In our changing healthcare delivery system the emphasis is on efficiency, on eliminating waste. Doctors are either encouraged or mandated by employers and others to see a large number of patients over what most doctors feel is a less than sufficient time period.

Over many decades the role of the American physician has changed. She/he no longer works in a role that is mandated by a higher power (remember that in the Hippocratic Oath the newly minted physician swears by Apollo). She/he no longer feels it possible to practice employing a personal, creative approach to patient care. Today the healer receives her/his practice mandate from a society, a culture. The mandate may come from an employer, a politically active patient organization (like the National Alliance on Mental Illness), a professional association such as the American Psychiatric Association, which published practice guidelines, or a governing entity, such as a state department of health, exercising its authority. The doctor even has a new name determined by legislation and societal influence: provider.

However, while today’s doctor does not operate with personal agency derived from a theological force, as a more active member of a culture the doctor has many opportunities to be a societal advocate for health. In many cases a society will expect the physician to be a politically and socially active advocate, and a leader in the community. Such leadership and advocacy offers the informed physician many opportunities to shape the healthcare system.
To assume that advocacy and leadership role the physician must have an appreciation of the many dimensions of the healthcare system, and a broad understanding of the many components of health maintenance. She/he must have a strong education in the social sciences and the humanities. She/he must know a great deal more than the details of her/his area of specialty practice. It is clear that preparation for such activity must begin in undergraduate school, because course selection in college is necessary to impart to the future physician what she/he needs to know. It is also a fact that once in medical school there’s simply not enough space in the curriculum to allow the student to learn what is necessary as regards the social sciences and humanities.

The author has developed a course for freshmen pre-medical students at The University of Texas at Austin. It is designed to influence them to think and learn about the many dimensions of healthcare, from the very start of their higher education. It focuses on the influence, the reach of America's physicians: their potential for enhancing attention to many previously ignored aspects of healthcare, such as the built environment, gender/racial/economic equality, good nutrition, control of violence, and the ethical vision of healthcare as a human right.

In this presentation the author will describe the School of Undergraduate Studies Freshman Signature Course, The Doctor-Patient Relationship, he taught this past semester at The University of Texas at Austin. He will describe the overwhelmingly enthusiastic response to this course, offering detailed assessments of the course by students. He will discuss several specific areas of study included in the course: the work of the physician Paul Farmer, who suggests that doctors can use their role as healers to influence human rights practices (Pathologies of Power: Rethinking Health and Human Rights, American Journal of Public Health, Vol. 89, 1999), the work of the physician Didier Fassin, who uses his medical background and knowledge to call attention to the way lives can be valued differently during times of violence (Humanitarianism As a Politics of Life, Public Culture, Vol. 19, 2007), and the work of the journalist and film director Shlomi Eldar, who offers the viewer a portrait of a physician who in the midst of war stands against the use of force that does not respect the basic human right of a healthy life (Precious Life, a film by Shlomi Eldar, 2010). He will discuss the way the contributions of C.P. Snow were studied (The Two Cultures
and The Scientific Revolution, Cambridge University Press, 1961), along with the contributions of Lawrence Weed (Physicians of the Future, New England Journal of Medicine, Vol. 304, 1981): when taken together Snow and Weed advise of the need for a blending of science and the humanities in creating doctors of the future, who have the vision and motivation to lead in creating a healthy world population. He will describe the way nutrition is in focus when the class studies the work of Raj Patel (Cook, Eat, Man, Woman, The Journal of Peasant Studies, Vol. 42). Study of the built environment will be described, focusing on a unit when the class met with Peter Mullan, the Chief Executive Officer of the Waller Creek Conservancy.

Finally, the author will discuss the slippery slope in today’s medical culture, where the relationship between doctor and patient can be ignored when the focus is on the number of patients seen on a given day. While waste in the system must be eliminated, there is a danger that the relationship will be ignored, like the proverbial baby that goes down the drain with the bath water. One purpose of the Signature Course is to encourage the physicians of the future to advocate for and create good relationships with patients.