

# How To Be A Health Futurist In Ten Easy Lessons

By Joe Flower and Patrice Guillaume

Want to be a health futurist? Follow these ten guidelines, and you will have a leg up on most of the people out there who write about the future of health care in this country.

**1) Study people.** Observe them. Note what they actually do, not what you think they should do, or what would make sense, or what theory predicts. What do they trust? What do they act on? What roles do they take in groups?

Use any system of thinking from psychology, spirituality, or other disciplines which actually enhances your ability to notice human behavioral patterns.

Then take those observations and apply them to any trend, scenario, or forecast you are building about the future. Ask yourself: Does this make sense? Will people really act the way I am expecting?

**2) Follow technology.** Medicine is fundamentally technological, and the technology of medicine is changing with unprecedented speed and force. Speculations and forecasts on the future of health-care usually leave out the effects of new technologies, considering them “wildcards” that are irreducibly unpredictable. They consider only demographic aspects, for instance, or economics. This seems to make sense, as it isolates pieces of the problem that we can deal with in a more straightforward manner. On the other hand, it likely makes the forecasts wrong. The effects of technology on healthcare in the next few decades are likely to be so powerful that they will overturn every other assumption and projection. Any forecast that leaves these effects out is no forecast at all.

**3) Get into demographics.** It’s a pretty simple science, at root: Take every-

body who is alive now. Next year, they will be a year older (give or take a few factors at the margin, such as changing immigration, birth and death rates). Ten years from now they will be ten years older, doing the things that people do at that age, such as go to school, have babies, retire, get sick. This simple science can tell us profound things about the future. Fifteen years from now, for instance, the baby boom enters its prime heart-disease years — at the very moment that boomer cardiologists retire. That one effect alone is so powerful that it will likely force adoption of new technologies, and even the re-definition of the doctor-patient relationship.

**4) Look for beliefs, assumptions, and emotional attachments.** What we call a “doctor” or a “hospital” or “medical treatment” in our society is not written in stone, it is written in the beliefs, assumptions, and emotional attachments shared by physicians, patients, and everyone involved in health-care. If those change, healthcare changes.

**5) Understand healthcare.**

If you have not closely followed the peregrinations of the healthcare system and the diffusion of medical technology in the past few decades, you are unlikely to have sensible things to say about the next few. The way we do healthcare and medicine is peculiar in the extreme.

Running healthcare may be the most insoluble management problem in the history of the world.

**6) Read history.** It's the only place that you will find alternative futures. Though many aspects of this moment in time are unprecedented (instantaneous cheap global communications, for instance), we can still mine the past for enormous amounts of information. If you want to think about the long, arduous task of adopting electronic medical records, for instance, you can learn a lot by looking at the two decades it took the banking industry to get its customers to use ATMs, or the decade it took for fax machines to become standard office items. If you want to watch a really big, complex system get out of hand, study the decline and fall of the Roman Empire, or the slow decay of Tang Dynasty China, or the causes of the U.S. Civil War.

**7) Learn complexity theory, chaos theory, and adaptive systems theory.** You don't have to be able to do the math, but you must understand the ideas. "Learning curve" and "feedback loop" are not vague phrases. They are precise scientific ideas that contain specific predictions. If you don't understand positive and negative feedback loops, local optima, adaption landscapes, and related ideas, it will be difficult to think about the future in useful ways.

**8) Grok scenarios.** "Scenarios" are not wild, fun stories we make up about the future. Working with scenarios is a specific discipline. It starts with a detailed and deep understanding of the trends and forces of the present situation. Then it makes certain assumptions: Trend X will dominate, while Force Y will be less important. Then it asks a useful question: If those assumptions hold, what does that future look like? Then it changes the assumptions (What if Trend X is less important, and Force Y strengthens?) and asks the question again.

**9) Distrust straight lines.** You don't find them in nature, you don't find them in history, and you won't find them in the future. Read, for instance, James MacPherson's single-volume history of the Civil War era, *The Battle Cry of Freedom*,

and notice how many times, in how many ways, it was actually possible that the South could have won the war and emerged as a separate nation. Notice how uninevitable the outcome was. Then notice how many future forecasts are based on simple straight-line trends in the present extrapolated into the future

**10) Don't mistake your personal prejudices for future trends.** For a great example of what not to do, dig out *Time Magazine's* special issue on the 21st Century, "Beyond 2000," November 8, 1999. Read the section on complementary and alternative medicine, "What Will Happen To Alternative Medicine?" by Leon Jaroff, page 77. Keep in mind as you read that *Time Magazine* considers itself a serious journalistic institution. The illustration shows a bunch of herbs overgrown with cobwebs. The thesis of the article is that alternative medicine will disappear within a generation. Why? What powerful counter-trend, what demographic shift, what grand historic nexus does the author cite that will overturn one of the strongest healthcare trends of the past few decades? Quite simple: the author thinks that alternative medicine is a bad idea. He cites the usual arguments (it's untested, some of its claims don't make sense to him), calls it names ("quackery," "voodoo medicine") and throws in some guilt by association ("hucksters," "snake oil"). He concludes that since his opinion is so imminently sensible, the American people, federal regulators, and Congress will all wise up and agree with him.

Having opinions and beliefs is a fine thing. Don't confuse them with grand historical movements. Understanding that the future will not bend to your will, no matter how wise and sensible you are, is a prerequisite for the job.

These ten guidelines are a good start. If you follow them, you will be good enough — and better than most — as a health futurist.

