

Responsibility and Rights in Healthcare - VWC Talking Points

1. The human right to healthcare requires that all of us, acting together as a community and society, take responsibility to ensure that each person can exercise this right. As a community, we have a responsibility to provide a healthcare system as a public good, so that everyone can get the healthcare they need. As individuals, we have a responsibility to contribute to making this system available to all of us.
2. Our human rights are much broader than the right to healthcare, and they include broader responsibilities. While we have a responsibility for ensuring that everyone can get the treatment they need, we also share the responsibility for preventing poor health in the first place. Many health problems cannot be solved by medical treatment alone; they require us to look beyond medical solutions to how we can all live healthier lives and create healthier communities. We cannot succeed in achieving a healthy population unless we tackle the underlying causes of poor health. To do so, we must work to eliminate poverty, racism and inequality more generally.
3. Who has the responsibility and the ability to protect the health of our communities? We all do, together, through public health initiatives such as vaccinations, clean drinking water, clean air, food safety, public parks, walkways and bikeways and many other healthy living measures. Healthy living also requires healthy living conditions: e.g. healthy and heated homes, adequate income to buy healthy food and live in an area with stores that sell it, a healthy workplace and healthy environment. These are our human rights, and when people cannot exercise these rights, their health suffers. We all share the responsibility to protect and improve Vermonters' health.
4. Most health problems are due to social and economic factors that are beyond the control of any one affected individual. We see this fact clearly in the shocking health disparities between different groups of people: those in poorer health tend to be low-income and poor people, people who live in "food deserts" (areas without accessible and affordable grocery stores that sell healthy food) and people who face discrimination for various reasons, particularly racial discrimination. It is profoundly unjust to demand "individual responsibility" for illnesses that are caused or made worse by the economic and social conditions some of us have to endure. This "blaming the victim" approach leads to discrimination and marginalization of entire communities based upon income, ethnicity, race, geographic location or other factors that are beyond the control of those communities, and it contributes nothing to improving public health.
5. The issues that are used to blame the victim (e.g. diet, exercise, drug abuse) are complex social issues, and the best way to address them is as social issues. If lack of exercise and poor diet were really the result of individuals making "bad choices", then why do we have an epidemic of obesity? By definition, an epidemic is a social — not an individual — problem, so it should be addressed as a public health problem not as an excuse for stigmatizing or otherwise discriminating against individuals.

6. This country has a history of public health initiatives that improved the health of individuals without casting blame. These initiatives include the polio and smallpox vaccines and regulations for workplace safety and for cleaner water and air. Some public initiatives — e.g. raising the minimum wage — are not explicit public health measures, but they have a powerful positive effect on our health.

7. Of course healthcare plays a role, too, in improving our health. Healthcare must be freely accessible without cost barriers, to enable Vermonters to take responsibility for seeking the healthcare they need as early as possible, to avoid a deterioration of their condition. Doctors and hospitals are responsible for using medical resources wisely. We need to eliminate financial incentives that may lead to the use expensive equipment or brand medication to bolster profitability rather than medical efficacy.

8. Discouraging the use of health care with deductibles and co-pays is not only discriminatory (because some people are asked to pay more than others, simply because they are sick) but also counter-productive, as it prevents early treatment and thus allows health conditions to worsen. Therefore, use fees actually inhibit the responsible use of healthcare by putting up barriers to accessing care.

9. With the passage of Act 48, the State of Vermont committed to providing healthcare as a public good. Participating in the design, operation and financing of our new, universal healthcare system, Green Mountain Care, will be a community responsibility. It will belong to all of us, and we will all be responsible for contributing to it and maintaining it.