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From the Editor
A Health Care Tipping Point?

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From the Editor

A Health Care Tipping Point?

Occasionally, in these pages (*The Bleeding Edge*, May 1999, Vol 12, #2), I have reviewed a book that is relevant to our readership. Rarely, have I read a popular book that has more relevance to health care than Michael Gladwell's, *The Tipping Point*, published late in 2000.¹ The central thesis of *The Tipping Point* contends that ideas, behavior, messages, and products are often spread like outbreaks of an infectious disease. "Social epidemics" reach a critical mass engendering changes in society's behavior – the so-called Tipping Point. Gladwell's contention is that one imaginative person applying a well-placed lever can move the world. To elucidate this Tipping Point concept, Gladwell describes three principal rules of all social epidemics. Let me describe each of his rules in turn and draw an analogy to the on-going work of all of us in health care, that is, our obligation to measure and improve what we do each and every day.

The three rules of social epidemics are the Law of the Few, the Stickiness Factor, and the Power of Context. The Law of the Few means that a handful of exceptional people can create dramatic social change. The Stickiness Factor, in essence, states that the medium is the message. How a message is formatted bears on its impact, or stickiness. The Power of Context notes that an epidemic is sensitive to the conditions and circumstances of the times and places in which it occurs.

Many of us would agree that the Law of the Few makes intuitive sense. We have popularized the six degrees of separation among us, and we understand the power of word-of-mouth, especially in fields like marketing and satisfaction with health care services. But, Gladwell believes that there are special kinds of individuals labeled as mavens, connectors, and salesmen who are actually responsible for starting word-of-mouth social epidemics.

Mavens, borrowed from Yiddish, are individuals who accumulate knowledge and who like to spread it around. Connectors are unusual persons who know many people in different worlds other than their own. Acting in concert, these mavens and connectors along with the foot-soldier "salesmen" can rapidly spread a social epidemic. They can determine what is popular, what is fashionable, and what is decidedly not. Connectors call upon a special power, notably the "strength of weak ties." This means that connectors, through their acquaintances, have a special source of social power because connectors rely on these acquaintances to give them access to opportunities and worlds to which others do not belong. Connectors, when working together, may build on these weak ties and multiply their social epidemic powers. Gladwell says, "Simply by finding and reaching those few special people who hold so much social power, we can shape the course of social epidemics." Is this just pop social psychology or a cleverly presented blueprint to implement much needed changes in health care?

Think about it! Maybe, by searching for the connectors and mavens on a medical staff, we might begin to subtly promote them as physician champions for change. If we could harness the literature of academic detailing, feedback, and social influence

theory, which have been well documented, perhaps those connector physicians could begin to promote a culture of measurement, self-evaluation, and reduction in medical error. Maybe, the Law of the Few means that by working through the strength of weak ties, these connectors can energize everyone in health care to create a culture that abhors error and seeks ways to improve our collective performance.

The Stickiness Factor urges us to pay attention to the structure and format of a message to dramatically enhance its stickiness – its ability to implement a change in behavior. Gladwell points out that the average American is exposed to nearly 254 different commercial messages in a day (up 25% from the mid-1970s). What gets through this clutter? How can we compete for attention in this cacophony? Certainly, the pharmaceutical industry is the best example in health care, of a group focused on the Stickiness Factor. Perhaps, we could channel the power of the Stickiness Factor into a better packaging system for information about practice guidelines and the standardization of care. If Gladwell is right, that there is a simple way to package information that under the right circumstances can make it irresistible, then, maybe we ought to pay more attention to this phenomenon. We could dramatically improve the value of health care report cards by giving consumers “stickier” information that would rally them into action. Maybe, groups like “Leapfrog” (*Leapfrogging Quality*, Dec 2000, Vol 13, #4) and “FACCT,” (*Just the FACCTs*, Sept 1997, Vol 10, #3) will master the Stickiness Factor leading to dramatic improvements in the quality of medical care.

The Power of Context, Gladwell’s third and final rule, notes that epidemics are sensitive to the conditions and circumstances of the times and places in which they occur. He makes an analogy to the so-called broken window theory. “If a window is broken and left unrepaired, people walking by will conclude that no one cares and no one is in charge. Soon more windows will be broken and the sense of anarchy will spread from the building to the street on which it faces.” Of course, our readers may recognize that the broken window theory was the cornerstone of New York City’s approach to dramatically lowering the crime rate in the late 1990s by tackling graffiti, subway fare beaters, and other minor criminal infractions. Social scientists have concluded that the broken window theory worked. Repairing the window lowered crime.

Does the broken window theory and the Power of Context make sense in our business? I believe the answer is a resounding, YES! Every failed diagnostic test, missed appointment, illegible prescription, and adverse drug event represents the broken window of health care. Committees struggle to fix these seemingly impossible process-related problems and frustration mounts to the point of helplessness.

Also, within the Power of Context is the Fundamental Attribution Error (FAE). Social scientists, according to Gladwell, believe that we will reach for a dispositional explanation for events that are character-related, as opposed to a contextual explanation. By doing this, we overestimate the importance of FAEs in our leaders and underestimate the importance of situation and context. Social psychologists believe that FAE makes the world a much simpler and understandable place in which to work. Research in health care from giants like Demming, Juran, Crosby, and others would certainly resonate with the FAE hypothesis. It’s much easier to overestimate the importance of fundamental character traits than it is to eliminate the variation in the processes we use to care for patients. FAE means we will

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discipline the doctor, nurse, or pharmacist for making an error before we engage in the more difficult task of evaluating the failed process that led to the error originally.

The Law of the Few, the Stickiness Factor, and the Power of Context are appealing in their graceful simplicity. Social epidemics make sense on an intuitive level. No doubt, some readers will balk at my health care analogies and the provocative nature of Gladwell's thesis. From my perspective, our acknowledged slow progress in tackling the tough issues of measurement, improvement, and self-evaluation might force us to consider the question, "Have we reached the Tipping Point in health care?" As usual, I am interested in your views. I can be reached at david.nash@mail.tju.edu.

Reference

1. Gladwell M. *The Tipping Point: How Little Things Make a Big Difference*. Little, Brown and Company, NY, 2000.