**American Ideals and Health Care**

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Social Problems: ARP

The article this paper is based on is, “Social Policy in Health Care: Europe and the United States” by James W. Russell. In the article Russell traces the history and origin of health care in Europe and in the United States. He outlines three different health system models that are in use today and emphasizes the United States’ need to reform. The question comes down to what model the U.S. should draw from most. Of course there are negatives for all the health care models, but I believe a national model or a social insurance model has the least amount of negatives and would drastically improve American quality of life. However, whether Americans would ever be able to adopt this change is unclear and the facts all seem to point towards a highly unlikely switch to either model unless Americans can change their ideals and principles.

Russell begins his article by pointing out several statistics to highlight the failure of the American health care system. Health care costs $5,724 per person which is twice as high as the average cost in Western Europe. In addition there are 45 million citizens without healthcare which results in eighteen thousand deaths a year. For a country like America that is absolutely unacceptable. Perhaps the most important statistic comes in the form of a 40% approval rate from Americans for their current health care model compared to a 57% approval rate for Western European models. Clearly America needs a change with its current system and I believe this is something all the political parties agree upon. However, Republicans and Democrats both have vastly different desires when it comes to what sort of healthcare model they want.

As far as healthcare models go there are 3 distinct types. The private health care system is what the U.S. utilizes. In this model healthcare is viewed as a commodity that is sold to consumers like any other product. There is little government involvement outside of services like Medicare and Medicaid. Everything is privatized and those who cannot pay for insurance go without. In the social insurance system countries, such as Germany and France, mandate employers to offer insurance plans that employees must enroll in. The payment comes from the employees and employers and the money goes to a multitude of different health funds and private companies. In addition if someone can’t work or is unemployed they are covered through a tax financed back-up plan. Canada, Italy, Spain, and other countries use the national model which treats healthcare like public education. It is a publically controlled service where citizens pay for health care services through taxes and receive benefits based on their citizenship. For a country like Canada this allows them to negotiate fees with physicians and other private providers resulting in low costs. One important thing to point out is that no country strictly follows these models to a tee. The majority of a countries system might be based on one of the three models, but at least some of the system borrows from other models. For example, the U.S. government providing medical services to the elderly and poor in a private health care system.

The privatized health care system is what we currently have now. There seems to be little support for it to continue to exist aside from private insurance providers and others who are benefiting greatly from the cost of insurance and prescription drugs. Even though this system is much maligned there are positives for it when viewed through an American point of view. Firstly, it involves very little government interference which is something Americans value highly. Secondly, the cost of insurance does allow for state of the art medical technology to be available along with great care from doctors. Finally, it allows the freedom of choice that allows Americans to decide whether they want or need health care at all. These all could be viewed as positives for the private health care system. However, I believe the negatives vastly outweigh the meager positives associated with this system. For one the lack of government involvement has led to soaring prices and complete control over health care by large corporations. As Charles Reich pointed out in the article, “The Corporation as Invisible Government” corporations rarely play by the rules and are, in all reality, sometimes even stronger and more oppressive than our government could ever be. The second positive is also only a positive for someone in the upper class. Many people are just too poor to afford state of the art services to cure their diseases. The average cost of an eight week treatment of chemotherapy can run from $100 to $30,000 (live strong). This leads to some cancer patients paying thousands and thousands of dollars out of pocket because part of their treatment is not covered by their insurance (ABC news). Finally, freedom of choice is of course what makes America wonderful, but access to health care should be a right and not a choice. Everyone gets sick and everyone should be able to go see a doctor regardless of their social standings. All of this points to a change needing to be made. Looking at the remaining two health care models provides us with some options.

The social insurance program does several things that would be a vast improvement over America’s current program. The first thing it does is guarantee universal coverage for all the citizens of the country. Another benefit is that it’s cheaper than privatized healthcare with countries like France and Germany roughly paying a per capita cost of $2,800 compared to $5,274 for Americans. Western European nations also have a better infant mortality rate than the U.S. (4.9 to 7 for every thousand births) and they also have longer life expectancy. Social insurance based programs also allow for choice of coverage and private based insurance programs. However, there are negatives with implementing this model in the U.S. For one it raises taxes to support those who are unemployed and it makes employees pay into an insurance plan whether they want to or not. Thus people will find themselves losing money on two different fronts instead of one. In addition to this it takes away a lot of freedom of choice that Americans value so highly. Just look at the outcry over “Obamacare” that is occurring because it mandates everyone to buy health care. However, even with the added cost evidence shows that it would still be cheaper than the current U.S. model and that it would improve several aspects of our health. A point that I believe should be continuously reiterated is that health care is a right not a privilege or commodity. For me this is why the idea of raising taxes and losing our freedom of choice matters little. Everyone should be allowed access to health care no matter the cost.

The last model is the national health care model and the benefits related to cost and well being are the same as the social insurance model. Italy, France, and Canada all have a better life expectancy and lower infant mortality rate than the U.S. (united nations). Again this model isn’t strictly government based as it allows for private physicians and providers, but it is more government oriented than the social insurance model. The payment for health care comes strictly in the form of taxation which pays for universal coverage for everyone. If citizens are still not satisfied with their health plan they can buy a plan through a private provider to “top off” their existing coverage. The main negative of course if the high rate of taxation needed to pay for this plan. This is my favorite health care model and the one I would like the U.S. to borrow the most from. Since I do believe that health care is a right I believe that it should be provided largely by the government and cut out as much of the private sector as possible. I also like how this model gives people the option to get more health care if they want it, but it gives everyone the same consistent base coverage. This is speaking more towards the Canadian model of health care which does differ a bit from other national health care models. However, I would be satisfied with either approach being utilized as long as it involves universal coverage and cuts down on the costs of our current system. The relative problems of both systems seem much less problematic when compared to the problems our current system has.

The real question however is whether or not Americans would accept a switch to either of these models. It’s clear that something must be done to change our health care system, but the forged in stone commandments of America seem to be violently opposed to the sort of change the social insurance model or the national model would bring. The idea of losing personal choice and freedom along with extra taxes seem to be completely against America’s ideals. A nice summary of this is found in the article, “What’s Wrong with the American Dream?” by Jennifer Hochschild. In the article the “tenets” of the American dream are outlined and explained which leads to a conclusion that America is highly individualized. The idea is that in America you are not what you were born, but what you have it in yourself to be. Any success or failure is determined by the character that you possess. This leads to a very narrow minded attitude that reveres the men and women who supposedly have risen above their status and condemns those who cannot. The American dream is of course uniquely American and our country is heavily influenced by it. This all can be seen in our health care system which is endowed with our free market principles to a fault. This idealization of the individual leads to a, “may the best man win attitude” where health care is something to be earned by those possessing a job and the skills or wealth to obtain one. To change our health care system Americans are going to have to change their ideals and principles in order to recognize that sometimes everyone really does deserve a piece of the pie. Health care is not a hand out and it isn’t a privilege. It’s a right that every American has. President Obama has said that the Canadian health care model won’t work in America and that, “we’ve got to develop a uniquely American approach to this problem” (ABC News). The problem with that quote is we already have developed a uniquely American approach and it simply hasn’t worked.

In his article James Russell advocates for change in the American health care system after analyzing the three distinct models and looking at other countries success rate with different health care acts. He concludes that America needs to shift towards more government influence and less privatized profiteering. I fully agree with him that something needs to be done and agree that either the national health care model or the social insurance model should be adopted by the U.S. However, the biggest impediment is ourselves and our cultural values that we place on individualism and the tenants of the American dream. We need to re-think our values and ideas about life and be more willing to accept that health care is a right that everyone should have access to, not just the privileged or the elite.

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