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## Health Psychology within the Health-Care System

### Chapter Summary

Due to different public and private funding arrangements, regulatory structures, and delivery modes, health systems vary from country to country and shape the way health psychologists provide services to their patients. Certain individuals, such as celebrities, can afford all healthcare services, regardless of the country or type of health care system. Canada has a predominantly public coverage system in which provincial governments provide medically necessary hospital, diagnostic, and physician services. Due to restrictive public coverage, patient access to the services of health psychologists is limited, despite the fact that health psychologists can provide an array of services directly connected to medical care. Despite these health system barriers, health psychologists are involved in every stage of care, from primary and secondary to tertiary care.

When working with patients, health psychologists often need to consider whether patients are misusing medical services. There are two common types of misuse: overuse and delayed use. Health psychologists also often assist patients with adherence to medical care. *Adherence* refers to patients following treatment recommendations made by their health-care professionals. Since psychosocial variables predict adherence, psychologists have an important role to play in assisting patients with adherence to medical recommendations.

In addition, growing evidence suggests that there are effective psychological treatments to assist individuals with recovery and adaptation to medical conditions as well as to problems they encounter within the health-care system. These psychological services can reduce health-care spending.

## Essay Topics

1. What are the similarities and differences between health care in the US and health care in Canada? Which system is makes it easier to access health psychology services? How could this be improved in both countries? (pp. 72–80)
2. What are the personal and social factors that influence tendencies to seek health care? (pp. 80–85)
3. How can health psychologists help improve patient adherence? What about patient satisfaction? (pp. 86–88)
4. Does providing psychological services to medical patients ultimately reduce health-care costs? Support your answer. (p. 90)

## Weblinks

<http://www.hc-sc.gc.ca>

Health Canada is the Federal department responsible for helping Canadians maintain and improve their health, while respecting individual choices and circumstances.

<http://www.hc-sc.gc.ca/hcs-sss/pubs/system-regime/2011-hcs-sss/index-eng.php>

This section of the Health Canada website provides a variety of information on Canada's health care system—its history, the role of government, delivery of health-care services, and other related topics.

<http://www.nih.gov/>

The National Institutes of Health (NIH) website provides a variety of health-related information and resources. The National Institutes of Health—part of the US Department of Health and Human Services—is the US government's medical research agency.

<http://www.pbs.org/wgbh/pages/frontline/sickaroundtheworld>

PBS *Frontline* episode titled “Sick Around the World,” which explores how five other capitalist democracies—the UK, Japan, Germany, Taiwan, and Switzerland—deliver health care, and how their successes and failures might inform the US health care system.

## Glossary

**Beveridge systems** Health systems financed through general taxation that involve a government overseeing the co-ordination and integration of a broad range of health services for its entire population; named after William Beveridge, the civil servant whose recommendations led to the creation of the National Health Service in the United Kingdom.

**Health system** The complex array of governance, funding, administrative, and service delivery arrangements established to deliver personal and population-based health services, all in an effort to improve health and health-care outcomes.

**Health maintenance organizations** HMOs, or packaged health services of specific medical professionals and facilities offered by provider organizations.

**Medical cost offset** The net savings in medical costs resulting from an intervention.

**Primary care** First level of personal care for common conditions, focused on both prevention and treatment, from which access to specialized care is co-ordinated.

**Private health insurance systems** Health systems in which the majority of payments are made through individual or employment-based private insurance contracts.

**Secondary care** Health-care services provided by medical specialists and other health professionals who generally do not have first contact with patients.

**Social health insurance systems** Health systems financed largely through compulsory employer–employee insurance contributions regulated by the state.

**Tertiary care** Care provided in a facility that has specialized personnel and facilities for advanced medical investigation and treatment.