

## Challenging Issues of Child Health Care

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### EDITORIAL

The maximum that decisions involving children must be made in their best interests is well-known and seems uncontroversial; after all, children as potentially vulnerable members of our society ought to be protected to the fullest extent possible, doesn't it? However, a closer look exposes serious issues with the definition and practical use of such a phrase. Although they apply to all areas of decision-making involving children, the healthcare setting is the emphasis of this book. The amount to which a child's body can be investigated, operated upon, or changed by medications, gadgets, and procedures intended to cause physiological or psychological change is one of the most delicate and challenging issues that can be raised in this context. Childhood healthcare decisions may have a huge impact on the possibilities and experiences that children will have both now and in the future. In certain situations, it may even be their lives that are on the line in addition to their bodily and mental health.

In a nutshell, there are two basic threads to my thesis. The first is about how youngsters who are incapable of making decisions for them are positioned. In this case, parents and medical professionals jointly decide on the great majority of healthcare interventions. There may be a need for impartial scrutiny in situations where people are making decisions on behalf of other people because such power cannot be unrestricted. The courts offer this on the guiding principle that the welfare or best interests of the kid come first. However, the courts typically only become involved when there is a disagreement between the parents or when it is determined that the child's major interests are going to be jeopardised. In light of this, parents are often not required to follow the best interests test as it has been construed by the courts when making such judgments. My opinion is that when courts override parental decisions, they should simply be concerned with making sure that the child's vital interests aren't jeopardised and that the parents' choices are reasonable. Going further undermines the legitimate role and authority of parents and leads to inconsistent expectations about what is under their preview.

Another widely held belief in this field is that it is typically advantageous for children to get medically advised treatment. In

general, there is no disputing the significance of sustaining people's health for their welfare, therefore it should come as no surprise that it has emerged as a key priority in international and national law, guidance, and policy. They must also "recognize the right of the child to the enjoyment of the highest quality of health reasonably practicable and to facilities for the treatment of illness and rehabilitation of health," according to article 24. States parties shall work to ensure that no child's right to access such healthcare services is violated. This article goes on to list particular concerns that states could take action to address in order to comply with this requirement, like making sure that all children have access to the required medical care and assistance, with a focus on the growth of primary healthcare. The world medical association also published a declaration on the rights of children to health care more recently.

In the UK, the National Health Service (NHS) is primarily responsible for providing healthcare for children, and secretaries of state are required to make sure that medical services are available to meet the population's reasonable needs, once again recognizing the fundamental significance of health for every member of society. The improvement of children's healthcare has been the focus of national frameworks and plans, coupled with a wealth of supporting data. Few people, if any, could argue that protecting and enhancing the lives and health of children is a noble goal and, in fact, a necessary condition for any community. However, since there can be other legitimate rights and interests that could be impacted, it may be more debatable whether it always takes precedence over any other factors. Furthermore, It may also be challenging to use the best interests test and make the health of each child the deciding consideration. For instance, including children in medical research may be essential to enhancing the treatment provided to upcoming pediatric patients. However, it might not assist the kids who are engaging right now and might potentially put them in danger. It is challenging to defend this in the context of a strategy where the best interests of each kid are the most important consideration, particularly when those goals conflict with the child's own health needs. While promoting children's health in general may be the goal, the best Interests test that courts utilize does not appear to allow for this. Furthermore, when it comes to competent kids, just like competent adults, they should be free to priorities other things even if others disagree.

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