

## RIGHTS TO HEALTH CARE

# Philosophy and Medicine

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# RIGHTS TO HEALTH CARE

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## EDITORIAL PREFACE

Human existence is marked by pain, limitation, disability, disease, suffering, and death. These facts of life and of death give ample grounds for characterizing much of the human condition as unfortunate. A core philosophical question is whether the circumstances are in addition unfair or unjust in the sense of justifying claims on the resources, time, and abilities of others.

The temptation to use the languages of rights and of justice is understandable. Faced with pain, disability, and death, it seems natural to complain that “someone should do something”, “this is unfair”, or “it just isn’t right that people should suffer this way”. Yet it is one thing to complain about the unfairness of another’s actions, and another thing to complain about the unfairness of biological or physical processes. If no one is to blame for one’s illness, disability, or death, in what sense are one’s unfortunate circumstances unfair or unjust? How can claims against others for aid and support arise if no one has caused the unfortunate state of affairs? To justify the languages of rights to health care or justice in health care requires showing why particular unfortunate circumstances are also unfair, in the sense of demanding the labors of others. It requires understanding as well the limits of property claims. After all, claims regarding justice in health care or about rights to health care limit the property rights of those whose resources will be used to provide care. The languages of rights to health care or justice in health care, if secured, lead to others having duties to give aid and to relinquish claims over their own time, money, and resources. The languages of rights to health care and of justice in health care construe much of what is unfortunate as also unfair in the sense of supporting moral claims for particular allocations of health care.

This volume addresses the problem of grounding duties to provide care, rights to health care, and claims to justice in health care. As the volume shows, sense can be made out of this web of claims only if one goes to a foundational level to determine the scope and character of duties of beneficence and claims in justice. To go beyond the often confusing and provocative rhetoric of rights and justice, one must first make sense

of the translation of unfortunate circumstances into unfair circumstances and show how the claims of those in need can limit the rights of those who possess.

This volume developed out of numerous discussions regarding the standing of rights to health care, duties to provide health care, and claims to the provision of health care grounded in considerations of distributive justice. The plans for this volume began with the 20th trans-disciplinary symposium on philosophy and medicine 'Rights to Health Care', held March 14–16, 1985, at the School of Medicine of the University of Missouri-Columbia.

There are many to whom the editors are in debt for the support of this conference, which initially framed the issues upon which the volume focuses. In particular, the conference received support from the Missouri Committee for the Humanities, the state-based arm of the National Endowment for the Humanities. It was also supported and sponsored by the Program in Health Care and Human Values, the Department of Family and Community Medicine, and the Department of Philosophy, University of Missouri-Columbia. The co-chairmen of the conference were William B. Bondeson and Gerald T. Perkoff. In addition, the conference received the generous voluntary labor and participation of a large number of individuals. The editors wish to express their deep appreciation to all of these institutions and persons.

The papers developed at this conference became the focus of subsequent philosophical and public policy discussions. The current volume draws not only from essays presented at the Missouri conference that have been refashioned over half a decade of dialogue, but also from contributions made by individuals over the intervening years. In particular, the editors wish to express their appreciation to the Liberty Fund, which sponsored a symposium on November 12–13, 1987, in Houston, Texas, hosted by the Center for Ethics, Medicine, and Public Issues, Baylor College of Medicine ('The Profit Motive in Medicine: Contemporary Issues in Historical Perspectives'), from which ancestral versions of the essays by Klaus Hartmann and H. Tristram Engelhardt, Jr., derive. Dr. J. Charles King and the participants at that seminar contributed to the development of many of the issues explored in this volume. Special thanks are due to Mary Ann Gardell Cutter, who worked with the manuscripts over years of discussion among the authors of the essays and the editors of the volume. The editors are similarly in debt to George Khushf, who helped with the final editing. Without their labors and



insight, this volume would not have successfully come to completion. Though this volume reflects a half decade of conversations between the contributors and the editors, it is obvious that the debate at both philosophical and public policy levels has not reached closure.

*15 November 1990*

THOMAS J. BOLE, III  
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