Case 1.3: Physicians' Political Communications with Patients and Their Families—Who Should I Vote For?

Case Presentation

Dr. Allworthy has been a physician for nearly 35 years. He has many long-time patients with whom he often engages in non-medical conversations about vacations, new restaurants, good movies, etc. When asked about changes in health care, he usually sighs and says, "Being a doctor isn't what it used to be!" Given the upcoming election and the candidates', as well as media's, attention to health care-related issues such as rising malpractice insurance, costs for medication, and changes in Medicare, Dr. Allworthy's patients are beginning to press him for his opinions on these subjects and to ask for whom he is voting. Since elected officials at local, state, and federal levels will be tackling many of these issues through policy decisions and specific statutes, Dr. Allworthy is thinking that he should inform his patients about what he believes is in their best interests and who he believes is the best candidate.

What should Dr. Allworthy do about involving patients in political advocacy? (select an option)

A. In the 30 days preceding the national election, tell patients who inquire which candidates they should vote for.
B. Hand out flyers with instructions on how patients can inform their elected representatives of their positions on proposed legislation.
C. When patients ask his opinion, provide them with an overview of the issues and what particular options will mean for health care in general.
D. Explain that it is not appropriate for him to discuss political issues with patients—even health-related issues.

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Option Assessment

A. Telling patients for whom they should vote should be avoided. According to Opinion 9.012, "Physicians' Political Communication with Patients and Their Families," "Conversations about political matters are not appropriate at times when patients or families are emotionally pressured by significant medical circumstances. Physicians are best to judge both the intrusiveness of the discussion and the patient's level of comfort."

B. Providing patients flyers and instructions on how to notify their elected representatives is an acceptable activity under Opinion 9.012, "Physicians' Political Communications" as long as patients do not feel pressured to take the flyers. This opinion clearly states that physicians should not allow their positions on political matters to interfere with the delivery of high-quality professional care.

C. Providing patients with information and opinions related to health care issues is the preferred course of action. Opinion 9.012, "Physicians' Political Communications" states that, in "fulfilling their responsibility to work for the reform of, and to press for the proper administration of, laws that are related to health care, physicians should keep themselves well-informed as to current political questions….In addition, "it is natural that in fulfilling these political responsibilities, physicians will express their views to patients or their families."

D. Explaining to patients that it is not appropriate to discuss political issues is an acceptable course of action. While Opinion 9.012, "Physicians' Political Communications" acknowledges the right of physicians to express their views when appropriate, it mandates that they do so with due consideration. The responsibility for judging whether the discussion is within the patient's level of comfort lies with the physician.

Compare these options

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Option Comparison

The manner in which physicians advocate for political candidates and issues can have serious consequences for the patient-physician relationship. Patients can easily become concerned that they will disappoint or anger the physician if they disagree with the physician's opinion and that the disagreement might affect the health care they receive. Other variables, such as the length of a particular patient-physician relationship or degree of formality in the relationship, can affect how patients feel about complying or disagreeing with the physician's political opinions.

When physicians indiscriminately exercise their right to advocate for political causes, as in option A, they are exhibiting a lack of concern for the effect on the individual patient and thus should avoid doing so as a general practice. Asking patients to take flyers with instructions on how to notify their elected representatives, as in option B, is an acceptable form of political advocacy. Option C is the preferred course of action because it provides the patient or family with relevant information but allows them to make the final choice for whom they vote. Option D—explaining that talking politics with patients is taboo—is acceptable in maintaining clear professional boundaries between physician and patient.

Preferable: Option C

Acceptable: Options B and D

Avoid: Option A

Additional discussion and information

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Additional Information

Physicians enjoy the rights and privileges of free speech shared by all Americans. In addition to these ordinary political rights, physicians have a particular and enhanced duty to work for the reform of, and to press for the proper administration of, laws that affect health care issues. When patients turn to them for advice about health care matters, physicians are in a position to offer them well-informed, thoughtful opinions. Thus, it is natural for physicians to express their views to patients or their families, and doing so may also solicit the support of patients or their families for particular positions, parties, or candidates. However, these rights and privileges must be exercised with sensitivity to the context of the patient-physician relationship in general and to the particular encounter.

Political conversations should not exploit the medical authority of the physician. To avoid the over-reliance of patients on physicians' non-medical opinions, the ideal discussion should be an interactive one in which the patient receives information from the physician but feels free to exercise his or her own judgment. Communication about political matters must be undertaken with sensitivity to the threats such communication can pose to the patient-physician relationship, especially when the patient is vulnerable and dependent on the physician's help. Physicians should exercise due care in discussing specific issues or opinions on matters that are directly related to the patient's health condition. Finally, physicians should cease political conversations if it becomes apparent that the patient or family is at all uncomfortable, even if the patient or family member initiated the conversation.

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