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Sociological Association

## **Private health insurance and ‘the good citizen’**

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People are increasingly expected to make choices between public and private healthcare services in many Western countries. Some respond to this by purchasing private health insurance, and others rely on the public system, which is increasingly privatised. However the capacity to choose between services is assumed, rather than problematised in the policy and health services’ sectors. In this paper, we report on a study of the way people navigate the healthcare system in Australia, examining how choices are structured, perceived and enacted. Bourdieu’s concepts of capital, habitus and field, enable a robust account of the dynamics shaping the actions of individuals as they encounter the healthcare maze. Drawing on qualitative interviews with 78 participants we report on the choices they value and choices they make. We find that the choice to use private services is highly valued by some segments of the community – private services are extensively privileged, even among participants who speak positively of their experiences of public and bulk-billing services. We argue that many choices in accessing healthcare are swayed by the perceived symbolic capital associated with the ‘good choice.’ These choices are often based on the enactment of the ‘good citizen’ or ‘good healthcare consumer.’