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Is American Healthcare a Right or a Privilege?

Brianna Borden

INTRODUCTION

The current state of the healthcare in the United States has allowed for American adults to be much more likely to live their lives without with essential care, the main culprit being a financial struggle to afford even basic necessities. (Osborn et al, 2016).

These issues would not be so common among so many Americans if healthcare was granted as a right to all people- the idea of a right to healthcare is a moral one. However, the privilege of receiving healthcare is a principle that is nationwide and further proven by the law.

The privilege to receive healthcare is not an issue, however, that cannot be rectified by the advocating for the underserved communities by nurses and other healthcare staff .

SIGNIFICANCE

Several factors of the U.S. Healthcare system play a significant part in the American struggle of not having guarantee of universal healthcare:

- Unlike other western nations that have a national system of healthcare and insurance, the U.S. relies on direct fee system, leaving 50 million adults and 8 million children without health insurance. (University of Minnesota,)
- Adults in U.S. more likely than in 10 other countries more likely to go without healthcare- 33% adults were found to not get recommended care, see a physician, or fill prescriptions because of costs. (Commonwealth Fund International Health Policy survey, 2016).
- 15% of Americans reported concern about insufficient funds to cover healthy food purchase

Even some insured Americans report difficulty affording their insurance copay and put off seeking out care because of finances:

- At least ¼ of American adults report having difficulty affording the routine costs, and 1/3 of insured report it to be “very difficult” or “somewhat difficult for them to pay the deductible. (Kaiser Family Foundation, 2019).
- About a half of adults in the United States report they or a family member have either put off or completely neglected to receive health care as a result of the high cost, 31% of which rely on OTC medications, 30% that skip dental care, and 26% that completely put it off. (KFF, 2019).

POSITION STATEMENT

Healthcare in the United States, while an ethical right for all, is only a legal privilege for many Americans as a result of the many factors that depend on an individual’s ability to afford and access insurance and health care coverage.

SUPPORT FOR POSITION

Receiving healthcare is a priority for all individuals and should be an available privilege for all. According to Health People 2020, access to care services that are all encompassing and high quality are of utmost importance to serve several functions including:

- Promoting and maintaining health
- Preventing and managing disease
- Reducing disability and early death
- Achievement of health equity for all Americans

(Healthy People 2020, 2020).

Since health insurance is the largest means by which people can gain access to healthcare, a lack of this can allow for the uninsured to have higher rates of poor health status, make them less likely to receive care, increase rates of later diagnosis, and occurrences of premature death.

However improving access to healthcare is possible through the means of removing barriers and implementing:

- Face to face patient contact and easy contact with providers
- Managing patient demand
- Providing timely care
- Utilizing technological resources to provide timely communication

(American Academy of Family Physicians, 2020)



IMPLICATIONS FOR PRACTICE

As nurses, we are responsible for taking care of and ensuring the health of a variety of populations, and will surely encounter clients from the underserved communities in almost any healthcare setting that we practice in. We especially can see this in the specialty and many roles of the community health nurse, which can include the promotion, protection, and preservation of the health of the public. (Northeastern State University, 2021).

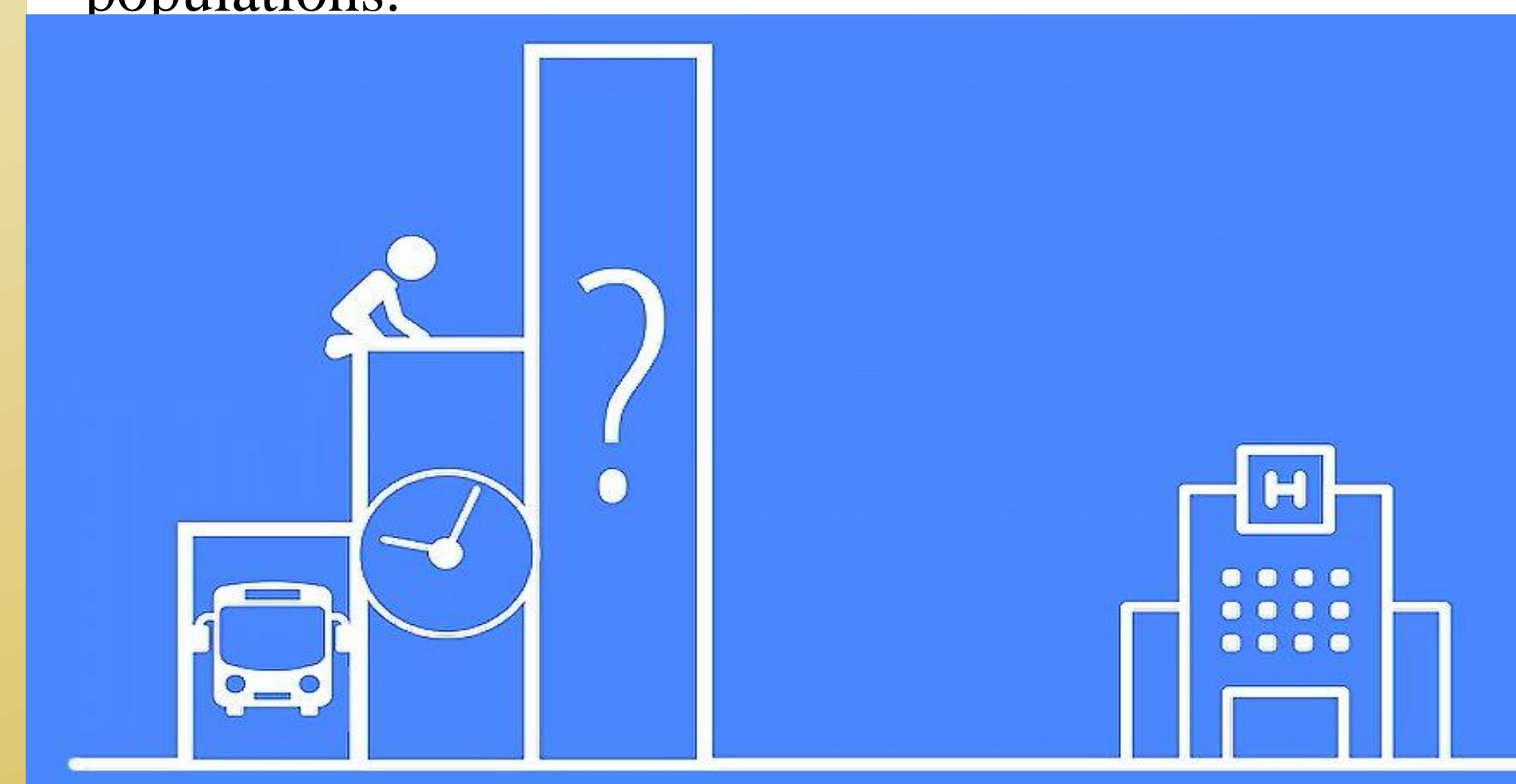
Community Health Nursing involves a variety of specific concepts, but all of which are applicable to all aspects of the nursing role in 3 major ways:

- Promotion of healthy lifestyle through both individual patient and comprehensive community education: with an adequate understanding of healthy promotive choices, we can decrease the amount of clients with
- Evaluation of a community’s ability to provide patient care and the providing of direct care to both patients and communities as a whole
- Institution of health and wellness programs and the conducting of research to improve overall care

Additionally, as nurses we are required to stand by a specific Code of Ethics that consummates the principles by which we provide non-discriminatory care to individuals. According to American Nurse’s Association (ANA) 2015 publishment of Code of Ethics, specific provisions in the code ensures that nurses are:

- Able to advocate for all vulberable populations to receive equal treatment
- The nurse’s primary commitment is to the patient.

With the combination of preventative and promotive methods of healthy lifestyles and adherence to provisions in the nursing Code of Ethics in our practice, we can see a great decrease in the struggles of those without health insurance or coverage and instead a great increase in the overall health status of these populations.



CONCLUSION

In conclusion, healthcare in the United States is one that is a privilege to those that can afford it and still not a guarantee for those that cannot. Lack of access to care proves to have several significant effects on Americans that ultimately can produce detrimental challenges overall. However, we as nurses and members of the healthcare team play a significant role in ensuring underserved populations that struggle to afford healthcare can still receive health promoting and preventing measures via easy to access resources.

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