Professional autonomy and the governance of health care. Perspectives from social science

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Aims

• Present thoughts about how social science can contribute to this research field
• Briefly discuss relevant social science theory and research
  – Can Karl Marx and Adam Smith explain why doctors get sick?
  – Can theories of professions be of any help?
  – How about economic theory?
• Give a brief overview of LEFOs research topics
• Present myself and my research relevant for today’s topic
LEFO research

• Studies of medical doctor’s health and behavior
  – Working hours, self related health, stress management, life style, professional challenges, tensions in their roles, how to meet social and ethical challenges
  – Relations between organization of health care systems and doctors’ behavior, health and professional content

• Data
  – Representative panel of 1800 Norwegian MDs established in 1993, biannually surveyed

• www.legforsk.org
My research

• Sociological perspectives, influenced by economics, and social and moral philosophy

• Topics
  – Descriptive and normative analysis of how health care in general and doctors in particular meet the challenges of scarce resources (priority setting) and social inequalities in health
  – Doctors’ roles: How do doctors’ conceptions of good medical work commensurate with how the system works (tensions – professional content - health)
  – Descriptive and normative analysis of health care systems and policy
Individual and social

• Majority of research on doctors’ work and health concentrates on individual experiences and individually directed interventions

• The doctor’s role
  – Is performed in an intersection between individual, professional, and societal factors influencing how the role can be played
  – Studies of doctors’ health and professional content should reflect this
Different disciplines – different perspectives
Principal-agent theory

• Principal - agent relationship
  – One part (the principal) contracts with another (the agent) to perform some tasks on behalf of the principal
  – Patient (principal) - doctor (agent)
  – Car owner (principal) – garage mechanic (agent)
  – Government (principal) – professional (agent)
Characteristics of the relation

- Asymmetric information
  - Agent possesses more knowledge of what is going on than principal
  - Agent will exploit this position to maximize interests which can be contrary to principal’s interests

- Theory of distribution of power
  - Agent may possess more power than the principal
Autonomy and control

• Professions in the welfare state are expected to apply general rules to individual cases
  – Discretionary judgments requires some degree of professional autonomy
• Restrictions of autonomy is required if professionals act contrary to principal’s interest (societal)
• What is the right balance between autonomy and control?
• How does a good control system look like?
Freidson, Abbott, Light

• Eliot Freidson
  – Changing perspectives from more to less restriction of professional autonomy
  – NPM (?) works counter to good medical care

• Andrew Abbott
  – Professions establishes jurisdictions (areas of control) based on social legitimacy
  – If legitimacy decreases, other professions can take over (managers?)

• Donald Light
  – Countervailing powers – between professions, managers, government (principal and agents?)
Alienated professionals?

• McKinlay and Marceau (2011)
  – Claim doctors are increasingly discontent (in most Western health care systems)
  – Doctors professional discontent is result of how modern health care systems work
  – Increasing restrictions on professional autonomy, involving less control over work, estrangement from the production

• Suggest Marx’ alienation concept as theoretical approach
Concluding remarks

• Balancing autonomy and control
  – Society has legitimate need (and responsibility) to regulate and control professionals
  – How the control system is shaped is crucial (promotes good health care?)

• Different research traditions and different conceptions of doctors
  – Inconsistent?

• Are McKinlay and Marceau right?
  – Empirical evidence
  – Question of balance?
Conference Oslo, June 2-3, 2014

The magnitude of physician content/discontent – similarities and differences between countries and health systems

What are the root-causes of professional content/discontent?

Consequences for quality of care

Institutional, financial, and organizational contributors

Implications for future research

Speakers: Donald Light, Lawrence Casalino, John McKinlay, Lisa Marceau, Jay Crosson, Thomas Kontrad, Peter Angerer, and more