

Negotiating Identity Orders of Health Professionals and Patients in Discourse on the Transformation of (E-)Health System

In order to raise the healthcare system to a digital standard, the German government established 2021 a national health-app, the „electronic patient file“ (ePA). In this app patients as record keepers are given an active role in the production and feeding information into the newly established digital infrastructure. This new role of the patient opens up a large field of discussion, conflict and negotiations around usability of health data, which will be the topic of the suggested paper.

It emerges from research in the D-WISE project (BMBF funded), which combines manual and digital methods of discourse analysis to work out how and when structural analytics can be integrated into qualitative discourse-analytical knowledge production. The interdisciplinary project co-creates a prototypical working environment for digital discourse analysis (D-WISE Tool Suite).

Following the Sociology of Knowledge Approach of Discourse (Keller 2011) the present study is a manual discourse analysis and investigates discursive negotiations strategies, actor-positionings and knowledge bases in context of the social construction of data protection issues within the digitization of healthcare.

A multimodal corpus is iteratively sampled of 60 online materials (social media, news, press releases) and elaborated by the grounded theory as a hermeneutic methodology and different visualization strategies (mapping, timeline).

New practices and role expectations for healthcare actors are demanded by the ePA – old structures and treatment identities are thus in the negotiation process of a new order. The analysis shows narrations and patterns of interpretation in context of role-identities from patients and health professionals. Discursive patterns of interpretation from health data as a “data treasure” (Datenschatz) in contrast to “highly sensitive personal data” can be identified, giving an insight into the ambivalences of interpretation patterns, which discursively create conflicts of patients identity: Between personal health and public health issues and between patient protection and the economic value of health data. For medical staff, the ePA requires a translation of their working practices into digital data. The narrative of the “transparent doctor” (Gläserner Arzt), appears in the discourse as a critique of role transformation and forms a manifestation of the identity conflict.

Keller, Reiner (2011): SKAD: 43–65 <https://doi.org/10.1007/s10746-011-9175-z>.

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