The Politics Of Self Care | Allan Besselink

Written by Allan Besselink Wednesday, 25 April 2007 19:00

Politics. A topic that will always instill debate, discussion, and perhaps even social revolt. It seems like there is a political slant to everything these days. Health care and fitness ... aren't any different. There is always a lobbyist pushing for the rights of some special interest group - regardless of the point of contention or discussion. It seems we're becoming more fragmented in the way we live - and think - in our world today.

If we all truly believed that self-care and "wellness" were the way to go forward with our health "care" system (and I use this phrase loosely), then we'd have to admit some deep-seated issues and incongruities in our professional lives. Self-care means spending time with patients, listening to them, educating them, mentoring them, and fostering personal growth and self-responsibility so that they can in fact pursue a path to health independently.

So what do we see in our current state of disrepair? What's the reality of our traditional medical (and fitness) model? Let's look at some of the numbers involved.

In a study entitled "Time Spent in Face-to-Face Patient Care and Work Outside the Examination Room" in the Annals of Family Medicine (2005), Gottschalk et al found that the average primary care physician's workday was 8.6 hours, and face-to-face patient care accounted for 55% of the day. In other studies, it's been found that the average number of visits per day is 22. Do the math. This would equate to no more than 13 minutes per patient office visit. Can you be heard, diagnosed, educated, and provided a plan - in 13 minutes? The scary part is that the average duration of physician office visits actually increased between 1989 and 1998!

How about another culprit ... administration and paperwork. In the same study, work related to a patient not physically present accounted for 23% of the workday. Chicken or the egg ... which came first? The time with the patient, or the time to take care of the administrative aspects of care?

The National Center for Health Statistics also provides some insights. In 2001, over half (53%) of patients visiting the doctor were over age 45. The leading primary diagnoses for visits in 2001 included high blood pressure, arthritis and related joint disorders, the common cold, and diabetes - all clinical entities in which self-care would be critical for long-term efficacy and cost efficiency. Diabetes was the primary diagnosis at 27 million doctor visits in 2001. Only 16 percent of doctor visits were for preventive care.

Consider these recent quotes (April 21, 2007) from Dr. Kenneth Cooper of the Cooper Clinic in Dallas:

"More people will die this year due to inactivity, obesity, and diet than will die from cigarette smoking."

"80% of the diseases we have today are the result of our lifestyle."

Need I say more?

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The population is getting older ... the medical conditions that we see are very amenable to self-care ... yet the time spent with the patient cannot possibly address these issues appropriately. The insurance companies say they promote self-care - yet very few doctors visits account for it. Practitioners claim "patient education and empowerment" yet don't understand that education isn't about the clinician "telling", it's about the patient "learning". Fitness professionals spend countless hours being "external motivators" for people that have long-standing issues that will respond favorably to simply getting on with their own self-care.

It seems like everyone is on the "wellness" bus these days. It's become a catch-phrase and a marketing tool. But let's use the description I've proposed - and apply it to any and all practitioners, trainers, and coaches that profess to offer "wellness" services. Look at the services provided - and you be the judge. I suspect I know what you'll find.

Self-care involves elemental and systemic changes in perception - for both the provider and the participant. People need to be their own best advocates and be responsible for their care. If not, then we can't "empower them" when they have simply abdicated their self-responsibility in the issue. We're faced with a world of incongruities - between what we do, and what we say we do.

As it stands right now, true "self-care" doesn't pay. Yes, you heard that correctly. As in all political arenas, we're faced with hidden agendas, lobbying power, and good old dollars and cents. It sounds to me like the politics of self care - are pretty similar to the politics of just about everything else. Sad ... but true.

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