

Good Behavior



Center for Advancing Health

"The Way We (Wish We) Were"

Here is President Barack Obama speaking to the American Medical Association in June 2009:

"The fact is Americans – and I include myself and Michelle and our kids in this – we just do what you tell us to do. That's what we do. We listen to you, we trust you."

This statement, which better describes the state of affairs 50 years ago, clashes with the educated participation in our health care that policy makers assume guides our choices today and will protect us tomorrow. It's also inconsistent with survey data showing that 75 percent of us describe ourselves as fairly active, independent consumers of our care.

Nevertheless, the public's response to these reform proposals is more consistent with the President's characterization of us: We quickly reject any proposal that seems to change the idealized relationships we imagine we have with our doctors. Indeed, the biggest opposition to reform is that the government will intervene between patient and physician. So Obama goes on the road and the airways to reassure the public that reform will cause no such thing.

Despite our claims of confidence about managing our health care, most of us defer to our physicians on decisions about treatment, placing a high priority on "doing what they think best." That's why only 14 percent of us have used quality reports that might raise questions about our doctors (or hospitals, or health plans). And while half of us report that our health care costs have gone up in the past year, two-thirds of us think our doctors' charges are reasonable. Perhaps this accounts for our reluctance to discuss the costs of care with our physician: Only two of ten of us have done so in the past two years. So much for health care consumerism.

The lofty rhetoric of leaders of both political parties capitalizes on this confusion. Policy makers speak of reforms that portray us as intelligent consumers of health care, thus feeding our best vision of ourselves as people who accurately judge the competence of doctors and the treatments they recommend, claim our rights to choose among them, and feast on the rich health information online to find the most effective, least costly care for ourselves and our families.

But as policy makers return to their districts to discuss reform, their appeals to their constituents are based on fear of losing that comfortably passive relationship with our wise doctors, with those who oppose reform threatening its loss and those who advocate reform assuring us that nothing will change.

Neither message is true. Regardless of whether reform is enacted, that kind of relationship is increasingly untenable: Our competent, critical participation is already required if we are to find and benefit from safe, decent care.

Meanwhile, most of us wish we didn't have to think about it at all. We'd rather go back to the way things were when we got help from our doctor if we were sick and otherwise went to work, played with the kids and mowed the lawn.

Do you know what those physicians at the AMA meeting in June did when the President said we trust them and do what they say?

They laughed.

Jessie C. Gruman, PhD
President

From the Health Behavior News Service

The Health Behavior News Service regularly distributes stories summarizing new research on health behavior issues. These stories can be found online at <http://www.cfah.org/hbns/current.cfm>

July Releases:

- **GETTING MARRIED - AND STAYING MARRIED - IS GOOD FOR YOUR HEALTH** A stable, long-term marriage can be good for your health, but divorce or widowhood leave a lasting scar on the health of middle-aged and older people, according to a new study.
- **SPORT CREAMS, HEAT RUBS NOT SO HOT FOR TREATING MUSCLE PAIN** Would the review author recommend salicylate creams to consumers? "I wouldn't waste the money. You might as well rub your skin with a bit of spit."
- **COLLEGE STUDENTS MIGHT DRINK LESS IF THEY KNEW PEERS' TRUE HABITS** Blame it on peer pressure. When college students think that other undergrads drink a lot of alcohol, they drink more themselves.
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- **SENIORS BENEFIT FROM STRENGTH TRAINING** Progressive resistance muscle training improves strength in older adults and enhances their ability to do daily tasks such as walking, climbing steps or getting out of a chair.
- **DRUG USED TO TREAT ANEMIA IN CANCER IS HARMFUL, REVIEW CONFIRMS** Patients with head and neck cancers who received erythropoietin with radiation had poorer outcomes than those who received radiation treatment alone.

CFAH CENTER FOR
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Since its founding in 1992, The Center for Advancing Health (CFAH) has worked to translate complex scientific evidence into information, policies and programs that will ensure that each person can make good decisions about their health and interact effectively with their health care providers. CFAH is an independent, non-profit organization that is supported by a number of philanthropic organizations (principally the Annenberg Foundation and the W.K. Kellogg Foundation) and individuals. Good Behavior is a monthly series, written by the Center's president, Jessie Gruman, PhD, and intended for health policy makers. The publication offers Dr. Gruman's perspective on emerging health care issues, and provides insight based on evidence about how best to address them. For more information, visit us online at www.cfah.org