



# European manifest opposing the commercialization of the health system

# Health professionals speak out

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The organization of a health system is a public responsibility. We, health professionals, are concerned with diagnosing, treating and preventing illnesses in our patients. We do this without discriminating on the basis of race, gender or socio-economic status. Our role would be severely restricted and handicapped if care for patients were defined by primarily economic criteria. We do not wish to withhold necessary services, nor do we want to perform services that are medically unnecessary but profitable for health care providers.

In all European countries, the resources are available to provide excellent medical services as the European Union is one of the richest regions of the world. However, we are becoming increasingly concerned that the current political climate within the EU may counter the provision of good medical care.

#### Health is not a commodity

We note an increasing trend toward privatization of the health system and care organizations, regardless whether the health system is structured by governmental or insurance funds regulations. Increasingly, the health system will be commercialized and health and illness is becoming a commodity.

#### Privatization means:

- Public hospitals and institutions are privatized
- For-profit corporations take over public hospital services and ambulatory centers
- In governmentally-organized health systems private corporations are allowed to offer and bill for services
- Profits and surpluses from health care services are generated, directed to investors and not to the benefit of the public and patients
- Medical services provided typically by public health care institutions become increasingly limited and curtailed, while the private sector gains and offer these services for extra costs to the patient.

Well reimbursed highly technical services are ever-increasing

Privatization of the health system results in the loss of the solidarity principle and greater individual risk of the patients. It also restricts democratic influence, control and participation. The ever-growing pressure of corporations to generate profits leads to subordination of medical priorities to economic concerns and undermines the patient-doctor relationship.

In order to install the principles of a market-oriented health system, the ideology of 'healthy competition' is propagated. The for-profit private sector health system and the public system are forced to compete for patients and their care. In this situation, the most efficiently-run hospital is the champion and not the best patient-care oriented hospital. It also introduces the new ideology of competition into the traditional non-for-profit health care fund systems.

The same ideology is given as a reason for commercialization: There is a cost explosion because of medical progress, the growing aging of the population and the rising expectations of the "insured lives". Because of resource limitations and financial constraints in the public sector, increased competition and privatization are the purported solutions.

However it is a fact: The more privatization ensues, the greater are access to care and quality health services dependent on private income and resources. The more privatization occurs, the more expensive the health care system becomes — even if life-expectancy and general health status of the populations does not improve (see for example USA). Furthermore, the more privatization occurs the more bureaucratic the system becomes, because only what is "documented" is paid for in a competitive system.

This is our concept of a human society: A human society is characterized by solidarity with its weakest member.

## Hospitals are no patient-factories.

The commercialism leads to unacceptable consequences for patients and health care providers. It results health care delivery surplus, the lack of health care services and misguided service and consequently in preventable suffering. In countries with high levels of privatization and

economizing of the health care sector unnecessary health care is delivered because it makes financial sense and leads to direct profits. Even new fields of health care deliveries are explored. This can go so far that illnesses are made up in order to create a profitable service need. At the same time the numbers of health care providers are reduced to save labor costs. This in turn leads to more work for fewer providers, resulting in inferior health care for patients. The commercial principle categorizes patients in lucrative and not-so lucrative patients, who receive different care. This is contrary to the principles of humanity and our professional ethical standards.

# As Health professionals, we oppose the privatization and economizing of the health care sector. We demand:

- Equal access to quality health care for all irrespective of race, gender, creed or status.
- Health care financing based on principles of solidarity and equality
- Sufficient number of adequately-trained and paid health care providers (including contractual and legal guarantees)

We petition everyone, including all patients, to support us in this effort. We demand that responsible politicians stop the growing commercialization and economization of the health care sector and move to reverse this trend.

## **Signatories (15.02.2013)**

Aktion Gsundi Gesundheitspolitik (Switzerland); Asociación Española de Neuropsiquiatría-Profesionales de Salud Mental (Spain); Basisgruppe Medizin Göttingen (Germany); Deutsche Gesellschaft für Verhaltenstherapie (DGVT) e. V. (Germany); Federación de Asociaciones para la Defensa de la Sanidad Publica (Spain); Gewerkschaft Gesundheitsberufe Hannover (GGB) in der FAU-Hannover (Germany); International Association of Health policy in Europe; Medical Practitioners' Union – Unite (Great Britain); MEZIS e.V. (Mein Essen zahl ich selbst) - Initiative unbestechlicher Ärztinnen und Ärzte (Germany); National Health Service Consultants' Association (Great Britain); Notruf113 Marburg (Germany); Ogólnopolski Związek Zawodowy Pielegniarek i Położnych - OZZ PiP (Poland); Socialist Health Association (Great Britain); Socialistiska läkare (Sweden); Solidarisch G'sund. Initiative für ein öffentliches Gesundheitswesen (Austria); Sozialmedizinisches Zentrum Graz (Austria); Thure von Uexküll-Akademie für Integrierte Medizin. Stuttgart (Deutschland); Verein demokratischer Ärztinnen und Ärzte (Germany); Vereinigung unabhängiger Ärztinnen und Ärzte (Switzerland)