Casting a Ballot for Primary Prevention

I doubt that any of us are unaware that we are in the midst of a close presidential race. Sadly, many of us, like many other Americans, will not take the time to cast our ballot. So many good reasons exist why one should exercise those “good citizen” muscles and vote on November 4 that it hardly seems necessary to address one specific reason, but address it I will. My intent is not to campaign for one candidate over another, as I would not presume to use this forum to espouse a particular political view. I cannot say strongly enough, however, that our ability to vote is a privilege and a responsibility. If you do not take the initiative to be a part of the solution, you become not only part of the problem but also a liability for this country.

Accompanying this issue of Oncology Nursing Forum is a comprehensive supplement on cancer prevention and detection. The opportunity to vote for president, senators, congresspersons, and state politicians is a very real way to exercise some primary prevention for our nation. By voting, we have a say in the direction this country chooses to take regarding an enormous range of issues. As healthcare providers—the largest single group of healthcare providers—nurses need to pay particular attention to a number of healthcare-related issues that once were on the forefront of the political scene. In recent years, however, these issues have become less appealing to politicians who are unwilling to take the difficult stands and push for the hard choices necessary so that all of us can access and afford high-quality medical care. These days, healthcare reform is addressed in snippets (e.g., the cost of drugs, coverage for children, Medicare viability), and no one is talking very much about the more comprehensive concerns of universal health care coverage, skyrocketing costs of care (particularly cancer treatment), loss of control of practice by physicians and nurses to “bean counters” and corporate greed, declining levels of service, decreased enrollments in nursing schools, and the shortage of not only nurses but also physicians in areas of high need. The system is broken, and no one seems to have the political will to fix it.

Each presidential candidate has some plans and a healthcare policy. As citizens and healthcare providers, it is incumbent on each of us to examine these candidates carefully in this regard. Even if you cannot find the impetus to vote for any other reason, do it based on what you believe is good for healthcare and for whichever candidate you believe offers the best hope of making real progress in our areas of severe deficiency: preventive health care, insurance, for all, access to high-quality state-of-the-art care regardless of circumstances, curbs on tobacco products, effective drug-addiction treatment programs, affordable or insurance-covered disease detection—the list goes on.

The latest news is that somewhat fewer of us are uninsured this year than a few years ago. Nevertheless, approximately one in four Americans cannot afford health insurance. The figures indicating progress do not take into account the nature of the insurance coverage compared to years past. I suppose some coverage is better than none, but is that really good enough? If your insurance policy does not protect you from bankruptcy if you get a catastrophic illness, is it really worth having? And what about those individuals who are “uninsurable,” those with preexisting conditions? How will we provide coverage for them? Recently, the University of California decreed that students entering the system in 2001 must have health insurance. On the surface, this seems like a good idea, but will affordable coverage be available? What about students with preexisting conditions? Will there be insurance for them? And what about genetic testing? We have some legal protections in place regarding test results and insurability, but with the ever-increasing availability of genetic testing, we would be naive to think that this issue will not require continued vigilance.

The bottom line here seems to be that we have a pretty good idea of what we should have but little in the way of implementing all those shoulds. Because the private sector will not take care of these problems, the government will have to play an active role. So, whether you are for big government, reduced government, or get-out-of-my-face, government, we will need Washington to help solve the terrible dilemma that is health care today. You, as an individual, can contribute in a number of ways, but come November, do it at the polls. This is our professional business we are talking about. Don’t take the lazy way out.