

Bulgaria's public health crisis

Europe's most underfunded welfare state struggles to cope with Covid-19

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Bulgaria has the weakest health and social security systems in the EU. Patients officially pay 48% of health costs, but that doesn't include the bribes required to obtain decent service. For years, nurses and doctors have emigrated to Western Europe, those remaining are overworked and underprotected. The far right is encouraging the government to scapegoat Roma. Left groups and NGOs are calling for rent strikes and debt cancellation. These practical solutions have not yet found wider support among the population.

The first cases of coronavirus in Bulgaria were detected on 8 March 2020 in the northern towns of Gabrovo and Pleven. One of them was a woman hospitalized with pneumonia, who infected a medical worker. She was already on the mend when she tested positive for SARS Cov-2. None of these patients had travelled abroad to a high-risk country or had contacts with such individuals. That the "patient zero" was never found shows that Bulgaria detected its cases rather late—in the stage of community transmission.

By then the grisly news from Lombardy had reached the country, and Bulgaria implemented a comparatively swift and drastic shutdown—albeit with some reticence. For example, the minister of culture first ordered the closure of theatres, cinemas, and other cultural venues. The entertainment industry protested, and after some haggling the ministry lifted the restrictions, instituting a "safe" seating protocol to avoid overcrowding. Several more days into the epidemic, however, all such events and venues were shut down completely.

The price of sanitizer, disinfectant, and face masks shot through the roof, and the items themselves became hard to find. Bulgaria's chief prosecutor thundered against profiteering, with little results. This failed to stop the health minister from ordering—several weeks into the crisis—the mandatory wearing of protective masks in public or risk being fined 5,000 Bulgarian leva (roughly 2,550 euro). He retracted his order the following day.

The government also went ahead with school and nursery closures, despite Prime Minister Boyko Borisov's initial hesitation, convinced by Benjamin Netanyahu that the coronavirus infection would not spread to children. The government worried that closing all businesses could "break the economy", and ordered only the closure of shopping malls, parks, cinemas, and restaurants. Some factories producing non-essential goods, such as weapons and car parts, remained open.

On 13 March, parliament declared a state of emergency in accordance with articles 57(3) and 84(12) of the Bulgarian constitution. It quickly transpired that the precise constitutional significance of the state of emergency had not been adequately enshrined in Bulgarian law, and the reshuffle of powers was conducted on the fly. A special law on the state of emergency was passed on 20 March (after surviving a presidential veto), listing new government powers such as the power to impose closures on some businesses and limits to some civil rights, including freedom of movement. The executive cannot rule by decree, but the cabinet, foremost the PM and minister of health, have seen their

powers extended.

The country has banned citizens of Germany, Italy, France, the Netherlands, the UK, Switzerland, Spain, China, and other Asian countries from entering. International freight traffic through Bulgaria's borders is being maintained through designated crossing points. Flights have been heavily reduced, but not halted entirely. Several disease control checkpoints have been established between provinces.

With 7,000 people tested thus far and 8–10,000 kits in stock, testing is nowhere near as extensive as recommended by the WHO's "Test, Test, Test" guidelines. State-run test centres use PCR tests. Private labs are testing as well, but behind a paywall. Some enterprising individuals are exploiting the demand for tests and selling dubious home kits acquired through the Internet.

As of 5 April there are 522 confirmed cases, 37 recoveries, and 18 deaths in Bulgaria. A woman who complained of fever and abdominal pain was "diagnosed" with coronavirus by her GP over the phone and told to ride it out at home. Days later she died of peritonitis. She is not counted as a coronavirus victim, but she should be. Fifty-three of the confirmed cases are medical workers. While it took 12 days to reach the first 100 infections, it took only four days to reach 200, another four for 300, three for 400, and only two days to reach 500. On 23 March, the chief of the national COVID-19 response team announced that the 36 patients in Sofia's two main corona hospitals had filled their ICUs to capacity, raising questions of how the state would respond when demand for mechanical ventilation inevitably skyrockets. ICU capacities have been boosted since, but people are still worrying whether the health system will be capable of handling the burden.

Can Bulgaria's Ailing Health System Cope?

The general situation is that while there is some material capacity—hospitals, beds, ventilators, albeit unequally distributed—there is insufficient personnel to deal with the influx of cases. For example, the city of Plovdiv constructed a make-shift corona-only "field hospital" with 300 beds, but the doctors ordered to staff it began requesting their annual paid vacation leave. Eighty-five nurses and doctors in Sofia resigned after their hospital was selected for COVID-19 treatment without consulting them. They claim the hospital is ill-equipped, while staff have little experience handling respiratory infections and complications. The same applies to small provincial hospitals. Frontline medical workers such as ambulance nurses and paramedics also complain of lacking protective gear and testing, potentially turning them into disease transmitters. Meanwhile, the Bulgarian parliament is rigorously testing all MPs after one of them tested positive.

In 1998, the healthcare sector embarked on a liberalization path that converted all hospitals into self-sustaining commercial entities. The reforms turned the Bulgarian healthcare system into a market of services structured by a voucher system, in which public and private hospitals compete for state money. This leads to a division of labour whereby private hospitals perform costlier and more lucrative operations, leaving more mundane, poorly remunerated but essential procedures to public hospitals. As budgets depend on output, performing cheaper services translates into perennial underfunding of public hospitals, which in turn make up for their budget deficits by charging patients for services already covered by insurance. Bulgaria has the highest share of co-payments in the EU, with nearly 48 percent of the healthcare budget coming from end-user out-of-pocket payments despite their regular social insurance contributions.

The problem is compounded by the poaching of Bulgarian medical workers by Western European countries offering better pay and working conditions. To illustrate, a large provincial hospital recently was forced to close its maternity ward after the last neonatologist left, forcing women in labour to travel 90 kilometres to the nearest hospital. Bulgaria haemorrhages most of its nurses abroad, while half of those still at work are close to retirement age. Lower Austria recently proposed

importing some 250 Bulgarian nurses urgently needed in nursing homes via charter flights. The country-wide shortage of nurses stands at 30,000, while the number of midwives has halved in the last two decades. Monthly take-home income for nurses ranges between 270 and 450 euro in provincial hospitals, and 350–650 euro in major facilities. Meanwhile, some surgeons in public hospitals exploit the voucher system and rake in tens of thousands per month performing unnecessary operations.

Bulgaria has 130 private hospitals, all of which affirmed their readiness to take in coronavirus patients should the designated state facilities no longer be able to cope. A telling incident occurred when Kiril Domuschiev, a millionaire and president of one of the industrial capital associations, flouted the COVID-19 hospitalization protocol by checking himself into a private hospital, causing a great disruption to its ordinary operations.

In addition, municipal hospitals across the country have expressed concerns that with the voucher system and the ongoing curtailment of non-emergency and non-COVID-19-related medical activities, their income will be gravely depleted and potentially lead to bankruptcy. Smaller hospitals are not only understaffed, but frequently their personnel are close to retirement age, making them more susceptible to the infection. Overall, the crisis has laid bare the major structural problems in the Bulgarian health care system and its extreme fragility.

Dual Power

The government began the fight against the outbreak by establishing the so-called “Coronavirus Response Team” to determine and direct its response to the epidemic. In line with the prevailing war rhetoric shaping the perception of the pandemic the world over, the Response Team is chaired by a military surgeon.

Controversy erupted over its strategy for combating the disease. The Coronavirus Response Team uses PCR tests. Because they require well-equipped labs and well-trained lab workers, however, Bulgaria cannot embark on South Korean-style mass testing, so it imposed a state-wide lockdown in a bid to slow transmission. The combination of testing only symptomatic patients and a generalized lockdown was challenged by a group of doctors, among them adherents to the now-abandoned “natural herd immunity” initially adopted by the UK government. They propose quarantining only vulnerable populations, while the youth “take one for the team” and develop herd immunity by exposing themselves to contagion.

The controversy revolves around mass quarantine vs. mass testing. The latter approach is gaining traction, and was also endorsed by a notable group of Harvard-trained economists and entrepreneurs. It constitutes a form of epidemiological neoliberalism that puts the economy first, whereas the Response Team aims to radically slow the contagion to avoid overwhelming the healthcare system regardless of economic costs. As opposition grew Borisov appointed a newly formed “Medical Expert Council”, but stressed that it only had auxiliary functions. Nevertheless, open warfare erupted between the Response Team and the Council resulting in constant media spats. With reports pouring in from other countries that the rapid tests were massively unreliable and with Borisov himself throwing his weight behind the Response Team, the Council eventually toned down their vocal support for mass testing and limited quarantine before disbanding the following day.

On 24 March, exactly three weeks after the first cases were confirmed, the government announced it would participate in the EU’s shared testing kits tender by ordering one million tests. More extensive testing will commence in May, hopefully revealing the true scope of the outbreak in Bulgaria.

Churches stand out as an epidemiological hazard because they stubbornly refuse to cancel services and the state of emergency does not apply to them. The Church defends itself by saying that “only Communists close churches”, while PM Borisov stated he would not interfere in the Church’s affairs.

Free Loans for the Working Class!

The ruling coalition (comprising one centre-right and three far-right parties) does not hide its acute pro-business bias. Even so, the economic response was characterized by the “back-and-forth” approach mentioned above. For example, although the European Commission quickly relaxed its strict budget deficit and debt-to-GDP controls, early in the crisis Borisov derided borrowing or taking money from the fiscal reserves as a form of “populism”. Eventually, he announced the state would borrow 10 billion leva.

The economic contraction induced by COVID-19 is already felt by people in permanent, non-permanent, precarious, and seasonal jobs, as well as in sectors dependent on large crowds (sports, entertainment). The popular Bansko ski resort was placed under quarantine, leaving hundreds of workers without food or shelter. The number of people filing for unemployment has doubled since the state of emergency was announced, and over 31,000 people have lost their jobs since it took effect. To stymie the impending explosion of unemployment, the government promised to absorb some of the expenses.

While countries like Italy froze mortgages, rent, utilities, and debt repayments, the Bulgarian government merely advised self-regulating financial institutions to postpone credit servicing for three months at their own discretion, because it was “in their self-interest”. On 3 April, the Bulgarian National Bank invited banks to work out rules for a private moratorium on loan repayments. Unlike Italy, the Bulgarian government merely doubled the penalty-free period (from ten to 20 days) for people falling behind on their bills.

While even conservative governments like the Trump administration seriously discuss some forms of direct transfers like basic income, Bulgaria will extend a 200 million leva government-backed “interest-free” credit line to workers on unpaid leave and the self-employed, while businesses are set to benefit from EU grants and interest-free credit-lines totalling 4.5 billion leva. In addition, the government urged employers whose businesses were shut down by government orders to retain some “idle” workers for six months by financing 60 percent of their salary for three months. Even companies that cannot afford paying the 40 percent share applied for the scheme. The money will reach workers via their employers instead of transferring it directly to the former, as Bulgarian trade unions demand. Moreover, it will not constitute an additional government expense, as the funds will be taken from the unemployment security fund financed by workers, which pays 60 percent of salaries in the case of unemployment as it is.

While the payment of corporate and income taxes (the lowest in the EU) has been postponed until June, the VAT—which punishes the consumption of the majority (and is among the highest in the EU)—has not. Only 20 million leva are expected to buttress the state’s home-care agency that delivers food and checks on elderly and vulnerable people. Fifty million leva will be spent on an “Easter bonus” for pensioners. One half-billion leva will top up the wages of “frontline workers”: doctors, policemen, and soldiers.

The large business associations seized the opportunity to voice their arrogant proposal that workers take a pay cut to shoulder the burden “more equally” with employers. The associations also forced the state to cover their share of social insurance contributions. The only sensible measure—a freeze on late fees—is now under attack from businesses and their right-wing political representatives.

To enforce the quarantine, the government relies primarily on repressive measures such as

exorbitant fines and up to five years of jail-time for those who violate the lockdown, instead of working to ensure the safety of people staying at home—especially the elderly and the precariously employed.

Predictably, COVID-19 also beefed up the repressive arm of the state. Roma citizens are subjected to stricter movement controls. Days before the government enforced internal border controls between the provinces, some towns already experimented with the measure by cordoning off Roma neighbourhoods solely on the basis of “suspected” infections. In Burgas, city authorities deployed new technology to nefarious ends, monitoring the body temperature of residents from above with a thermal camera-equipped drone. The emergency law now allows mobile phone operators and Internet providers to share user locations with the police.

The situation for women quarantined with abusive husbands is predictably dire. Domestic violence helplines and survivors’ organizations registered a spike in abuse amidst a concomitant reduction in helpline usage, because abusers and abused now spend all of their time together. While three women lost their lives to violent partners this year before the state of emergency began, four have died in the three weeks since. The looming recession will most likely worsen the situation by making women even more economically dependent on their partners, further complicating their ability to leave. Unfortunately, nothing in the emergency response to the pandemic caters to the needs of domestic violence victims (such as by increasing the capacity of crisis centres or help lines). Informal workers, who are overwhelmingly female, will be particularly hard-hit as demand for crafts and agricultural produce dries up and catering falters.

According to police, no refugees have exhibited coronavirus symptoms thus far. All intercepted asylum seekers are placed in a 14-day quarantine, during which they cannot speak to lawyers but, according to police, medical doctors check on them.

The situation of prisoners is quite hard, as all visits from family members and friends have been suspended until the state of emergency is lifted. Prisoners are asking for amnesty to prevent the outbreak of coronavirus in Bulgaria’s sorely underequipped prisons.

The Left against the Costs of the COVID-19 Battle

Bulgaria’s Left and working-class movements have found themselves in the situation of pushing for more protective measures on the one hand, while opposing the incurred costs being imposed on society’s most vulnerable. As the threat of mass contagion and the possibility of a lockdown grew more tangible, the employer’s organizations initially tried to have quarantine time deducted from workers’ annual paid leave. After the trade unions pushed back, however, the proposal was dropped and quarantine will be considered sick leave. Nonetheless, some employers are forcing workers to take unpaid leave.

In a further attempt to push for more worker-friendly policies against the new coronavirus, the left-wing NGO Solidarna Bulgaria drafted a list of measures to be implemented in a pandemic, such as free childcare for doctors and on-duty workers, a state fund that guarantees salaries in the coming recession, a freeze on taxes, rent, and mortgage payments, etc. As far as internationalism is concerned, the proposal calls on the EU to request help from China and Cuba, as both countries have valuable experience in fighting contagious pathogens.

The unions sent a letter of protest to the government challenging the exclusion of the mining, manufacturing, and energy sectors (employing some 542,000 workers) from the 60/40 financing bill. The unions noted that many enterprises in these sectors have fully or partially closed down and sent their workers on annual leave, most likely to be followed by mass layoffs. Their demand that the bill be revised and the three excluded sectors be recognized as eligible for government support was

eventually heeded.

Save for the minuscule union of the self-employed and a coalition of left-wing organizations, no one struggles for the implementation of a basic income scheme for all workers—whether in permanent, precarious, grey, or self-employment—until the crisis abates. Absent such measures and given the galloping unemployment that the half-baked 60/40 scheme is incapable of stemming—along with the reluctance to freeze utilities and prices of basic commodities—food riots will likely erupt when sanitary conditions are safe enough.

Following a proposal to discipline medical workers and practitioners who refuse to treat COVID-19 patients (which came in the wake of mass nurse resignations over inadequate safety equipment and ventilators), citizens drafted a petition calling for full solidarity with Bulgarian doctors and medical specialists and stepping up investment in public health.

The opposition, represented by the Bulgarian Socialist Party, made a singular achievement by agreeing to support the emergency executive powers of the government in exchange for limiting them to one month (in place of the initially proposed indefinite state of emergency), which has since been doubled. If that is the most the opposition can muster, the costs for working people will likely continue to mount.

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