

# **A new political economy of equity in health and health care**

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# Problems with the existing economic paradigms

- Based on individual values
- Consequentialist
- Health care focus dominates
- Assume common constructs of health
- Do not allow for cultural relativity
- Do not link cultural systems to economics systems

# Underlying Problems

- Neo liberalism
- The increasing hegemony of neo liberalism
- The 'TINA' perception

# Neo liberalism

- Poverty

- Inequality

- Distribution of power

# Social determinants of health

- Too often ignored in economic analysis of equity
- Destruction of local cultures major determinant of ill-health
- Preservation of diversity of cultures essential
- Need to recognise links between cultures and economic systems

# WHO's Global Elitism

The 2000 World Health Report from WHO argued for health care systems to be judged on the basis of a common set of factors including

- *a common definition of health;*
- *a common definition of equity; and*
- *a common weighting of the importance of equity.*

No recognition of cultural diversity on any of these issues

**WHO NONSENSE ON STILTS**

# The Way Ahead for Equity

- Communitarianism and communitarian claims
- Oppose neo liberalism
- Seek to maintain diversity of cultures
- Do so by maintaining and fostering diversity of economic systems

# Communitarianism

- Place value system underlying equity into the hands of the community *qua* community rather than individuals
- Adopt a communitarian stance where community values count and where community per se is valued.

# Communitarian claims

- Such **claims** first recognise that a duty is owed by the community to the disadvantaged and vulnerable and second that the carrying out of this duty is not just instrumental but is good in itself.
- Thus the community recognises and values the empowerment involved in establishing **claims** and in determining the strengths of **claims**.

# Communitarian Claims and Social and Cultural Institutions

- This new paradigm requires that questions of culture and cultural values come into play as well as diversity of cultures and diverse definitions and constructs of health across different cultures.

# Diversity of Cultures and Diversity of Economic Systems

- Need to recognise that preserving culture promotes health
- Preserving cultural diversity world wide needs diversity of economic systems
- See e.g. Cuba, Kerela and Scandinavia

# Equity, Communitarian Claims and Indigenous Health

- Health is a cultural phenomenon. Trying to base equity policies on some common construct of health will fail.
- In Australian Aboriginal health, Australian society to determine what constitute claims by different groups in society (such as Aboriginal people). E.g. land dispossession, racism, etc. Also determine what weights to attach to different claims and in turn what resources to allocate to improving Aboriginal health.
- Aboriginal people then decide how best to use these resources for the health of their people.