

Good Behavior



Center for Advancing Health

Cheaper Weed Whacker? Safer Hospital? Decisions, Decisions

Did you ever look at the *Blue Book* to help you make a decision about selling your car? Have you ever used *Consumer Reports* to help you figure out which refrigerator to buy?

I don't think twice about using this kind of resource. I know what I don't know and that my options differ in price and quality. I know that there is often good objective information out there to help me to compare those options and make a good decision. And I'm not alone: Millions of us use such tools to help us make a diverse range of decisions ranging from vacuum cleaners to vacations.

So it is interesting that so few of us turn to similar tools to help us make decisions about our health care. After all, most of us don't know that much about health care and we'd be hard-pressed to weigh all the pros and cons of the various hospitals in our community, for example, without some help. Many health decision aids exist: both private and public sector groups have developed tools to help people make informed decisions about health insurance, hospitals, long-term care facilities, doctors and medical treatments. Yet in a recent Kaiser Family Foundation survey, only 14 percent of adults indicated they had seen and used comparative health quality information for health plans, hospitals or doctors in the past year.

What gives?

Why do so many of us abandon the familiar role of savvy consumer when making decisions about our health care, and instead choose our health plan on the basis of its ads or the hospital recommended by the woman behind us in the 7-Eleven checkout line?

This question is the basis of a research report called "Getting Tools Used" issued in June by the Center for Advancing Health. The aim was to learn from successful decision support tools outside of health care how to increase people's use of tools to make decisions within

health care. Detailed case studies of four successful non-health-related tools were developed: *Consumer Reports: Car Buying Guide*; eBay; *U.S. News & World Report: America's Best Colleges*, and the FDA's federally mandated Nutrition Facts Panels (NFP). Five experts in health-related decision aids commented on the keys to their success and the implications for tools relevant to choices in health care.

The findings were clear. The successful tools all come from a trustworthy, objective source; their content is tailored to the interests of the audience; each tool is targeted to the users' capabilities; and all of them are highly visible and readily available nationwide. Implications of these findings for sponsors of health care decision aids can be found on the Center's Web site.

For the rest of us, however, the critical issue is this: Our indifference to health-related decision aids is not trivial. Health care has never been more complicated. We are more responsible for making more decisions about our care than ever before. And the stakes of our decisions have never been so high. But there is simply no way we can make well-informed decisions without relying on objective information that is arrayed so that we can understand and weigh the trade-offs of our options. Increasingly, being able to find safe, decent health care depends on our ability to locate trustworthy tools when we need them – and then to use them to help us make the choices that meet our needs and preferences.

We need better tools, yes. But we also must recognize that to realize their benefit, we have to use them.

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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>

June Releases:

- **NEARLY 1 IN 10 KIDS REPORT CYBER BULLYING** New research shines a light on the phenomenon of “cyber bullying,” suggesting that nearly 1 in 10 children are bullied through electronic means such as text messages, and girls are more likely to be victims than boys are.
- **CAN TOBACCO INDUSTRY RESEARCH HELP ‘SOCIAL’ SMOKERS QUIT?** The tobacco industry knows exactly what makes social smokers tick. Now, researchers want to use that once-secret information to help them quit.
- **LOW-INCOME MINORITIES MISS MORE GLUCOSE CHECKS** Hispanics and African-Americans with insulin-treated diabetes perform daily self-monitoring of blood glucose less frequently than whites, and Hispanics receive less diabetes education, according to a new study.
- **DEINSTITUTIONALIZATION LEADS TO RISE IN SUICIDE AMONG MENTALLY ILL** Reducing the number of beds available in public psychiatric hospitals is associated with increased suicide rates. A new study finds that for every bed lost for 100,000 people in the population, 45 additional suicides would occur per year.
- **OBESITY MAY REDUCE BRAIN GRAY MATTER IN POSTMENOPAUSAL WOMEN** Results from a small study of postmenopausal women suggest that obesity might relate to a reduced volume of gray matter in the brain. However, whether the results have relevance in a woman’s day-to-day life is unclear.
- **SECONDHAND SMOKE THREATENS CASINO WORKERS’ HEALTH** A new report indicates that casino workers are gambling on their health.