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As I See It: The gap in US health care

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Op-Ed by George J. Dooley III

As an engineer and scientist for most of my adult and working life, I have lived in great admiration and constant appreciation of the technological and scientific achievements of our great country. That list is long and storied, going back at least to the telegraph and telephone and extending to today's cloud computing, smartphones, 3-D printing and so forth. Our nation's standing and stature in this realm is truly exemplary and outstanding.

However, our nation's health care status on the world stage presents a remarkably different picture. For clarity, a distinction needs to be made here on the "quality" of the health care that we do possess and are capable of delivering, versus the overall health of all of our nation's citizens as a whole as measured against national and international standards. Inherent in this latter metric is the proportion of our population that our admittedly good health care capabilities is available to. To have our country's overall health care rank (in light of the technological achievements alluded to above) somewhere around 20th in the world seems to border on the deplorable. Granted that different national and international surveys on this topic will yield different respective rankings, nowhere in any of these professionally recognized studies does the United States come anywhere near ranking even in the top 10. Even to the untrained eye, the low level of achievement would appear unbelievable.

Then, one could reasonably ask, why is our world health status so shabby, by any recognized metric, in light of the technical and scientific prowess that we as a nation proudly possess? At least one plausible reason must have to do with a minimum of two contrasting facts. Those of our citizens who receive our admittedly excellent health care seem to be doing relatively well on the whole. However, the stark fact that is bringing down our overall health care status in the world is that our admittedly good health care capabilities are NOT available to all of our citizens, especially those who need it the most.

A solution to this dilemma of those needing health care but not receiving it may lie in the following analogy. A very large percentage of this nation's technological achievements had one element in common. At some stage of their development, these efforts received some form of government or public funding. For some, it was during the basic research phase of the work. For others, it might have been during the implementation phase as the work progressed. In many cases, this public funding was provided because, at the time, there was no readily perceivable commercial benefit, but the underlying sound science was deemed worthy of support.

In an attempt to cast this low health care status issue in the simplest and most readily understandable terms, one could pose the following question: "What is more important to our nation as a whole than the health of its citizens?" Freedom, possibly yes. Anything else, I would offer as seemingly less so. Would it not be possible and prudent to extend the tangible successes of the public funding element in the fields of science and engineering into the realm of health care for ALL citizens where the benefits would be even more ubiquitous and more far reaching than those in science and engineering? How admirable it would be to have this lofty goal on our national horizon!

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