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Health and culture: National and individual drivers of preference for professional medical help

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characteristics across Europe on individual healthcare preferences related to non-acute medical conditions.

Methods:

Data from 17,710 individuals from 16 European countries were analysed using a multi-level approach, simultaneously including individual- and country level predictors.

Results:

Healthcare preferences were explained by both human values (Conservation $\gamma=0.097$, $p < .01$, Self Enhancement $\gamma=0.038$, $p < .05$) and trust in the doctor ($\gamma 0.054$, $p < .01$). Socio-demographics played a minor role. Societal tightness-looseness (TL) strongly predicted healthcare use preferences on the country level ($\gamma 0.109$, $p < .05$). Also TL enhanced the relation between conservation and preference ($\gamma 0.024$, $p < .05$), and decreased the relation between self-enhancement and preference ($\gamma -0.021$, $p < .01$).

Conclusions:

Our results suggest that healthcare behavior is related to people's motivations and the extent to which the society they live in is more tight or loose. Stronger conservation values increase preference for professional medical care, while self-transcendence- and openness-to-change values decrease preference. Societal tightness is positively related to preference on the country level. Furthermore, in tight societies the effect of conservation is enhanced and the effect of self enhancement is suppressed, related to an additional higher preference for professional medical help. Our results may help key actors within the health system to predict and channel healthcare choice behavior across and within nations.

Key messages:

- Culture plays an important role in developing a preference for medical help, on both individual as well as country level.
- Personal values as well as cultural tightness looseness are fruitful tools for the analysis of national and international health care research.

Health and culture: National and individual drivers of preference for professional medical help

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Background:

Preferences for professional medical healthcare in case of non-acute medical situations influence a major amount of healthcare use, and vary strongly across countries. Personal values and country culture have been shown to be important predictors of human preferences in many areas. We therefore investigated the impact of both individual and country-level