

# AAPS Student Essay Contest Winners

**Question 1:** Every society grapples with establishing the relative importance of key values. What is the best way to balance the requirements of individual autonomy (freedom), justice, and equality? Define your terms and apply them to the provision of medical care.

## Elisabeth Miller

Democratic values of liberty, justice, and equality are prominent in American founding philosophy. Each of these values is pursued in one form or another in modern society, and the medical field is no exception. Although these values may compete with one another, the capacity for prudence serves as the best way to balance these requirements.

Liberty, or individual autonomy, is the freedom to make decisions for oneself without interference from outside pressures or opinions. In medical care, a patient may receive education about available treatments, but it is ultimately the patient who chooses the treatment, if any. Equality is the state in which every individual is given the same opportunities, services, and rights. For example, equality is demonstrated by offering the same medication to a group of people who have identical illnesses. Although many use the terms “equality” and “justice” interchangeably, there is a distinction. Unlike equality, in which everyone acquires the same goods and services, justice attempts to provide commodities congruent with an individual’s situation to achieve fairness in outcome. For instance, a physician would likely treat pneumonia differently in a previously healthy teenager and an elderly, immune-compromised person, although the common goal would be to regain health.

The American medical system pursues the values of autonomy, equality, and justice, but in many cases, as one value is strengthened, another is weakened. The balance between liberty and equality is difficult to maintain. For example, if a man is granted the power to demand any type of medical care he wishes—through financial or political means—he gains liberty, but equality is diminished. Other patients would not gain similar opportunities. Alternatively, if equality was so strongly favored that every patient received the same treatment of a shared disease regardless of individual circumstances, patients lose liberty. In this instance, the physician controls all aspects of care. Patients lose autonomy.

How does one balance equality and justice? With equality, every person, irrespective of race, religion, or social status receives care without bias. The difficulty is that differences among people exist; for example, severity of disease or ability to afford recommended therapies. Justice takes those disparities into account. It judges individual contexts and seeks to correct factors that impede a person’s chance for medical care. Medicaid is an example of government seeking justice by supporting medical services for those with income too low to afford them. Justice, however, can be more difficult to enact than equality because it often depends on evaluating characteristics subjectively. As a result, the measures to attain a “fair outcome” vary among communities.

The best way to balance the requirements of democratic

values is through prudence. More than simply wisdom, prudence is the practical application of reason to action, in order to know how to achieve a certain end, including moral ends. Having good intentions is not enough—one should possess the correct knowledge of the circumstances and of the means to reach a goal.

The values of liberty, equality, and justice align themselves with our Framers’ sense of morality, and by themselves, these values are just values. With prudence, people know how to effect these values in society, including medical care. In the Declaration of Independence, the Framers state: “Prudence, indeed, will dictate that Governments long established should not be changed for light and transient Causes.” Through the faculty of prudence, they demonstrate awareness of the serious need for independence from English rule (an end) and act by writing the document (a means). While the everyday interactions in medical care are typically less dramatic than a nation choosing its own government, prudence still plays an important role in recognizing and attaining goals in medicine, and balancing values.

The democratic values are interlaced with one another in American medical care, and must be balanced, using prudent insight, to produce ideal opportunities for patients.

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## Tyson Amundsen, M.D.

The U.S. is at a crossroads in medicine. A top priority of voters—reform of the current system—is an incredibly complex public policy issue that draws ideas from across the political spectrum. Political philosophy is linked with practical politics, and therefore directly impacts individual lives. Some favor the expansion of centralized programs under federal control, while others promote a return to less centralized, market-based reforms that minimize third-party interference. Toward which direction should American society go? When choosing how medical care should be provided, Americans should consider ethical principles applied in the context of our unique heritage.

Ethical principles are a source of moral obligation that dictate actions. Any society can evaluate its method of providing medical care and orient its future trajectory by comparing it against an ethical framework. Using a framework of ethics creates a strong moral foundation upon which a medical system can be built or remodeled.

Of principal concern for our society is the ethical principle of autonomy. Autonomy is the right of patients to be sovereign over medical matters pertaining to their own bodies. The singular founding of this country reflects the value placed on autonomy and individual responsibility. There is an American way of doing things that is unique, which follows from the inspired principles of freedom embedded in our Declaration of Independence. Because of this legacy of liberty, autonomy is the first principle to consider in America.

In a medical system that protects individual freedom,

autonomy is placed over paternalism, which has historically been a dominant approach to medical care. For patients to exercise autonomy, their sovereignty must be respected. Major personal medical decisions belong to patients, and are not subject to control by a third party, such as a government entity or insurance agency. Patients have a right to informed consent when making decisions, and the right to delegate decision-making authority if so desired. An ethical medical system must maximize individual freedom by designing the system with the patient at the center.

In addition to autonomy, medical provision must adhere to the principle of justice, which states that patients should be treated fairly—similar cases are treated similarly, and different cases are treated differently. The ethical principle of justice is often confused with the idea of equality, when in fact they are not the same.

The natural rights of all human beings are universal, and only in America are those rights recognized and protected in the founding documents of our nation. Protecting these natural rights for all is true justice. It is the birthright of every American citizen to live freely, and the freedom to choose one's own path implies that every life will be different. A just medical system is not designed to ensure equal outcomes. A just system allows patients to retain autonomy in their personal lives, permitting them to make decisions about how they care for themselves, while providing them the best opportunities possible. Justice is unlikely to be satisfied by a hegemonic centralized system that seeks equal medical care for all. Such design of a system inevitably creates more injustices. The only equality that matters is that each person be equally free to seek happiness and the medical care of choice. Mistaking equality for justice inevitably results in the erosion of autonomy and individual freedoms.

The best medical system is constructed from fundamentally sound decision-making based on ethical principles. Autonomy and justice are the first building blocks. The author Stephen Covey stated, "The main thing is to keep the main thing the main thing." In creating a system of medical care, a society must place the interaction between patient and physician at the forefront. Protecting this important relationship means preserving patient autonomy. The system must serve the individual, not the other way around. The only truly just medical system puts the patient in control.

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**Question 2:** All proposals for providing medical care will have strengths, weaknesses, and trade-offs. Identify and address weaknesses and potential negative trade-offs that arise within a free-market approach to the delivery of medical care.

## Parker Foster

Medical care delivery profoundly impacts lives, making it a highly contested issue. Two diametrically opposed directions medicine can take are expanding or limiting government's role, with Medicare for All at one end, and free-market ideals at the opposite. According to a plethora of recent polling, Medicare-for-All is undoubtedly gaining appeal. Its advocates challenge two aspects of a free-market approach.

Perhaps the foremost argument against a free-market approach is lack of universal health coverage. Advocates for Medicare-for-All boast that every individual will have health insurance. This argument measures quality by the number of insureds. Free-market ideals, in contrast, are meant to reduce

cost and increase quality.

The premise that coverage is synonymous with affordable, quality care is faulty. Although universal coverage systems sound attractive, care rationing, extended wait-time, and elevated moral hazards are inherent. Free markets instead minimize these problems and reduce prices.

Consumers armed with choice wield incredible pressure in a free-market system. Demonstrated by nearly every commodity, competition over time has an extraordinary ability to reduce cost, and increase distribution and quality. Market-based medical care can reduce procedure costs and widen availability; LASIK is a hallmark example. With prices dropping upwards of 50 percent accompanied by increased quality, LASIK has shown that medical procedures are indeed susceptible to market forces. These shifts are the result of increased competition between sources of care coupled with a lack of insurer coverage. Reducing the cost of actual procedures is but one area for savings. Other areas include delivery type (i.e. subscription plans) or streamlining administrative processes.

Additionally, free-market systems will eliminate the need for insurance coverage for routine care (i.e. physicals). Insurance plans instead could limit coverage to catastrophic events, thereby lowering premiums. As competition reduced costs, premiums could be further reduced. Lower premiums would allow more individuals to participate, spreading the burden-sharing over a larger population.

Effectively, a positive feedback cycle will ensue, driving the population toward universal coverage. So, while there is no guaranteed universal coverage, the system can approach universal coverage. Thus, free markets grant more individuals access to affordable, quality care that is otherwise inaccessible.

For the population who still cannot afford services, various institution could meet their needs. These include private-sector, charity-like funds, or potentially a governmental Medicaid-like program to subsidize costs. Reducing costs will reduce the pool in need, making assistance more manageable.

Those skeptical of a market approach argue that some locations simply cannot support competition. In an area only capable of supporting one source of care, a select few hold significant pricing power. While the argument does contain merit, it does not apply to as many populations as one may believe. Most people live in communities large enough to support multiple care sources, thus competition. The idea of a physician price-gouging in an extremely small community seems unlikely. In such cases, free markets produce innovation. Suppose a radiologist overcharges in a small community. Even though a second radiologist cannot be supported, an entrepreneur may start a business where a technician performs imaging, and images are electronically interpreted elsewhere. Innovations in telemedicine can rise to serve even the most isolated communities. In fact, in a reverse scenario, living costs for a radiologist in a rural community may be so low that he can provide telehealth services at substantially lower rates to urban areas. Accordingly, small communities may exert pressure upon metropolitan cities. Innovations in a free market are unpredictable and limitless.

Ultimately, the market has proven that its aggregate knowledge is well beyond that of a small collective of bureaucrats. Certainly, every solution carries potential pitfalls; however, I believe a free-market approach minimizes unforeseen externalities, and places power in the hands of the consumer.

Medical practice is susceptible to market forces and should be allowed to be driven by them.

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