

# **24<sup>th</sup> International Congress of CIRIEC**

*Napoli Italia 30 settembre - 2 ottobre 2002*

## **THE ROLE OF THE SOCIAL ECONOMY IN HEALTH INSURANCE AND THE LOSS OF SOCIAL PROTECTION**

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***Workshop 3 – Health, Assistance and Social Security***

## **INTRODUCTION**

In the field of contemplated social assistance, that as an Individual right and a universal duty should be foreseen by the legislation of every well organised country in the World, the prevention and care of health should occupy one of the leading places in the scale of social values.

In the contemporary economic and social activities, between the public and the private sectors of the nations, we can now find a marvellous participative movement, which, without looking for profit and under different designations, has become known as The Third Sector. Even though the shape and structure adopted by these entities, and their legal regulation vary from one country to another, it is precisely these cooperatives, mutuals, associations and foundations the ones that can balance and give a social meaning to the disrupting strength of the trade globalisation that especially in the field of social care, demands the validity of a cooperative attitude from all social segments.

As many factors encourage the progress of the insertion of socially-oriented-economies in the frame of the more ambitious projects in developed countries, it becomes absolutely necessary for the developing ones to double their efforts in the legislative and educational fields, to make sure that these organisations become truly established in the area of the more vital services.

## **THE VALUE OF PRINCIPLES**

Among these factors, the support of solidarity and responsibility as leading principles to work with unselfish selfmanagement methods, independently of the public authorities, must be understood as a top priority value when trying to satisfy the needs of social protection which, in many cases, cannot be properly covered by the public health care systems.

Open and voluntary adherence to these initiatives together with the democratic control exercised by the interested parties themselves, are elements of vital importance when administering sanitary resources, which are always scarce in the face of the growing and uncovered needs for health and welfare.

In the protection of independent workers, fraternities and mutuals have had a long history of active participation. With different degrees of flexibility, these self-managed organisations have provided not only social coverage, but also remarkable examples of efficient administration and a fair distribution of services.

Referring to the subordinate workers, whom were initially relatively protected by their own autonomous solidarity initiatives, as States broadened its role, they were later incorporated to compulsory public health care systems. The importance and

transcendence of the already existing voluntary and solidarity organisations allowed some of them to be recognised, and to continue providing their services as alternative, subsidiary, or substitutive of the public systems. Nowadays, the example of such cases in Germany, France, Belgium, Spain and even in the United Kingdom, proves to us the importance of the role and continuity of the institutions in the health care, which preserve social peace, due to their better knowledge and understanding of the environment and the general health conditions.

## **THE HEALTH CARE ISSUE**

The developing countries face serious problems due to the fact that most of the population is deprived of an egalitarian chance to access reasonable health care, not always from the lack of sufficient funds, but from an inadequate vision of the role assigned to the health public policies. The compromise that the states should assume to secure a top conditions of physical and mental welfare and not only the lack of diseases or ailments, as defined by the World Health Organisation (W.H.O.), does not necessarily mean that to reach the above mentioned goal everything should depend only on public assistance.

The cooperative organisations of the social economy are capable of providing from the primary care of health to the most complex services, either complementing the public system or assuming delegate faculties to care for those who comply with their principles. The banning of discrimination for reasons of age, health condition or potential risk will be certainly achieved through these entities, and not through profit-oriented insurance companies, moved by other objectives.

The intervention of the public sector in the field we are considering, results to be, most frequently, neither efficient nor sufficient. In many countries, the access to the public health services is threatened by cultural, geographical, functional and economic barriers.

## **A PROPOSAL FOR MUTUALS AND COOPERATIVES**

Therefore, focusing on the cooperatives and mutuals, we must conclude that these autonomous associations of people joined voluntarily to satisfy their common needs, are the better equipped because of the principles that rule them, to carry out a self-managed system of health care with fairness and efficiency. We will not find these characteristics and principles in the public or commercial sectors.

Moreover, we must remember that financing results necessarily common to all systems, whether the income provides from taxes, public revenue, mandatory contributions, primes, or fees.

The coexistence of different security systems within the same country, mainly in the developing ones, with a multiplicity of agents and institutions, has impaired the principles of universality, solidarity and unity of management fundamental to the exercise of the universal rights to health and welfare. Surely enough, changes will have to be soon produced in this situation.

Therefore, as a consequence of what we have been saying, it would be highly desirable that this Congress considers the possibility of appointing a Work Committee made up by representatives of organisations that operate solidarity health services in order to project and enhance the actual participation of these entities, in the alternative, substitutive or complementary coverage for integral social protection.

The social economy is, without doubt, a powerful instrument in economic development. In the field of health care, their agents can encourage associative projects between organisations of similar characteristics, which might provide correction to the social distortion brought by the market economy.

This social movement should work fast to make sure that the constant social upheavals shaking the World, do not distort the basic structures and objectives of these organisations, endangering the expectations and chances of future generations.