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## **Why I Rejected the Conference on Dental Health Part V**

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**Your Life Your Health**

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The origin and the fruit of hope - value, virtue, trust

As we move deeper into the 21st Century, we do so knowing that the technological advances we face are astounding. Our grandchildren's generation will experience healthcare methods and possibilities which seem like science fiction to us today. Yet, that technology risks decreasing the value of our lives, if we do not in the midst of technology retain our humanity. As we celebrate science, we must not fail to embrace the minister, the ethicist, the humanist, the theologian, indeed the ones who remind us that being the bionic man or woman will not make us more human; but, it seriously risks causing us to be dehumanized. And in doing so, we may just find the right balance between technology and trust and thereby find the solution to the cost of care.

### Conclusion

There is no doubt that there are different opinions which are often founded upon different world views. While I am not unaware of injustice in this world, I do not see the world through a prism of injustice. Others can see it no other way. The solution to healthcare problems to me is not to assign blame but to design solutions. I begin with the value and virtue of the individual and design a system which will ultimately benefit society. Others believe the way to solve problems is to change society and indirectly to impact the lives of individuals.

If the conference I attended had begun with goals which are well defined (which it did), looked at active solutions which are in place by attendees, and also looked at public policy issues which will benefit dental health, I would stay since the conference was not over until two days after it began and two days after I left..

It was not necessary to couch the entire conference in what to me and to many healthcare providers are radical, liberal, Community-Organizer vocabulary, which blames society for all of the ills of individuals and relieves all individuals of any responsibility for their own well being.

If the goal is to enlist healthcare providers into the battle against illness, the focus must be on health and not politics. If the goal is to promote a world view which requires the embracing of a collectivist, progressive, liberal, socialist ideal, then we will never agree.

It is possible for people with different world views to collaborate on a common goal. I support the value and imperative of dental health but there is no area of health where individual responsibility and policy decisions are so clearly wedded. The individual, beginning at an early age, needs to practice good oral hygiene. Society cannot brush everyone's teeth and society cannot floss everyone's teeth every day. The society needs to value dental health and make sure that it is part of health policy and insurance policies because it makes good health and economic sense.

I will never buy what was being sold in that first session and I feel certain that those selling it will never relinquish their affection for their model, but if we are going to collaborate it will have to be around goals and methods, not political or philosophical ideals, which are irrelevant to both goals and methods.

#### A Summary Where We Began and Where We Are

Remember, when we started this discussion, I stated, "I totally agree with the goals of this conference and I even understand the rationale of their approach." It is SETMA's contention that if Medicare and all insurance companies pay for screening, preventive maintenance and restorative dental care that the return on investment would be significant.

When I was a college sophomore in 1962, a boy in my dorm had totally rotten teeth. I went to a dentist and arranged a total extraction and dentures which I would pay for by working the following summer. I was 18 years old. There was another student who agreed to pay for half of the dental work. When we returned from the summer vacation and I had paid my half, he said that he was not going to keep his commitment. I had to be at school two weeks before the cafeteria opened so I had money for two weeks of food. It was exactly half the cost of the dental work. I gave it to the dentist and fasted for two weeks. The debt was paid, the boy's life was changed forever and I received a great blessing. And I had my first experience with the joy and the discipline of giving to others.

Through my 43-year medical career, I have known that there are identifiable differences in care received by various groups or populations of patients. Sometimes those groups are identified by ethnicity and the differences, which almost always represent lower quality of care, are referred to as "Ethnic Disparities". When these disparities are recognized, it is possible to design treatment programs which can mitigate or hopefully eliminate them. Due to the use of business intelligence, statistic analysis, and health data informatics, SETMA has been able to demonstrate the elimination of ethnic disparities in diabetes and hypertension treatment. SETMA's approach to healthcare is defined in our Model of Care. (See: [The SETMA Way - SETMA's Model of Care Patient-Centered Medical Home: The Future of Healthcare Innovation and Change](#)) This model includes personal and personalized care for individuals and population-health-methods for groups or panels of patients.

In the introductory session at this conference, the discussion was not about defining the problem of dental care and designing a solution. It was about who is to blame. Terms like “health equity” and “social justice” were used to explain our current dental health. It was even said, “White people get dental care,” implying that the absence of dental care among other groups could have a race basis.

“Social Justice” and “Health Equity,” while popular and familiar terms are not healthcare terms; they are political terms. The vocabulary of the presentation sounded like a training program for a Community Organizer group and the spirit was like a cheer leader among people who shared a common belief. The presentation was given by a liberal, qua progressive, qua socialist who, rather than promoting a solution, placed responsibility for the solution, not upon the individual, but upon society. The presentation was well rehearsed and well presented and had obviously been practiced before.

Also, I had heard it before. If “social justice” is the solution, then it must be to undo the result of “social injustice,” and it was implied that the solution to the problem was to find who is to blame, and that it might actually be “white people.” After all, if they are absorbing all the resources, there is no balance or equity in the distribution of those resources.

I will soon be 73 years old. My personal experience with dental health came through my father and mother. I grew up in a lower, middle class home. 70 years ago, in my family, there was not a great deal of money, Nevertheless, my father, who lost all of his teeth at age 30 due to poor dental care, made sure that his children and wife had excellent dental care. It was a choice he made. He did not use alcohol. He did not have a fancy car. He lived in company housing and he grew most of our food. But, he provided for our dental care. He did not expect society to provide it.

## **The Future**

The only solution to dental and general health is for each person to take responsibility for their own care. Those who need help should receive it, but what they receive should be “help” and not the assumption by society of ALL costs and responsibilities for ALL care. We can solve the healthcare problems of all but only with all participating in that solution.