BABY BOOMERS FOR BALANCED HEALTH CARE

SMALL GROUP CONVERSATIONS

THEME: ARE WE OVERDOSING ON HEALTH CARE?

Facilitator Process Guide

Getting on Board and Into the Topic (20 min.)

1. Welcome with words like these:
   Welcome to a conversation on the question: “Are we overdosing on health care?” The process we are using here was developed by a citizen group I am part of, called Baby Boomers for Balanced Health Care.”

2. Introductions and interest (10 min.)
   • “Let’s start with introduction and why we each came today. Would everyone give your name and why you decided to participate in this conversation?”
   • [Start on your left or right, and go last.]

3. Goal and Process Handout (#1)
   • “Here are the handouts for the conversation. The first page describes the goal for our conversation and the process we’ll use. We will read it together around in a circle, and anyone you can take a pass on reading if you like.”
   • [Read the title and first point yourself, and then ask someone on your left or right to read the next point.]
   • [At the end, be open to questions about the process but postpone content questions (such as what we mean by overuse).]

4. Overview of the Conversation
   • “So that’s the goal and the process we will use. Here are the topics we’ll cover.
   • We will begin with background information on overuse.
   • Then we’ll discuss the cultural sources of the more is better idea.
   • Then we’ll see if any of us have personal stories to share about experiences with too much health care.
   • In the last part we will talk about what we can do individually and collectively to resist the pull towards too much health care. Are we ready to go?”
Background Information (10 min.)

5. “We’ll start with some background information on the topic of overuse. Here’s a one page summary that we can share reading. It’s okay to pass on the reading.”

6. [Ask people to turn to the second page of the handout packet Background Information Handout (#2) and read the title and first point, then turn to the opposite side from the person who started the last reading.]

7. [At the end of the reading, say]: “I hope this background is helpful in our conversation. The rest of what we’ll discuss is the cultural idea that more is better in health care, and how we can change it.”

8. [Note that you are not inviting questions about the background information. If someone asks a question, feel free to clarify what the handout said but pass on answering factual questions beyond your knowledge. You are not here as a content expert. You can refer people to the sources at the bottom that we will provide. If you are health care professional with content knowledge, avoid getting into a prolonged answer to a question because that will derail the group discussion to follow.]

Exploring the Cultural Roots of the More Is Better Idea (15 min.)

9. Sources of the cultural belief

- “Okay, we’re ready for the next part of our conversation. Let’s look at **handout #3** with the topics and discussion questions. I’ll read the discussion question for part two: ‘Assuming you agree that medical overuse is a problem and that the more is better cultural belief is a contributor, what do you think are the sources of this belief? Why do so many of us assume that we are getting better care when it’s newer, more expensive, and involves more things being done to us?’”
- “Here’s the process: we’ll take one minute for personal reflection on the question and invite people to share their thoughts with the group. So, again, the question is: [repeat it]. Does everyone get the question? Okay, let’s start with a moment of reflection.”
- Thirty seconds of silent reflection.
- “Now let’s hear from anyone who wants to offer a reflection. We’ll try to hear from everyone who has something to say. There is no expectation for a consensus, just sharing ideas and reflections on the question. Who would like to start?”
• Let anyone start who wants to, then ask you want to go next. Don’t allow cross talk or debate during this sharing time. Share your own reflections if you like, but not near the beginning.
• If someone makes a point without connecting it to the cultural beliefs, try to make the connection yourself. For example, if someone says “Doctors jump to write prescriptions because that’s what they are trained to do,” affirm their statement and add that in our culture patients and families often expect a prescription and are disappointed if they don’t get one. Bring things back to the culture if possible.
• At the end, say something appreciative about the cultural conversation and say that we are going to move on to personal stories.

**Personal Stories of Overuse and Resistance (15 min.)**

10. Sharing Stories
• “Now let’s go to the personal experiences question on Handout #3. It’s a two part question and you can share something about the first part, the second part, or neither of them.”
  Part one: “Does anyone have a story about a personal or family experience with too much health care, and how it affected you or a loved one?”
  Part two: “Does anyone have a story of how you have resisted the pull towards overuse of health care? It might be a small example or a larger one.”
• “Let’s take another minute of personal reflection and then we’ll see if someone has a story.”
• Thirty seconds of silent reflection.
• “Does anyone have a story to share?”
• Wait for someone to speak up. If no one volunteers after 10-15 seconds, share a story from your own experience. At the end, ask if others can relate from their own experience.
• If you are getting stories only about part one or part two, ask if someone has a story about the other one.
• If someone is going past five minutes, graciously acknowledge the value of their story and say that you hope to be able to get in some more stories.
• Allow brief clarifying questions from group members about the stories (e.g., “how old was your father at the time?”), but try to steer away from questions about the gory details, and don’t let someone go off on their own tangent and distract from the one sharing the story. Gently but firmly, you can say, “Let’s go back to what (name) wants to tell us about his/her story.”
• End with an appreciation for the sharing. And say that in the last part of the conversation we’ll be addressing what we can do about these problems.
What We Can Do (25 min.)

11. What We Can Do

- “Now we’ll talk about what we can do individually and together to counteract the culture of overuse of health care.”

- **Choosing Wisely questions:** “There is a campaign among medical professionals and Consumer Reports to move away from overuse and help people talk differently with their physicians and other providers. It’s called the Choosing Wisely Campaign. Here is a handout with five questions that Choosing Wisely suggests patients ask of their doctors.” [Refer to the *Choosing Wisely handout* (#4) and repeat the process of group participants taking turns reading them out loud.]
  
  o Question: “What do you think of this list of questions? Can you imagine asking these questions of your doctor? What would it take?”
  
  Open discussion (5 min.) which is likely to include recognition that it’s too hard for many of us to raise these questions without community and cultural support. If no one brings up how hard it is for many people to ask these questions, then mention it yourself. Then transition to the importance of working together for cultural change.

- **Working together:** “Now let’s spend a few minutes talking about what we can do together as citizens to change the more is better culture in health care. Individual change is not going to be enough. That’s why Baby Boomers for Balanced Health Care got started. Let’s look at a description.” (10 min.)
  
  o [Ask people to look at handout #5 on the Baby Boomers for Balanced Health Care Project. Read it out loud yourself—with enthusiasm. Say why you joined up. Ask if people have questions or comments. Share what we are trying to do with these small group discussions.

  o Invite people to connect with us on our website and with the Choosing Wisely/Consumers Report campaigns.

12. **Check out:** What are you taking with you from our conversation today? (5 min.)

Talk to a people who have told compelling stories, asking them if they might want to share their story with us.