

# The fight for the right to health: Global Capitalism's crisis and accelerated expropriation

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During the first week of November 2012, the Uruguayan cities of Piriapolis and Montevideo hosted three – joint – Congresses: the XII Latin American Congress of Social Medicine and Collective Health, the XVIII International Congress of Health Policy, and VI Congress of the American Network of Local Health Activists (*La Red Américas*). This combined event brought together some 700 people from 27 countries.

The three sponsoring organizations – the Latin American Social Medicine Association (ALAMES), the International Association of Health Policy (IAHP), and *La Red Américas* – bring together an important part of the critical health movement known as Social Medicine or Collective Health, a movement that is especially active in Europe and Latin America. The meeting brought together a diverse group, which included academics, researchers, students, health system managers, policy makers, and representatives of social movements. What united these groups was a progressive approach to health based on an analysis that took into account society, politics, culture, and environment.

The session investing ALAMES's new governing council noted that:

*One hundred sixty years ago the term Social Medicine gave voice to demands for social reform and became the standard calling on health professionals and the general population to confront a mode of production that had created*

*massive population displacement, chaotic urbanization, inequality, violence, child labor, and preventable disease and death at levels never before seen.*

Note was made during the Inaugural Ceremony that a central concern of the Congress would be a critique of the capitalist social model, based on a productive system increasingly relying on outright expropriation and exploitation. The result has been that millions of humans are excluded from the benefits of society and condemned to a life of – totally preventable – hardship, illness, and early death.

The inaugural address (the [Juan Cesar Garcia\\* memorial lecture](#)) was delivered by Professor Jaime Breilh, an Ecuadorean epidemiologist, who denounced that:

*The early years of the 21st century have brought us a shocking deterioration of living conditions under Capitalism. Global Capitalism has given us ways of producing, of trading, of consuming, of learning, of interacting with nature, of communicating, and of making culture that are the exact opposite of what we need to promote the welfare of mankind and protect life on Earth. We now have a society organized by the greed of big business and governed by an economy based on death.*

Atilio Boron, Argentinean politician and Professor at the University of Buenos Aires, discussed "[The new general crisis of capitalism and anti-capitalist struggles in Latin America and the developed world.](#)" He suggested that the current crisis was not simply an economic one. Rather, it was the

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\* Named in honor of Juan Cesar Garcia, an Argentinian physician and sociologist, who was one of the pioneers of Latin American Social Medicine.

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crisis of an entire civilization, which had become unsustainable. Multiple individual crises in different sectors were now converging: finance, production, energy, nutrition, water, and ecology. We are witnessing the destruction of the social fabric and the forces of social integration.

One of the most obvious effects of neo-liberal health policies is the destruction of social security protection as universal public health systems are dismantled. Various speakers, including [Asa Cristina Laurell](#), a Mexican physician and former Secretary of Health for Mexico City, discussed this topic. Dr. Laurell cautioned us to be skeptical of current efforts by the UN to limit social insurance to a bare minimum. The concept of “basic universalism” in health (i.e., universal coverage with health insurance) is a distortion of the concept of universalism. Rather than adopting the principle that all people should have access to necessary services, current proposals call for limiting coverage to a “basic” package of health services and social protection. The result is a two-tiered system: a private market for those who can pay and a public system for those who cannot.

Dr. Laurell also pointed to the contra-hegemonic experiences that had been developed in Latin America. These defended health as a right and a public good:

*The struggle for the universal right to health and the strengthening and expansion of public health institutions to guarantee it are foundational and irrevocable principles of Social Medicine and Public Health. Our history is full of experiences, some successful, others less so. These experiences are our heritage and legacy and a rich source for reflection.*

Some of these experiences included the creation of the Bolivian health system (discussed by [Nila Heredia](#), Bolivian physician, former Bolivian Minister of Health, and General Coordinator of ALAMES), and the local management of health systems in Brazil (discussed by [Antonio Carlos Nardi](#), President of the National Council of Municipal Health Secretaries - CONASEMS). Latin Americans and Africans have now become specialists in resisting the implacable demands of neo-liberal

policies. And now these same policies have brought millions of Europeans out on the streets to protest. Transnational corporations consider the current welfare state to be ideologically incompatible with their goals and they sense that now is the time to destroy it. We would encourage our European brothers and sisters by noting that half of the current Latin American governments came to power as a result of popular opposition to expropriation, oppression, and injustice.

A number of researchers presented papers on the current status of health in Colombia. Using the lens of social medicine, they highlighted new ways of promoting collective action and of involving social movements in the fight against privatization and for the right to health.<sup>†</sup>

A number of Colombians also participated in the plenary panels. [Saúl Franco](#), physician, spokesperson for the National Alliance for a New Health System, and ALAMES member, took stock of the ethical and political lessons that could be drawn from over 20 years of struggle over health in Colombia. He argued that health should be a central part of the ongoing Colombian peace process. [Mario Hernández](#), physician and ALAMES member, reviewed health reforms in Brazil, Mexico, and Colombia. He argued that the current capitalist crisis potentially offers opportunities for progressive change. The outcome would depend upon our ability to offer a political criticism of existing social models, to better understand the dynamics of contemporary political economics, to rebuild a praxis connecting the state and the people, to combine multiple struggles in a new social project, to emphasize human development, and to collaborate in organized networks.

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<sup>†</sup> Some of these talks include: Política de salud y luchas sociales por la salud en Colombia, en el contexto de la reforma a la salud 1994-2010 (Echeverry E); Lucha por la salud en Colombia, el caso del Movimiento Nacional por la Salud (Borrero Y); Luchas sindicales por la salud en Colombia (Gallego W); Perfil de la acción colectiva en salud motivada por la crisis hospitalaria en Colombia 1994-2010 (Morales D); Acción colectiva por el derecho a la salud en Colombia, el caso de Bogotá 1994-2010 (Torres-Tovar M).

The student participants in the Congress provided us with a fresh and lucid voice in their emotionally rich [declaration](#):

*We are the sons and daughters of the struggles and experience of Latin American Social Medicine and Collective Health. Through this heritage, we have found practical lessons to guide our organizational and theoretical debates in the Student Movement. We have seen how the current developmental model leads only to a fragmented and individualistic society, not a worthy life “well lived.”*

Many of the discussions during the Congress highlighted the need for a renewal of anti-capitalist analysis. Health is socially determined by the prevailing modes of production and economic development. To overcome capitalism means developing a new type of civilization where life is focused more on solidarity and equilibrium with nature than on spoiling the earth, consumption, theft, and individualism.

To foster this project, the Congress called on the institutions of social medicine and collective health to work more closely with social movements. Networks like ALAMES and IAHP should be placed at the service of social and popular movements in order to deepen their struggles for health and social transformation. One example of this came in a proposal made by ALAMES’s Health and Work Interest Group. They suggested preparing a continent-wide report on the effects of agrottoxins on the environment, health, and food sovereignty. This report

would be used by the popular movement Via Campesina in their campaign [Los Agrotóxicos Matan](#) (Agrotoxins Kill).

Particularly notable among the experiences of popular mobilization was the creation of “[public laboratories](#)” in Brazil to promote universalist policies. This was discussed by Dr. Armando De Negri, a Brazilian physician and ALAMES member. These laboratories were designed to generate a “knowledge network” that opposes hegemonic processes with educational activities (not necessarily academic) and locally relevant policy proposals.

Finally, ALAMES agreed on a strategic vision to guide its activities for the period 2013-2015:

1. Strengthen the knowledge base for anti-hegemonic actions;
2. Construct and reinforce universal public health systems and social security within the framework of a new model of living and of the State;
3. Build a new relationship between humanity and nature that excludes predation and plunder;
4. Develop a profound change in popular and academic training with respect to health;
5. Recover traditional knowledge and develop an intercultural approach to health;
6. Develop strategic interaction with social and political movements;
7. Systematically denounce the denial and degradation of human rights; and
8. Strengthening the organization and management of the Association.

