Myths, "Zombies" and "Damned Lies" Plague Canadian Healthcare Systems: What's a Researcher to Do?

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To seasoned researchers and today's research savvy decision-makers, some of the ideas that show up in the news media or come up over coffee are laughable. That's because some of the ideas – for example, that the aging population will overwhelm the healthcare system – have long been discredited in health services research discussions. And, yet, the spread of such myths is no laughing matter. For example, when the public hears that all of our Canadian-trained doctors are headed to the United States or that our systems are financially unsustainable, they likely worry that their health is at stake and their systems are in disrepair. Decision-makers – even those with a savoir faire for making evidence-informed decisions – face similar challenges. Using research to inform management and policy is already difficult notwithstanding when popular culture supports measures that are counterintuitive to the best research.

Since 2000, the Canadian Health Services Research Foundation (CHSRF) has been busting widely held Canadian healthcare myths in its *Mythbusters* series (CHSRF 2008). For the foundation – a research funding and knowledge brokering organization – the aim of the series is to speak for what the research evidence says. It's a small but important step in an outright battle against what researchers Morris Barer and Robert

Table 1. Issues of *Mythbusters* by popularity and year, based on web data from January to December, per year in question*

Popularity	2005 (Title, Downloads)	2006 (Title, Downloads)	2007 (Title, Downloads)
Most ↑	A parallel private system would reduce waiting times in the public system (5,413)	Medical malpractice lawsuits are a growing problem in Canada (6,525)	Medical malpractice lawsuits are a growing problem in Canada (5,830)
	Seeing a nurse practitioner instead of a doctor is second-class care (5,008)	A parallel private system would reduce waiting times in the public system (5,610)	The risks of immunizing children often outweigh the benefits (5,792)
	For-profit ownership of facilities would lead to a more efficient healthcare system (3,657)	Managed care = mangled care (4,976)	A parallel private system would reduce waiting times in the public system (5,133)
	Medical malpractice lawsuits are a growing problem in Canada (3,544)	Seeing a nurse practitioner instead of a doctor is second-class care (4,682)	Seeing a nurse practitioner instead of a doctor is second-class care (4,536)
Least	Canadian doctors are leaving for the United States in droves (3,167)	For-profit ownership of facilities would lead to a more efficient healthcare system (4,185)	Canadian doctors are leaving for the United States in droves (4,045)

*Total downloads: for 2005, $N = 46,353$; for 2006, $N = 60,668$; for 2007, $N = 63,880$.

Evans have candidly referred to as "damned lies" and healthcare "zombies" – false ideas that have embarrassingly little support from the research evidence but just won't die (Barer et al. 1998; Evans 2006; Evans and McGrail 2008). To help put some of these falsities to rest, the foundation has recently taken some time to reflect. We're asking: What are some of the most widely held myths? And what are some of our lessons learned from debunking them?

Undying Myths

To date, the foundation has busted 22 myths in its quarterly series of two-page, expert-reviewed knowledge summaries (CHSRF 2008). Last year, the foundation took some preliminary measures to gauge the "popularity" of these using web-download data, measured annually (Table 1).

Between 2005 and 2007, a few myths have held a position in the top five most downloaded issues:

- Myth: A parallel private system would reduce waiting times in the public system.
- Myth: Seeing a nurse practitioner instead of a doctor is second-class care.
- Myth: Medical malpractice lawsuits are a growing problem in Canada.

A quick scan of these topics reveals a striking commonality – for example, their relevance to physicians, who as a group hold great power and influence in healthcare policy and management decision-making. But what does the foundation hope to gain in tracking all of its *Mythbusters*? It allows us to begin the process of assessing our own impact and asking questions, such as: Which issues of the *Mythbusters* series are adding value to the healthcare management and policy discourse? Where might niche areas exist? For example, where in popular culture are the subjects of our series under greatest scrutiny and debate? And where might interest groups and opinion leaders (the messengers) exert the greatest influence? These are important and difficult questions, which will take some time to resolve completely.

Mythbusters Teaching Resource

Although the *Mythbusters* series is designed to be read by health system managers and policy makers, they can assist a range of individuals who are attempting to communicate with these important audiences. In particular, they have shown promise as teaching tools at the graduate level. That's why, in 2007, the foundation worked with researchers to compile the *Mythbusters Teaching Resource* (Thornhill and Clements 2008). Launched in early 2008, the resource walks readers through the major steps of writing and sharing a *Mythbuster*:

1. **Spotting the myth.** Where can you find myths? Our experience has been that researchers (with notable exceptions, i.e., Barer and Evans) often have difficulty identifying myths.
2. **Searching for evidence.** What weight can you place on different sources of evidence?
3. **Writing the summary.** How do you talk in a way that makes research accessible and is appealing to your audience?
4. **Adding visual appeal.** How do you make a research document not look like a research document and more pop-culture friendly?
5. **Undergoing review.** How do you appropriately approach experts for review and use their expertise to the full effect?
6. **Sharing evidence-informed messages.** Where are the champions and opinion leaders who can help to take a research summary beyond, as a tool that can help support evidence-informed decision-making?

The full 28-page teaching resource and all the issues of *Mythbusters* are available on the foundation's website at www.chsrf.ca. The foundation's hope is to involve others in dispelling lies and chasing zombies – a job not for the faint of heart. HQ

References

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