

NCFPR/NCSM WORKSHOP

KANSAS CITY, MO

I. Description of DOC

DOC was created in 1977 by a group of young family physicians to address a new dimension of social responsibility. Since its founding, DOC has put its emphasis on growing as a grassroots movement of concerned individuals who share a common philosophy.

II. Organizational Structure

DOC is a nonprofit organization (501c3) registered in the state of Florida. Other chapters are usually established as affiliate chapters under the national DOC charter. In some states, such as Washington, DOC is registered under a separate charter, in this case as "Washington DOC".

Alan Blum, MD, is Founder and serves as Chairman of the Board of Directors. Dr. Blum serves as the main media contact and consultant to other organizations. Eric Solberg is Executive Vice President and handles the day-to-day organizational activities, membership database, and new chapter establishment.

DOC's Board meets formally on an annual basis. Committees for both content and administrative functions work with direction of the Board.

III. DOC Philosophy

Unhealthy lifestyles at the root of much of the ill health, suffering, death and high medical bills are in large part the result of massive, unrelenting and, not infrequently, unethical marketing practices by corporate entities more interested in maximizing their profits than promoting health. Central to our philosophy is DOC's belief that peer pressure, so often blamed for many of these problems, is created and packaged by advertising agencies, then marketed and sold by corporations like so much bread. Further, DOC's emphasis is in proportion to the problems these products cause.

The most important audience DOC is reaching for is young people. Those who have yet to develop habits which may cause future health problems or who lack at an early age the information, maturity of self assurance to make and maintain responsible decisions. Young people, especially teenagers, easily influenced by advertising, poor role models and other factors need positive motivation. The educational and promotional programs DOC has organized emphasize that comprehensive aspects of healthier lifestyles.

DOC's invariably humorous, occasionally sexy, and undeniably offbeat approach is a far cry from finger-wagging--and it works. Through its SUPERHEALTH 2000 program in schools, health professionals' offices, hospitals, the work place, and the media, DOC is educating the public, especially teenagers and children, about the major killer habits of cigarette smoking, alcohol, and other drug abuse, poor nutrition as well as "huckster health" commercialism.

DOC's focus was first summarized in 1977 by Dr. Blum, "to help kids turn the tables on Madison Avenue's promotion of unhealthy lifestyles--to stop, think, and assume responsibility for their own lifestyles."

IV. DOC History

Soon after its founding in 1977 in Miami, DOC was presented in an informal setting to several of the attendees of the National Conference of Family Practice Residents in Kansas City. From that meeting a chapter was started in South Carolina. With help of \$7500 in grants from the American Academy of Family Physicians, a county wide youth conference, SUPERHEALTH 79, was held in Miami and the SUPERHEALTH 79 Speakers Bureau was established in Spartanburg, SC. DOC presented the results of these pilot projects at the NCFPR and the American Medical Association RPS in 1979. Since then DOC speakers have carried the concept to over 3000 medical audiences on five continents. Local Speakers Bureaus have brought physicians and medical students together with millions of kids.

V. DOC Status

DOC currently has over 7000 individuals on its mailing list. Over 130 chapters, ranging in size from individuals in private practice to over a hundred members in some cases, are scattered across the United States and in several foreign countries.

VI. DOC Undergraduate & Graduate

DOC may be incorporated into the curriculum as a required course or rotation, as an elective, or as an activity without formal ties to the curriculum. DOC activities may be incorporated in whole or part and can be inserted during any level of training.

Samples of chapter and/or course structures are available from the national DOC office.

VII. DOC Organizing Guidelines

- A. Formulate specific objectives for your local chapter.
- B. Design possible mechanisms to achieve the objectives.
- C. Establish a time table for implementing the objectives.
- D. Meet with practicing physicians, residents, medical students and any other interested people in your community.
- E. Identify, meet with and actively solicit the support and participation of appropriate community agencies.
- F. Arrange for a formal meeting.
 1. What needs to be done?
 2. What personal agendas do people have?
- G. Elect or appoint a DOC coordinator and notify National DOC.
- H. Designate areas or responsibility with specific tasks and deadline.
- I. Set date of the next meeting.

VIII. DOC Research

Image-based health promotion research is in its infancy. The science of marketing is years ahead in its knowledge of why people do what they do. Medical science cannot hope (and does not need) to duplicate their studies. However, by observing their marketing techniques, indeed specific brand campaigns, we can retrospectively identify those items which

impact on buying behaviors. Little emphasis has been placed in this area of research. Much needs to be done. The DOC research network is available for multisite studies and/or consultation.

IX. DOC Funding

DOC's status as a 501c3 organization requires strict financial record keeping. All funds generated nationally as well as locally in the name of DOC must be deposited in the DOC account.

Local chapters are encouraged to open accounts with a local bank. DOC's federal ID number is available for this purpose. Funds generated on a local basis and sent to National DOC for deposit, a tithe (10% up to the first \$5000 of local funds generated, 2% thereafter) is deducted to help cover national DOC's creative, advertising and newsletter costs. The remainder is the same fashion to assure everyone is put on the mailing list to receive the newsletter.

Similarly, when an individual notes a chapter affiliation on their check for DOC membership application, 90% of the dues are forwarded to the named chapter.

X. DOC Resources

The slide presentations are continually updated based on input from individuals using the material who send in slides that seem to work well in their presentations. They are not meant to be "canned" talks, but rather a base that can be personalized using the suggested script which accompanies the slides. Fact sheets and classroom exercises also accompany the material. A list of DOC resources is available from the national office.

XI. DOC Programmatic

A. Superhealth 2000 Speaker's Bureau

The Superhealth 2000 Speaker's Bureau has been highly successful. The steps for design and implementation and a sample budget are available. Very "home video" quality training tapes and a production quality video of Dr. Blum well as "Death in the West" are available along with substantial topical curricular material.

B. Sports Counter Promotions

1. Emphysema Slims Tennis Tournament: Now in its tenth year in Augusta, GA, this annual event resulted from medical student intrigue with first DOC picketing of the Virginia Slims tournament in 1977 in Miami. Though some chapters are planning day long tennis matches for their ESTT, others are holding mini-ESTT "House Calls" outside the "other" tournament.

2. The No Tar Fun Run: First held in Atlanta, GA, the day's activities consist of 5k and 10k runs with an important twist--the finish line is 800 cigarettes across road. The runners must "stomp the tar out of them" to finish.

3. The Disad-Vantage Golf Tournament: Christened in golf-capital Augusta, GA, this 18-hole Lauderdale format tournament was played just short distance from the site of the Masters. The first event drew four players from the LPGA and local pros from each area courses as well as amateurs from South Carolina and Georgia.

4. The DEAD MAN CHEW Softball Tournament: Inaugurated in Omaha, NB, this event has grown in size each year and pits the various medical and surgical specialties against one another.

C. Media Messages

1. International and national recognition for media excellence have been awarded to Washington DOC for their television and radio commercials. Several other chapters have run locally produced radio ads. All are available for duplication by other chapters.

2. regular shows
3. cartoons
4. articles
5. bus benches
6. billboards
7. t-shirts

D. Notebook, Bumper Stickers, and Magazines

E. Ad Expo

This is a counter advertising contest for students. Posters, billboards, radio, rap-video, etc. are encouraged.

F. Essay Competition

These can be part of a city/county wide competition or a classroom project and resolve around the social, political and ethical issues of tobacco - not the health issues. For example, in a joint venture between the Tobacco Products Liability Project and DOC, law students were asked to discuss the topic "Are tobacco company executives criminally responsible for the deaths, diseases and fires that their products cause?"

G. Obituary Cards

These black bordered postcards are sent to politicians to alert them that one of their constituents has died from causes related to tobacco. One card is for the physician to send regarding his patient and the other card is from the victim or his family to send.

H. Letters to the Editor

DOC members are encouraged to send letters to the editor regarding local, state or national events related to tobacco, alcohol and other drugs, or other unhealthy lifestyles. Sample letters are available.

I. Office and Waiting Room Strategies

Creating a professional ambiance that fosters health promotion isn't hard as one might think. From the time a patient enters the office until the time they exit, there are countless opportunities to encourage healthy lifestyles. Chapter 11 in Taylor's Family Medicine: Practices and Principles discusses these in detail.

Doctors Ought to Care

MCG-DOC

HH 101 * 1423 Harper Street * Augusta * GA * 30912

Dear Freshman:

Doctors Ought to Care! Doctors ought to care about what? As you begin your medical education, that is the most important question you can ask yourself. During the next four years, you will establish not only your personal medical career but also shape the way medicine is practiced and perceived in America.

As you enter medical school, you are probably full of enthusiasm and idealistic striving to help your fellow man. But, maybe you are also wary because you have heard that the classes are tough, that the hours are long, and that there are many sleepless nights ahead... And, you may have heard that many students lose their enthusiasm about medicine because of the reduced amount of "patient contact" in the first two years.

If you have heard any of these rumors, we can tell you that they are all true to some degree, but there is a good way to avoid those *pitfalls* and maintain your enthusiasm throughout medical school: **DOC**. Doctors Ought to Care encourages its members to become active participants in the shaping their own education as well as the rest of the medical profession. DOC is a blend of the medical students from all four years of medical school, with over 120 chapters in the United States.

The goals of DOC are threefold: (1) to educate physicians about major preventable causes of illnesses (2) to educate the public, particularly teenagers and children, about the major causes of bad health in our society, and (3) to reduce death and disease from poor lifestyle related behaviors.

So, what does DOC actually care about? DOC cares about preventing disease. We do this by actively teaching prevention to students of all ages, while at the same time promoting health conscious behavior, at the Medical College of Georgia, and throughout Augusta. After little over ten years in existence, Augusta DOC has been praised for its health promotion efforts by many community and state leaders, including Joe Frank Harris, former Governor of the State of Georgia, Augusta Charles Devaney and U.S. Congressman Doug Barnard.

During orientation, DOC members will be around to talk to you about its activities in Augusta and how you can become involved and we look forward to seeing you there. **Congratulations** on being accepted to Medical School - the fun is about to begin.....

Sincerely,

Michael Milton, MS II & Bob Morrow, MS II
Co-coordinators--MCG DOC

Welcome to DOC Headquarters

Here are some answers to frequently asked questions:

1. Where are the slides for the talks?
The DOC slides are in the large white notebooks labeled according to the topic. They may be found on the book case behind the door. Scripts corresponding to slides are useful if you are pressed for time, but feel free to pick and choose to create your own talk. Remember, some slides don't require lengthy discussion, yet will have great visual impact upon students.
2. Can I keep these scripts and papers related to my topic?
Please xerox materials and leave originals. If an original is too extensive, you may check out this material. The xerox machine is the 3rd door on the opposite side of the hall. Additional scripts from the past years are kept in the gray filing cabinet, third drawer, "DOC TALKS"..
3. How do I check materials out?
There is a sign out sheet on the door. Please fill in your name, contact number, what you have taken, and the date borrowed. When you return the stuff, do make sure you fill in the return date or we'll think you still have the materials.
4. How do I get a slide projector for my talk?
Slide projectors are usually available at the schools and should be arranged for when the teacher is originally contacted. If the school is without the necessary AV equipment, you can easily check out what is needed from Classroom Services at AK-113, ext. 4116 (Mr. Dennis Jones). The office is next to the Student Health center. Please remember to bring your student I.D..
5. Is there more informational material I can take to the class?
Yes. Please take a set of relevant informational pamphlets for the classroom bulletin board. If a particular pamphlet is available in quantity, feel free to take one for each student.
6. Are there rewards or prizes I can use in my talk?
T-shirts (one per class), stickers, posters, and buttons are available as classroom prizes for "best question," "best answer." e.t.c.. A variety of posters is available to give to teachers. In the younger grades, try to make sure every student gets some stickers.
7. How is my talk evaluated?
Please take a teacher evaluation form and fill out the top portion (your name, e.t.c.). Ask the teacher to complete the remainder after you talk. This evaluation can be mailed in or collected at the time of the talk. When you return the checked-out materials to the DOC office, please fill out a speaker evaluation form on the talk you gave (please note that these are two different evaluation forms). Turn your form in to the DOC office (leave it on the table for us) so we can figure out at the year's end how many talks were given, by whom, e.t.c., and give you credit accordingly.

If you have any other questions, please ask Mike (667-0088) or Bob (724-6416). If you want need help at the DOC, ask or call Julie (721-2269).

DOC OUTLINE

I. INTRODUCTION

- A. Welcome
- B. Define DOC
 - 1. What
 - 2. Who
 - 3. How
 - 4. Why
- C. Summarize Workshop
 - 1. Office
 - 2. Community
 - 3. Home
- D. Handout
 - 1. Contents
 - 2. Use

II. DOC

III. OFFICE

- A. Waiting Room
 - 1. Audience
 - 2. No Ashtrays
 - 3. No mags with cig ads
 - 4. Ad doctoring
 - 5. Patient education material on TV
 - 6. Superhealth notebook - media watch
- B. Exam Room and Toilet
 - 1. Wall
 - 2. Ceiling
- C. One on One
 - 1. Physicians
 - 2. Communication Skills
 - 3. Specific suggestions re: lifestyles
 - 4. Contracting
 - 5. Diary
 - 6. Habit prescription
 - 7. Working with teens: Creating teachable moment

3. Prohibit smoking or make non-smoking the norm "Because smoking is harmful it is permitted only in designated areas."
4. Segregate smoking
5. Offer incentives to quit
 - (a) \$
 - (b) First dollar insurance
6. Get rid of incentives not to
 - (a) Smoking breaks
 - (b) Full insurance
 - (c) Medical/disability for early retirement related illnesses.

V. SCHOOLS

A. School Board

1. Goals
 - a) Personnel
 - 1) Undergraduate courses
 - 2) Postgraduate courses
 - 3) Inservice training
 - 4) Role models

B. Policy

1. Consistent with health information
2. Behavior modification
3. Teaching
4. Enforcement

C. Curriculum

1. Subjects
 - a. Priority
 - b. Techniques
2. Resources
 - a. Community agencies
 - b. Medical persone
3. Budget
 - a. Time
 - (1) Specific health class
 - (2) Implementation schedule

- (3) Teachers workshops
- b. Money
 - (1) Salaries
 - (2) Supplies
 - (3) Consultants

D. STUDENTS

- 1. Education
 - a. Facts
 - b. Motivation
 - c. Participation
 - 1) Planning
 - 2) Teaching
 - 3) Role playing
- 2. Interaction
 - a. Classroom
 - 1) Health (physical education)
 - 2) Mathematics
 - 3) English (Language, arts)
 - 4) Art
 - 5) Science/social studies
 - 6) Music
 - 7) Physical education
 - b. Clubs
 - 1) Projects
 - a. Experiments
 - b. Research papers
 - 2) Contests
 - a. Poster
 - b. Button
 - c. Essay
 - 3) Special events
 - a. Health fairs/science
 - b. Athletic events
 - c. Book fairs
 - 4) Special activities
- 3. Curriculum
 - a. Needs
 - 1) Personal
 - 2) Professional
 - b. Resources

- 1) Community
- 2) Medical
- c. Supplies
- d. Workshops
 - 1) Factual material
 - 2) Motivation
 - 3) Techniques
 - 4) Credit
- 2. Role Models
 - a. Classroom
 - b. Personal

F. PHYSICIANS

- 1. Participant
 - a. Curricula design
 - b. Speaker
 - 1) Teacher workshops
 - 2) Classroom
 - c. Resource
 - d. Parent
- 2. Sponsor
 - a. Contests
 - b. Printed
 - c. Student interest groups
- 3. Role model
 - a. Personal
 - b. Professional
 - c. Parent
- 4. Interaction
 - a. Board
 - b. Teacher
 - c. Students
 - d. Peers
 - e. Parents

VII. MD AS ROLE MODEL

- A. Personal example
 - 1. Behavior
 - 2. Priorities
- B. Advocate
 - 1. Legislature

2. Litigation
C. Activist

VIII. MEDIA WATCH

IX. PRIVATE PRACTICE EXAMPLE

X. PANEL

XI. SUMMARY

A. Statement

B. What's in it for me?