The Paradox of Disease Prevention: Celebrated in Principle, Resisted in Practice

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U.S. Life Expectancy

1918 Flu Epidemic
Curative

• Identify pathology
• Restore health (return to the norm)
• Individual service ethic
• Clinical intervention predominates

Preventive

• Identify risk
• Reduce risk (shift in the norm)
• Population responsibility
• Behavioral and social as well as clinical intervention
Why Prevention is a Hard Sell

1. Success is invisible
Why Prevention is a Hard Sell

2. Lack of drama
Why Prevention is a Hard Sell

3. Statistical lives
Why Prevention is a Hard Sell

4. Long delay before rewards appear
Why Prevention is a Hard Sell

5. Benefits often do not accrue to the payer for prevention
Why Prevention is a Hard Sell

6. Changing or inconsistent preventive advice
Why Prevention is a Hard Sell

7. Persistent behavior change may be required
Why Prevention is a Hard Sell

8. Bias against errors of commission
Why Prevention is a Hard Sell

9. Acceptance of avoidable harm as normal
Why Prevention is a Hard Sell

10. Double standard of evaluation for prevention as compared to treatment
Why Prevention is a Hard Sell

11. Commercial conflicts of interests
Why Prevention is a Hard Sell

12. Conflicts with personal, religious, and cultural beliefs
Ways to Overcome Obstacles

1. Pay for prevention
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2. Make prevention cheaper than free
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3. Involve employers
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4. Re-engineer to reduce the need for individual action
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5. Use policy to make the right choices easier
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6. Communicate strategically using multiple media