

4-11-2014

Just Care: Healthcare on the Margins

Erick W. Skaff

Jacob B. Boersma

Lauren Gentry

Follow this and additional works at: http://digitalcommons.hope.edu/curcp_13

Recommended Citation

Repository citation: Skaff, Erick W.; Boersma, Jacob B.; and Gentry, Lauren, "Just Care: Healthcare on the Margins" (2014). *13th Annual Celebration for Undergraduate Research and Creative Performance (2014)*. Paper 195.
http://digitalcommons.hope.edu/curcp_13/195
April 11, 2014. Copyright © 2014 Hope College, Holland, Michigan.

This Poster is brought to you for free and open access by the Celebration for Undergraduate Research and Creative Performance at Digital Commons @ Hope College. It has been accepted for inclusion in 13th Annual Celebration for Undergraduate Research and Creative Performance (2014) by an authorized administrator of Digital Commons @ Hope College. For more information, please contact digitalcommons@hope.edu.



HOPE COLLEGE

Just Care: Healthcare on the Margins

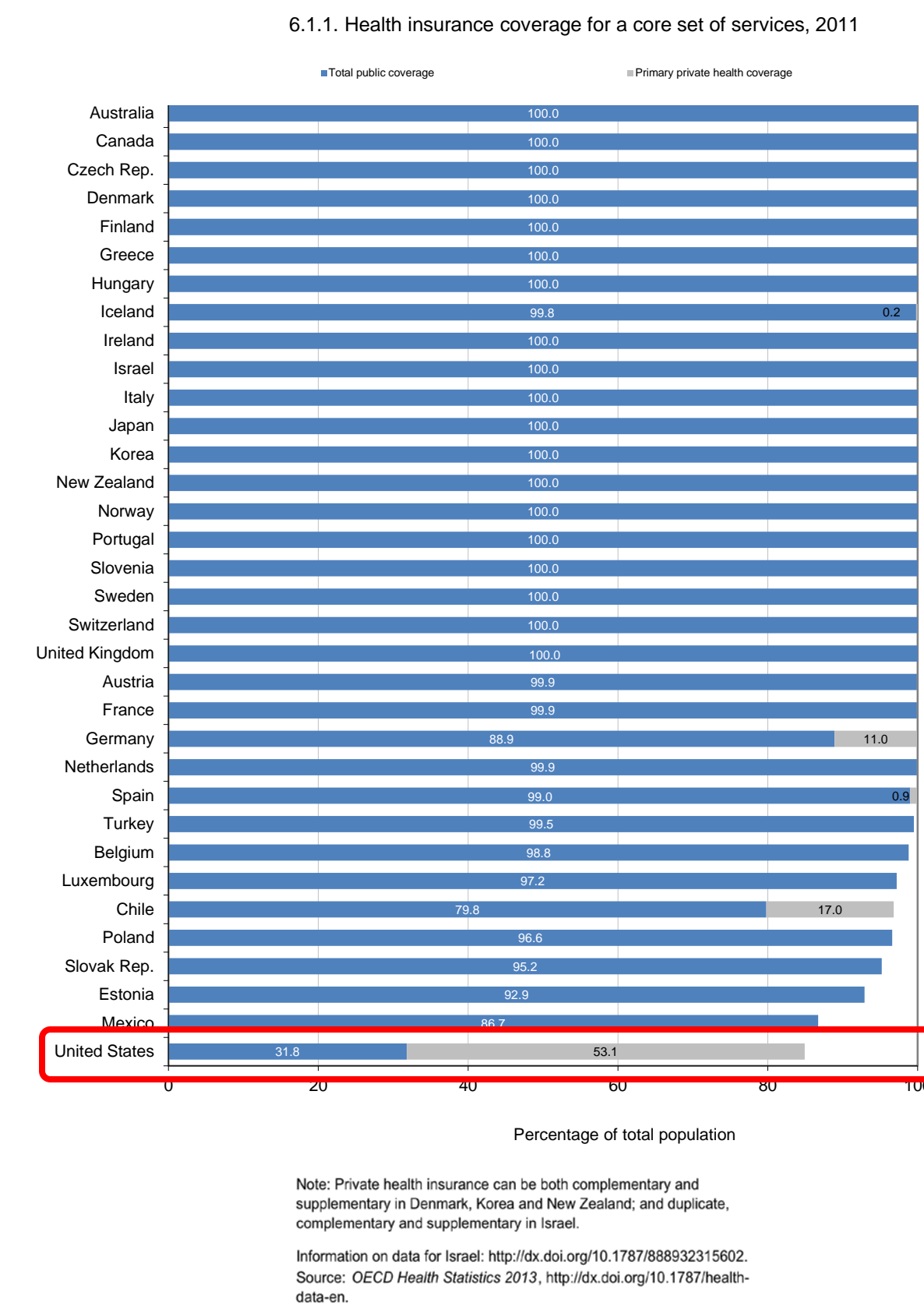
Erick W. Skaff, Jacob B. Boersma, Lauren Gentry, Mark Husbands*
Emmaus Scholars Program, Hope College, Holland, MI 49423

For more information, contact:
Mark A. Husbands
Hope College
(616) 395-7214
husbands@hope.edu

Abstract

Inequality is one of the most significant issues facing contemporary society. This is evident upon a close examination of the Organization for Economic Co-operation and Development (OECD) Health Data report "Health at a Glance 2013". This report documents a number of critical deficits with respect to accessibility and quality of health care in the United States compared to the other 33 member nations in the OECD study. The U.S. spends over two and a half times more than the majority of developed countries while providing significantly fewer physicians, hospital beds, and a slower increase in life-expectancy per person than most other OECD countries. The findings of the OECD report raise normative claims regarding public health policy and the delivery of medical care in the U.S. We maintain that nations have the moral responsibility to provide "just care" for the marginalized, poor, indigent, and undocumented persons. Such care follows from a number of basic claims about the nature of health care, the dignity of persons, and the moral/social fabric of a nation. These claims are undermined by the pursuit of profit leading to the disparity in health care. The existence of health care organizations that succeed in providing "just care" demonstrates that such care is both achievable and represents a positive alternative to the dominant for-profit model of health care delivery. In fact, such work begs the question of equity and justice. A nation that spends \$8,508 per capita per year on health care owes its citizens and non-documented workers greater accessibility and a higher quality of care than is currently provided.

U.S. Healthcare Coverage



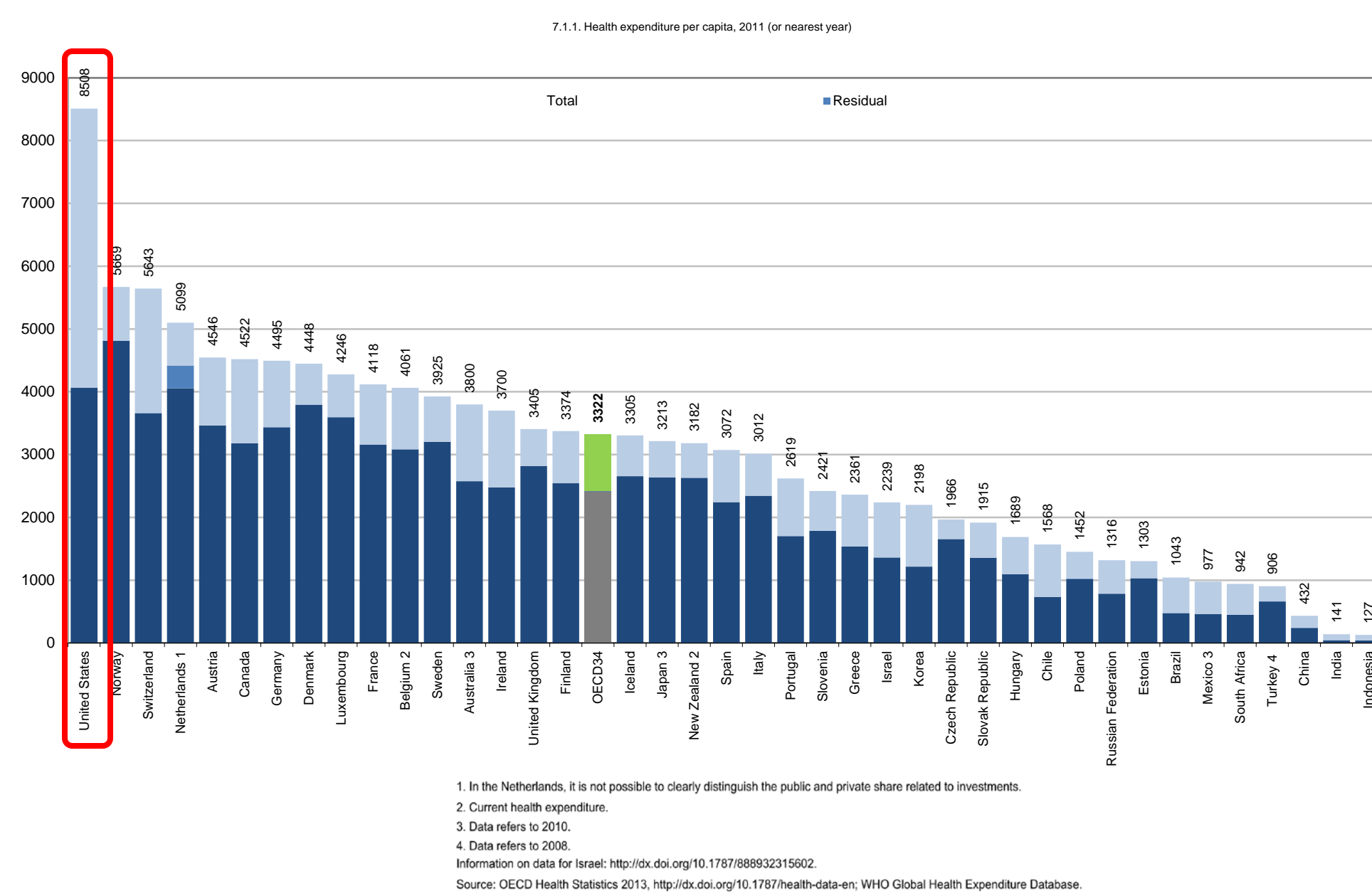
Examining a Virtuous Model: Christ House

- Located in the Adams Morgan district of Washington D.C.
- Founded in 1985 by a physician and her minister husband.
- 33 bed hospital facility gives around-the-clock attention to patients with a wide variety of acute medical needs.
- Each patient is assigned to a case manager, who functions to help the patient in obtaining the necessary paperwork in order to receive medical treatment.
- Full time staff comprised of two physicians, four nurse practitioners seven nurses, and eight nursing assistants.
- Long-term patients have option to live in Kairos House, a community of former patients supporting each other through their sobriety, healing, and daily life together.

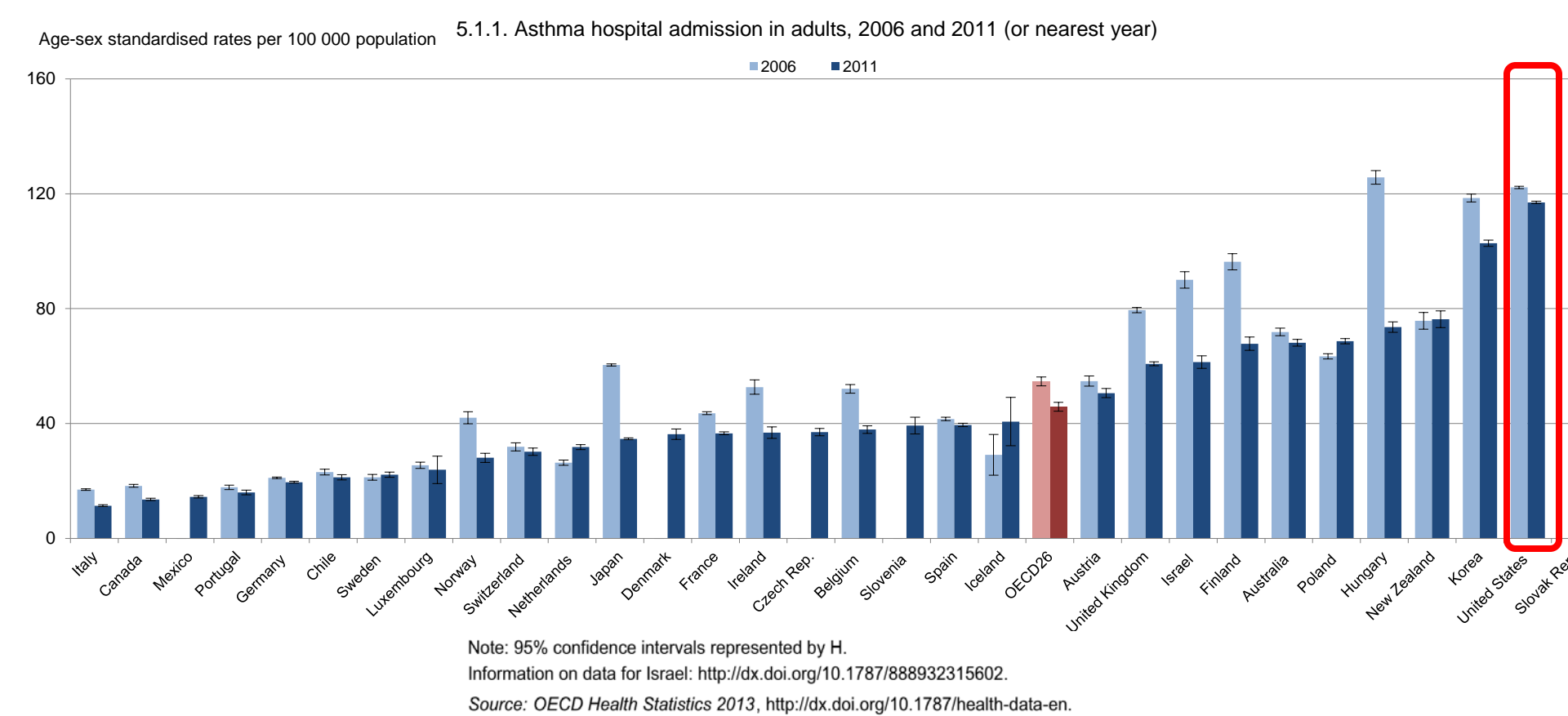


"Our mission is to provide comprehensive health care for sick, homeless men and women and assist them in addressing critical issues to help break the cycle of homelessness." –Christ House

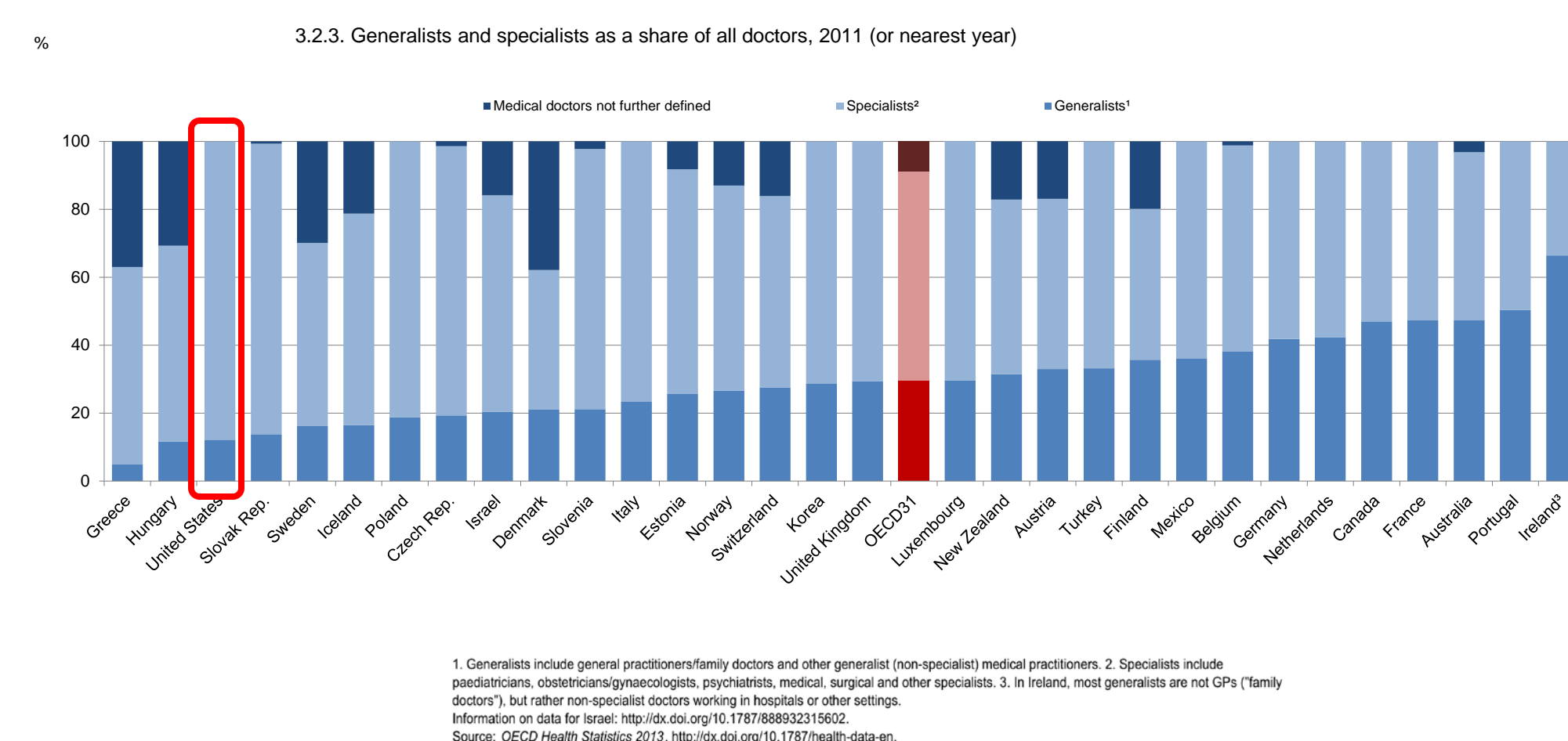
U.S. Healthcare Spending



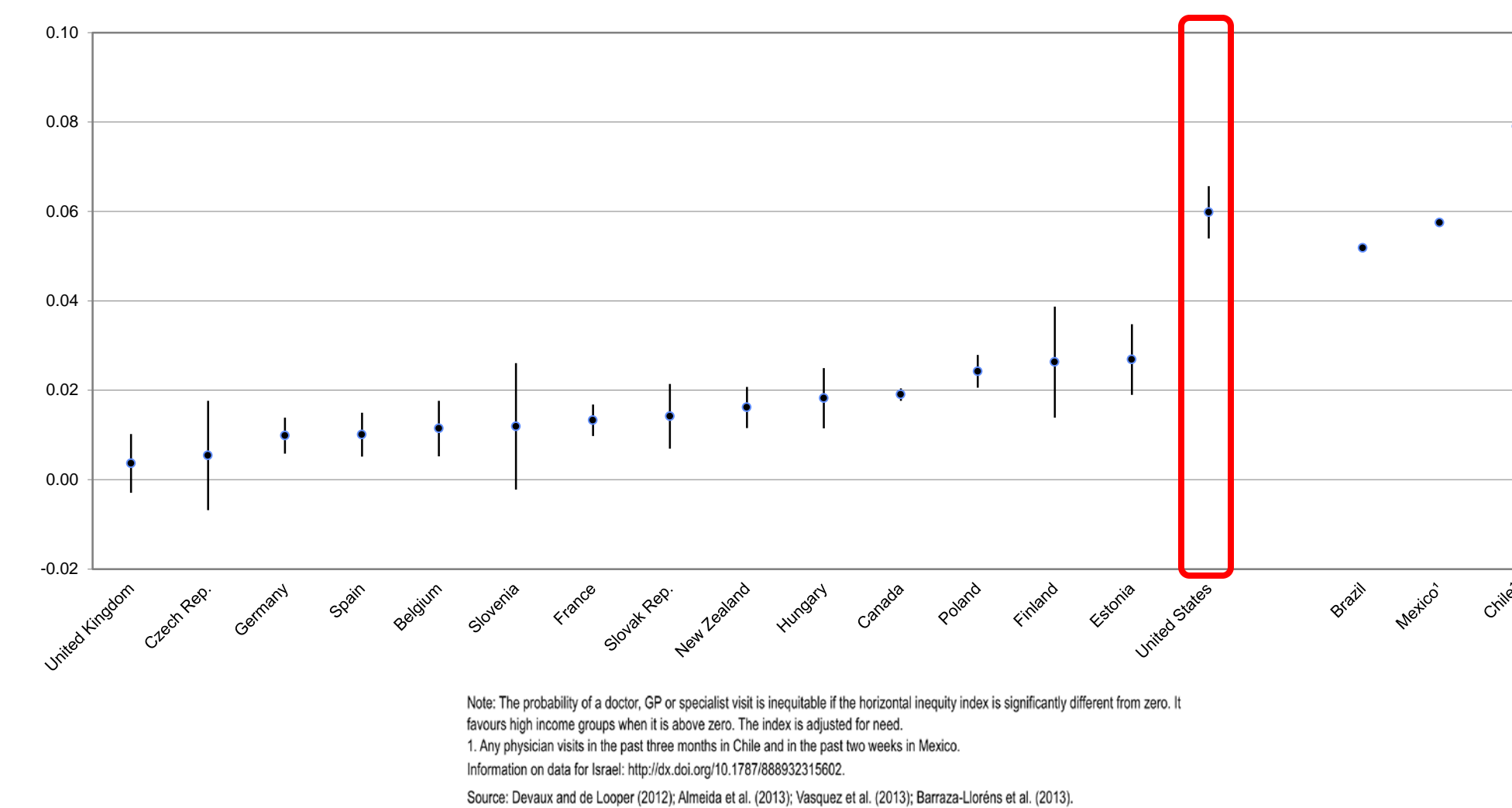
The Root Problem: Lack of Quality Care for All People Cases of Asthma Admittance and Routine Doctor Visits



One Potential Explanation: Lack of Primary Care Physicians



6.4.1. Horizontal inequity indices for probability of a doctor visit in the past 12 months (with 95% confidence interval), 17 OECD countries and Brazil, 2009 (or nearest year)



Conclusions and Basis for Future Work

- The U.S. spends far more money per person on healthcare than any other OECD country, while yielding a much lower standard of care for under and uninsured persons.
- The U.S. reports having the highest number of specialists, while there remains an imbalance of patients having a condition that a generalist could effectively treat.
- Despite the massive steps it would take to completely restructure the U.S. healthcare system, we urge the U.S. to examine its own healthcare system, and in doing so seek to follow a Christ House precept, "Poor people do not deserve poor medicine."
- From our research, we have learned the proclamation and demonstration of the gospel cannot be separated, and it is our role as the body of Christ to "seek justice, love mercy, and walk humbly with our God" among the poor and oppressed.
- Each of us aspires to one day be a physician or healthcare professional who integrate our passion in doing social justice with our calling into being healthcare professionals.

"He has shown you, O mortal, what is good. And what does the Lord require of you? To act justly and to love mercy and to walk humbly with your God." –Micah 6:8 (NIV)

Acknowledgements:

Hope College Emmaus Scholars Program
Mark Husbands Ph.D.
Christ House (1717 Columbia Road NW,
Washington, D.C. 20009)

