

Dominic Padon

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ENG 1121

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## U2 Annotated Bibliography

### Introduction:

For my Annotated Bibliography, I decided to ask how American society could improve upon the healthcare system here in America. This has seemingly been an issue that has existed for a while now, but I became interested in this topic only after a recent medical diagnosis within my immediate family that has put us through various hoops in attaining insured healthcare coverage, the process of which was (and sometimes still is) very anxiety-inducing and very stressful. This new and unexpected months-long struggle led me to ponder about the reasons as to why my family member was struggling to get insured healthcare in a country that boasted equal opportunities to achieve success and prosperity through hard work, determination and initiative. It seemed very strange and unfair, and it felt that we were just another statistic within a flawed system. In my research, I expect to find flaws within the system of the American healthcare system, particularly in terms of accessibility and financial issues. Another issue that I expect to encounter are the problems with the quality of care that are provided in the current system, but I don't think I'll focus too much on writing about those, as the scope of my personal experience with it has primarily been the issue of access and coverage and therefore I would like to focus more on those issues. I am certain I will run into some aspects of it in my research, but I do not think I will be writing about it to the degree that the two aforementioned issues will be talked about. I think that researching and looking into this topic and further issues will make my

worldview a bit more informed, and that I will finish this project as a person who is more aware of the world's issues, and how it can affect everyone.

Source Entries:

Citation #1:

Case, Anne, and Angus Deaton. "The Sickness of Our System." *TIME Magazine*, vol. 195, no.

7/8, Mar. 2020, pp. 80–81. *EBSCOhost*,

<https://search-ebSCOhost-com.citytech.ezproxy.cuny.edu/login.aspx?direct=true&db=a9h&AN=141838308&site=ehost-live&scope=site>.

Summary:

In this article in Time Magazine, the authors point out the flaws of the American healthcare system. They begin by outlining the fact that in 2017, healthcare costs per person were about five times what the country spent on defense per person, and about three times what the country spent on education per person. According to the authors, this is not good as it simply inflates earnings for providers and bloats the industry, while at the same time holding down wages and destroying jobs. The authors compare American health quality and costs to other countries and find that other countries had a higher life expectancy while spending less money, indicating that higher costs didn't necessarily equate to higher quality. Another problem, the authors outline, is that the politics within the healthcare community contribute to the higher costs. They say that physician-led groups have successfully kept salaries up by purposefully keeping the number of positions low and rejecting foreign medical professionals who would be assets. The final point in

this article is that the government itself is complicit in this imbalance, and that “the industry that is supposed to improve our health is undermining it”.

Reflection:

From the information given in this article, I am extremely shocked that this system has been permitted to go on, and that it seems too large to change. The problems seem to be deeply rooted, numerous, and reform would have to be an extremely uphill battle. The most surprising piece of data that I found was the case of the comparison with the Swiss, in that they spent 30% less per person on healthcare yet they lived 5.1 years longer than Americans in 2017. That number is mind-boggling to think about because any rational person would think that with higher prices, the quality of what is being paid for is sure to be higher, but that seems to not be the case with the American healthcare system.

Quotation:

“Americans like to believe that their system is a free-market one, in spite of the fact that the government is paying half of the cost, is paying the prices demanded by pharmaceutical companies without negotiation, is permitting professional associations to restrict supply, and is subsidizing employer-provided health care through the tax system.”

Citation #2:

Sammour, Tarik. "Healthcare: Is It a Right or a Luxury? | Tarik Sammour | TEDxAdelaide."

*youtube.com*, TEDx Talks, 25 Jan. 2018,

<https://www.youtube.com/watch?v=jCVmY1iOJQs>.

Summary:

In this TEDx Talk, surgeon Tarik Sammour from Adelaide, Australia talks about whether healthcare was a right or a luxury. He begins with a story about a job opportunity he was offered in one of America's best cancer hospitals. He says that within the paperwork, there were some things that he found odd, such as being asked about his children's medical wellness status, and a company policy that stated that he pays \$25,000 a year in health insurance in order to work there, regardless of his children's medical status being healthy. As he came from a socialized public system in Australia and New Zealand, he thought about the implications of situations such as him happening to not have the right insurance to cover his children and what would happen if a child's parents were on the minimum wage. He expresses his satisfaction about working in such a place where cutting-edge, life-saving equipment was used, but also lamented working there as for every patient he treated and saved, another one was not due to a disqualification of insurance or not having the right type of cover. He asked a colleague how one could live with themselves as a doctor knowing that a "large segment of the population can't access the care [they] provide", and this colleague replied that he regarded healthcare as a birthright due to his upbringing, whereas in places like the U.S, it is regarded as a very expensive luxury. She says that populations have two choices; one being "crappy mediocre healthcare for everyone with long

waiting lists” or “high quality healthcare on tap for those that could afford it”. This response led Dr. Sammour to dig deeper into the topic, and he found that in the developed Western world, the day that healthcare would be utterly and completely unaffordable healthcare is rapidly coming. He says that the reason healthcare is getting expensive is due to the higher life expectancy, with more people who need to be sustained longer causing the price of such sustenance to rise. With this said, Dr. Sammour offers some solutions to begin fixing issues he has observed in the system from his experience and insight. First, he says America should pick a system, whether it be a free, shared public health system that is paid through taxation, and a private system where individuals can pay for their needed healthcare directly or through insurance. Secondly, Dr. Sammour says that there should be complete doctor-patient transparency, and that doctors and practitioners should offer not only the best treatment options, but also the most practical and efficient options. He outlines an example with unnecessarily expensive wound dressings, when cheaper wound dressings could be used because they don’t really have a massive impact on patient comfort and recovery, meaning that not only is it an unnecessary medical option, it’s also an unnecessarily expensive treatment factor. The third and final suggestion that Dr. Sammour offers is that we should emphasize the quality of life over the quantity of life. He ends by saying that we should not focus so much on the question of healthcare being a luxury or a right, but instead we should focus on how we as a society should focus on working towards making the right choices in helping our sick people instead of standing idly by as our rights and luxuries become more and more inaccessible to us.

## Reflection:

I find this TED Talk to be very informative and unbiased, and I agree with the statements that Dr. Sammour made, as he gives a very firm bird's eye view of the problem by using his experiences to inform an argument that looks at both sides of this argument. I like that he used specific examples in his arguments, always providing options that could foster a growing discussion that opens up avenues for amendments, compromise, and progress, while also making sure that the system is held accountable for the flaws that are being pointed out. He is also clear in what he thinks the flaws are and outlines his thoughts in an informative manner. It is also very interesting how he was able to use the contrasts in his experience growing up in a different country to illustrate how vastly different the systems of healthcare between countries are and how America's can be improved. It gave a fresh perspective on the topic, and it made the process of offering solutions a bit more dynamic given that it's coming from an "outside-of-the-box" style of thinking. If there's anything I could say to the speaker, I would say that I enjoyed his TED Talk as it was informed, practical, and had fresh ideas that could very well be applied and expanded upon here in America and other countries that have their own similar healthcare issues.

## Quotation:

"You see, in the developed Western world, no matter which country you live in or what healthcare system you have, we are rapidly heading towards the day when our healthcare will be completely and utterly unaffordable. We may even be there already".

Citation #3:

Targeted News Service. "Shriver Center on Poverty Law: Healthy Illinois Campaign Celebrates Historic Start of the Illinois Health Benefits for Immigrant Adults Program". *Targeted News Service*, April 1, 2022 Friday.

[advance-lexis-com.citytech.ezproxy.cuny.edu/api/document?collection=news&id=urn:contentItem:654B-KRS1-JC11-14PX-00000-00&context=1516831](https://advance.lexis-com.citytech.ezproxy.cuny.edu/api/document?collection=news&id=urn:contentItem:654B-KRS1-JC11-14PX-00000-00&context=1516831). Accessed April 11, 2022.

Summary:

In this article by the Health Department of the State of Illinois, readers are informed that the Healthy Illinois Campaign and Illinois Latino Legislative Caucus are celebrating the launch of the Health Benefits for Immigrant Adults (HBIA) program within the state for any adults aged 55-64, regardless of immigration status. The information article states that Illinois was the first state in the nation to provide medical coverage to low-income seniors over the age of 65, and that this new program is to further supplement the health and wellness of Illinoisians who are undocumented and without any medical insurance - which happens to be the largest population in Illinois that has no coverage. The article states that this program is a step towards lowering uninsurance rates, uncompensated care, and that it provides equitable care to the state's citizens. The article also outlines the requirements in order to receive benefits from this program, and are as follows: you must be a resident of Illinois State, you must be between 55-64, and that you must have an income that is no more than 138% Federal Poverty Level (\$17,774 for an individual). The article ends with various representatives of State Districts and other Illinois immigration and health services applauding the creation of this program and the services it offers.

## Reflection:

I really like this article because it shows that healthcare coverage in America does not need to be so restrictive and inaccessible to non-workers and those with limited opportunities/non-citizen status such as senior citizens and undocumented immigrants. This program, to me, represents what can be accomplished when the health and safety of the general public and all of its population's categories are looked after and are taken care of. This act shows that an equitable, more accessible and more humane healthcare system is possible and very much a possible reality. As someone who is affected by a patient's relative inaccess to care due to immigration status, the HBIA program is a spark of hope and represents a future wherein the people I care about get better opportunities to receive the care that they need.

## Quotation:

“As our state continues to fight a virus that disproportionately impacts people of color, access to affordable, quality healthcare is more important than ever,” said Assistant Majority Leader Lisa Hernandez, D-Cicero. “Expanding Medicaid coverage to undocumented adults is an important step in furthering access to healthcare and ensuring the dignified treatment of undocumented individuals. I am proud to support this legislation that will improve and save lives across the state.”



## Conclusion:

In my research, I have found that the American healthcare system is very inaccessible and is priced very inequitably. It seems that the focus of the system is to line the pockets of insurance companies while making access very hard to acquire for a lot of demographics within the United States - undocumented immigrants, senior citizens and low-income families. I also found that even with the exorbitant prices that comes with healthcare, the quality of it does not match the price range. Countries with lower healthcare prices have populations that are living longer, while Americans are paying much more and not receiving the quality of healthcare that should be commensurate with the prices. In my research, I also found a doctor that offered solutions as to how the American healthcare system could be remedied in small, actionable steps that still make a big impact. In addition to this, I researched that the State of Illinois has put in action a program that aims to provide healthcare support to its citizens that are between the ages of 55-64 with no requirement of documentation. These last two topics that I found make it clear that the American healthcare system does not need to remain the way it is right now, and that positive and equitable change can happen if the health and well-being of beneficiaries is put at the forefront of company or federal policy. I was surprised to see the scope of greed and inequality that the current healthcare system fosters. It seems really mind-boggling that money, and not health and well-being, seems to be the goal of insurance companies and some healthcare institutions. What I learned in researching this topic is significant because it makes me more aware of what is happening in the country I live in, it makes me more aware of social issues and thereby removing ignorance with knowledge and awareness. I think that my topic can be applicable primarily to Americans in the middle and lower classes, as those are the demographics that seem to be most affected by the overly priced American healthcare system. Perhaps if they were made aware of

what is going on in their own healthcare system, they could be inspired to use their power as the people in a democracy and enact small change that leads to fundamental change to a system that everyone in America should be able to use, but are unable to do so because of greed and inequitable policies.