that meet the current sanitary and fire regulations, as well as safety requirements during training and scientific and industrial works:

Name of the equipped rooms and rooms for independent work	List of main equipment
The computer class of the School of biomedical AUD. M723, 15 work places	<p>Screen, electrically 236*147 cm to trim the screen; Projector DLP technology, 3000 ANSI LM, WXGA with 1280x800 resolution, 2000:1 Mitsubishi EW330U; Subsystem of specialized mounting equipment course-2007 Tuarex; Subsystem of videocommunity: matrix switch DVI and DXP 44 DVI Pro advertising; extension cable DVI over twisted pair DVI 201 TX/RX advertising; Subsystem of audiocommentary and sound; speaker system for ceiling si 3ct LP Extron on from; digital audio processor DMP 44 LC the Extron; the extension for the controller control IPL T CR48; wireless LAN for students is provided with a system based on 802.11 a/b/g/N 2x2 MIMO(2SS) access points.</p> <p>Monoblock HP Loope 400 all-in-one 19.5 in (1600x900), core i3-4150t, 4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, and a DVD+ / -RW, GigEth, Wi-Fi and BT, the USB port of roses/MSE, Win7Pro (64-bit)+Win8.1Pro(64-bit), 1-1-1 Wty</p>
Multimedia auditory	<p>AIO PC HP ProOne 400 G1 AiO 19.5" Intel Core i3-4130T 4GB DDR3-1600 SODIMM (1x4GB)500GB; Screen projection Projecta Elpro Electrol, 300x173 cm; Multimedia projector, Mitsubishi FD630U, 4000 ANSI Lumen 1920 x 1080; Flush interface with automatic retracting cables TLS TAM 201 Stan; Aversion CP355AF; lavalier Microphone system UHF band Sennheiser EW 122 G3 composed of a wireless microphone and receiver; Codec of videoconferencing LifeSizeExpress 220 - Codeconly - Non-AES; Network camera Multipix MP-HD718; Two 47 " LCD panels, Full</p>

	HD, LG M4716CCBA; audio commutation and sound amplification Subsystem; centralized uninterruptible power supply
Reading rooms of the Scientific library of the University open access Fund (building a - 10)	Monoblock HP Loope 400 All-in-One 19.5 in (1600x900), Core i3-4150T, 4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD+/-RW,GigEth,wifi,BT,usb kbd/mse,Win7Pro (64-bit)+Win8.1Pro(64-bit),1-1-1 Wty Speed Internet access 500 Mbps. Jobs for people with disabilities equipped with displays and Braille printers.; equipped with: portable reading devices flatbed texts, scanning and reading machines videovelocity with adjustable color spectrums; increasing electronic loops and ultrasonic marker



THE MINISTRY OF EDUCATION AND SCIENCE OF THE RUSSIAN
FEDERATION

Federal State autonomous education institution of higher education

«Far Eastern Federal University»

(FEFU)

SCHOOL OF BIOMEDICINE

**TRAINING AND METHODOLOGICAL SUPPORT
INDEPENDENT WORK OF TRAINEES**

in discipline «**International Public Health**»

Educational program

Preparation for 31.05.01. General Medicine

Form of training full-time

**Vladivostok
2016**

Schedule of independent work on the academic discipline

№ p/p	Date/deadline	Type of independent work	Approximate standards of execution time	Form of control
1.	2-4 weeks	Essay	18 h.	The result of activity, issued in electronic form, Presentation

Sample topics of reports and essay

On discipline of 18 hours of independent work, within these hours the abstract and the report on one of the offered subjects is carried out. In addition, the student himself can offer a topic. Classes are held in the project format.

Topics

1. Comparative analysis of health systems in the system of market relations.
2. Medical and legal problems of health care reform.
3. Health as an international legal category.
4. International medical law.
5. General characteristics of the si system of health care as a system.
6. Alma-ATA conference in 1978. Its value.
7. Who-history of origin.
8. Who-tasks, functions.
9. Comparison of the health care system of the UK and Russia.
10. Comparison of the us and Russian health care system.
11. North Korea's health care system.
12. Health care system in France.
13. Health care system in Denmark.
14. Health care system in Germany
15. Israel's health care system
16. Approaches to the classification of health systems.

Guidelines for writing and design of the essay

Abstract-creative activity of the student, which reproduces in its structure research activities to solve theoretical and applied problems in a particular branch of scientific knowledge. Because of this, the abstract is an important component of the educational process in higher education.

The abstract, being a model of scientific research, is an independent work in which the student solves the problem of theoretical or practical nature, applying the scientific principles and methods of this branch of scientific knowledge. The result of this scientific search can have not only subjective, but also objective scientific novelty, and therefore can be presented for discussion of the scientific community in the form of a scientific report or a report at a scientific-practical conference, as well as in the form of a scientific article.

The abstract is carried out under the supervision of a supervisor and involves the acquisition of skills of building business cooperation based on ethical standards of scientific activity. Commitment, initiative, selfless cognitive interest, responsibility for the results of their actions, integrity, competence – the qualities of the individual, characterizing the subject of research activities, corresponding to the ideals and norms of modern science.

The abstract is an independent educational and research activity of the student. The supervisor provides advice and evaluates the process and performance. It provides the approximate themes of abstracts of the work, clarifies together with a student issue and a research subject, helping to plan and organize research activities, appoints the time and the minimum number of consultations. Scientific supervisor accepts the text of the abstract for review at least ten days before the defense.

Traditionally, there is a certain structure of the abstract, the main elements of which in the order of their location are the following:

1. Title page.
2. Task.
3. Content.
4. List of symbols, symbols and terms (if necessary).

5. Introduction.
6. Main part.
7. Conclusion.
8. Bibliographic list.
9. Applications.

On the title page are specified: educational institution, graduating Department, author, supervisor, research topic, place and year of the abstract.

The title of the abstract should be as brief as possible and fully consistent with its content.

The table of contents (content) reflects the names of the structural parts of the abstract and the page on which they are. The table of contents should be placed at the beginning of the work on one page.

The presence of a detailed introduction-a mandatory requirement for the abstract. Despite the small volume of this structural part, its writing causes significant difficulties. However, it is a high-quality introduction is the key to understanding the whole work, testifies to the professionalism of the author.

Thus, the introduction is a very important part of the abstract. The introduction should begin with justification of relevance of the chosen subject. As applied to the abstract, the concept of "relevance" has one feature. From how the author of the essay is able to choose a topic and how well he understands and evaluates this topic from the point of view of modernity and social significance, characterizes his scientific maturity and professional readiness.

In addition, in the introduction it is necessary to isolate the methodological basis of the abstract, to name the authors whose works formed the theoretical basis of the study. A review of the literature on the theme should show thorough acquaintance of the author with the special literature, its ability to systematise sources, critically them to consider, to provide significant, to determine the most important in the present state of knowledge of the topic.

The introduction reflects the importance and relevance of the chosen topic, defines the object and subject, purpose and objectives, the chronological framework of the study.

The introduction ends with the presentation of General conclusions about the scientific and practical significance of the topic, the degree of its study and availability of sources, the hypothesis.

The main part describes the essence of the problem, the topic is revealed, the author's position is determined, as an argument and for illustrations of the proposed provisions the actual material is given. The author needs to show the ability of consistent presentation of the material at the same time its analysis. Preference is given to the main facts, rather than small details.

The abstract ends with the final part, which is called "conclusion". Like any conclusion, this part of the abstract serves as a conclusion, due to the logic of the study, which is in the form of synthesis of accumulated in the main part of scientific information. This synthesis is a consistent, logically coherent presentation of the results and their relationship with the overall goal and specific tasks set and formulated in the introduction. It is here that the so-called "output" knowledge is contained, which is new in relation to the original knowledge. The conclusion may include practical suggestions, thus increasing the value of theoretical materials.

So, in conclusion, the abstract should be: a) the conclusions of the study; b) the theoretical and practical significance, the novelty of the abstract; C) the possibility of applying the results of the study.

After the conclusion it is accepted to place the bibliographic list of the used literature. This list is one of the essential parts of the abstract and reflects the independent creative work of the author of the abstract.

The list of used sources is placed at the end of the work. It is issued either in alphabetical order (by the name of the author or the title of the book), or in the order of appearance of references in the text of the written work. In all cases, the full name of the work, the names of the authors or the editor of the publication, if

the writing of the book involved a team of authors, data on the number of volumes, the name of the city and publisher in which the work was published, the year of publication, the number of pages.

Guidelines for preparing presentations

General requirements for the presentation:

- * presentation should not be less than 10 slides;
- * the first sheet is the title page, which must be submitted: the name of the project; surname, name, patronymic of the author;
- * the next slide should be the content, which presents the main stages (moments) of the presentation; it is desirable that the content of the hyperlink can go to the desired page and return again to the content;
- * design-ergonomic requirements: color compatibility, limited number of objects on the slide, text color;
- * the last slides of the presentation should be a Glossary and a list of references.

Criteria for evaluation of the abstract.

The stated understanding of the abstract as a complete author's text determines the criteria for its evaluation: the novelty of the text; the validity of the source selection; the degree of disclosure of the essence of the issue; compliance with the requirements for registration.

The novelty of the text: a) the relevance of the research topic; b) the novelty and independence in the formulation of the problem, the formulation of a new aspect of the known problem in establishing new relationships (interdisciplinary, intra-subject, integration); C) the ability to work with research, critical literature, systematize and structure the material; d) the manifestation of the author's position, the independence of assessments and judgments; d) the stylistic unity of the text, the unity of genre features.

The degree of disclosure of the essence of the issue: a) compliance plan topic essay; b) compliance with the content of the topic and the plan of the abstract; C) the completeness and depth of knowledge on the topic; d) the validity

of methods and methods of work with the material; e) the ability to summarize, draw conclusions, compare different points of view on the same issue (problem).

The validity of the choice of sources: a) evaluation of the literature used: whether the most famous works on the topic of the study (including journal publications of recent years, the latest statistics, summaries, references, etc.) are involved.

Compliance with the requirements for registration: a) how true are references to the literature, references; b) assessment of literacy and culture of presentation (including spelling, punctuation, stylistic culture), knowledge of terminology; C) compliance with the requirements for the volume of the abstract.

The reviewer should clearly formulate comments and questions, preferably with links to the work (you can on specific pages of the work), research and factual data that the author did not take into account.

The reviewer can also specify: whether the graduate student addressed the topic earlier (abstracts, written works, creative works, Olympiad works, etc.) and whether there are any preliminary results; how the graduate conducted the work (plan, intermediate stages, consultation, revision and revision of the written or lack of a clear plan, refusal of the recommendations of the head).

The student submits an abstract for review not later than a week before the defense. The reviewer is the head of research. Experience shows that it is advisable to familiarize the student with the review a few days before the defense. Opponents are appointed by the teacher from among students. For oral presentation, the student needs 10-20 minutes (about as much time to answer the tickets on the exam).

Assessment 5 is put, if all requirements to writing and protection of the abstract are met: the problem is designated and its relevance is proved, the short analysis of various points of view on the considered problem is made and the own position is logically stated, conclusions are formulated, the subject is opened completely, the volume is sustained, requirements to external registration are met, the correct answers to additional questions are given.

Assessment 4-the basic requirements for the abstract and its protection are met, but there are shortcomings. In particular, there are inaccuracies in the presentation of the material; there is no logical sequence in the judgments; the volume of the abstract is not sustained; there are omissions in the design; incomplete answers are given to additional questions in the defense.

Assessment 3-there are significant deviations from the requirements for abstracting. In particular: the topic is covered only partially; there are actual errors in the content of the abstract or in answering additional questions; there is no conclusion during the defense.

Assessment 2-the topic of the abstract is not disclosed, there is a significant misunderstanding of the problem.

Grade 1-the student's abstract is not submitted.



THE MINISTRY OF EDUCATION AND SCIENCE OF THE RUSSIAN
FEDERATION

Federal State autonomous education institution of higher education

«Far Eastern Federal University»

(FEFU)

SCHOOL OF BIOMEDICINE

ASSESSMENT FUND

«**International Public Health**»

Educational program

Preparation for 31.05.01. General Medicine

Form of training full-time

Vladivostok
2016

Passport of the Fund of Assessment Tools

Filled in in accordance with the Regulations on the funds of evaluation means of educational programs of higher education, approved by the order of the rector of 12.05.2015 №12-13-850.

Code and formulation of competence	Stages of competence formation	
the readiness to work in a team, to perceive social, ethnic, religious and cultural differences tolerantly. (GCC -8)	Knows	Knows the social and ethical norms of behavior in the team
	Is able to	Is able to tolerate social, ethnic, confessional and cultural differences in the team
	Possesses	Team working skills
the ability and willingness to implement a set of measures aimed at the preservation and promotion of health. It includes the formation of a healthy lifestyle, the prevention of occurrence and (or) the spread of diseases, their early diagnosis, the identification of their causes, as well as this set is aimed at elimination of harmful effects of environmental factors on human health (PC - 1)	Knows	The concept of forming a healthy lifestyle, preventing the occurrence and (or) spread of diseases, their early diagnosis, identifying the causes and conditions of their occurrence and development, as well as aimed at eliminating the harmful effects on human health of its habitat factors
	Is able to	Implement a set of measures aimed at maintaining and strengthening health
	Possesses	Skills of application of the complex of the actions directed on preservation and strengthening of health including formation of a healthy lifestyle, prevention of emergence and (or) distribution of diseases, their early diagnostics, identification of the reasons and conditions of their emergence and development, and also directed on elimination of harmful influence on human health of factors of environment of its dwelling

CONTROL OF ACHIEVEMENT OF COURSE GOALS

№ p/p	Controlled modules / sections / themes of academic discipline	Codes and stages of the formation of competencies	Evaluation tools - name		
			Current control		intermediate evaluation
1.	Module 1 Comparative analysis of health systems	the readiness to work in a team, to perceive social, ethnic, religious and cultural differences tolerantly. (GCC - 8)	Knows	Interview	Test
			Is able to	Interview	Essay
			Possesses	Test	Individual task
2	Module 1 Comparative analysis of health systems	the ability and willingness to implement a set of measures aimed at the preservation and promotion of health. It includes the formation of a healthy lifestyle, the prevention of occurrence and (or) the spread of	Knows	Inter-view	Test
			Is able to	Interview	Essay

	diseases, their early diagnosis, the identification of their causes, as well as this set is aimed at elimination of harmful effects of environmental factors on human health (PC – 1)	Possesses	Test	Essay
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interview, situational tasks, written test or computer model calculations, individual assignments, essay, etc.

The scale of assessment the level of formation of competences

Code and formulation of competence	Criteria		Indicators	Credits
the readiness to work in a team, to perceive social, ethnic, religious and cultural differences tolerantly. (CC-8)	knows	Knows the social and ethical norms of behavior in the team	Ability to control specific problems	65-71
	Is able to	Is able to tolerate social, ethnic, confessional and cultural differences in the team	Tolerant and cultural construction of interactions in the team	71-84
	possesses	He has the skills to work in a team	Ability to control specific problems based on analysis and synthesis of initial data	85-100
the ability and willingness to implement a set of measures aimed at the preservation and promotion of health. It includes the formation of a healthy lifestyle, the prevention of occurrence and (or) the spread of diseases, their early diagnosis, the	knows	Assessment of the quality of medical care in the world	Ability to analyze the quality of medical care in the countries of the world	65-71
	Is able to	Comparative assessment of medical care in different countries	Is able to compare the quality of medical care in different countries	71-84
	possesses	Comparative assessment of the quality of medical care at different stages (prehospital and hospital stages)	Has the skills to compare different stages of medical care, forms conclusions based on the data	85-100

identification of their causes, as well as this set is aimed at elimination of harmful effects of environmental factors on human health (PC – 1)				
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Guidelines that define procedures for assessment of results of learning

Evaluation tools for interim certification

Questions to pass-fail exam

1. Tell us about the different options for the organization of medical care.
2. What is the main value of Russian society enshrined in the Constitution of the Russian Federation?
3. What are the main objectives of the professional and ethical system in different countries?
4. The concept of international medical law.
5. Ensuring access to health care for the population in different countries.
6. Legal regulation of medical sterilization in different countries.
7. Differences in the manner in which mental health care is provided, depending on the country in which it is provided. Grounds for involuntary psychiatric care.
8. Features of the organization of drug treatment depending on the country where it is provided.
9. Specificity of advertising of medicines in different countries.
10. Organization and implementation of sanitary and epidemiological surveillance in the world.
11. The system of measures to prevent the spread of tuberculosis in Russia and the world.
12. The system of compulsory health insurance in the world.
13. Features of professional training of medical and pharmaceutical workers in different countries.
14. The procedure for admission to professional activities in health care in different countries.
15. Legal regulation of health care workers in Russia and abroad.
16. Social protection of health workers in different countries.
17. Examination of the quality of medical care in Russia and abroad.
18. Medical examination as a means of proof.

19. Disciplinary and material liability in case of violation of patients ' rights in the countries of the world.
20. The who – the history of
21. Cuba's health care system.
22. The UK health care system.
23. China health care system
24. Korea's health care system.
25. Japan's health care system.
26. Comparison of the health care system in the UK and Russia
27. Comparison of the us and Russian healthcare systems

Criteria for evaluation of the oral response of the student in the competition in the discipline " International healthcare»:

Credit score (standard)	Requirements to the formed competences
<i>«read out»</i>	The assessment "pass" is assigned to the student if it is deeply and firmly mastered program material, comprehensively, consistently, clearly and logically sound to his sets, knows how closely to connect the theory with practice, freely copes with problems, questions, and other applications of knowledge, not hesitates when modification of tasks uses material response monographic literature, properly substantiates the decision, possesses the skills and techniques of implementation of practical tasks.
<i>"not credited»</i>	The "not counted" grade is given to the student who does not know a significant part of the program material, makes significant mistakes, uncertainly, with great difficulties performs practical work.

General evaluation criteria:

1. Attending practical classes.
2. Active participation in discussions
3. Timely and high-quality performance of independent work

Evaluation tools for current certification

Control tests are designed for students studying the course "International healthcare".

When working with tests it is offered to choose one variant of the answer from three – four offered. At the same time, the tests vary in their complexity. Among the proposed there are tests that contain several options for correct answers. The student must provide all correct answers.

Tests are designed for both individual and collective solutions. They can be used in the process and classroom, and independent work. The selection of tests necessary for the control of knowledge in the process of interim certification is made by each teacher individually.

Results of performance of test tasks are estimated by the teacher on a five-point scale for certification or on system "offset" - "not offset". The score "excellent" is set with the correct answer to more than 90% of the tests offered by the teacher. Score "good" - with the correct answer to more than 70% of the tests. Assessment "satisfactory" - with the correct answer to 50% of the proposed tests.

Sample test tasks

Instruction: from the proposed answers, select one and mark it with any sign.

1. The world Health Organization cites factors that affect health:

- 1) income and social status
- 2) social support: family, friends and environment
- (3) education
- 4) occupation and working conditions
- 5) natural environment
- 6) personal health and ability to look after themselves
- 7) genetic inheritance
- 8) level of medical care in the region of residence
- 9) true 1,4,5,6,7,8
- 10) are correct 1,2,3,4,5,6,7,8
- 11) are correct 1,4,5

2. Who finances the health care system in Canada

- 1) financing is carried out at the expense of local taxes
- 2) financing is carried out at the expense of state income taxes
- 3) financing is carried out at the expense of employers
- 4) funding is provided through the purchase of insurance policy
- 5) health care in Canada paid
- 6) are correct 1,2,3
- 7) are correct 1,2
- 8) are correct 1,2,3,4

3. Who finances the health care system in Cuba

- 1) financing is carried out at the expense of local taxes
- 2) financing is carried out at the expense of state income taxes
- 3) financing is carried out at the expense of employers
- 4) funding is provided through the purchase of insurance policy
- 5) health care in Cuba paid

4. Who finances the us health care system

- 1) financing is carried out at the expense of local taxes
- 2) financing is carried out at the expense of state income taxes
- 3) financing is carried out at the expense of employers
- 4) funding is provided through the purchase of insurance policy
- 5) health care in the US paid
- 6) true 1,2,3
- 7) true 1,3,5
- 8) true 1,2,3,4,5

5. Who finances the UK health care system

- 1) financing is carried out at the expense of local taxes
- 2) financing is carried out at the expense of state income taxes
- 3) financing is carried out at the expense of employers
- 4) funding is provided through the purchase of insurance policy
- 5) health care in the UK paid

6. Who finances South Korea's health care system

- 1) financing is carried out at the expense of local taxes
- 2) financing is carried out at the expense of state income taxes
- 3) financing is carried out at the expense of employers
- 4) funding is provided through the purchase of insurance policy
- 5) health care in South Korea paid
- 6) mark-up on tobacco products
- 7) верно 1,2,5
- 8) true 1,2,3,4,5
- 9) true 1,2,3

7. Who finances North Korea's health care system

- 1) financing is carried out at the expense of local taxes
- 2) financing is carried out at the expense of state income taxes
- 3) financing is carried out at the expense of employers
- 4) funding is provided through the purchase of insurance policy
- 5) health care in North Korea paid

8. Who finances Japan's health care system

- 1) financing is carried out at the expense of local taxes
- 2) financing is carried out at the expense of state income taxes
- 3) financing is carried out at the expense of employers
- 4) funding is provided through the purchase of insurance policy
- 5) health care in Japan paid
- 6) true 1,2,3
- 7) true 1,2,3,4,5
- 8) true 1,2,3,5

9. In which country in 1978 the health care system was recognized as the best in the world

- (1) in Canada
- (2) Cuba
- 3) in the USA
- 4) in the UK
- (5) in Japan
- 6) in Russia

10. In which country in 2012 the health care system was recognized as the best in the world

- (1) in Canada
- (2) Cuba
- 3) in the USA
- 4) in the UK
- (5) in Japan
- 6) in Russia

11. In which country did the formulary system originate

- (1) in Canada
- (2) Cuba
- 3) in the USA
- 4) in the UK
- (5) in Japan
- 6) in Russia

12. It guarantees the act on health care of Canadians?

- 1) health of all citizens and permanent residents of Canada is insured by the state.
- (2) everyone in Canada has the right to health care by the country's health facilities and workers
- (3) health care in Canada is managed by government representatives and elected officials.
- 4) health care costs are paid from taxes collected from the population.
- (5) representatives shall report to the people of Canada.
- (6) immigrants with residence permits and Convention refugees are not entitled to health care

13. The act on Health care of the population of Canada was adopted as the law

- 1) in 1947
- (2) in 1984
- (3) 2005
- (4) 2013

14. The USA takes the leading place on

- 1) the level and effectiveness of scientific research
- 2) life expectancy
- 3) the incidence of

- 4) number of Nobel laureates in medicine
- 5) provision of the most modern medical equipment
- 6) true 1,4,5
- 7) true 1,2,3,4
- 8) true 1.4

15. In 2000, the United States took on the level of health of citizens

- 1) 56th place in the world
- 2) 1st place in the world
- 3) 2nd place in the world
- 4) 72nd place in the world

16. Does the US guarantee its citizens a universal and comprehensive health insurance system

- 1) Yes
- (2) no
- 3) US does not work under health insurance programs

17. According to a Harvard study in 2009, the lack of health insurance in the US is the cause of about

- 1) 45 thousand additional deaths per year
- 2) 14 thousand additional deaths per year
- 3) 78 thousand additional deaths per year
- 4) in the US there is no health insurance, medical care is financed by the state

18. The functions of the U.S. Department of health include

- 1) control over the medical system and implementation of social programs
- 2) control of medical science
- 3) monitoring the health situation
- 4) control over the provision of medical care to all us citizens
- 5) true 1,3,4
- 6) true 1.3
- 7) true 1,2,3

19. Us medicine operates at the following levels

- (1) primary health care

- 2) family medicine
- 3) hospital care
- 4) high-tech assistance
- (5) public health
- 6) true 1,2,3,4
- 7) true 1.3
- 8) true 1,3,5
- 9) true 2,3,5

20. Does the United States have a single centralized health management

- 1) Yes there is, its functions are performed by the United States Department of health
- 2) Yes there is, its functions are performed by the Department of the US Government
- 3) there is no single centralized management

21. What types of hospitals are in the United States

- 1) state
- (2) municipal
- 3) private profits
- 4) private " non-profit»
- 5) true 1,2,3
- 6) true 1,3,4
- 7) true 1,2,3,4

22. Medicaid in the United States provides the following services

- 1) inpatient and outpatient treatment
- 2) consultation of surgeons
- 3) consultation of ophthalmologists
- 4) stay in nursing homes,
- 5) laboratory diagnostics
- 6) x-ray examination methods
- 7) true 1,2,5
- 8) true 1,2,4,5,6
- 9) true 2.5

23. The duration of the residency for a cardiologist in USA

- 1) 4 years
- 2) 6 years
- 3) 8 years
- 4) 2 years

24. The duration of residency in the United States is

- 1) 2 years
- (2) 3 years
- (3) 4 years
- 4) 5 years

25. According to the us Department of health, by 2017, the cost of medicine will be

- 1) 15.5% of GDP
- 2) 11 % of GDP
- 3) 17.5% of GDP
- 4) 19.5% of GDP

26. What types of insurance are provided by U.S. employers

- 1) "fee-for-service»
- 2) " managed services»
- 3) " all inclusive»
- 4) true 1.3
- 5) true 2
- 6) true 1.2

27. What is the minimum cost of health insurance for 1 month in the United States

- 1) \$ 50
- 2) 130 dollars
- 3) 150 dollars
- 4) 300 dollars

28. Some of the presidents of the United States created Medicare and Medicaid?

- 1) Johnson
- (2) Truman

- 3) Carter
- 4) Reagan
- (5) Obama

29. The life expectancy of the most

- 1) in USA
- (2) in Canada
- 3) in Russia

30. What are the main health problems in Canada?

- 1) poor quality of care
- 2) long waiting queues
- 3) high prices for medical services
- 4) shortage of doctors
- 5) shortage of nurses
- 6) low salary of doctors
- 7) paid physiotherapy
- 8) true 1,2,3
- 9) true 2,4
- 10) true 6

31. Canadian health act

- 1) prohibits the provision of paid medical services
- 2) permits the provision of paid medical services
- 3) permits the provision of paid medical services that are not provided in the municipal health plans

32. In-patient facilities in Canada are mostly

- 1) private
- 2) state
- 3) municipal

33. In which country is the highest availability of doctors

- 1) in USA
- 2) in the UK

(3) in France

4) in Russia

34. What country above all the security of nurses

1) in USA

2) in the UK

(3) in France

4) in Russia

35 smokes in Canada

1) 15% of the population

2) 18% of the population

3) 23% of the population

4) 26.5% of the population

36. Budget spending on health care in Cuba in 2012 amounted to

1) 8.2% of GDP

2) 12% of GDP

3) 4.3% of GDP

4) 4.5% of GDP

5) 8.6% of GDP

37. What is the main health problem in Cuba?

1) poor quality of care

2) long waiting queues

3) high prices for medical services

4) shortage of doctors

5) shortage of nurses

6) low salary of doctors

7) paid physiotherapy

38. Primary health care as a global programme put forward

1) USA

(2) great Britain

3) who

4) Russia

5) China

39. Family doctors are the most common

1) in Russia

(2) in Finland

3) in the USA

4) in the UK

(5) in Japan

40. Health care is decentralized as much as possible

1) in the UK

(2) in Japan

3) in Russia

(4) in Australia

5) in USA

41. Who is

1) private, not commercial

(2) non-governmental

(3) government

4) philanthropic

5) commercial

42. Is not preferential direction for who in modern conditions

1) direct financial support to national programmes

2) collection and dissemination of information and provision of expert advice

3) development of international classifications, standards, norms, rules

43. Who exists

1) 10 years

2) 30 years

3) 50 years

44. Who unites

- (1) 28 countries
- (2) 100 countries
- 3) about 200 countries

45. Russia as the successor of who enters

- 1) to the who Eastern Mediterranean region
- 2) to the who African region
- 3) in the who region of the Americas
- 4) to the South-East Asia region
- 5) to the European region
- (6) to the Western Pacific region

46. The main purpose of who, as enshrined in its Constitution, is

- 1) disease control
- (2) the attainment by all peoples of the highest level of health
- (3) improving health services

47. Who functions not included

- 1) act as the governing and coordinating body in the field of international health
- 2) promote and develop disease control and medical research
- (3) provide technical assistance to governments upon request
- (4) to take decisions binding on its member States
- 5) develop and disseminate international standards

48. The main social goal of who and its member States is health for all

- 1) deliverance of mankind from all diseases
- (2) ensuring access to health care for the entire population and reducing the health gap between countries

1. 9)
2. 7)
3. 2)
4. 8)
5. 2)
6. 9)

- 7. 2)
- 8. 8)
- 9. 6)
- 10. 2)
- 11. 4)
- 12. 2)
- 13. 2)
- 14. 6)
- 15. 4)
- 16. 2)
- 17. 1)
- 18. 7)
- 19. 9)
- 20. 3)
- 21. 6)
- 22. 8)
- 23. 3)
- 24. 2)
- 25. 4)
- 26. 6)
- 27. 4)
- 28. 1)
- 29. 2)
- 30. 9)
- 31. 3)
- 32. 1)
- 33. 4)
- 34. 2)
- 35. 2)
- 36. 5)
- 37. 6)
- 38. 4)
- 39. 4)
- 40. 5)
- 41. 3)

42. 1)

43. 3)

44. 3)

45. 5)

46. 2)

47. 4)

48. 2)