



STANDING COMMITTEE ON HEALTH AND SOCIAL PROTECTION

**Foz do Iguaçu, Brazil
May 10, 2005**

REPORT

Some fifteen parliamentarians met for the 3rd work session of COPA's Standing Committee on Health and Social Protection.

After introducing each member in attendance, the committee chair read the discussion paper drawn up to launch debate on the issue of public health systems in the context of international trade negotiations.

The paper discussed how the proliferation of trade agreements is bringing increasing pressure to bear on governments to liberalize services, including many associated with healthcare. Countries of the Western Hemisphere and other parts of the world may find their ability to maintain public health programs and regulate the sector jeopardized by the negotiations currently under way at the World Trade Organization (WTO) or under the Free Trade Area of the Americas (FTAA), as countries sign multilateral, regional, or bilateral agreements. It is therefore important to assess the repercussions these negotiations have on access to healthcare services and how they are delivered, particularly among the poorer populations that are likely to be the most affected by liberalization.

The Committee members then listened to a presentation by Ms. Teresa Cyrus, a professor with the Economics Department at Dalhousie University in Halifax, Canada. Ms. Cyrus discussed the impact of trade agreements on the health of women, and more specifically, the impact of the North American Free Trade Agreement (NAFTA) in Canada. The findings of her studies are disturbing. For example, Canadian women, particularly women with modest incomes or who work in the services sector, are likely to suffer from eventual changes to the Canadian healthcare system. Ms. Cyrus notably suggests that we oppose privatization of clinic and hospital services. In her opinion, it would be too much of a risk to allow the creation of private, for-profit clinics since we do not know if such a measure would make the entire Canadian healthcare system a target in Canada's trade agreements.

Debate began after the speaker's presentation. Members of the committee cited the situation of healthcare systems in their own states. We looked at the experience of Argentina, Cuba, Ecuador, Mexico, Québec, and El Salvador.

The discussion allowed us to come to a consensus on the importance of protecting public healthcare systems in the hemisphere, and the Committee adopted the following recommendation: