Chile’s Carabineros repress, detain health workers protesting budget cuts

Our reporter
10 July 2026

The militarized Carabineros attacked some 600 members of the National Confederation of Municipal Health Workers (CONFUSAM) with water cannon, tear gas and pepper spray on July 8, as they attempted to deliver a letter to President José Antonio Kast at La Moneda Palace. Up to 15 people were detained, according to the Chilean Human Rights Commission (CCHDH), including national-level union leaders.

The CCHDH issued an unambiguous statement: “Protesting for public health is not a crime: Repression is not the answer.” It condemned the “excessive use of force” against workers whose “sole purpose was to deliver a letter” warning of the impact of CLP (Chilean peso) 2.8 trillion (more than US$3 billion) in public spending cuts, the freezing of the funding for a second consecutive year, and the threatened elimination of nearly 40 health programs.

The scenes outside La Moneda with water cannon dispersing a peaceful march and union leaders dragged into detention belong to the same global pattern of state violence against working-class opposition that has been deployed with particular savagery by the Erdo?an government in Türkiye, where wildcat strikers have faced protest bans, mass arrests, and the imprisonment of rank-and-file union leaders on fabricated charges. The Kast government, barely four months into office, is replicating these authoritarian methods against health workers whose only crime was demanding that the government honor its funding obligations to primary care.

The Kast government’s deployment of the same Carabineros Special Forces whose record of murder, mutilation and torture during the 2019 social revolt remains almost entirely unpunished confirms that the Chilean ruling class will not tolerate even the most restrained forms of protest when its austerity program is challenged.

The dismantling of primary healthcare

The immediate catalyst for the demonstration was the government’s failure to transfer the per capita adjustment, an inflation adjustment that should have been incorporated into the decree issued in December, before the public sector wage negotiations had concluded. Six months later, municipalities across Chile are owed more than CLP 21.8 billion (US$2.4 million). As CONFUSAM President Gabriela Flores explained: “The government is required to transfer the funds from the budget adjustment… so that the Ministry can send the resources to the health services and municipalities. Six months have already passed.”

The withheld CLP 21.8 billion exceeds the separate 0.5 percent budget cut formalized by Finance Minister Jorge Quiroz in Decree 333, which strips approximately CLP 19 billion from primary healthcare. The decree specifically targets the Universalization Program (CLP 3,947 million), the Pharmacy Fund (CLP 1,651 million) and Local Management Support (CLP 11,187 million). These are not abstract line items. The Pharmacy Fund is the mechanism through which clinics provide medications to patients. Local Management Support finances the administrative and logistical infrastructure that keeps the Family Health Centers (CESFAMs) functioning and the Prioritized Access System to reduce waiting times for major surgeries that are not covered under the GES. The Universalization Program was the Boric government’s flagship initiative to extend primary care coverage to all National Health Fund beneficiaries, regardless of the resources of their commune (*comuna*-municipal government)—now being strangled in its infancy.

The central mechanism through which the state finances municipal primary healthcare has been frozen for two consecutive years. It currently stands at CLP 11,932 per person (US$12.90), while the National Productivity Commission’s most conservative estimate places the real cost at CLP 16,322—a gap of CLP 4,390 per beneficiary, representing a chronic underfunding of approximately 37 percent. Primary health is being starved.

Beyond the immediate cuts, Kast’s four-year projections will amount to CLP 2.8 trillion (more than US$3 billion) in total cuts to public health of which primary healthcare absorbs approximately 40 percent. The threatened elimination of 40 health programs by 2027, including mental health, suicide prevention, palliative care and services for vulnerable populations, will transform an already dire situation into a full-scale crisis.

The structural consequence is already being felt. Municipalities unable to meet payroll obligations are beginning to invoke Article 48(i) of the APS Statute, the budgetary redundancy clause that allows the dismissal of permanent health workers when resources are insufficient.

© World Socialist Web Site

The Boric continuity

Broad Front Deputy Consuelo Veloso Ávila and Communist Party Deputy Daniela Serrano Salazar made radical-sounding statements calling on the government to explain the police violence and the budget cuts.

Veloso declared that "defending their right to protest also means defending the right of millions of Chileans to decent public healthcare," while Serrano demanded that the government "explain what prompted the police intervention." These are the same political forces who normalized repression against workers, students and indigenous communities. The Broad Front-Communist Party coalition implemented the very austerity that created the conditions for Kast's cuts, slashing government spending, raising interest rates to their highest level in four decades, and erecting the most expansive police state since the return to civilian rule.

Moreover, the funding adjustments did not begin with Kast. The 2025 budget passed under Gabriel Boric's pseudo-left government froze the per capita funding for the first time in its history. Boric's government introduced the Universalization Program—extending coverage on paper—while systematically refusing to fund it, forcing municipalities to absorb the cost by forgoing other operations and leaving staffing positions unfilled.

The same Boric administration that deployed Carabineros Special Forces to break a picket line at the Hualpén oil refinery in May 2022, arresting 11 workers, and ordered violent crackdowns on demonstrations commemorating the 2019 revolt, now finds its political heirs posturing as defenders of the right to protest. Their crocodile tears over the July 8 police repression are an insult to every health worker they betrayed while in office.

Chile at the bottom of the OECD

The crisis of Chilean primary healthcare cannot be understood in isolation from the structural inequality produced by four decades of free-market counterrevolution, initiated under the Pinochet dictatorship and entrenched by every subsequent civilian government including those of the Concertación and the Boric pseudo-left.

Chile spends US$3,749 per capita on health (PPP), well below the OECD average of US$5,967. The top spenders—the United States, Germany, Switzerland and Norway—spend three to four times Chile's absolute per-capita figure. The OECD classifies Chile as one of the countries that does not have universal or near-universal coverage for core medical services. Out-of-pocket spending remains disproportionately high, and only 59 percent of health expenditure is covered by mandatory prepayment, compared to the OECD average of 75 percent.

These figures are the statistical expression of a health system deliberately structured to serve the wealthy while condemning the working class to chronic underfunding, interminable waiting lists, and increasingly no care at all.

For rank-and-file committees and the expropriation of wealth

The WSWS defends unconditionally the right of CONFUSAM members to protest and condemns the police violence unleashed against them. But the strategy pursued by the CONFUSAM leadership—marches, letters to the president, appeals to parliament and "responsible" mobilization calendars timed to the November budget vote—is a dead end perspective repeated many times before. Flores herself emphasized that Thursday's mass delegates meeting would decide "with great responsibility" what actions to take, pointedly ruling out an immediate strike. This is the language of a union bureaucracy whose function is not to lead a struggle, but to contain one.

The union apparatus, dominated by the Christian Democratic Party (of which Flores is a militant), the Socialist Party, the Communist Party and other currents of the Chilean center-left, is structurally integrated into the state. It negotiates the terms of austerity rather than opposing it. It substitutes lobbying for mobilization and substitutes the budget calendar for the independent initiative of the working class. The result is that 70,000 health workers, and the millions of patients who depend on them, are left disarmed before a government that is systematically dismantling public healthcare.

What is required is the building of rank-and-file committees that break from the stranglehold of the emasculated and corporatized union apparatus. These committees must begin democratically discussing nationally, regionally and internationally what the real priorities of health workers should be. First and foremost, the expropriation of the fortunes of the oligarchic clans and the banks that have plundered Chile for generations, to establish a genuinely universal, well-resourced and adequately staffed public healthcare system.

The resources exist. What is lacking is not money but the political independence of the working class from the parties and unions that serve as instruments of capitalist rule. The struggle of Chilean health workers is not a national question to be resolved through "dialogue" with a fascistic government. It is a class question that can only be resolved through the international unity of workers against capitalism and its austerity, whether administered by Kast, Boric or any other representative of the ruling class.

To contact the WSWS and the Socialist Equality Party visit:

wsws.org/contact

© World Socialist Web Site