

Who's Power Is It Anyways?

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It's time to give health care back to the people.

"Power to the people". You'd have to go back a few years to witness the cultural significance of this phrase. In the '60's, it was a rallying cry against The Establishment. It was used to protest the US involvement in the Vietnam War. It's been uttered by many a musician ranging from John Lennon to Public Enemy to James Brown.

Everyone speaks of "power". But in health care, who's power is it anyways?

On one hand, power is defined as "the possession of control or command over others; authority; a person or thing that possesses or exercises authority or influence". Let's give you some not-so-uncommon "power" phrases you might hear a clinician utter ...

"I love the power of adjusting someone" ...

"I love being able to make someone better" ...

"That patient isn't being compliant with their home program" ...

"We need to continue to see you to make sure you stay well" ...

"I want you to go see my clinicians" ...

On the other hand, power is defined as the "ability to do or act; capability of doing or accomplishing something". Personal power. The capacity for growth ... change ... learning. The freedom to choose. The freedom to act upon those choices in my own best interests. Self-responsibility.

So whose power is it anyways? Is it the practitioner's power ... to wield over the patient? To foster patient dependency? To make grand overtures about "empowerment" but then demand compliance and encourage the patient to partake in more visits to enforce that compliance? To control your options for care by simply not telling you that there are indeed options? Worse yet, to make money by NOT telling you the options?

Or is it the patient's power ... to choose. To make good self-informed, educated decisions about their health care, who they receive it from, where they receive it, and how it is offered. To understand why adherence is important. To learn and base their competent self-care upon evidence-based principles.

I'm convinced that we're now seeing what I would call "practitioner dependency", something akin to any other dependency issues. Our society now understands the mechanisms behind alcohol and drug dependency. Can there be an underlying co-dependency between practitioner and patient that is enabled by the provider? If you can have an alcohol or drug dependency program, then I would have to wonder if we couldn't also apply these principles to

"practitioner dependency" as well.

When people are provided with an environment in which they can learn, they make surprisingly good choices on their own. When they understand the "why" behind the issues, then they will more often than not make good healthy choices about the "what" to do. And ... better yet ... when they know why, they will DO whatever it takes.

In a country that defines itself by personal power, independence, and choices, we have watched our system become a shamefully passive entity with a skewed focus.

The system really isn't about the providers - it's about the patients. It's their power, not ours.

Power To The People.

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