

## Professor Joanna Coast BA (Econ), MSc, PhD

Professor of Health Economics

### Contact details

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### About

Joanna Coast is Professor of Health Economics within the School of Health and Population Sciences.

Jo has published more than 90 research papers in academic journals. She has received major grants from the Medical Research Council and the European Research Council. She is Senior Editor, Health Economics for *Social Science and Medicine*.

### Qualifications

- PhD in Social Medicine, University of Bristol, 2000
- MSc in Health Economics, University of York, 1990
- BA (Econ) (Hons) in Economics, University of York, 1988

### Biography

Joanna Coast qualified with a BA (Econ) (Hons) in economics in 1988 and an MSc in Health Economics in 1990, both from the University of York, and a PhD in social medicine from the University of Bristol in 2000. Prior to her appointment to the University of Birmingham in 2005, Jo was based in the Department of Social Medicine at the University of Bristol for 15 years.

Jo has been Professor of Health Economics at the University of Birmingham since November 2005. She was Head of the Health Economics Unit from August 2008 until December 2011. Her research interests lie in the theory underlying economic evaluation (including capability), developing broader measures of outcome for use in economic evaluation (including measures of capability), health care decision making, the economics of antimicrobial resistance and the organisation of care. She also has a methodological interest in the use of qualitative methods in health economics and is recognised as an international authority in this field. She has published extensively in all of these areas.

She has been a member of a number of national and international grant-awarding panels and is currently a member of the Marie Curie Cancer Care Funding Committee. She is currently Senior Editor, Health Economics for Social Science and Medicine.

### Teaching

#### Teaching Programmes

- MSc Health Economics and Health Policy
- [MPH \(/postgraduate/courses/taught/med/public-health.aspx\)](#)
- [BSc Economics \(/undergraduate/courses/econ/economics-bsc.aspx\)](#)

### Postgraduate supervision

Joanna is interested in supervising doctoral research students in the following areas:

- The use of the Capability Approach in health economics;
- Health care priority setting.

If you are interested in studying any of these subject areas please contact Joanna on the contact details above, or for any general doctoral research enquiries, please email: [dr@contacts.bham.ac.uk \(mailto:dr@contacts.bham.ac.uk\)](mailto:dr@contacts.bham.ac.uk) or call +44 (0)121 414 5005.

For a full list of available Doctoral Research opportunities, please visit our [Doctoral Research programme listings \(http://www.bham.findaphd.com/?es=y&apl=y&apl=&show\)](http://www.bham.findaphd.com/?es=y&apl=y&apl=&show).

### Research

#### RESEARCH THEMES

Health Economics, capability approach, outcome measurement, end of life care, priority setting

#### RESEARCH ACTIVITY

##### The Capability Approach to Resource Allocation in Health Care

The major focus of Joanna's current research programme is around the operationalisation of Amartya Sen's capability approach for health care decision making. She has

ed the development of the ICECAP-O and ICECAP-A capability indices, valued using best-worst scaling. She has also explored the use of the capability approach more broadly within health economics. The overall aim of her research programme is to improve the conduct of economic evaluation in complex settings, where a broader assessment of costs and outcomes is required, developing approaches to enable such assessment within a sound theoretical extra-welfarist (in its widest sense) framework. Current work, funded by a large EU grant, is looking at applying the capability approach to evaluation of interventions at the end of life

### Decision making in health care

A large part of Joanna's work has concerned the making of rationing decisions in the NHS. In 1996 she completed a book, *Priority setting: the health care debate*, in conjunction with colleagues. The book developed a framework for considering explicit priority setting and advanced a number of themes both theoretically and in terms of practical attempts to set priorities. Following the completion of this book she developed a theoretical model of the potential disutility which could result from implicit rationing. Between 1996 and 2000 she conducted empirical research into the commissioning of care in collaboration with colleagues in Avon Health and at McMaster University, Toronto. The research was concerned with the willingness of members of different kinds of community to undertake the purchasing of their own health and social services. Focus groups and semi-structured interviews were used to explore issues surrounding public participation in resource allocation decisions in the UK. Fieldwork was also carried out with health service informants to explore the process of decision making in relation to the economic theory of principal-agent relationships. Following the completion of this work, Joanna has continued to focus on rationing decisions through ongoing supervision and mentorship of postgraduate students and post-doctoral fellows examining the use of economic evaluation at local level in the NHS, and exploring perceptions of implicit and explicit rationing.

### Efficiency in the organisation of care

A large part of Joanna's work in the early 1990s concerned the appropriateness of acute hospital care. She led two research projects, conducted in Bristol and Cornwall, which aimed to go beyond previous "appropriateness" research by considering the potential for altering patterns of care. From these projects she developed a broader interest in the organisation of care and has been involved in the empirical evaluation of a number of innovatory organisational developments. Specific projects have included:

- a randomised controlled trial comparing discharge to a hospital at home scheme with continued acute hospital care for elderly patients. Here I was Principal Investigator for the entire project, leading both the RCT and the economic evaluation;
- An economic evaluation comparing follow-up in a community optometrist setting with such care provided in a hospital setting;
- An economic evaluation comparing the use of telemedicine in the Accident and Emergency setting with usual practice;
- A systematic review evaluating the evidence for innovatory organisational approaches to ensuring that elderly patients receive the care that they need, both from the health system and from social services, on discharge from the acute hospital setting;
- An economic evaluation comparing hospital outpatients appointments with appointments with General Practitioners with Special Interests (GPSI) for dermatology patients;
- An economic evaluation comparing PhysioDirect services with standard physiotherapy care – ongoing.

### The economics of antimicrobial resistance

Since the mid 1990s Joanna has worked on the economics of antimicrobial resistance with a variety of collaborators. One of the main aims has been to develop the relevant economic theory, conceptualising antimicrobial resistance as a negative externality that occurs as the result of the private decision by the patient/doctor that the patient should take antimicrobials. This work has considered both the value of empirical assessments of efficiency in this area and the possible organisational and policy responses that could be pursued. Later work has been more empirical with a systematic review of strategies to contain the emergence of antimicrobial resistance and modelling projects using both decision modelling and computable general equilibrium models. Recent funded research focused on the economics of antibiotic resistance in the context of lower respiratory tract infection, through the GRACE European network, and the writing of a policy report for the UK Department of Health.

### Health economics in the context of social medicine

The conduct of health economics within the environment of a Department of Social Medicine gave Joanna the opportunity to explore a number of methodological areas, but particularly, the use of qualitative methods in health economics. Joanna has explored the use of qualitative methods in a number of areas within health economics, both in relation to developing grounded theory to enhance economic understanding, and in relation to the development of instruments for use in quantitative experiments and surveys. Throughout this work Joanna has had a keen awareness of the epistemological differences between economics and qualitative work and has published on this issue. Other methodological issues that she has been involved in exploring include:

- The measurement of outcomes for economic evaluation including validation work for the EQ-5D among the frail elderly, and the reprocessing of data to form quality-adjusted life-years (QALYs);
  - The conduct of economic evaluation alongside clinical trials, particularly in relation to studies of service delivery;
  - The use of stated preference discrete choice modelling, particularly the use of best-worst scaling;
  - The appropriateness of using QALYs in decision making, particularly with regard to complex interventions and interventions for children
- **[Research Group: Evaluative Spaces and the Capability Approach \(http://www.birmingham.ac.uk/research/activity/mds/domains/health-pop/healthcare-evaluation-and-methodology/evaluative-spaces-and-the-capability-approach/index.aspx\)](http://www.birmingham.ac.uk/research/activity/mds/domains/health-pop/healthcare-evaluation-and-methodology/evaluative-spaces-and-the-capability-approach/index.aspx)**

### Other activities

- Member of Marie Curie Cancer Care funding committee
- Senior Editor, Health Economics for Social Science and Medicine
- Chair of BY-BAND Trial Steering Committee

### Publications

Al-Janabi H, Flynn T, **Coast J**. Development of a self-report measure of capability wellbeing for adults: the ICECAP-A. *Quality of Life Research*. 2012; 21:167–176. doi: 10.1007/s11136-011-9927-2

Ridyard CH, Hughes DA, DIRUM team (including **Coast J**). Development of a Database of Instruments for Resource-Use Measurement: Purpose, Feasibility, and Design. *Value in Health*. 2012;15:650-655. doi: 10.1016/j.jval.2012.03.004

**Coast J**, Al-Janabi H, Sutton E, Horrocks S, Vosper J, Swancutt D, Flynn T. Using qualitative methods for attribute development for discrete choice experiments: issues and recommendations. *Health Economics*. 2012;21(6): 730-741 doi: 10.1002/hec.1739

Salisbury C, AA Montgomery, S Hollinghurst, C Hopper, A Bishop, A Franchini, S Kaur, **J Coast**, J Hall, S Grove, NE Foster, A pragmatic randomised controlled trial of the effectiveness and cost-effectiveness of 'PhysioDirect' telephone assessment and advice services for patients with musculoskeletal problems. *British Medical Journal*. 2013; 346 doi: <http://dx.doi.org/10.1136/bmj.f43>

Oppong R, Kaambwa B, Nuttal J, Hood K, Smith RD, **Coast J**. The impact of using different tariffs to value EQ-5D health state descriptions in patients with acute cough/lower respiratory tract infections. *European Journal of Health Economics*. Online first: doi: 10.1007/s10198-011-0360-9

Al-Janabi H, Peters TJ, Brazier J, Bryan S, Flynn TN, Clemens S, Moody A, **Coast J**. An investigation of the construct validity of the ICECAP-A capability measure. *Quality of Life Research*. Online first: doi: 10.1007/s11136-012-0293-5

Mitchell PM, Roberts TE, Barton PM, Pollard BS, **Coast J**. Predicting the ICECAP-O capability index from the WOMAC Osteoarthritis Index: Is mapping onto capability from condition-specific health status questionnaires feasible? *Medical Decision Making*. (In press.)

Flynn TN, Coast J, Peters TJ. Quantifying response shift or adaptation effects in quality of life by synthesising best-worst scaling and discrete choice data. *Journal of Choice Modelling*. (In press.)

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