Election and new governments: perspectives for democracy and health

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THE BRAZILIAN ELECTORAL PROCESS OF 2018 takes place under an atmosphere of extreme political tension and fragility of democratic institutions. The elections that will define the presidency of the Republic, the state governments, the federal senate, and the legislative chambers demand that the Brazilian Center for Health Studies (Cebes) once again expresses itself in defense of democracy, human rights and the universal right to health, guaranteed 30 years ago by the Federal Constitution.

In its most recent thesis, the Cebes analyzes the global context of capitalism and its tensions with democracy. The relations between contemporary capitalism and democracies have been the subject of study by several authors who converge as for the threat of the power of capital to the detriment of collective interests1.

In the Brazilian case, these tensions have been expressed since the coup of 2016, when, under the pretext of irregularities committed by the government of President Dilma, an agenda not chosen by popular vote was implemented abruptly, swiftly and with broad support from conservative sectors. The argument that the country has suffered a coup can be confirmed by at least four aspects not common at all in consolidated presidential democracies. (1) The then Vice-President makes public his disapproval of the elected president and the government of which he is a member, but does not resign; (2) his party (Movimento Democrático Brasileiro – MDB) formally withdraws from the government; (3) after the deposition of President Dilma, Temer and his party assume the government and incorporate members of the opposition defeated in the elections; and (4) begin a program that was not approved in the Dilma-Temer elections in 2014.

The program not approved in the elections was, in fact, the goal of the coup. The approval of the Constitutional Amendment, which has frozen public expenditures for 20 years, the work reform, the privatization of resources and strategic sectors, and the pension reform (which has not yet been approved but is likely to be resumed at this end of government) are measures that would hardly be supported by vote, hence the speed with which they were presented and approved.

Supporters of the coup have bet on the Temer government and the economic recovery as their main political capital for the 2018 elections. However, the promised recovery for the first few months of 2017 has never come, unemployment has risen, and political and economic instability has weakened the Brazilian position in the international scenario. Allied with that, the serious denunciations of corruption against the president (who became the most unpopular president in the history of the Republic) and against several politicians associated with the coup made this group's preferred candidacy unfeasible.

In the other political spectrum, the Workers' Party (PT) has built a strategy to denounce the coup, the unpopular government measures, and the illegal imprisonment of former President Lula, maintaining his candidacy until the last moment, in a risky maneuver, but which guaranteed the transfer of votes to his candidate by placing him in the second round. Also, in this political spectrum, are two other candidacies that analysts consider as an expression of the division of the center-left in Brazil.

The novelty in these elections, however, is the presence of a candidate linked to a small party, of the extreme right wing, with a strong preference from the voters of the middle and upper classes, who in addition to openly assuming conservative moralistic and fascist positions (which has never been common in candidacies for presidency in the Country), is associated with an ultraliberal economic agenda. That association is even more unusual; and from this point of view, perhaps Brazil is presenting a singularity in the current well-known expansion of the right wing in the world. Behind the misogynist, racist and homophobic positions of the candidate, which flood the media and the pro and against arguments in social networks, radical proposals for privatization and reduction of the state are proposed. It is the latter that can bring that candidate closer to the traditional conservative sectors that have failed to elect candidates of their own. In fact, under allegation of impeding the 'return' of the PT, the central issue is the economic agenda.

Vladimir Safatle2, in a recent lecture, points out that the actors who support the far right candidate (and who have supported the military dictatorship) are the agribusiness, the conservative churches, the conservative media, and the national business community dominated by financial capital. It is not unlikely that those actors can also co-opt democratic sectors of the national bourgeoisie and the middle classes that cultivate 'hatred for the PT', even if they refuse the candidate's moralist and retrograde agenda.

The polarization, therefore, before being pro or against the PT, is about the direction that the democracy and the project of national development will take.

The Cebes defends a non-liberal project for the Country that includes health in the development plan and breaks the existing insulation of the sector. In order to make improvements in the health conditions of the population, the transformations must go beyond the health sector stricto sensu from a broad conception of social security, involving pension, social assistance, education, food security, housing, urbanization, sanitation, environment, public security, employment and income. From this perspective, health, as a right, can be established as a basic factor for citizenship and an inherent and strategic part of the social dimension of development.

Different dimensions of the insertion of health in the national development project deserve to be highlighted. It is true that, under the economic and technological dimension, health is responsible for more than 8% of the Gross Domestic Product (GDP); and in function of it, are articulated the generation and the diffusion of advanced technologies. On the other hand, health represents a democratizing dimension of development because it aims the equity of social right. Finally, health can represent a factor of regional development since its territorial base of organization of services conditions and supports development3. This is the non-liberal, democratic project, articulated to the national development that health represents and that the Cebes defends.

Reaffirming a non-liberal agenda for health requires a set of changes in the relationship between health and economy and in their interfaces. Such an agenda should have as commitment the totality of the ethical, political and organizational principles of the Unified Health System (SUS) and the rupture with the health model adopted and implemented since the explicit neoliberal period that is limited to responding to a restricted group of problems, through the provision of services, fueling the needs of the market4.

The Cebes defends the universal right to health, not only as access to health care, but also as part of a State model and public policies that promote social justice, in which inequalities are faced through a set of rights maintained and guaranteed by the State. The SUS is part of this project and has proven effective in reducing inequalities. Because it is such an ambitious project of democratization through social rights, the SUS has been affronted and threatened since its inception and has never been treated as part of a development project.

Universal and comprehensive health are not illusions, but a choice based on documented evidence and real experiences. There is abundant evidence that public and universal systems are more effective and efficient. However, because it contributes a significant amount of resources, it makes health a constant object of dispute of economic interests. The speech is that privatization is an alternative for reducing expenses. However, countries that increased private participation did not reduce expenditure. On the contrary, they increased public expenditure, direct spending of the population and did not have a positive impact on people's living conditions and health.

The Cebes has always maintained that health is an effective right, promoting security for the entire population, without distinction. For that, it is fundamental that health is also part of economic development, with investments in research, inputs and pharmaceutical drugs to meet the demands of the population. Strengthening the institutional capacity of the State is essential for ensuring health as a right.

The fight and the mobilization for change are essential. For the new governments that will take office in January 2019, we intend to defend the right to health and the consolidation of the SUS as formulated and guided by the Federal Constitution. That they plan their spending and make investments having the population's health needs as their focus, not private or political interests. That they respect the population and incorporate their participation in local systems. That they respect health workers, without putting corporate interests in place of those of the population.

That mobilization should extend to the mobilization process of the 16th National Health Conference summoned for 2019 and which constitutes an important opportunity to include health in the national development project. Public and universal health is a viable project. To adopt it is to adopt development, democratic citizenship and to guarantee a more just future for the new generations.

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