



המאמר הזוכה לדצמבר 2015

The Israeli Medical Association's Discourse on Health Inequity

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Background

Inequalities in health (measured by indicators such as life expectancy, infant mortality, and morbidity) are caused by the unequal distribution of power and resources. The phenomenon of health inequity (HI) is both reflected in and reproduced by the diverse ways in which various actors explain and conceptualize HI. These conceptualizations influence the choice of policies and ways of addressing the phenomenon.

HI in Israel exist since the State's first days. However, the health establishment in Israel became aware of HI and began to develop more coherent policies that address them only recently.

Since professional healthcare organizations play an important role in framing discourses on HI, it is important to understand the ways in which they themselves understand inequalities. Thus the present study analyses the ways in which the Israeli medical association (IMA), the only institutional representative body of physicians in Israel, conceptualizes HI.

Methodology

An analyses of IMA discourse on HI between 1977 and 2010 was undergone in three databases- public IMA documents (press releases, position papers, protocols) and two IMA journals - its scientific journal, "HaRefuah" [Medicine], and "Zman HaRefuah" [Annals of Medicine], a non-peer-reviewed publication which addresses professional issues. The research included a quantitative assessment of references to HI in order to assess their salience vis-a-vis other topics, and a qualitative analysis of the discourse contents and characteristics.

The search for relevant articles from "HaRefuah" was completed via the "Pubmed Medical online database", using fifteen "Mesh Terms". The search for relevant materials in the two other databases was carried out by a systematic review of all items in the years specified. Critical Discourse Analysis was used to describe, understand, and analyze the various discourses on HI.

Quantitative analysis results

Latecomer and Marginal Discourse:

Among the 11,063 Scientific articles published in "HaRefuah" between 1977 – 2010, only a negligible percentage explicitly address HI (197). In "Zman Harefuah" HI are addressed as the main topic of the paper only 8 times. With regards to public IMA documents, only one booklet directly addresses the issue, as well as five surveys and four additional documents.

In other words, among thousands of texts published by the IMA from 1977 to 2010, only a very small number of items explicitly address HI.

Qualitative analysis results

Dominant discourses alongside alternative discourses "competing" over the conceptualization of health inequality, were detected in the texts.

Dominant Biomedical and Behavioral Discourses: Although the texts refer to the role played by the various social determinants of health while explaining inequalities and discussing possible solutions, they focus on the healthcare system (mainly stressing inequality in the spreading and utilization of health services), the role of medicine, and the physician. They are also characterized by a predominant use of medical terminology and images. Few articles point to the presence of alternative materialist and eco-social discourses. Among these are texts that address issues related to the structure of the health system, its funding, and the relationship between the health system and the educational or welfare systems.

Emphasis on certain axes of HI: two main axes are emphasized in the texts: geographic inequality between the center vs. the periphery and material variables that influence health and access to health services, such as poverty and out-of-pocket expenditures on health services and medication. Theses axes are usually characterized as individual differences in socio-economic status and place of residence as opposed to the structural causes of individual differences in socio-economic status or to the wider political structures (discrimination, exclusion of minority groups, structure of the labor market). The ethno-national dimension, a critical component of Israeli society, is de-emphasized.

Images stressing access to medication and poverty, published in the IMA's main booklet on HI

