Spanish State

Privatization of health and resistance in Catalonia

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Catalonia is one of the first autonomous communities to have implemented austerity policies in the domain of health: closure of hospitals, operating rooms, emergency services, night care, some health centres, payment of one euro per prescription and privatization of certain health services, among many other attacks.

To understand the situation that we have at the end of 2012, we have to remember where we are coming from. Health policy, conducted over the years in Catalonia by Convergence and Union (CiU), with the complicity of the Socialist Party, was clearly a mixed public-private model of health services. This “social convergence” put in place the foundations of various kinds of relationship of public health with private centres, mutual health societies and other enterprises, not very transparent and already having problems with the law. All kinds of affairs and ruses have been uncovered by some sectors of the media and are waiting to be examined by the commission of inquiry set up by Parliament, which, unfortunately, has been suspended following on the Catalan elections of November 25, 2012, but which, if nothing prevents it, should resume its work.

Without denying the clearly negative aspects of this mixed system and the inequalities in the territorial distribution of the budget, which does not correspond to health inequalities, there is general agreement that universal free access to most of the services, as well as programmes for the most vulnerable groups, with special needs, helped not to aggravate inequalities related to health and even to reduce them, over the years of their operation.

The population as a whole (including those who have a complementary insurance) has always recognized, in different surveys, that the public system is best in all aspects of clinical care and that it is surpassed by the private health care system only as regards aspects such as comfort and the waiting time for non-urgent care.

Dismantling of the system of public health

Over recent years, the CiU has quite obviously advanced towards the privatization of health care, and without denying the role of Marina Geli, the socialist former councillor of the tripartite government of the lefts (we should remember her insistence on the implementation of the policy of the patients paying a share, when she was in government), there is a before and an after in the dismantling of the system of public health policies after the elections of November 2010 in Catalonia.

As we know, the health councillor, Boi Ruiz, was president of the Unió Catalana de Hospitales (Catalan Hospital Union, UCH), which includes private subcontractors and other private health care establishments which manage public services. During his tenure he openly favoured the private model at the expense of the erosion of the public system. His performances are already well known in the Catalan population and his prestige has collapsed lately.

Without wishing to make a comprehensive examination, let us quote some of his performances: the opening of the operating rooms of public hospitals in the evening for the benefit of private mutual societies has become a practice in some hospitals. One of the hospitals where this is done, well known because a few months ago the Spanish monarch underwent surgery there, is the Hospital Clinic of Barcelona, in which Barna Clinic, the very expensive private group, operates in the evening. Another similar case is that of the hospital in Terrassa. And also the Hospital of Sant Pau, which is currently in the news because of the struggle of its workers, because today it has been closed for more than a week already. In this hospital, since April 2011, 84 beds remain closed, with all that this entails in terms of
saturation of the emergency services, premature discharges of patients, lengthening of waiting lists. In addition, there have been significant cuts to the budget of the hospital pharmacy, of prostheses and catheters, cuts in radiotherapy, radiology, nuclear medicine and hemodynamics, and the closure of operating theatres in the afternoons, which represents a reduction of about 713 surgical operations per year. But according to the workers themselves, the straw that broke the camel's back, and that led to the hospital's closure, was the announcement by the Catalan government of the reduction of the health budget for 2013. This reduction will amount to 200 million euros, which represents a reduction of health activity of the order of between 15 and 20 per cent. This brutal cut will represent a reduction of services, decreased wages and possible redundancies in health enterprises that have agreements with the government.

Another recent affair “a clear support for the private sector and for the search for profits” was the concession for ten years to the private group Eulen of the management of the Centre for Primary Health Care of the population of L'Escala and of seven medical consultations in the area. Eulen won the concession at a price of â¬2.4 million per year, an offer that was cheaper by only... â¬10,000. This was the reason for giving the concession to a group mainly specialized in security and cleanliness, which has no experience of health management, unlike the entity which was previously in charge: the Fundación Salut Empordà of the Hospital of Figueres, a not-for-profit foundation that was appreciated by the population. The Mayor of L'Escala considered this outcome as "bad news not only for L'Escala, but for health in Catalonia as a whole" and said he would be appealing.

These cases, as well as many others which cannot be dealt with for lack of space, correspond to an understanding of health by the regional minister as "a private sphere which depends on you, and not the state, because it depends on the genetic code, on your family history and on your habits", according to statements made on 25 October 2011 by Boi Ruiz. Certain statements which have been contested by Amnesty International run counter to the 2008 report of the Commission on Social Determinants of the World Health Organization itself, which considers that the toxic accumulation of unjust and avoidable social factors - such as economic inequality, precariousness of employment, pollution of the environment, food insecurity, lack of adequate housing or lack of participation and democracy - damage health and create injustice. The Commission considers that these determinants and others, such as pensions, the level of education, inequalities between men and women (in particular the work of reproduction and violence against women) and social and political participation are "the causes of the causes" of health and of its inequalities.

Struggles of opposition and of resistance

The struggle of the workers of the Hospital de Sant Pau followed on from the other battles that have taken place in the Catalan health sector over the last few months against budget cuts and dismantling of services. There have been struggles of the hospital staff, as in the Hospital Vall d'Hebron, the Bellvitge University Hospital and the Hospital Dos de Maig, all in Barcelona, but also the struggles of users and patients in the Primary Care Centres (CAP), such as that of the residents of the neighbouring working-class district of Bellvitge, who occupied their CAP for weeks to defend public health care and to avoid its closure.

Another action is underway, to try to stop the looting of the public health system for the benefit of the patrons and friends of Councillor Ruiz Boi. On November 19, 2012 the PARS, the League of the Chronic Fatigue Syndrome, Acordem ATTAC, ATTAC Catalunya, IAC - CATA-CTS-IAC and Dempus per la Salud PÀblica filed a complaint against Boi Ruiz and his government team before the Supreme Court of Justice of Catalonia. The plaintiffs consider that the articles of the Penal Code that refer to the prevention of the exercise of civil rights (art. 542), non-assistance to persons in danger (art. 196), trafficking in influence (article 428) and in negotiations and activities prohibited to civil servants (art. 441) have been violated. They consider that the right to health, one of the basic pillars of the Welfare State, has not been respected.
Recently, the review *Café amb llie* once again discovered in the town of Mataró a case where significant medical expenses of the Generalitat (the Catalan government), also negotiated with the private sector, were granted to companies in an unlawful manner. And this is not the first case. One of the best known has been exposed by the CUP[2] of Reus, which unveiled all the affairs of the president of the Institut Català de la Salut, Josep Prat, who is considered to be the key figure in the privatization process in Catalonia. It is difficult to understand how Prat can be part of the Spanish subsidiary of the multinational United Surgical Partners, of the big Onnova group which dominates Reus, and at the same time be the principal manager of the Catalan health service. This case is now before the courts.

These struggles, and others for the defence of Catalan public health, are a good example of resistance, but that is still not sufficient to stop the offensive by the employers and the neoliberal Right that governs Catalonia, whose aim is to appropriate public health.

So we have to build the convergence of the struggles of all sectors of health and of citizens in general, all those who are affected by the budget cuts of 2013 and the process of privatization of a public health system that, until quite recently, was one of the best in the world.

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[1] Working paper prepared in December 2011 by some professional health workers and other citizens belonging the organizations *Dempeus per la salut*, *Forum Catala d'atencio primaria*, *Associacio catalana de defensa de la sanitat publica*, *Grup de recerca en desigualtats en salut UPF*, *Fundacio Congres Catala de salut mental*.