

Free term paper on the difference in quality of health care in america and other ...

[Countries](#), [United States](#)



Abstract

Being healthy is the most important part of maintaining a healthier lifestyle. However, it is difficult to maintain good health without efforts and dedication of resources. The US government understands the importance of health and tries to implement a health care system that is beneficial for all. However, the US Health care system is under constant criticism for being uneven and inefficient. The following paper is a discussion of quality of US Health care and a brief evaluation of its shortcomings in comparison to other health care systems of the world.

Keywords: health, medicine, health care, medical costs, life span

Introduction

Healthy people make a healthy nation (Wall, 2002). Health care comes foremost amongst the most important responsibilities of any governing body towards its people. Every nation has its own individual Health Care policy and these policies form a part and parcel of every country's core administration. However, every country has a different take on the issue of Health care for its citizens as different countries have different health care standards. The United States have one of the most elaborate Health Care systems with policies like Medicaid, Medicare, etc. along with health care services for serving its people. All health care policies in the US are made keeping the benefit of its citizens in mind, yet these policies have faced criticism for inefficiency through the years. It is constantly under comparison with similar policies in other developed nations. However, since health care is highly dependent on the demographics of a country for its effectiveness, the

US Health Care needs scrutiny in terms of its effectiveness. The following paper is a discussion of the Health Care in the United States of America, and a comparison of US Health Care with Health Care in some other countries.

Discussion

The American Health Care system is one of the most elaborate health care systems in the world, complete with federal as well as state based policies and services that provide Health Care coverage to the citizens of America. These services include non-profit hospitals, private agencies, government health care facilities and health care insurance policies. Nearly eighty percent of the Health Care organizations in the US are non-profit organizations. Health care policies cover more than seventy percent of the population of United States. Most people below the age of the sixty seven years are either insured independently or insured by their relatives. Government officials and other public sector employees are provided by the respective governments. Emergency Health Care infrastructure is designed to take care of all individuals who face any form of medical emergency. Health Care is also extended to non-resident immigrants. There are several health care policies in place for example Medicaid, Medicare, Veterans Health Administration, Children's Health Insurance Programs and TRICARE etc. The US health system is the world leader in innovations in pharmaceutical industry, with an average equal contribution from both public as well as private funding sectors. However, even with such an elaborate health care system the quality of United States Health Care system is under constant criticism.

Mortality rates are comparatively high and life expectancy is approximately seventy five years (Fenton, Jerant, Bertakis and Franks, 2012). However, mortality rates are mostly considered due to deaths caused by accident, murder, severe trauma due to fatal injuries, suicide, homicide, obesity, chronic pulmonary or cardiac diseases, etc. Medical procedure costs have been on a constant rise and professional primary health care has become difficult. People in the uninsured category, especially the ones over the age of sixty seven years find it difficult to pay their medical bills. Added to this fact that the ones who are insured declare bankruptcy by the time they reach this age. Health care is costly and US spends a large some of its GDP in providing health care to its people (Emanual and Pearson, January 2012). Yet people have to face costs and therefore have to take up loans that adds to the debt to the whole system. Therefore, there is a general dissatisfaction amongst citizens towards the overall standards of the Health care in the United States.

Citing health care issues in other countries becomes an important task in this analysis as a different perspective is always required to understand the issue at hand. Most of the countries in the world with a stable government system provide health care facilities to their citizens. India is one of the world's largest democracies with diverse demographics and huge requirements for health care. In a stark contrast with the US Health Care system, the Indian Health Care system is very basic and is redundant in providing proper health care to its people (Fenton et al., 2012). The Health Care in India consists of government run health facilities both in rural and urban areas while privatized health care is available mostly in urban regions only (Kishore,

2005). Mortality rates are very high with an average life span of only sixty five years, a difference of nearly ten years from the average life span of United States (Kishore, 2005). The low life span accounts to the inadequate medical services present in the country. Inadequate number of hospitals and ambulance services are some of the major reasons of failing health care. Also unlike the US centralized as well as state wise health care policies, India likes a tangible health care initiative. Most of the medicine provided is unsubsidized and available at higher rates. However, the only positive factor is the comparatively lower costing medical procedures in the country (Kishore, 2005). This is possible because of the majorly state run medical facilities like hospitals and maternity homes throughout the country. Another comparison can be made between the Health Care in Australia with that of the United States. The Health Care system is closely monitored by government organizations and health care policies include a single universal policy, the Medicare (Fenton et al., 2012). A large sum of the policy is publicly funded, with public levy of one and half percent of the income, and becomes higher for higher income groups and an exception for low income groups; while the rest of the funding is derived through state funds. This is in contrast with the US policy as most of the health care policy fund is derived from taxes, state funds and the federal funds. Australia boasts of one of the highest life expectancies in the world, counting at seventy eight years for males while eighty five years for females. Although both the US and Australia are high income countries, Australia has a comparatively higher health status than the United States (Wall, 2002). However, the health standard in Australia faces disparity as people with income below the poverty line,

indigenous communities and people living in remote areas seldom get proper health care, as most of the health care facilities are concentrated at places that are reachable from economic centers. However, there have been efforts to decrease this gap, with subsidized programs of outreach to indigenous and the remotely located people through government funding. The major concern for the Australian Health care system is its vulnerability to political influence (Wall, 2002). For this reason, the health care system has been criticized to be slow, rigid and at times ineffective in its deliverables. With the established facts about some of health care systems elsewhere in the world, one must understand that all policies must undergo change at some point of juncture in time. Even though Health Policies in the US are meant for the benefit of its citizens, it is time and again criticized for its inefficiency at providing universal health care to its people. With a higher mortality rate as compared to mortality rates of other high income group countries like Australia, Norway, Luxembourg etc. (Wall, 2002). US Health Care may seem to be failing at providing health care to its citizens. The fact remains, however, that the US Health Care system ranks the lowest amongst Health Care systems in high income countries (Emanuel and Pearson, January 2012). It is one of the costliest, most diversified and all-encompassing system, yet it ranks as a comparatively less efficient system of health care in the world. Health care is distributed unevenly and there are many instances where people require taking loans for medical treatments (Fenton et al., 2012).

It is imminent that substantial reasons are to be found for this situation (Emanuel and Pearson, January 2012). Research is required and monitoring

needs to be done to ascertain the reasons for such deterioration of the US Health Care Industry. However, the fact remains that the United States is a diversified nation with varying demographics throughout its provinces. Also, the population density is much higher in comparison to many other countries and has an almost even distribution throughout its expanse (Fenton et al., 2012). With these facts, creating policies that can benefit all is a very cumbersome and rigorous task. However, the fact that such policies exist and operate is an example of how the administrations try to implement them with a large perception of the demographics. What must be understood is that with rapidly changing and overall rising inflation rates all over the world, price rise is inevitable. Other factors worth noting are the use of emergency health care by uninsured population, increased obesity, stressed working culture and newly developing health threats, which cost the US Health Care system. The present federal administration recognizes these fact and proposes to amend the present system with policies like the Obamacare. There is a proposed cut on the research and development spending on pharmaceuticals to divert more funds towards other health care services (Emanuel and Pearson, January 2012). There is also a need to increase the number of physicians working under the new health policies, a need that may take time to be fulfilled as training medical care professionals is a time consuming process. Other measures may include introduction of minor levies on higher income groups to compliment the funding process. What can also be done is increasing the uniformity of the overall system for the whole demographic, which again would require certain amount of monitoring and efforts by the government. However, amongst all of this the responsibility

must also be given to increase their efforts at maintaining healthier living standards.

Conclusion

It is evident from the above discussion that the Health Care in the United States is a well-established one and is availed by almost all of the citizens of the State. In comparison to developing countries like India the Health Care system in the US has many benefits for the people. It provides access to quality health service, which is a right of the people, an efficient health care service system which is responsive both in emergency and non-emergency cases. However the system lacks in comparison to some countries like Australia, Norway etc. There are several factors that turned up as causes in the discussion which account for a comparatively low performance of the US Health Care in comparison to these countries. The first reason is increased population growth rate, caused both by reproduction as well as immigration. The second reason is the slow pace of reforms. The third and the most important reason is the inflation in prices at the global level. These and many more such factors make it difficult for health care services to reach out to people in a way that all can be benefitted in an economical way. However, one should not begin to think that the health care system in the US is an inefficient. Compared to the third world countries and some upcoming developing nations, United States has some of the best in the world medical services complimented by medical professionals proficient in their task. The present day issue is the rising expenditure on medicine and health care services, which requires a thorough review of the health policies of the state

in a way that the effect of inflation be minimized on the health care system and people may avail better health care at affordable prices. The change must be a two way development process, with the government, private health care organizations and the people coming together to produce higher living standards and better health care facilities for all.

Reference

Emanuel, E.; Pearson, S. (January 2012). " Physician autonomy and health care reform". JAMA 307 (4): 367-368. doi: 10. 1001/jama. 2012. 19. PMID 22274681

Fenton, JJ; Jerant, AF; Bertakis, KD; Franks, P (2012). " The Cost of Satisfaction: A National Study of Patient Satisfaction, Health Care Utilization, Expenditures, and Mortality". Arch Intern Med. 2012; 172 (5): 405-411. doi: 10. 1001/archinternmed. 2011. 1662 172 (5): 405-11. doi: 10. 1001/archinternmed. 2011. 1662. PMID 22331982.

Kishore, J. (2005). National health programs of India: national policies & legislations related to health. Century Publications. ISBN 978-81-88132-13-3.

Wall, A. (2002). Health Care Systems in Liberal Democracies. Routledge. p. 20. ISBN 020343014X.