The Medical Profession. A Construction of the Professional Ideology

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Objectives: Describe the ideological components in the educational process of medical professionals and their practice.

Methodology: Descriptive analytical.

Results: The author begins by introducing the predominant general reference in the studies of ideology of the medical professional. This reference is fixed on four aspects of professional medical practice: status, social prestige, university training and professional autonomy. He then outlines six characteristics of the new ideology of the medical professional:

1) The symbolic construction of the profession is defined by the physician-patient relationship, the specific practice and the dominant values of society.
2) The formation of the practice is individual and liberal, however in some societies, medical care and vocational training are subordinated to the model originated at the Welfare State, which offers significant variations: practical training is obtained in hospitals and professional identity and sense of responsibility is transmitted primarily by the faculty.
3) Liberalism is opposed to the arbitrary, authoritarian and anything that limits the individual, but the author notes that liberal medicine is not the only form of professional practice, as some medical practitioners in Latin America practice as much in the public sphere as in the private ones.
4) The medical professional develops its practice through preventive measures and treatments, both in individuals and in groups, but the practice developed in any state agency is being challenged as costly, inefficient and with technical limitations, while the liberal exercise is seen as an autonomous initiative, which deals with overcrowding, segmented attention and dependency of care professionals, although not with the high cost of its service.
5) The hegemony of the medical profession is determined by four historical events: a) recognition and prestige of the profession by the ruling groups since the Middle Ages; b) the definition of its scope and mastery in relation to other health professions; c) the definition of medical knowledge as an art of healing, and d) the segmentation of its practice in specialties.
6) The conflict between the institutional, the private and the public arises from the provision of services throughout the state to the labor force, which began in the time of European industrialization. This medical practice, although individualized, is regulated and paid for by the state, in a professional environment where doctors claim the private initiative before the state reorganization.

Conclusions: The author concludes that the concept of liberal medical practice is based on specialized care, the segmentation of knowledge and loss of the integral vision of the patient. Liberal medicine confronts and contradicts the collective nature of the organization of contemporary professional work in the field of health. Training and practice of medicine are determined by a professional liberal ideology linked to historical processes that have given them its specific form. The current processes demand a redefinition of this concept and practice.