INTRODUCTION

In Canada, the rise of Conservative governments seems to have coincided with a decline in the number of political scientists analysing health care policy. There never were very many political scientists who published in the health policy field, despite its size and importance, but now there are even fewer. Far more attention is accorded the field these days by economists and sociologists. In fact most of the political scientists in Canada left in the field are members of the Canadian Health Economics Research Association (CHERA). It may be for this reason that the difference between the rhetoric and the reality of the recent wave of Conservative governments has not been clearly delineated.

The few political scientists who still concern themselves with matters of health policy in Canada seem to have lost much of their separate identity and have concentrated their efforts on a small set of largely economic issues such as physicians extra-billing. This has been partially a reflection of the relative rise in influence of health economics, but it is also a reflection of a seemingly persistent inability to fully break with political science’s traditional focus on pressure group type analyses of the health field, namely the concentration on the major group actors in the policy field, such as physicians. Perhaps this is political science’s equivalent of the problem health economists are perceived to have, that is a focus on a small set of issues and especially upon micro-economic appraisals. This concentration on the small scale is one reason that the larger issues seem not to be analysed to any great extent.

Furthermore, preoccupation with the micro curiously mirrors the shift in the scene of the action in health policy from the macro, the
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federal or national level, to the micro, or the provincial and territorial level. The steady Balkanisation of the health care system in Canada has led to the realisation that Canada has many different health care systems, and that little is known about the dynamics of health policy within each. The focus in the past has been upon the interactions between the federal government and the provinces on health policy matters. This shift to the provincial sphere is an invitation for political analyses in health to also become Balkanised and micro rather than macro in scope. This is perhaps especially the case as provincial politics is not itself a major area of concentration in Canadian political science and much preparatory groundwork has yet to be undertaken. The analysis of provincial political patterns and policies is often regarded as somewhat parochial and therefore of lesser value and interest, and this may also explain why some political scientists have moved away from the health care field entirely.

Another reason why the gap between the rhetoric and the reality of recent Conservative governments in Canada has not been much commented upon by political scientists in Canada is that there seems to have been a trend to a return to an avoidance of values or value-laden issues. Whether this is anything inherent in political science in Canada or merely a reflection of the strong influence of health economics on political scientists is difficult to detect. Whatever the reason it is a disturbing trend to have developed just when policy actors in health care are engaged in conflict over the future direction of health care policy. This debate reflects considerable differences in basic values towards health and health care delivery. Political scientists and, to a lesser degree, health economists are not contributing a great deal that is useful to the debate, and the centre of new thinking seems to be shifting out of academia and into the governmental, bureaucratic and pressure group arena, that is to those who are directly engaged.

Another part of the reason why the rhetoric–reality gap among recent Conservative governments in Canada has not been the subject of much attention on the part of academic political scientists, is the consensus of point of view or values that seems to exist among them on the macro issues. There are a few who want to see ‘market forces’ have a greater influence, but in Canada that greater influence is advocated very much on the margins of the existing system, and normally not in such a way to threaten the basic structure. There are virtually none who advocate more than marginal changes in the direction of greater public influence, although there are many who