

# Coronavirus, Capitalism in Crisis and the Perversity of Public Health in Bolsonaro's Brazil

International Journal of Health

Services

2021, Vol. 51(1) 18–30

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DOI: 10.1177/0020731420965137

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## Abstract

This article aims to discuss the meaning of the coronavirus crisis as an integral part of the totality of the capitalist crisis and its implication in the health area of Brazilian capitalism, in which the rise of ultraliberal and neofascist policies is witnessed by the Bolsonaro government. To this end, we opted for a historical-dialectical materialist analysis of the situation experienced between the global beginning of the pandemic until the month of May 2020 in Brazil. The article is structured in 2 parts: The first discusses the problem of agrifood systems in the context of capitalism in crisis and its effects on the spread of diseases such as the coronavirus, and the second discusses the neglect of the Bolsonaro government in facing the COVID-19 pandemic and the Brazilian universal health system. Evidence shows that the Bolsonaro government has led to more deaths and more of the barbarism of capitalism. The scenario after the pandemic will be one of a country with a more or less intense capitalist crisis depending on the resistance of workers in the defense of public health and lives.

## Keywords

Brazil, coronavirus, crisis, pandemic, politics, public health

The lives of women and men on the planet – and those of Brazilian women and men in particular – go through extremely turbulent times. Brazil, with 5 months of COVID-19, occupies the second highest count in the world, after the United States, with the highest number of deaths in absolute numbers (106,523 inhabitants, according to the position on August 16, 2020, as it is possible to verify using the data published daily about the Region of the Americas by the Pan American Health Organization).<sup>1</sup> This is considered a very high number, in relation to the low number of existing tests, indicating that the increase in deaths will persist for a longer time. The Ministry of Health has announced that Brazil has so far failed to try to meet the World Health Organization recommendation that countries should carry out mass tests on their populations to combat the new coronavirus pandemic. The executive secretary of the Ministry of Health, João Gabbardo,<sup>2</sup> stated that the government is studying the import of rapid tests for the new coronavirus, due to the absence of testing materials and inflated prices in the country.

In this scenario, this is an important question: What is this world in which we are living, in which crises are increasing, showing the barbarism of capitalism and the health of its inhabitants, especially in Brazilian dependent capitalism?<sup>1</sup> In addressing this issue, many analysts seek to refer (only) to a health crisis of such magnitude and scale that has not been felt for many years. Other analysts, on the other hand, argue that this is a long-term crisis of capitalism,<sup>3–5</sup> which has emerged since the crash of 2007–2008 and continued to worsen until 2020, with clear signs of a recession, compounded by the health crisis of the new coronavirus.<sup>6,7</sup> It

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is through this second argument that, in this text, we will seek to understand this health crisis in the totality of the capitalist crisis.

As one of the possible explanations for the appearance of the virus, some authors argue that pandemics occur in a social, political, and economic context that is intertwined with processes such as the mutation of viruses, their transition from one host to another, and their impact on living organisms, primarily caused by the process of concentration of agribusiness capital.<sup>8–11</sup> In this sense, the nature of the COVID-19 pandemic cannot, therefore, be understood without considering capitalism in its current configuration.

Marx's basic definition of capital is reasonably well-known: Capital is above all a social relationship.<sup>12</sup> Now, this means that capital is the product of a determined social and economic formation – in other words, that a specific development of the productive forces, as well as of the relations that are established between human beings in the characteristic production process, results in the appearance of capital. Capital only exists as a dominant form in a given society and is therefore not an economic category common to all modes of production. Capital, therefore, is not simply wealth capable of being used to produce more wealth, but the result of a historically specific mode of wealth production. For this author, it must be recognized that the capitalist mode of production can only be understood historically, transforming and becoming more complex, according to its different phases, as its contemporary times (from 1980s onward) dominated by fictitious capital.<sup>13</sup> It is also a matter of seeking his understanding in what Marx called the capital appreciation process (the law of value) and its consequences in the whole of capitalist society, the bourgeois society. Marx considers that capitalism is oriented toward the search for capital appreciation and its accumulation, through the production of surplus value, with labor value as the central determination of the social relations of production and development of the productive forces.<sup>12</sup>

A pandemic on this scale opens and over-intensifies the various problems (such as health and food) that already exist in capitalism. More structurally, the contradiction is exposed: defending profits or saving lives? The indications, so far, especially of the Bolsonaro government in Brazil, have been primarily to reinforce the first exit, led by those who dominate and command our dependent capitalism.

When comparing countries' confrontations with the coronavirus, Brazil must be taken as a very particular experience, given the neglect of the Bolsonaro government in dealing with the magnitude of this pandemic. In addition to the president's daily disregard of the extent of the harms of COVID-19, he encourages the population to disrespect social isolation, minimizing the

importance of this measure scientifically proven to reduce infectibility. It is worth mentioning some statements made by President Bolsonaro through the media.<sup>14</sup> In one of his first public comments on the disease, the president said the press was exaggerating its severity. "There is also the issue of coronavirus, which, in my opinion, is oversized, the destructive power of this virus," said the president at an event in Miami on March 9. In a televised statement on March 24, when the country had already recorded more than 10 deaths from the virus, the president criticized the closure of schools and businesses. He even compared the contamination by coronavirus to a mild cold and said that if he got sick, he would not suffer.

Due to my athlete's history, if I were infected by the virus, I would not have to worry, I would feel nothing or be affected, at most, by a cold or a little cold, as the well-known doctor said on that well-known television, he said.

At the end of March, after a trip that caused crowding, the president said: "This is a reality, the virus is there. We will have to face it, but face it like a man. Not like a kid, fuck! Let's face the virus with reality. It's life. We will all die someday." In late April, the president was asked by a reporter what he had to say about the daily record of deaths reported that day, to which the president replied: "So what? I'm sorry. Do you want me to do what? I'm a Messiah, but I don't do a miracle" (a reference to his full name, Jair Messias Bolsonaro).

Under the varnished discourse of "saving the economy," his real intention is to expose the working class to the risk of contagion, decimating the most vulnerable part of that class, as a "float" to desperately save the interests of the bourgeoisie in the face of the long-lasting capitalist crisis.

The negligence of the Bolsonaro government regarding the pandemic is blatantly revealed when one observes the low resources allocated to confront the coronavirus. Until May 12, 2020, spending on combating the pandemic was negligible, corresponding to only \$1.5 billion (all dollar amounts in U.S. dollars), or 5.4% of the total budget of the Ministry of Health for 2020.<sup>15</sup>

In fact, the last few years in Brazil, with the implications of the capitalist crisis in general, and the internal political crisis in particular, have been harsh for the working class as a whole due to an intense process of destruction of social rights, among them the right to health. Especially, since the institutional coup in 2016, painful counter-reforms introduced by governments have been witnessed and intensified by Bolsonaro's rise to power and his neofascist practices.

Thus, the objective of this article is to discuss the meaning of the coronavirus crisis as an integral part of

the totality of the capitalist crisis and its implication in the health area of Brazilian capitalism, in which the rise of ultraliberal and neofascist policies by the Bolsonaro government is taking place.

The article is structured in 2 parts. The first part discusses the problem of agrifood systems in the context of capitalism in crisis and its effects on the spread of diseases such as the coronavirus. The second part discusses the neglect of the Bolsonaro government in facing the COVID-19 pandemic and the Brazilian universal health system.

### Capital in Crisis and Agrifood Systems: A Key to Understanding COVID-19

Capitalism has evident influence on human food, especially through agribusiness and the expansion of the food industry. The food industry and the distribution/marketing network, as it has been organizing itself since the 20th century and during its intensification in the 21st century, represent threats to countries' food sovereignty, making the struggle for sustainable agro-food systems increasingly necessary. The concentration of the seed production market and the pesticide trade have had a substantial impact on what is grown, created, and eaten, and of course it would be impossible to believe there were no implications for the quality of food. The implication is that food systems are affected by a global logic of capturing and homogenizing the food diversity present in each crop.<sup>16</sup>

English critical thinker Choonara<sup>9</sup> points out that biologist Robert Wallace, in his book *Big Farms Make Big Flu* (2016),<sup>8</sup> emphasizes the role of this agribusiness, on a large scale, in the creation and spread of new diseases. This is because monocultures of domestic animals, heaped in large numbers, mean high rates of transmission in weakened immune response environments. Wallace in a recent interview states that: "The increased occurrence of viruses is closely linked to food production and the profitability of multinational corporations. Anyone who aims to understand why viruses are becoming more dangerous must investigate the industrial model of agriculture and, more specifically, livestock production."<sup>17</sup>

In reality, what these and other authors<sup>10,11</sup> say is that it is not only industrial farms that generate new, increasingly virulent pathogens, but also the broader disruption of ecosystems, the expansion of food production, and transformation into *commodities* caused by the logic of perverse contemporary capitalism in crisis in the quest to face its declining profit rates.

Still, as already described by Roberts in *The Long Depression*,<sup>3</sup> in a moment of long depression of capitalism, mainly from the 1970s, there is, on the one hand, a

fall in the profit rate of productive capital, as provided by the law tendency of Marx,<sup>18</sup> and, on the other hand, the exacerbated growth of fictitious capital, occupying the center of economic and social relations.<sup>13</sup> It is in this context that the recovery of profit has demanded ultra-liberal policies from the ruling class; at the same time, the advance of conservative social forces (and many neofascists) is perceived in an attempt to reheat accumulation and "encourage" market projections. This effort to save capital today cannot take place without the extremely intensive exploitation of the environment, destroying it inexorably.

That is why Wallace<sup>17</sup> insists on drawing our attention to, when new outbreaks appear, governments and the media that restrict themselves to acting and commenting on them as if they were a separate emergency, discarding the structural causes that are leading several marginalized pathogens to become the newest global celebrity, one after another, such as SARS, MERS, avian flu – H5N, H1N1, Zika, Ebola, and now COVID-19.

Agribusiness and the food industry, through their ultra-neoliberal projects, are organized around the efforts of companies based in the most advanced industrialized capitalist countries to plunder the land, raw materials, and overexploit the work and natural resources of peripheral and dependent countries.<sup>9-11</sup> As a result, many of these new pathogens, previously controlled by long-evolving forest ecologies, now are being released and transformed and threatening the health of the entire world as their ecosystems have been dramatically and intensively modified.

Wallace is categorical in arguing that: "Capital is spearheading land grabs into the last of primary forest and smallholder-held farmland worldwide. These investments drive the deforestation and development leading to disease emergence. The functional diversity and complexity these huge tracts of land represent are being streamlined in such a way that previously boxed-in pathogens are spilling over into local livestock and human communities."<sup>17</sup>

It is in this context of land expropriation by capitalism – in other words, in the advancement of agribusiness and the food industry and in its valorization process – that we must understand the birth of COVID-19.<sup>9-11</sup> Thus, it is a matter of saying that it is in the movement of contemporary capital and its implications that our questions and the indignation of all must lie.

The globalization of capital, under the dominance of fictitious capital, understood as the transformation of the world into a shared space through global connections in the economy, in politics, in technology, in communications, and in law, also brings an increasing separation between products and their manufacturing and between services and their location, in addition to

producing an increase in the permeability of borders and a reduction in the influence of national policy instruments.<sup>19</sup> Lucchese<sup>20</sup> draws attention to the consequences of this unequal political and economic process in relation to national governance and highlights its impacts on health regulation, as the internationalization and globalized institutionalization of the economy directly affects the sovereignty and democracy of peripheral capitalist countries.

It is appropriate to remember that the notion of food sovereignty has been built and disseminated by social movements since the mid-1990s, with the main motivation of responding to the loss of capacity of national states to formulate their agricultural and food policies in the context of the progressive internationalization of the economy,<sup>21</sup> commanded by the supremacy of fictitious capital, opening space for the advance of financialized *agribusiness*. In turn, it is important to make a counterpoint to this dynamic of capitalism, defining food sovereignty as:

people's right to define their own policies and strategies for the sustainable production, distribution and consumption of food that guarantees the right to food for the entire population, on the basis of small- and medium-sized production, respecting their own cultures and the diversity of peasant ways, fishing and indigenous forms of agricultural production, marketing and management of rural areas, in which women play a fundamental role [ . . . ]. Food sovereignty is the mean to eradicate hunger and malnutrition and guarantee lasting and sustainable food security for all peoples.<sup>22</sup>

However, the role of dependent countries' sovereignty seems more like a mirage than a real possibility. In countries with dependent capitalism, as in the case of Brazil, the socioeconomic situation of the population is an important aspect that must be considered for the realization of food sovereignty, because although there is expansion, growth, and development of the economy and some improvement in social indicators, social and economic inequalities, class, ethnic-racial, gender and access to and availability to food remain as structural problems to be faced.<sup>23–25</sup>

In turn, in urban settings, the expression of the capitalist logic of commodification of human food can be observed through the growth of harmful food environments (obesogenic environments), mainly, from the point of view of commercialization, advertising, and consumption in unhealthy food systems.<sup>26</sup> These environments are full of highly industrialized/ultra-processed foods (rich in sugar, salt, and fat) with various chemical additives. All of this is presented with easy access and low cost, with the expressive use of communication and advertising strategies that aim to attract a

target audience (children and adolescents) for the consumption of these foods.<sup>27–29</sup> Developing countries and those considered to be dependent capitalism already point to the impacts that financial globalization and urbanization have had on human food,<sup>16</sup> which are signs of violation of the principles of food sovereignty.

Thus, we are witnessing a growth in agribusiness as a global phenomenon, fueling the expansion of meat consumption in the Global South. The domination of strong companies worldwide in the industrial production of poultry and animals has been forcing local farmers to join large-scale chicken and pork processing companies.<sup>30</sup> In reality, agribusiness aims to dominate the food market. As part of the neoliberal project, it is observed that companies based in the most advanced industrialized countries aim to steal land and resources from countries with dependent capitalism.<sup>17</sup>

Therefore, under this scenario, we must understand the ongoing pandemic. It is the problems created by contemporary capitalism itself that led to the health crisis that the world is experiencing. In turn, a question deserves to be asked: Were the central capitalist countries unaware of this situation and the danger that this would pose to the health of the world population?

Roberts<sup>31</sup> reveals that at the beginning of 2018, at a meeting at the World Health Organization in Geneva, a group of experts, through a "Research & Development Blueprint"<sup>32</sup> report, drew attention to the term "Disease X," predicting that the next pandemic would be caused by a new unknown pathogen that has not yet reached the world's population. This "Disease X" would be due to a virus originating from animals and would appear somewhere on the planet. The knowledge about what would come under the title of coronavirus did not stop there. Subsequently, in September 2019, the United Nations published a report "A World at Risk"<sup>33</sup> warning of the threat of a pandemic that would spread across the planet, killing around 80 million people, a figure similar to the result of World War II, and could end up with almost 5% of the planet's economy.

The contradiction in this context is that the majority of countries did not dedicate the necessary energy and resources in general, nor for their health systems in particular, reflecting the perverse profile of contemporary capitalism. In the name of the neoliberal market, the central capitalist countries practically ignored the warning to create obstacles to the effects of this possible disaster. In fact, what they did was what we have been watching: the "neoliberal plunder," that is, the widening of recessive adjustments, increasing drastic cuts in the resources of the social state in the name of helping the problems of the capitalist crisis. Under this rationality, governments ignored the insistent warnings promoted by the World Health Organization, seeking to maintain the maxim that the capitalist economy would need to be



saved from the deleterious effects of the crisis and, of course, a decision of greater interest than saving human lives.

As is well-known, for 12 years we have been witnessing the long-lasting capitalist economic crisis and depression.<sup>34</sup> In these years, capitalist economies have been combining low investment with reduced productivity growth, caused mainly by the fall in the profit rate of the productive sectors and a huge increase in financial sphere (fictitious capital), in response to this situation. Decade after decade, there is a decrease in the average annual growth rate of global gross domestic product (GDP), from 5.4% in 2010 to 3.5% in 2015, further decreasing to 2.9% in 2019.<sup>35</sup> The Organisation for Economic Co-operation and Development (OECD)<sup>36</sup> projection data indicates that, from 2019 to 2020, the retraction in the main capitalist economies remains, changing respectively to 2.3% and 2% in the United States, 0.6% and 0.4% in Germany, 1% and 0.6% in Japan, and 1.2% and 1.0% in the United Kingdom. China also indicates a drop in its GDP, to 6.2% and 5.7% in these years. Thus, the current crisis is of such magnitude and, many times, it has not been presented as such by the ruling class. On the contrary, it intends to camouflage the crisis, referring only to the coronavirus crisis. For this reason, it is essential to demonstrate how the capitalist crisis, not the coronavirus crisis, is at the center of the conjuncture – that is, the latter is part of the totality of the capitalist crisis.

Even in Brazil, this economic slowdown has been shown to be overwhelming. There are 6 years of stagnation, with 2 years of negative GDP (0.5% in 2014, followed by -3.5% in 2015 and -3.3% in 2016), followed by disappointing results in 2017 (1.3%), 2018 (1.3%), and 2019 (1.1%).<sup>37</sup> The capitalist economic crisis has a violent impact on the Brazilian economy, revealing: a social crisis with a high unemployment rate of 12.2% in 2019 (i.e., 1 in 4 workers is unemployed); a negligible public expenditure, imprisoned by Constitutional Amendment 95 (CA-95), a measure that has frozen public expenditure for 20 years, since 2017; a vertiginous growth of 9.5% of public debt in 2019, corresponding to 56% of GDP, having made a payment with interest and charges of this debt of \$94.7 billion (i.e., almost 4 times more than the value committed to the Ministry of Health [\$24.8 billion]).<sup>37–39</sup> In this way, the current crisis is serious and puts the Brazilian economy adrift, without a responsible command power to lead it. The counter-reforms of the Bolsonaro government have only made it worse and make it look like a coronavirus crisis. In reality, we could say that this virus exposes, even more, the cruel face of contemporary capitalism in Brazilian dependent capitalism. It is known that Brazil's historical roots, marked by social inequalities, place populations in more precarious situations of illness and death, with

different impact according to social class, race, and gender.<sup>40</sup> In Brazil, inequalities have race, color, and ethnicity, as it is a country structured by racism, which remains rooted in the historic slave system. Brazilian National Household Sample Survey data from 2019 indicate that the participation of the black population as informal workers (i.e., those without a formal contract) is significantly higher (47.3%) when compared to white workers (34.6%).<sup>41</sup> This situation was caused mainly after the 2017 labor reform of the conservative government Michel Temer, which established intermittent work.<sup>42</sup> If the working class is heavily penalized by the health crisis, there are areas within it that are even more affected. In other words, more vulnerable situations affect the majority of the black population. Of 30,000 serious cases of the disease that were recorded by the Ministry of Health in May 2020, among the total of individuals who died from COVID-19, 55% were black, while among whites deaths account for 38%.<sup>43</sup>

However, although COVID-19 may trigger an unthinkable global slowdown, it is definitely not the crucial cause, as Bolsonaro's Brazilian government has argued, the hegemonic media and analysts linked to the economic *mainstream*. It is worth stressing, the world system was already extremely "sick" before the arrival of COVID-19. The roots of this, as already mentioned, are in a long period of depression that has existed since the *crash* of 2007–2008, caused mainly by lower profitability of the productive sectors and an acceleration of fictitious capital. The profit rate in the United States, in the corporate sector of industrial and financial companies, fell to less than 7% in the years after 2007–2008.<sup>44</sup> In Brazil, this behavior is also noticeable, with its profit rate in the production sector declining between 2003–2014 from 28% to 23%.<sup>45</sup>

Choonara<sup>9</sup> still informs us, in the context of the rise of the current crisis, that in the third quarter of 2019 the global debt reached a very high level of 322% of the world GDP, about \$253 trillion. In other words, we may have reached the limits of the period of stagnant growth that emerged after 2008–2009.

In turn, with the coronavirus, Roberts<sup>34</sup> draws attention to the fact that the current crisis may get worse. This is because the blockades (social isolation) in many economies are expected to provide a huge drop in production, investment, employment, and income in the majority. According to this author, based on OECD data, the impact of closing deals for a few months can result in decreases of 15% or more in the level of production in advanced capitalist economies and in the economies of dependent capitalist countries, such as Brazil. Roberts is categorical in reporting these data, stating that for each closing month, there will be a 2 percentage point loss in annual GDP growth.<sup>34</sup> Thus,

in this pandemic, if the main economies are closed for 2 months or more, it is likely that global GDP will contract in 2020 more than in the great recession of 2007–2008, which fell about 3.5% in the period between months of 2008 and the first half of 2009.

However, with the hope that the blockades will be short-lived, the world ruling class and the Brazilian class, in particular, have been prioritizing saving whom? Now, they save profit and not lives. Based on measures that protect capitalist companies and banks, in addition to intensifying the exploitation of the working class (especially women, blacks, and the poor, who find themselves in low-income jobs), there is, in Brazil, a greater number of measures relevant for proposals to expand credit lines with subsidies for loans to companies in considerable amounts. In turn, the working class, which should be stopped in this period to have its life preserved, has seen its aid go in the opposite direction – that is, increasing its exploitation, hunger, and misery and complexifying the oppressions on female, black, and peripheral work.

### The Neglect of the Bolsonaro Government in Facing the COVID-19 Pandemic and the Brazilian Health System

When analyzing the universal health system in Brazil in the fight against coronavirus, it is also necessary to recover history and characterize the effects of “neoliberal plunder” with the complex health system (the Unified Health System [SUS]), even before the pandemic. It all starts with the long process of underfunding that SUS went through from 1995 to 2016.<sup>46</sup> Data related to the federal budget executed in 2019 (\$534.7 billion)<sup>44</sup> show that 38.3% of this budget is spent on interest expenses and debt principal expenditures, while only 4.2% refers to the Ministry of Health expenditure (Table 1).

Another characteristic of SUS underfunding is the lack of health priority in the budget – specifically, the federal one. The total financing of SUS is tripartite – that is, states and municipalities help to compose the final budget for public health in the country as a whole. If we analyze the federal government budget, it is important to mention that only 1.7% of GDP was earmarked for health spending from 1995 to 2019, while an average of 8.5% of GDP was earmarked for paying interest on the debt in the same period (Figure 1).<sup>39</sup>

Also characterizing the SUS underfunding are measures that have always been withdrawing resources from taxes linked solely to the Social Security Budget (OSS). OSS is the federal collection fund that jointly finances health, social assistance, and social security policies in

**Table 1.** Brazilian Federal Government Budget According to Interest Expenses and Debt Principal Expenditures and to Ministry of Health expenditure, 2019.

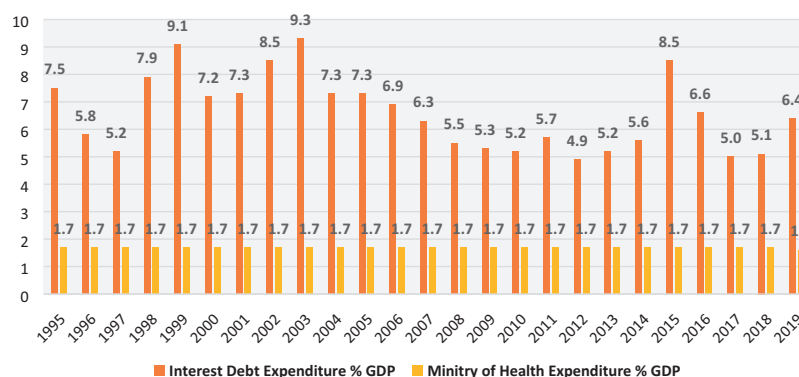
	US\$ Billion	%
Total Federal Government Budget – 2019	534.7	100
Interest expenses and debt principal Expenditures	204.8	38.3
Ministry of Health expenditure	22.5	4.2

Source: Brazilian Federal Government Budget.

Brazil. Since 1995, the Unbinding of Union Revenue (DRU) is a legal mechanism created by the government of Fernando Henrique Cardoso (Brazilian Social Democracy Party) that continues today, which allows 20% of OSS resources to be withdrawn to ensure the primary surplus and the payment of interest on the debt, according to the restrictive economic policy of the federal government developed over 2 decades. In the government of President Dilma Rousseff of the Workers' Party (PT), this rate increased to 30%, effective until 2023. The significance of the DRU throughout its existence corresponded to a loss of resources for Social Security, between 1995 to 2018, of about \$217.8 billion,<sup>44</sup> which has a huge impact on health.

It is known from vast literature in the area of health economics that the expenditure on personnel in health systems is around 70% of the payroll. With that in mind, the federal government, in the era of President Fernando Henrique Cardoso, created the Fiscal Responsibility Law, with neoclassical inspiration, with the objective of “cleaning up” public accounts and preventing governments from making more expenses than that revenue and leave the deficit for the next management. Despite this measure being in line with a restrictive economic policy, in line with neoclassical thinking, the biggest problem resides in the restriction of spending on health personnel, making it impossible for the treasury to be responsible for ensuring labor rights and, therefore, demotivating contraction by public tender. This measure favors the precariousness of the work of health professionals, who are starting to be hired by fragile employment bonds, through Social Health Organizations (private institutions).

In addition, from the tax point of view, the Brazilian federal government in the area of health has been increasing considerably, since 2003 – the beginning of the first Lula government (PT) – tax waivers, jeopardizing that SUS can count on higher public resources. These waivers refer to the Income Tax (individuals – IRPF and legal – IRPJ) that presents expenses with private health services and to tax concessions to private nonprofit entities (philanthropic hospitals), in addition



**Figure 1.** Evolution of expenses with Ministry of Health and with interest on debt, both in proportion to GDP, 1995 to 2019.

Source: Brazilian Federal Government Budget; Ministry of Health Budget.

to those related to the pharmaceutical industry. The total of tax exemptions granted to private health has grown considerably, from \$1.7 billion in 2003 to \$6.4 billion in 2015.<sup>44</sup>

Finally, in the government that followed the 2016 institutional coup in which President Dilma Rousseff was relieved of her position and turned over the command to her vice-president Michel Temer, the Constitutional Amendment n.95/2016 that froze public spending for 20 years was approved: a more severe fiscal austerity measure that finds no precedent in any country in the world. In public health, the Ministry of Health's expenditure was frozen at 15% of the 2017 net current revenues of the federal government, updated annually only by the variation of the IPCA/IBGE inflation index, until 2036. In order to have a better idea of the magnitude of this measure, the loss of resources from 2018 to 2020 has already reached the level of \$4.5 billion.<sup>47</sup> Therefore, in addition to the historical SUS underfunding, the country is experiencing the de-financing of this system.<sup>44</sup>

If, even before the coronavirus health crisis, investment in public health spending was happening without the interdictions carried out in its budget, public services could have the chance of having greater installed capacity to face the pandemic. However, when COVID-19 officially arrived in Brazil, with the first case confirmed in February 2020, SUS was already in a wide process of 32 years of underfunding provided by the neoliberal order, added to the last 3 years of its plain de-financing.

The health minister of the Bolsonaro government at the time of the health crisis, Henrique Mandetta, did not include in his statements mention of the revocation of the measures that de-finance SUS, as a way of obtaining more financial resources to equip and hire personnel in the system. What was observed was the intense power dispute between him and President Bolsonaro over the sanitary measures that should be adopted, with the

minister betting on compulsory social isolation and the president insisting on the recovery of the economy, rejecting and ridiculing the isolation. Neither the minister of health nor the president mentioned any measures to break free from the SUS de-financing. Bolsonaro, unwilling to let the economy stop, intended to make public appearances without the use of masks and called for demonstrations by part of the neofascist right-wing<sup>48,49</sup> to ask for the easing of isolation and yet, on several occasions, publicly demonstrated his discontent with the measures adopted by the Ministry of Health, forcing the minister to leave in the end. The scenario was complicated because after the dismissal of Minister Mandetta, the Ministry of Health already had 2 other ministers, the first of whom retired in less than a month and the second of whom is only considered an interim, being an active general of the army of the extreme right-wing, belonging to the closest political support group to President Bolsonaro.

It is important to emphasize that measures to refinance the SUS by the Bolsonaro government were not even an issue in the political arena regarding the fight against the coronavirus. These measures refer to: repeal of Constitutional Amendment 95 (CA-95); revocation of the limit established by the Fiscal Responsibility Law for spending on health personnel; increase in federal public health spending, from 1.7% of GDP to a level consistent with a universal health system, referring to 4% of GDP (\$59.0 billion); revocation of the DRU (\$23.8 billion, in 2018); and extinction of Health Tax Waivers (\$6.3 billion).<sup>44</sup> Even a simple measure, such as that related to the nationalization of private beds (which in some states reaches up to 50% of the total beds in the system), was at first blocked in the National Congress by a joint action between the Workers' Party (PT) and the Brazilian Social Democracy Party (PSDB).

In addition to these sources, other alternatives for financing the system that are outside the health sector

were not even institutionally guided, such as: the Tax on Large Fortunes (bill in Congress), with a rate of 1%/year, could raise \$19.8 billion a year; the return of funds from the Electoral Fund withdrawn from Health (\$100.0 million); the 45% refund of the value of DPVAT Insurance (Traffic Accident Insurance) to SUS (approximately \$400 million); and the renewal for the planning of the SUS of the resources of the Parliamentary Amendments, of which 50% are investment expenditures (\$8.9 billion) that could be oriented to address the hospital pandemic.<sup>50</sup>

In spite of the serious de-financing of SUS, the government tends to ignore the solutions mentioned above, insisting on a partial discourse related to the management of services. It is a fact that SUS is complex, extremely decentralized, and with very high capillarity in the national territory. Due to its continental proportion and because it is located in a territory of difficult geography, its access is a great challenge and has several contrasts between countryside and city and different population dimensions (voids and densely populated areas mainly in conurbations). In addition, there is a public-private mix<sup>51</sup> in its structure that generates several problems of coordination of care.

By ignoring this magnitude of management problems, the government develops a fascist rhetoric to these problems, placing on individuals the ability to solve the issue. This is noticeable when the government insists on the public disqualification of civilian ministers in the management of the health portfolio (justifying the need for a military – evoking metaphors of the pandemic in comparison to a “war”) and in the absence of support for health workers who find themselves on the front line, blaming them for the inability to deal with the demand, even when they do not have enough inputs to assist infected people.

In addition, civil society groups that support this neofascist government<sup>52</sup> have made the debate over facing COVID-19 a cultural war to disqualify science and militarize the state apparatus, chanting the slogan “Military intervention!”, despite the fact that the political regime is not yet fascist, but the government is and relies heavily on a process of neofascist social ascension to achieve its objective. All evidence points out that Bolsonaro’s intention is to close the regime and, in practice, restrict democratic freedoms (however much he voices the opposite).

The process of questioning these democratic freedoms had an important chapter in the 2016 institutional coup and is closely integrated to the neofascist rise. This is because the coup came in order to unlock the process of capitalist accumulation that had as an obstacle the capitalist crisis of long depression. The coup took advantage of the latent ultraconservatism in society for the fascistization<sup>48,49</sup> of part of the bourgeoisie carried by

the feeling of disgust to the Lula-Dilma legacy and to the Workers’ Party (“anti-workers’ party”).

The government has bet on the ultra-polarization of the debate and Bolsonaro has this profile of radicalization on the right-wing when provoked. Nevertheless, the bourgeois fractions have repositioned themselves in support of government measures in the context of COVID-19 that can be synthesized by a nucleus of power, clearly neofascist constituted by the commercial and services bourgeoisie (“Movimento” Brasil 200), by the industrial bourgeoisie (CNI, Fiesp), and by agribusiness (CNA, Faesc, Faep, Farsul, Faeng, Aprosoja-MT, Abrafrigo)<sup>2</sup>; CNI (National Confederation of Industry), Fiesp (Federation of Industries of the State of São Paulo), CNA Brazilian Confederation of Agriculture and Livestock, Faesc (Agriculture and Livestock Federation of Santa Catarina, Brazil), Faep (Federation of Agriculture of the State of Paraná), Farsul (Federation of Agriculture of the State of Rio Grande do Sul), Faeng (Federation of Agriculture and Livestock of the State of Minas Gerais), Aprosoja-MT (Mato Grosso Soybean Producers Association), and Abrafrigo (Brazilian Refrigerators Association). This nucleus defends vertical isolation, is against social and labor protections, and sharpens the contrast between the risks of COVID-19 *versus* economic losses. This nucleus is in dispute with another nucleus of power that consists of the following bourgeois fractions: the national banking capital, the associated financial bourgeoisie, the automotive industry (Anfavea), telecommunications (SindiTeleBrasil), the food and supermarket industry (ABIA, ABRAS, APAS), and small and medium rural producers (Faesp, Famato, Famasul, Faeg)<sup>3</sup>; Anfavea (National Association of Motor Vehicle Manufacturers), SindiTeleBrasil (National Union of Telephony and Mobile Cellular and Personal Service Companies), ABIA (Brazilian Food Industry Association), ABRAS (Brazilian Supermarket Association), APAS (Supermarket Association of the State of São Paulo), Faesp (Federation of Agriculture and Livestock of the State), Famato (Federation of Agriculture and Livestock of the State of Mato Grosso), Famasul (Federation of Agriculture and Livestock of the State of Mato Grosso do Sul), and Faeg (Federation of Agriculture and Livestock of Goiás).<sup>3</sup> This group advocates social isolation as the most effective means for the recovery of the economy.<sup>53</sup>

Amidst the tension between these nuclei of power of the bourgeoisie in the context of the pandemic, the Bolsonaro government has preferred to adopt measures to save big capital and undo any proposal that defends the life of the working class. Provisional Measure No. 936 of April 1, 2020, is an example of this. This measure creates the Emergency Program for the Maintenance of Employment and Income, proportionally reducing the



workday and, consequently, wages and temporarily suspending the employment contract, among other harmful measures.

In turn, in the face of public commotion about the lack of protection for workers, the Bolsonaro government was forced to present a minimum income bill to informal workers of \$39.6 monthly, during the pandemic. After intense criticism from civil society, the parliamentary left managed to intend for this amount to rise to \$118.80, still much lower than Brazil's minimum wage (\$206.90). Even with this ridiculous amount, the banking bureaucracy has made access difficult, extending the financial vulnerability of the working class and, like the United States, forcing the working class to go to work.<sup>54</sup>

In this fragile scenario, it is with great indignation that the federal government neglects to allocate suitable resources for coping with the coronavirus. Since its beginning, February 2020, until May 19, 2020 (when the country reached the second place, after the United States, in number of deaths), the allocation of new resources to the Ministry of Health was insignificant, corresponding to only \$2.6 billion (or 10.6%) of increase over the amount originally approved in the Budgetary Law 2020 for health (from \$24.8 billion to \$27.4 billion).<sup>55</sup>

In the last week of May alone, the Ministry of Health spent another \$3.1 billion, according to 2 new provisional measures (No. 967 of May 19 and No. 969 of May 20), exactly in the same period in which the Bolsonaro government deepened the negotiation with the "big center" (group of center-right parties) to have a base of parliamentary support in the National Congress and brought the leadership team of the Ministry of Health closer to the military base to seek a solution for the prescription of chloroquine and flexibility of the social distancing (after all, the technical and scientific resistance that existed for the adoption of these measures resulted in the fall of 2 ministers of health in the middle of the pandemic, as we have already shown).

This is a negligible amount compared to the position that Brazil occupies in the ranking of deaths by COVID-19. Officially with more than 106,523 inhabitants' registered deaths, the country has the highest growth rate of deaths, being more than 5 times the world average (position as of August 16, 2020).<sup>1</sup> The small number of tests carried out in the country and the enormous growth of deaths due to severe respiratory syndrome, which have not yet been confirmed for coronavirus, indicates that these statistics are still underestimated.

Let us come to an understanding of how resources were allocated for the pandemic. The first Provisional Measure No. 924, of March 13, allocated \$1 billion coming from the internal reallocation of the Ministry of Health budget and removed from the "budget sub-

**Table 2.** Resources Allocated for Pandemic in Brazil, According to Provisional Measures.

Provisional Measures of Allocated Resources	US\$ Billion
<i>Ministry of Health internal reallocation</i>	
PM924 (a) (03.13)	1.0
(b) (03.13)	0.2
Total (1)	1.2
<i>New allocated resources</i>	
PM940 (04.02)	1.9
PM941 (04.02)	0.2
PM947 (04.08)	0.5
Total (2)	2.6
Total (1) + (2) (up to 05.19)	3.8
PM967 (05.19)	1.1
PM969 (05.20)	2.0
Total (3)	3.1
Total (1) + (2) + (3) (up to 05.28)	6.9 <sup>a</sup>

<sup>a</sup>22,023 inhabitant deaths.

functions" Primary Care and Outpatient and Hospital Care, as if combating COVID-19 could dispense with meeting other health needs of the population programmed in the 2020 Budget Law (Table 2). After this reallocation, there was another that corresponded to the same Provisional Measure No. 924 in the amount of \$0.2 million. Thus, until May 19, the total amount reallocated for this action to combat the pandemic accounted for \$1.2 billion (Table 2). Accordingly, the remaining \$2.6 billion was defined according to the issuance of 3 Provisional Measures for extraordinary credits in the following period: (a) Provisional Measure No. 940 of April 2, corresponding to an increase to the Ministry of budget of \$1.9 billion, which represents 7.5% of the total allocated to this Ministry of Health in 2020; (b) Provisional Measure No. 941, also on April 2, which allocated \$200 million; and (c) Provisional Measure No. 947 of April 8, which corresponded to \$500 million. As we said, recently, also published were Provisional Measure No. 967 of May 19, in the amount of \$1.1 billion, and Provisional Measure No. 969 of May 20, in the amount of \$2 billion (Table 2).

It is important to note that of the total of \$3.8 billion (that is, until May 19, \$2.6 billion, plus \$1.2 for reallocation; Table 3) intended for coronavirus combat, according to the Bulletin of the National Health Council's Budget and Finance Committee, according to the position of May 19, 2020, only \$1.6 billion was effectively spent.<sup>55</sup> It is worth mentioning that, of this amount, \$600 million (37.5%) was transferred to the states, \$800 million (or 50.0%) to the municipalities, and only \$200 million (12.5%) was applied directly to Ministry of Health<sup>55</sup> shares (Table 3).

**Table 3.** Resources Allocated for Pandemic in Brazil, According to New Allocated Resources Up To May 19, Referring to Effective Spending Allocation.

	US\$ Billion	%
New allocated resources (05.19)	3.8	100
Effective spending (05.19)	1.6	42.1
Resources to be spent	2.2	57.9
Effective spending	1.6	100
States governments	0.6	37.5
Municipal governments	0.8	50.0
Ministry of Health – federal government	0.2	12.5

According to the position of August 16, 2020, the number of deaths reached 106,523 inhabitants in the country. Although the Ministry of Health has increased the volume of resources allocated for the new coronavirus to \$7.3 billion (100%), only \$4 billion (54.8%) was effectively spent. Thus, \$3.3 billion (45.2%) still remains to be spent.<sup>56</sup>

It is essential to maintain our indignation with this low volume of resources allocated to SUS to face this serious health crisis, in the context of a global economic crisis of long depression, compared to the crisis that capitalism suffered in the 1930s.<sup>57</sup> It is necessary that Brazilians' health should be treated with all the respect that human beings deserve, worthy of a life valued above profits and the fascist practice that this federal government has been exercising.

Thus, we understand that it is urgent that SUS have significantly more resources to face both the pandemic now and its consequences for the coming years, as well as to break free with the historical SUS underfunding process that restricts the capacity to fully comply with its principles and constitutional guidelines. This war cannot be fought without the strengthening of the SUS, which in turn needs adequate funding today and in the future to comply with the constitutional mandate of health as "the right of all and the duty of the State."

The real neglect of the Bolsonaro government with public health, in times of coronavirus, is such that, in parallel to the insufficient allocation of budgetary resources, at the beginning of social isolation, \$2 billion was released for private insurance and insurance companies. Health, from a guarantee fund, linked to the National Supplementary Health Agency, composed of resources from the operators.<sup>58</sup> This measure did not affect the formulation and execution of responses from these articulated companies to face COVID-19.

Due to all the evidence narrated here, it can be seen that the Bolsonaro government's concern in the face of the pandemic crisis is to prioritize profit and not the lives of Brazilian workers. In reality, the measures are far

from providing sufficient support for the millions of Brazilians who are in social isolation or have seen their companies dismiss them. Furthermore, it is important to mention that none of these measures will prevent the downturn in the economy that the pandemic will cause and, moreover, they are insufficient to restore growth and jobs in our dependent capitalism this year and the next.

This picture seems to be the same in the capitalist economies of the advanced countries. According to Roberts,<sup>34</sup> there is every possibility that this pandemic decline will not facilitate a sufficient recovery to face the ongoing capitalist crisis, as it has been recurrent to adopt more measures to try to save companies and banks. Strictly speaking, to face this capitalist crisis, plus the coronavirus, adds Roberts,<sup>34</sup> it is not enough to limit ourselves to Keynes' propositions that government spending should increase to compensate for the fall in private spending. Although a recession can be "triggered" by a bank failure or "a collapse in business confidence," these aspects are not the underlying cause of recurring crises in capitalism, especially this crisis that we have already described as resulting from the fall in the profit rate of the productive sectors and the increase of fictitious capital.

The teachings of the history of the Great Depression and World War II showed that, once capitalism is at the bottom of a long depression, there must be an intense destruction of capital – in other words, to destroy everything that capitalism has accumulated in the previous decades, even before a new era of expansion can become possible. Therefore, there are no "public policies" that can prevent this and preserve the capitalist sector. Roberts<sup>34</sup> enlightens us when he says that if it doesn't happen this time – the massive destruction of capital – the long depression that the world capitalist economy has suffered since the 2007–2008 recession may enter another decade, and it will be no different for Brazil.

From this perspective, in order to prioritize the discussion of human life, it is important to reflect on the totality of the root of the problems we are experiencing, and this obliges us to radical criticism of contemporary capitalism. We must prioritize that the adjustment must be directed to the capital and that it pay for the damage done by COVID-19. As Wallace<sup>17</sup> teaches us, agribusiness as a mode of social reproduction must end forever, even if only for the sake of public health. Highly capitalized food production depends on practices that endanger all of humanity – in this case, helping to unleash a new deadly pandemic. In addition, the author adds, we should demand that agrifood systems be socialized in order to prevent dangerous pathogens from emerging. Thus, it would also be important to demand the reintegration of food production to the

needs of rural communities and the performance of agroecological practices that protect the environment and farmers as they grow our food.<sup>17</sup>

## Conclusions

Given the above, the meaning of the coronavirus crisis as an integral part of the totality of the capitalist crisis and its implication in the area of public health under Bolsonaro's baton seems clear: more deaths and more capitalism from barbarism.

However, we know that the pandemic will pass and the Brazil that will emerge from this scenario will be a capitalist country in deep crisis, with a bourgeois order in intense dispute for the state apparatus and in the direction of the next pattern of capitalist accumulation. It will be a nation with deepening social problems, pitifully fractured and with persistent internal conflicts.

If the workers' resistance is articulated in the defense of public health and lives in order to block the destructive way of producing and managing capitalism, especially under the regency of the neofascist government of Bolsonaro, it may be that some gains are achieved: the realization that science is important, the need to defend public education as essential, and the understanding that health is not a commodity and the SUS must be respected and strengthened.

It may be, under this organization of resistance, that it is still possible to make workers pay attention to obvious, but unnoticed, things such as: how food is produced and with what kind of water one washes one's hands are essential things; that without sustainable agri-food production and basic sanitation with good infrastructure, eating well and maintaining hygiene may not be possible. It may also be that this crisis, if properly politicized, helps to ratify that those who produce wealth are the workers, not the primary surpluses and the parasitism of fictitious capital.

Brazil and the world that will come after the pandemic are, therefore, the same ones we left behind when all this started: a country and a world that need a revolution.

## Declaration of Conflicting Interests

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

## Funding

The authors received no financial support for the research, authorship, and/or publication of this article.

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