***AFFIRMATIVE CASE – WEEK 3***

I affirm the resolution: “Resolved: The United States ought to guarantee universal health care for its citizens.”

To clarify today’s debate, I offer the following definitions:

Universal health care – (defined by Medical Dictionary) a health insurance program that is financed by taxes and administered by the government to provide comprehensive health care that is accessible to all citizens of that nation.

Guarantee – (defined by Oxford Dictionaries) a formal assurance or promise, especially that certain conditions shall be fulfilled relating to a product, service, or transaction

Ought – (defined by Merriam-Webster Online Dictionary) used to express obligation or natural expectation

My value for this debate will be morality. Owing to the fact that the resolution includes the words, it suggests that the United States has a moral obligation to provide health care for *all* of its citizens, not just those who can afford to pay for insurance. The US government has a moral obligation to improve all of its citizens’ lives, which is essentially what the affirmative is arguing.

Therefore, my criterion for this debate will be maximizing the quality of life for all American citizens. This is an appropriate criterion because universal health care will help to increase life expectancy of many, and allow them to live longer and happier. This is why, therefore, this criterion is suitable.

I will now present my contentions.

Contention 1: Health care promotes equality among Americans because all can now have access.

Subpoint A: Racial inequalities have resulted in inequalities in health care.

**Alan Nelson, 2002, “Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care”**

**Racial and ethnic disparities in health care exist even when insurance status, income, age, and severity of conditions are comparable. And because death rates from cancer, heart disease, and diabetes are significantly higher in racial and ethnic minorities than in whites, these disparities are unacceptable. These differences in health care occur in the context of broader historic and contemporary social and economic inequality and persistent racial and ethnic discrimination in many sectors of American life.**

Subpoint B: An individual mandate will make help produce more equality between those that are healthy and those that are either sick or injured.

**Allison K. Hoffman, 2010, “Oil and Water: Mixing Individual Mandates, Fragmented Markets, and Health Reform”**

**The final policy objective some hope individual mandate will serve is**

**“health redistribution.”** **In essence, the mandate compels the healthy to**

**finance care for those sicker than themselves.** Because the mandate operates in insurance markets, **its ability to effect health redistribution depends on health insurance as a mechanism for risk pooling.** **When in risk pools together, the healthy and sick can pay for insurance in a way that the healthy majority subsidizes premiums and medical care for the sick or injured minority.125**

When all citizens are equal, they are able to live in a society that does not discriminate against them. This includes health care. Certain races are discriminated against in health care due to their medical history or just based on the race that they are from. Universal health care allows for people to truly become equal because they are being given equal access. Discrimination will no longer be a problem. And for those who can’t afford health care, the individual mandate will ensure that those who are capable of paying for their own health insurance will also help those who cannot afford to or are sick or injured but once again, don’t have the money.

Contention 2: American citizens look to the government to provide health care for all.

**Allison K. Hoffman, 2010, “Oil and Water: Mixing Individual Mandates, Fragmented Markets, and Health Reform”**

The American populace has expressed willingness to act in solidarity with respect to health reform. **Americans are clearly concerned with the high numbers of uninsured in the country. A recent poll reports that 94 percent of people think it is a very or somewhat serious problem that many Americans do not have health insurance.**163 And while the American public has at times **hesitated to embrace health solidarity because of resistance to interpersonal redistribution,164 this same poll suggests that this trend may be shifting.** **Nearly 60 percent of those polled said they were willing to pay higher taxes so that all Americans have insurance “they can’t lose no matter what.”165**

The general public naturally looks to the government to solve such important issues. The Hoffman card shows that the American public is also showing a growing concern about the fact that many Americans lack health insurance. Therefore, with this growing concern, the government has an obligation to ensure universal health insurance so that those who don’t have insurance and have a greater chance of suffering more if they are sick/injured will be able to live better.

It is for these reasons that I affirm the resolution.