

The theme of the 2007 Indiana University Roundtable on Post-Communism is “Public Health.” The sometimes dramatic changes in public health indicators in the region during the last two decades, the shifts (and continuities) in public health policies, and the restructuring of medical education and health care provision and management--all of which vary across the late- and postsocialist states--make this a fruitful topic to examine in comparative perspective. In particular, we want to create a space for discussing the challenges and opportunities in this important realm of public action posed by shifts away from communism and towards other ideological and institutional options.

We would like the speakers to consider broadly the nature of public health in late- and postsocialism--what is interesting and revealing about public health, health policies, and their transformation at this historical juncture? We ask you to briefly sketch out the theoretical and practical approaches to public health that drive your own work, and to discuss how these commitments set in motion particular research methodologies. Within these broad discussions, we suggest the following questions as provocative ones to consider. Given the limited space for your response, we encourage you to select the questions you would most like to address, rather than attempt any comprehensive coverage. The discussion itself will lead us in these different directions:

What are the major public health challenges in your country or region of specialization, and how are they distributed across the population? How are these health challenges and official and unofficial responses to them indicative of broader political and socio-economic transformations?

What specific health care reforms have been debated and instituted in your country or region of specialization? (You might discuss changes in medical education, the introduction of private insurance schemes, the development of privatized health care, efforts to improve emergency medicine, and/or the development of primary health care and the impact on system reform.) (How) is health care management being restructured? What discourses motivate these various changes, and (how) are they contested?

Do all citizens have free access to health care, and if not, (how) do inequalities in access reveal new processes of social differentiation in the late- and postsocialist region? Or, are these inequalities actually a socialist legacy?

Today, mental health could be considered one of the most significant indexes of progress for public health systems in the region. What transformations have occurred in your country or region of specialization in terms of public awareness and attitudes, diagnosis and treatment, and others? How has EU accession affected approaches to mental health (in Romania, for example)?

What are governments doing about HIV/AIDS in the region? What has been the impact of the Global Fund in your country or region of expertise? What role have international and local NGOs played in efforts to stem the crisis?

Overall, what role have international donors played in addressing public health problems in the country/region? What have been the priorities of donors, and do these match the priorities, expectations, and strategies of recipient states? How well have donors coordinated their efforts? In a recent article in *Foreign Affairs* (January/February 2007), Laurie Garrett argues that the

current boom in public and private donations towards health issues may actually pose a threat to developing countries. She warns that too much money has been directed towards narrow, disease-specific problems instead of public health in general, a strategy that may backfire in the long run. She also notes that programs have been ill-coordinated and have neglected to build up local infrastructures to sustain change once donor money trickles off. How do you see this argument playing out in your country or region of specialization?

In a context of downward demographic trends in Russia and other countries, much attention has been paid to family planning and reproductive health. Have we seen progress in these areas in the last 15 years? What pronatalist policies, if any, have been enacted, and what has been the impact on maternal and child health?

Let me remind you of the time-line of this event and what role we would like you to play. We wish to present three case studies in international comparative perspective. The three speakers are Sandra Hyde (Anthropology, McGill University), Kate Schecter (American International Health Alliance), and Mircea Miclea (Psychology, Babeş-Bolyai University, Cluj-Napoca, Romania). Each guest will prepare a 1000-word statement in response to our provocation. The aim of your written presentation should be to develop a brief argument (one that would stimulate further discussion and debate) that engages some of the questions in the provocation. We ask that you submit the paper to us by March 1st, 2007. We will then circulate it and the other papers to the conference participants, and place all materials (the “provocation” and 3 papers) on-line on a public website that we will forward to you as soon as it is in place.

At the Roundtable, on the Thursday afternoon panel, the chair will introduce the themes and questions of the panel, the participants, and will then ask two commentators to speak for 10-15 minutes, after which each panel presenter will have 10 minutes to address the questions posed by the commentators and to comment on other papers on that panel. (I should mention that our practice is to designate as commentators scholars who can broaden the multidisciplinary and comparative reach of the panel rather than people who replicate the expertise of the three main panelists.) After this the floor will be open for discussion. As you can see, we are aiming for a dynamic discussion rather than the presentation of three papers. The papers themselves should serve merely as the starting point for the panel discussion, and the commentator should seek to facilitate discussion rather than critique the papers. I hope this description will also help you in thinking about the shape your paper will take. Please let me know about any audio-visual equipment you may need for your presentation.

To encourage continued discussion of these themes in a more informal fashion, we will continue the Roundtable on Friday morning. At this session we will ask one of the organizers to summarize the issues raised on Thursday afternoon and then invite the audience to make comments or ask questions of the panelists, allowing for several sets of questions and comments before returning to the main guests. In the past this format has ensured lively participation by our attendees, our graduate students in particular.

This promises to be a stimulating event, and I want to thank you again for agreeing to participate. If you have any questions you may contact me at any time.

Sincerely,