

HEALTH CARE REFORM PAPER

Your paper should provide facts, personal perspective and a solution. Include the following seven elements. I have posed a few facts along with the questions to answer. However, do not rely on *SiCKO* and facts printed here alone. Do original research, too, to support your comments. In addition to the film *SiCKO*, pay attention to the news and the information coming from Congress and the Town Hall Meetings. Familiarize yourself with the most recent versions of the four, soon to be five, healthcare reform bills that are in play. Watch the President's September 9, 2009 address to the Joint Session of Congress. Do not rely on sound bites. When using websites, verify the source! Many sites are merely fronts for corporations or other NGO's with specific agendas! Wikipedia is NOT a source to be cited! Go directly to the source documents! Separate the fact from the fiction!

Your paper should reflect documented facts, correct the misunderstandings about U.S. health care and what it will mean to reform it.

QUESTIONS TO BE ANSWERED IN YOUR PAPER

1. HEALTHCARE IN THE UNITED STATES: HISTORY AND CURRENT STATUS

- Briefly discuss the evolution of the U.S. Health Care System and give an overview of the current U.S. Health Care System.
- What is the contemporary way to finance the U.S. Health Care System?
- What is Health Policy?
- How do we currently care for poor and vulnerable populations?
- Is the conventional delivery of health care in the United States effective? Why or why not?

You might want to include information on Access to Care & Allocation of Health Care Resources; Limited Provider Resources: Emergency Room; Overcrowding and Primary Care Shortages International Health Care Delivery and Financing; Private Health Care Financing; Insurance and Managed Care; Public Health Care Financing Programs: Single Payer Systems: Tricare, Federal Employees Health Benefits Program, Medicare, Medicaid and SCHIP; Government Owned (Socialized) Financing Programs: The Veterans Affairs

2. YOUR HEALTHCARE EXPERIENCES

SiCKO uses the experiences of "regular," insured people to underscore the brokenness of the U.S. health care system. Again and again, Michael Moore presents facts about the state of health care in our country and others as he weaves personal experiences throughout. The film examines a complex issue through the lens of the personal.

- Recall a recent health care experience of your own. What made it positive or negative? Which of the stories in the film resonated with you the most? Why?
- Thinking of the experiences portrayed in the film, or your own personal experiences, what are the major problems in the United States' health care system?

3. INTERNATIONAL HEALTH CARE DELIVERY AND FINANCING SYSTEMS -- CAN WE DO WHAT THEY DO? -- AND DO WE WANT TO?

In spite of per capita costs that far exceed those of any other industrialized democracy, the U.S. is ranked 37th in the world in overall health outcomes. [Sources: *World Health Organization and the Organization for Economic Cooperation and Development*].

In 2004 medical bills contributed to 54% of bankruptcies in the U.S. Most of these people were insured when illness struck. The rest of the bankruptcies were caused by job loss, divorce, death, gambling, and addictions. [Source: *Journal of Health Affairs, Feb. 2005*]

- Does the U.S. feel like a wealthy nation to you? Describe some features of your everyday life that support your answer.
- When you think of your health, job, and finances, do you feel personally secure?
- How do you make sense of the disparity between ordinary people's lives in this country and in the countries featured in *SiCKO*?
- What information about health care in other countries surprised you in the film?
- The film shows that different countries have found a variety of ways to make health care available to everyone. How can that inform our opportunities to improve the U.S. health system?
- What are the pros and cons of the healthcare systems of other industrialized democracies? What might and might not work in the U.S.?
- If you have lived in a country with a nationalized healthcare system, describe that system and your experience. How does it differ from the United States?

4. FAITH COMMUNITIES AND THE HEALTHCARE ISSUE

(If you are not comfortable discussing faith and healthcare, you may omit this discussion.) Faith communities have frequently been at the forefront of human rights issues in the United States. Also, most faith traditions specifically call for their members to right injustice, care for the poor and sick, and stand with those oppressed by corrupt systems.

- What do the canons, sacred texts, or traditions of your faith teach regarding care for others?
- How might faith communities bring about change in our health care system? How might there be barriers to faith communities effecting change?
- How does your personal faith inform your activism in the world?

5. SPECIAL ISSUES

Ethnic norms, cultural norms, gender issues, socio-economic divide . . .

In 1993, 1.3 million African Americans were known to have diabetes. This is almost three times the number of African Americans who were diagnosed with diabetes in 1963. The actual number of African Americans who have diabetes is probably more than twice the number diagnosed because previous research indicates that for every African American diagnosed with diabetes there is at least one undiagnosed case. For every white American who gets diabetes, 1.6 African Americans get diabetes. (NHIS)

African American women are more than twice as likely to die of cervical cancer than are white women and are more likely to die of breast cancer than are women of any other racial or ethnic group. National Center for Health Statistics (NCHS), Health, United States, 2002, Table 30.

Of all the TB cases reported from 1991-2001, almost 80 percent were in racial and ethnic minorities. Asian Americans and Pacific Islanders accounted for 22 percent of those cases, even though they made up less than four percent of the U.S. population.¹² NCHSTP Division of TB Elimination.

In 2000, American Indians and Alaska Natives were 2.6 times more likely to have diagnosed diabetes compared with non-Hispanic Whites, African Americans were 2.0 times more likely, and Hispanics were 1.9 times more likely.² National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), 2000.

Factors such as poverty, housing segregation, poor diet, social and environmental factors are stronger indicators of a person's likelihood of developing disease. Those in lower socio-economic levels live in areas more prone to negative environmental factors, and often lack the education and financial resources to secure health care. Perspectives in Biology and Medicine, 2008

“There are 23 million women currently without insurance in the U.S....women require a more diverse set of health services than men [putting] many women at greater risk. Women of reproductive age are at a particular disadvantage, as nearly one in five do not have private insurance or Medicaid coverage. Women are more likely than men to be in low-paying jobs that do not offer employer-sponsored insurance.” --from *the National Women's Law Center*

“Women have less access to their own employer-sponsored insurance...are more likely to depend on their spouses for their insurance...are more likely to have lower incomes than men...[and] use more health services than men...” ---from *“Women and Health Coverage: A Framework for Moving Forward”* by Patchias and Waxman at the *National Women's Law Center*

“An estimated 2 million babies die within their first 24 hours each year worldwide and the United States has the second worst newborn mortality rate in the developed world, according to a new report. American babies are three times more likely to die in their first month as children born in Japan, and newborn mortality is 2.5 times higher in the United States than in Finland, Iceland or Norway, *Save the Children* researchers found.” --from a *CNN Special Report* by Jeff Green, May 10, 2006

- How does one of your own experiences underscore the facts?
- Think about all of the interactions a woman has with the health care system over the course of her life. How does our government or health care system positively or negatively impact the lives of women?

6. STATE HEALTH CARE FINANCE REFORM: A MODEL?

State-Based Efforts and Other Proposals to Cover More Citizens

- Mandated Employer-Sponsored Plans: Hawaii's Prepaid Health Care Act
- Catastrophic Coverage: Rhode Island's CHIP Act
- Pay or Play: Maryland's Fair Share Health Care Fund Act
- Mandatory Private Insurance: Massachusetts Health Care Reform Plan

7. FEDERAL HEALTH CARE REFORM AND THE POLITICAL PROCESS

As you know, many groups (government and private) throughout the United States are working, at every level, to bring about national healthcare reform that includes, among other concepts, assuring Universal Access to Healthcare (a.k.a. National Health Insurance) and reforming the health system.

In *SiCKO*, Michael Moore argues that change is possible if we all find our voice within the democratic process. Moore repeats that we are not only a nation with the resources to solve this problem, but with a history and an ethos of helping one another.

“The percentage of working adults (18 to 64) who had no health coverage climbed from 18.5 percent in 2004 to 20.5 percent in 2005 -- an increase of over 800,000 uninsured workers. Nearly one (1) million full-time workers lost their health insurance in 2005.”

“Young adults (18-to-24 years old) remained the least likely of any age group to have health insurance in 2005 – 30.6 percent of this group did not have health insurance.”---*from the National Coalition on Health Care at www.nchc.org*

“Working families are experiencing double-digit increases in the costs of health insurance, more out-of-pocket costs for doctor visits and skyrocketing prices for prescriptions, forcing many to delay getting needed medical care or worse—to decline coverage for themselves or their families because of cost. Health care costs are rising at five times the rate of inflation.”
-- *“What’s Wrong with America’s Health Care,” by the AFL-CIO*

“The U.S. has [a]... ‘loose arrangement’ that wastes billions of dollars in administrative costs created by the vast number of different health insurance companies offering various health plans and all requiring different types and amounts of paperwork. ‘It’s cheaper to pay directly for the medical costs than to pay insurance premiums,’ said [Dr. Deborah] Richter, who is a member of Physicians for a National Health Program. ‘Every other industrialized country realized this long ago.’” --*from “Universal health insurance makes ‘business sense’” by PNHP*

“The United States spends at least 40% more per capita on health care than any other industrialized country with universal health care, and Federal studies by the Congressional Budget Office and the General Accounting office show that single payer universal health care would save 100 to 200 Billion dollars per year despite covering all the uninsured and increasing health care benefits.” --*from “The Case for Single Payer, Universal Health Care for the United States” by Connecticut Coalition for Universal Health Care*

- Do you think our government should be responsible for taking care of the health of working people? Of those who can't work? Why or why not?
- How did stories from the movie influence the way you think about citizens in the U.S. getting involved in their democracy?
- *SiCKO* contains lots of facts about the problems in U.S. health care. We've known these facts for years, but they have not moved us closer toward reform. Why not ?
- What do you think is your personal stake in changing the way our health care system works?
- In your opinion, how are social activists different from business people?
- Do you agree with Moore's premise that corporate players conveniently distort the truth in an effort to maintain the status quo and their profits? Why or why not?

- Which facts revealed in this exercise contradict what you have heard and/or believed about U.S. health care and the potential to reform it?
- Upon learning these facts, what new insights do you have about health reform?
- How do you respond to Moore's--and others'--argument that single-payer health care makes fiscal sense for the U.S.?
- Using issues from the film and your own knowledge, articulate what you think is the best solution for our failing system.
- If you were to begin helping reform the system, which area most speaks to you, your needs, and your history and experiences?
- How might business leaders help this cause? What obstacles might keep them from joining it?
- How might our elected leaders help with this cause? What obstacles might keep them from joining it?

Everyone is affected by our sick health care system; every one of us can be part of the cure...