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certain resources and opportunities to the general population.[citation needed] Susser further sets out four provisions that he sees as covered under the concept of access to health resources, it does not guarantee or necessitate an equitable state of health for each person due to inherent biological differences in health status.[18] This sociopolitical systems to give all parties a unique voice in health advocacy and promotion. He is careful to note here that, while this likely entails some minimum standard of access to health resources, it does not guarantee or necessitate an equitable state of health for each person due to inherent biological differences in health status.[18] This distinction is an important one, as some common critiques of a "right to health" are that it establishes a right to an unreachable standard and that it aspires to a state of health that is too subjectively variable from person to person or from one society to the next.[19] While Susser's discussion centers on healthcare as a positive right, Paul Hunt refutes this view and makes the argument that the right to health also encompasses certain negative rights such as a protection from discrimination and the right to not receive medical treatment without the recipient's voluntary consent. However, Hunt does concede that some positive rights, such as the responsibility of society to pay special attention to the health needs of the underserved and vulnerable, are included in the right to health.[20] Paul Farmer addresses the issue of unequal access to health care in his article, "The Major Infectious Diseases in the World - To Treat or Not to Treat." He discusses the growing "outcome gap" between the populations receiving health interventions and the ones that are not. Poor people are not receiving the same treatment, if any at all, as the more financially fortunate. The high costs of medicine and treatment make it problematic for poor countries to receive equal care. He states, "Excellence without equity looms as the chief human-rights dilemma of health care in the 21st century." [21] "Healthcare is a human right" sign An alternative way to conceptualize one facet of the right to health is a "human right to health care." Notably, this encompasses both patient and provider rights in the delivery of healthcare services, the latter being similarly open to frequent abuse by the states.[22] Patient rights in health care delivery include: the right to privacy, information, life, and quality care, as well as freedom from discrimination, torture, and cruel, inhumane, or degrading treatment.[22][23] Marginalized groups, such as migrants and persons who have been displaced, racial and ethnic minorities, women, sexual minorities, and those living with HIV, are particularly vulnerable to violations of human rights in healthcare settings.[24][25] For instance, racial and ethnic minorities may be segregated into poorer quality wards, disabled persons may be contained and forcibly medicated, drug users may be denied addiction treatment, women may be forced into vaginal examinations and may be denied life-saving abortions, suspected homosexual men may be forced into anal examinations, and women of marginalized groups and transgender persons may be forcibly sterilized.[25][26] Provider rights include: the right to quality standards of working conditions, the right to associate freely, and the right to refuse to perform a procedure based on their morals.[22] Healthcare providers often experience violations of their rights. For instance, particularly in countries with weak rule of law, healthcare providers are often forced to perform procedures which negate their morals, deny marginalized groups the best possible standards of care, breach patient confidentiality, and conceal crimes against humanity and torture.[27][28] Furthermore, providers who do not oblige these pressures are often persecuted.[27] Currently, especially in the United States, much debate surrounds the issue of "provider consciousness", which retains the right of providers to abstain from performing procedures that do not align with their moral code, such as abortions.[29][30] Legal reform as a mechanism to combat and prevent violations of patient and provider rights presents a promising approach. However, in transitional countries (newly formed countries undergoing reform), and other settings with weak rule of law, may be limited.[22] Resources and tools for lawyers, providers, and patients interested in improving human rights in patient care have been formulated.[22] As of 2008, at least 115 national constitutions now recognize the right to health.[31] Sometimes, these rights are justiciable, meaning that they can be pursued by action in court.[32] Indeed, a trend in constitutional reform around the world has been both to entrench the right to health and make it justiciable.[32] The US is an outlier to these trends, at least at the federal level.[33] Nonetheless, there have been campaigns in the US seeking to support a constitutional recognition of the right to health.[34] Where constitutions do recognize a justiciable right to health, the responses by courts has been mixed.[35] In 2022, Oregon became the first US state to enact a constitutional right to health care through Oregon Ballot Measure 11 [citation needed] Harvard-trained scholar Philip Barlow writes that healthcare should not be considered a human right because of the difficulty of defining what it entails and where the 'minimum standard' of entitlements under the right ought to be established. Additionally, Barlow contends that rights establish duties upon others to protect or guarantee them, and that it is unclear who holds the social responsibility for the right to health.[36] John Berkeley, in agreement with Barlow, critiques further that the right to health does not consider adequately the responsibility that an individual has to uphold his or her own health.[37] American writer and politician Richard Lamm vehemently argues against making healthcare a right. He defines a right as one that is to be defended at all costs, and a concept that is defined and interpreted by the judicial system. Making healthcare a right would require governments to spend a large portion of its resources to provide its citizens with it. He asserts that the healthcare system is based on the erroneous assumption of unlimited resources, as limited resources inhibit governments from providing everyone with adequate healthcare, especially in the long term. Attempting to provide "beneficial" healthcare to all people utilizing limited resources could lead to economic collapse. Lamm asserts that access to healthcare but a small part in producing a healthy society, and to create a healthy society, resources should also be spent on social resources.[38] Another criticism of the right to health is that it is not feasible. Imre J.P. Loeffler, former editor of Nairobi Hospital Proceedings and frequent contributor to the British Medical Journal, argues that the financial and logistical burdens of ensuring health care for all are unattainable, and that resource constraints make it unrealistic to justify a right towards prolonging life indefinitely. Instead, Loeffler suggests that the goal of improving population health is better served through socioeconomic policy than a formal right to health.[39] Global health Health and Human Rights (journal) Health promotion Health policy Health system Health law My body, my choice Patients' rights Primary health care Universal health care ^ "Human Rights Measurement Initiative - The first global initiative to track the human rights performance of countries". ^ Grad, Frank P. (January 2002). "The Preamble of the Constitution of the World Health Organization" (PDF). Bulletin of the World Health Organization. 80 (12): 981–4. PMC 2567708. PMID 12571728. Archived (PDF) from the original on 17 October 2013. Retrieved 14 October 2013. ^ Universal Declaration of Human Rights, United Nations, 1948, archived from the original on 3 July 2017, retrieved 29 June 2017 ^ Pillai, Navanethem (December 2008). "Right to Health and the Universal Declaration of Human Rights". 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