



A Monthly e-Newsletter From:

 Institute for Alternative Futures

November 2008

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Forward Perspectives

IAF Project Saves Lives

By IAF V.P. for Business Development and Futurist [Eric Meade](#)

Randy Pausch, the Carnegie Mellon professor who recently died of liver cancer after captivating internet audiences with his "Last Lecture" on "Really Achieving Your Childhood Dreams," ended the lecture with this:

"But did you figure out the head fake? It's not about how to achieve your dreams; it's about how to lead your life. And have you figured out the second head fake? The talk's not for you; it's for my kids."

The big "head fake" of futures studies is that it's not about what you do in the future; it's about what you do today. A great example of this comes from a project IAF led in 1996-98 with the Military Health Services System.

The project, Military Health Services System 2020, brought together key stakeholders and experts from the military services and the private sector to develop forecasts, scenarios and visions for military medicine in the year 2020. One important outcome of the project was that participants were allowed - even encouraged - to see health care from a variety of different perspectives, which introduced new ways to approach the challenges they faced. They also built relationships with people in other units and organizations with whom they would be "creating their future" over the coming years. Current Army Surgeon General, Lieutenant General (then Colonel) Eric Schoomaker found the experience so valuable that he has determined to continue offering futures to high-potential army officers.

One highpoint of that project was a visioning workshop in which participants spoke to the inspiring future military medicine could create. The discussion evoked factual as well as psychological and deeply emotional points of view on the values, struggles and successes of those working on the battlefield. IAF helped craft an inspiring vision of the future of their work, as well as a statement of shared identity, which began: "We are the healers who walk with warriors in unity. We are on a journey to do what must be done. We are a community of healers who know health is a wholeness. The depth of our caring runs as deep as the pain of war."

Motivated by this statement of identity and their vision statement, the members developed "audacious goals" that would help them turn "vision" into "reality." One of these goals was to extend the "golden hour" in a warzone - the period during which a critically injured soldier can be saved if he receives effective care - to six hours. Comparing their performance at the time with the audacious goals they had set during the MHSS 2020 project, several participants identified significant deficiencies in the qualifications and training of Army medics. Because the military entrance exam score required for admission as an Army medic were so low, new medics had few qualifications and - more importantly - did not easily gain the trust and confidence of their comrades. Weaknesses in the medical training given to medics after they joined exacerbated both of these problems. As a result, medics were often sent to do menial tasks not related to their specialty and many in the Army had concerns about even letting medics perform simple medical tasks like placing IV's.

The MHSS 2020 vision and identity statement crafted under IAF's guidance created a strong dissatisfaction with this state of affairs, leading some participants, including an Army general, to make significant changes to the recruitment and training process. Minimum test scores were raised and training was strengthened to ensure Army medics could perform resuscitative care at the level required on the battlefield. Those who led this change now point to the success of Army medics as first responders in the wars in Iraq and Afghanistan as the result of their efforts, and to some degree credit IAF for helping them develop and communicate a vision compelling enough to motivate real change which helped save lives on the battlefield.

Thinking proactively and creatively about the future is essential to the decisions that organizations make in the "here and now." Although we at IAF cannot say that our work always saves lives, we can say that we are highly effective in helping organizations convey their own aspirations for the future in a way that motivates positive organizational and behavioral change today.

For more information on how IAF can help bring your organization's future into the present, contact Eric Meade at emeade@altfutures.com.

Trends & Insights

House Committees in the 111th Congress Have Opportunities for Foresight

In January, the 111th Congress will convene around some of the most pressing national problems in a generation. The House will also approve the rules that will guide its work for the next two years. One provision in the House rules that is likely to remain is the "foresight provision". Rule X Section 2 includes a requirement for House Committees to do oversight and

foresight. The foresight provision calls on the Congress to do futures research and forecasting on subjects within a committee's jurisdiction.

IAF believes that house committees have an opportunity and an obligation to reinvigorate foresight to address the pressing challenges we face today. Effective foresight will create better legislation by anticipating challenges and opportunities. It can also reduce unintended consequences inherent in complex legislation by identifying potential worst case scenarios. Foresight can also be an effective tool for public communication by articulating preferred futures that legislators alone can create on behalf of their constituents.

The challenges faced by the next Congress highlight the need for effective foresight in government. There is great uncertainty in the state of the economy, climate change, health and health care, transportation (technologies, infrastructure, and auto companies), security and terrorism, to name a few policy challenges. Futures research and forecasting - can bound the uncertainty, but not eliminate it. Scenarios or alternative forecasts can identify which pathways are more or less likely and what contingencies are likely to be important.

IAF has been involved in promoting and assisting governments with foresight for considering the future and for involving the public in the executive, legislative and judicial branches. For example, IAF conducted futures workshops for the GAO. David Walker, the former Comptroller General of GAO actively led in supporting oversight, insight and foresight in the federal government.

Recently, however, governments outside the U.S. have been the leaders in integrating foresight and governance - particularly the UK, the European Union, Australia and some Asian Countries. The European Union, for example, is supporting a European Foresight Network which monitors the ongoing foresight activities in Europe. The network's database shows that most of the member states of the European Union have ongoing or recently completed foresight initiatives.

In recent years, the failure of foresight - of considering emerging developments as well as the side effects of policies -- has led to major problems. Promotion of biofuels in recent legislation has led to significant shortages and price increases for food in certain low income countries as US farms grew corn for biofuels. Failure to consider worse case scenarios during the planning for the invasion of Iraq and Afghanistan has led directly to severe policy failures at the federal level. The current economic crisis, based in part on the subprime mortgage meltdown, is another example of the lack of foresight about policies within House committees' jurisdiction.

Failure to consider emerging trends and contingencies, including the impacts of policies themselves, leads to poor policy making. The House Foresight Provision was an effort to make House Committees be more responsible for this essential aspect of policy making. House Committees can promote foresight by asking the agencies under their purview of the Committee for their futures research and forecasts, question experts during congressional hearings about the future impact of legislation including potential "wildcard" events and funding foresight activities both inside government and in non-partisan institutions.

It is vital that House Committees lead with foresight and actively encourage foresight inside the federal government. Time is running short for addressing many of the critical challenges facing the U.S. The fact that the foresight provision is part of the House Rules should make that leadership easier.

For more information about IAF's success in integrating foresight into policy making, please contact futurist@altfutures.com.

News and Events

IAF Collaborates with Ben Sheppard on War Game Simulation

The Institute for Alternative Futures (IAF) has been involved in a number of successful War Games with IAF Senior Associate [Ben Sheppard](#). Most recently, Ben Sheppard and IAF President Jonathan Peck collaborated on war game on market conditions for a global pharmaceutical company. Sheppard has also published a recent article in *Scrip World Pharmaceutical News* on [Pharma's New Playbook](#) on the use of Competitive Brand Simulations.

Ben Sheppard and IAF design and run war game simulations utilizing IAF's futures tools. Clients who have used these customized scenario planning exercises include multinational corporations, NGOs, and governments. The simulations can examine the robustness of current and alternative decision making, product development, portfolio positioning and organizational structures under various internal and external environments.

Sheppard also specializes in the terror of terrorism and ballistic missile proliferation. He is the author of a new book titled the [The Psychology of Strategic Terrorism: Public and Government Responses to Attack](#). Sheppard received his Ph.D. from the War Studies Department at King's College London in the U.K. and is also an Adjunct Fellow of the Potomac Institute in Washington, DC. Sheppard regularly publishes articles on terrorism including for Jane's Defence Weekly.

For more information on IAF War Game Simulations, contact Ben Sheppard at bsheppard@altfutures.com.

DRA Project Holds Second Disparities Foresight Briefing on The Health Disparities Collaboratives: Enhancing Quality and Reducing Disparities

DRA Project in collaboration with the Congressional Hispanic Caucus held a standing room only second foresight briefing on November 24th at the Rayburn House Building on Capitol Hill. Clem Bezold introduced the Health Disparities Collaboratives, the quality improvement processes in community health centers which are now 10 years old. The Collaboratives have been shown to improve outcomes and reduce costs in treatment of diabetes and other conditions through prevention and improved treatment. An expert panel followed: David M. Stevens, Director of the Quality Center at the National Association of Community Health Centers, Paloma Hernandez, President & CEO of the Urban Health Plan and Roland Gardner, CEO of Comprehensive Health Services, Inc. presented data on the importance of the Health Disparities Collaboratives in improving healthcare in community health centers across the United States.

David M. Stevens, Director of the Quality Center at the [National Association of Community Health Centers](#) identified the origins of community health centers in the OEO programs of the 1960s, and noted that 5 characteristics define health centers: a) Providing services in high-need areas, b) comprehensive care (whole life cycle: prenatal to geriatrics, mental

health, substance abuse, pharmacy, etc.) c) open to all residents irrespective of their insurance status, d) controlled by boards comprised of community members and e) meeting performance and accountability requirements. The Health Disparities Collaboratives provided an ongoing set of tools and processes for the CHCs to improve their care for diseases such as diabetes, cancer, and asthma. The quality improvement of the Collaboratives was then extended to the operation of the centers.

Paloma Hernandez, President & CEO of the [Urban Health Plan](#), a community health center based in Bronx, NY, in one of the poorest Congressional Districts in the country, provided insights into the operation of the UHP and the impact of their involvement in the Health Disparities Collaboratives. UHP provides services to a population that is predominantly Hispanics for a wide variety of conditions ranging from cancer, geriatrics and obesity to asthma, depression and teen pregnancies. They have successfully implemented the use of electronic health records, while setting and meeting high standards for health outcomes. For example, UHP was able to reduce pediatric hospitalizations in ages 5 to 12 due to asthma by 60%. They also increased the registry size from 2100 to 5900 asthmatics while raising symptom-free days from 4 to 10.8 (out of 14 days). Their efforts were recognized leading to EPA's "National Exemplary Award".

Ms. Hernandez emphasized the cost effectiveness of their organization and also their efforts to address social determinants of health by being a source of training and job creation for the local community members. The Collaboratives provided a way to focus on improvements in care and in their operations. They have been expanded and maintained by the broader involvement and leadership of health center staff beyond the senior managers of the center.

Roland Gardner, CEO of [Comprehensive Health Services, Inc](#) described the history and services of this community health center covering three counties: Beaufort, Jasper, and Hampton, in the largely rural Low Country of South Carolina. Mr. Gardner cited a study of Medicaid Patients with Diabetes in South Carolina. According to this study, while 9% of all diabetes patients in South Carolina are hospitalized, significantly fewer community health center patients with diabetes require hospitalization and when community health center diabetes patients are hospitalized their costs are less. The South Carolina health center saved the Medicaid program \$1.6 million between 2001 and 2003 based on 4,949 diabetic patients seen by the health centers with an average savings of \$336 per patient.

Mr. Gardner also discussed their patient education program that retains some of them as employees, along with identifying community health centers to train medical students often times chosen from within the community. According to a study prepared by the SC Office of Rural Health, the health centers' total impact to the state's economy was \$116 million in 2003 wherein health centers provided 1,474 jobs directly and also had a spin off effect that created 601 jobs indirectly. Mr. Gardner concluded that his organization has had a significant positive impact in a poor rural region by generating jobs, reducing health care costs and improving health.

The well received talks were followed by a Q/A session with participation from Congressional staff, NGO representatives and academics interested in the issue of health disparities. A complete summary of the Briefing will be made available on [DRA website](#) shortly.

Upcoming Events

Diversifying the Reach of Medical Care, [Consumer Health World Fall Conference](#), IAF
Founder & Chairman of the Board Clem Bezold, December 8th, Arlington, VA.

Healthcare Industry 2018, IAF scenario workshop for AARP will be conducted on December
11, 2008 in Washington, D.C.

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