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## ETHICAL AND MORAL DILEMMAS ABOUT LIMITING ACCESS TO HEALTHCARE AND RISK OF COVID-19

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The most common patient right across the globe is the right of access to health care. As the COVID-19 pandemic increases the numbers of patients flowing into the hospitals with respiratory symptoms, health professionals are being extra careful about medical consultation for „outpatients“. Many „inpatients“ are released from the hospital, as well, in order to protect them from infection.

This can present ethical and moral dilemma to health professionals who must choose between providing care or postponing already scheduled diagnostic and therapy process. Obviously, for some patients that can be very dangerous. They may be chronic patients with unrecognized complication or acute conditions, for whom delayed reaction and emergency response will not be adequate. We definitely deal with a world crisis, where everybody has a fear to become a regular, non-COVID-19 patient. However, we need to keep in mind that patients have their rights and that they must get full respect of their human right to health care even in the situation of COVID-19 or any other pandemic. We also have to keep in mind that this is a very difficult time for health professionals, who have to balance the fear about their own safety with providing full care to their patients.

The COVID-19 pandemic has also shown the importance of global health. COVID-19 transcends national boundaries and governments, and calls for global action to determine the health of people. However, understanding the needs of each individual patient locally brings together the best outcome of treatment and establishes a stronger relationship of trust between patients and health workers. Now, we can see how Public health is important: like an answer to the high-level question in health diplomacy. Also, it is not negligible that the private health system can bring an apprehension that even contagious, patients without insurance can be ignored.

We need a more systematic and pro-active approach to identify and understand key current and future changes that impact patient rights, and to build capacity among the Member States to support the necessary collective action to take advantage of all opportunities in ensuring that these rights are fully observed. We need to understand better the tracking statistics so that we clearly see how patients we affected in relation to their nonCOVID-19 health problem. Currently, we see many different numbers, and it is not clear whether deaths are due to COVID- 19 or the death occurred with but not directly from COVID-19. Figuratively, if you're shot, did you die from the gunshot or died with the bullet?