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Born to Die: Global Healthcare from Ethical Standpoint

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Abstract- There have been discourses on the issues of health care differences between the developing and developed world and the need to bridge the health care divide or the provision of health care services for all countries. A case study between Haiti and Harvard highlighted the poor and good state of health care system as it relates to causes of death. Though, universal health care is high and unsustainable as a result of several militating factors including cost and politics, cost is not as important as saving a life, recognizing human rights, resources for economic productivity, lowering the cost of health care, which implies that every hand must be on deck including the government, individuals, organizations and other richer countries to help develop a good health care system. Hence, the debate of sustainability health care system or universal health care is based on the matter of social, political and economic sustainability and policymaking.

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I. INTRODUCTION

In 2015 the London Review published books written by Dr. Paul Farmer titled “Who Lives and Who Dies.” In this work, he describes problems about the iniquities of healthcare funding in Haiti, Rwanda, Lesotho, etc. and the possibility of universal health care. Paul Farmer is an anthropologist and a physician who is well known for his humanitarian work as a founder of Partner in Health, an organization whose mission is to provide suitable health care to help poor developing counties. In the review, Farmer brought up the differences in the healthcare system between his work places in Haiti and Harvard. He saw differences in the cause of death in poor countries because of the poor health system. There is a big difference between the health services in poor and rich countries that gives rise to a debate question; is it because the poor are just unlucky to be born in developing countries instead of rich countries that make their life more at risk of disability and death? Some argue that limited resources where people lack medical insurance and/or treatment access is the issue, while others consider lack knowledge for disease prevention. In these countries, it is not uncommon for people to die of things like malaria, typhoid and childbirth. Resolving these issues could be as simple as educating people water sanitation, hand washing and providing bed nets. There are many questions that arise from Farmer’s works about good health care and access for basic disease treatment; Should there be basic care/proven care in places like Haiti, Rwanda, Lesotho, etc., or is universal health care (healthcare for

all regardless of who you are and where you are) “unsustainable” and therefore not worth doing? If yes, who should pay for truly universal health care?

To address the first question, should there be basic care/proven care in places like Haiti, Rwanda, Lesotho, etc., or it universal health care (healthcare for all regardless of who you are and where you are) “unsustainable” and therefore not worth doing, there are various way to answer this questions. First, we must consider one of the four principles of biomedical ethics-justice. According to Tom Beauchamp and James Childress in the Principles of Biomedical Ethics, healthcare resources need to be distributed fairly since all people have human rights ^[1]. This means all individual have the right to access the same healthcare resources and should not treat unequally no matter in who they are, their age, sex, quality of life, social or economic status, race, etc. Furthermore, based on the second principle of bioethics-beneficence, healthcare providers have obligation to help people in need and healthcare resource should target toward maximizing health gain ^[2]. Therefore, there should be basic care/proven care in places like Haiti, Rwanda, Lesotho, etc., and universal health care is best option.

This brings forth the second part of the first question, is universal health care (healthcare for all regardless of who you are and where you are) “unsustainable” and therefore not worth doing? Some argue that the cost of universal health care is too high. The political systems in many poor countries make universal health care unsustainability and therefore even minimal essential healthcare is not worth offering. Ethically, I disagree, Universal health care is sustainable based on the term rationing which means even though there is a limitation of medical care, and it should be provided to all patients ^[3]. Furthermore, limited resources should be distribution in a fair manner. It is not a smart idea to spend a large amount of money for small essential outcomes in terms of economic decision in business. But this is not true when it comes to healthcare and justice. Consider a good outcome where the cost is not at all important, such as saving a life, recognizing human rights, resources for economic productivity, lowering the cost of health care, and making it more affordable in the long-term. Furthermore, humans possess quality of dignity and claim of life. This means a wealthy society should help the poor society from falling below the baseline of subsistence and dignity.

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This brings lights to the second question, who should pay for truly universal health care? To answer this question, we must consider many conditions. Though the government has a large responsibility to establish the health system and healthcare decisions, they are not meant to be the only one with the obligation to provide all the essential resources or money to make universal health care sustainable in their countries. In short, everyone including individuals, families, businesses, charities, and churches, share in the responsibility to make it happen and come true. The government cannot force people to help others, but it should authorize, equip, and create a condition for all groups of communities to fulfill a mutual obligation to live the life of justice.

The answers to these questions are not easy to make, but the debate of sustainability health care system or universal health care is based on the matter of social, political and economic sustainability and policymaking. In my view, health policymaking is an important force to make universal health care sustainable and suggests a definitive solution to solve the problem. Without good political systems and right policies, the issue of healthcare will remains a controversial topic for debate.

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