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FENERBAHÇE ÜNİVERSİTESİ

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The Effects of a Healthy Economy

An interesting essay written by David N. Kearns examines the impact of economy types on the reinforcer. The implementation of a reinforcer in a closed economy, as Kearns stated, completely depends on the behavior of the topic, but not on the supply of a reinforcer after a séance in an open economy. Theoretically, reinforcers should have a greater value in closed economy than in open economy. About this prediction, various experiments have been conducted and the results have been discussed. Moreover, David mentioned about advanced by Hursh and Silberberg, ¹reinforcer magnitude which may affect behavior. The claim is that flexibility of request, isolated this way, reflects the significant worth of a reinforcer. Namely, topics work harder for those with rather inflexible request than those with flexible. The breakpoint in the progressive ratio (PR) program has been used to measure reinforcement value (Hodos,1961)². David said that requests flexibility and the implement of the PR often draw similar results and reinforced it with a few instance.³ The most important benefit of the PR is that it depends on the reinforcement size of the second rather than the first.

Furthermore, food and water are tough reinforcers to figure with when studying the impact of economy type. That is difficult to evaluate the extent to which deprivation level promoted to affects looked at such studies. However, it is necessary to repeat that when distinctions in the level of food deprivation may be ignored as a possible alternative illustration, a force of the type of economy is looked (Soto et al., 2016) ⁴. Furthermore, with drug reinforcers, the consequences of the type of economy seem to depend upon the actual drug and species being studied. In humans, turning on the economy of cigarettes or coffee decreased the worth of those reinforcers. In animals, the impact of economy type has been tried with cocaine, heroin, PCP and ethanol. An impact of the economy type was looked at only for ethanol. The possible causes of these differences between reinforcers and species are argued over.

¹Hursh SR, Silberberg A, 2008. Economic demand and essential value. *Psych. Rev* 115, 186–198

²Hodos W, 1961. Progressive ratio as a measure of reward strength. *Science* 134, 943–944.

³Freeman KB, McMaster BC, Roma PG, Woolverton WL, 2014. Assessment of the effects of contingent histamine injections on the reinforcing effectiveness of cocaine using behavioral economic and progressive-ratio designs. *Psychopharmacology* 231, 2395–2403.

⁴Soto PL, Hiranita T, Xu M, Hursh SR, Grandy DK, Katz JL, 2016. Dopamine D 2-like receptors and behavioral economics of food reinforcement. *Neuropsychopharmacology* 41, 971–978.

As a consequence, this is often an instance of how the concept of an economy type conduce essentially to the learning and behavior sector. The difference between open and closed economies is useable not only for comprehension behavior in the lab, but also for comprehension of the real-world choices and private makes. As an example, for a private selecting between a drug and a non-drug alternative reinforcer, knowing the type of economy for each alternative is knowledge that may help forecast how private will behave. If the drug could be received from only one source, the non-drug reinforcers is usually easily received from a single source, the person is awaited to settle on this drug frequently. On the contrary, a decline in drug selection is awaited if the drug is usually easily received from a single source. Only by admiring the general condition in which such poll take place will we fully comprehend them.

The second article written by Tomoyuki Takura, tries to draw attention and improve the general health assurance system. In this case, he argued that attention need to be paid for the implementation of health technology assessments (HTAs), such as cost-effectiveness analyses (CEAs) and in the medical treatment fee system. CEAs, the generic term for these techniques fall into four categories, like cost- effectiveness review that supports performance determinants, and usable in addition to the incremental cost-effectiveness ratio (ICER) when comparing health technologies. When he vastly reviewed several Japanese studies supported to these concepts, he found that in the results of his analysis of the economic performance of health system, Japan illustrated the optimistic trend in the world. Additionally, Tomoyuki mentioned that medical spending in Japan is growing every year and the price of during the years medical spending is doubling. The reason for this rising is an aging society, which has led to requests for medical assistance, advances in medical technologies and health costs.

The aim of health economics is to enhance the health care system of the population and provide a healthy model of econometrics and behavioral science methods such as health systems.⁵ Since health economics comprise a wide range of topics as a microcosm of society, the analytical method varies by topic. Subjects are usually divided into two types: those analyzed from a macro perspective and people analyzed from a micro perspective. Nevertheless, as the socio-economic condition in advanced countries will be discussed, it will

⁵ Takura T. *Iryou Keizai (83) (Healthcare economics). Intervention Hikkei (Intervention Handbook -a handbook for Medical Specialists-)*. Japanese Association of Cardiovascular Intervention and Therapeutics, Tokyo, 2013: 215-219 (in Japanese)

be argued that is good to investigate each topic in a cross-sectional manner. As a consequence, the growth of medical spending, which is not among the equivalent socio-economic developments, could complicate the health care system. The correction of health care system must be managed smoothly, as well as changes in the overall economy. Overall, it is reasonable to conclude that economy's effect on reinforcer value and also about cost-effectiveness. We may comprehend that the reinforcers have higher values within the closed economy than within the open economy. Namely, the growth of medical costs, which are among the socio-economic developments, could complicate the health system, therefore the health system must be fixed.

The TED talk , as Kate Raworth said that today's monetary economic system to grow financially because we are committed to follow best rate of return on publicly traded companies increasing sales, increasing profits, and increasing the share and the banks creating money as debt under constant pressure to get more and to ensure to pay back interest. Shortly, people are politically dependent on growth because politicians want to extend tax revenue without raising taxes. If one economy keeps growing and other stops growing, they're going to get replaced by subsequent powerhouse. She mentioned that we are socially hooked into growth and said that none of the addictions are insurmountable, we just got to pay more attention than we are attending now. Additionally, most of the income that goes to the rich today represents just one of the worldwide economies. She introduced a dynamic balance that she designed, looks like circle. In her opinion, we need economies of a regenerative and divisive structure. In the final, she gave suggestions on what we can do about it.

As a result in both of articles, rising medical costs, which are not among the equivalent socio-economic recovery, can complicate the health care system. Fixing the health system, changes in the overall economy should be managed lightly as necessary. We will understand that a closed economy has higher values than an open economy. That is, increasing medical costs, which are among the socio-economic recovery, can hinder the health system, so the health system must be fixed.

References:

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