





Building a Better World Together: Cooperative Contributions to the SDGs

Good health and well-being





HEALTH AND WELL-BEING: A FOUNDATION FOR SUSTAINABLE DEVELOPMENT

Health and well-being are foundational to human dignity, sustainable development, and resilient societies. Yet more than half the world's population still lacks access to essential healthcare. Rural populations, informal workers, and marginalized communities face the most severe barriers—barriers that were magnified by the COVID-19 pandemic, which overwhelmed public systems and widened existing disparities¹. Rising healthcare costs, shortages of trained health workers, and fragile infrastructure further threaten the delivery of equitable and quality services.

As the world observed **World Health Day** on April 7, 2025, the global health landscape remains a mix of progress and persistent challenges. This year's theme, "Healthy Beginnings, Hopeful Futures," draws attention to maternal and newborn health, an area where inequality remains stark. Nearly 300,000 women still die each year from pregnancy or childbirth-related complications, while more than 4 million newborns are lost to stillbirth or early death, many from preventable causes. These losses are concentrated in low-income and conflict-affected settings, where access to prenatal care, skilled birth attendants, and postnatal support remains limited.²

Sustainable Development Goal 3 (SDG 3) aims to ensure healthy lives and promote well-being for all at all ages. It includes targets for universal health coverage (UHC), reduced maternal and child mortality, improved mental health, access to sexual and reproductive health services, and better preparedness for health emergencies. But progress is lagging. Four out of five countries are off track to meet maternal survival targets, and non-communicable diseases like hypertension and diabetes are compounding pregnancy-related risks.

Reversing these trends demands urgent investment and coordinated action. A people-centered, rights based approach that strengthens healthcare systems, addresses social determinants of health, and improves working conditions for health and care workers is essential to building a future where every woman, child, and community not only survives but thrives. This includes ensuring occupational safety and health (OSH) for all health and care workers, many of whom face long hours, low pay, and high exposure to physical and psychological risks. Safeguarding their well-being is critical not only to workforce retention and service quality, but to the overall resilience and sustainability of health systems.

THE COOPERATIVE DIFFERENCE IN HEALTHCARE

Health cooperatives trace their origins to the 19th century, when mutual aid societies and worker associations began organizing healthcare services for their members in response to limited and unequal access. Rooted in solidarity and collective action, these early efforts laid the foundation for a people centered model of healthcare that continues to grow and diversify.

Over time, health cooperatives have evolved to meet changing needs, responding to shifting demographics, rising healthcare costs, and persistent inequalities. Their presence continues to grow globally. According to the International Cooperative Alliance, more than 3,300 health cooperatives now operate across 76 countries, serving over 100 million households and generating an annual turnover of 15 billion US dollars. The 2019 UN Secretary-General's report on cooperatives in social development recognized this growing role, highlighting how cooperatives contribute not only to improved health outcomes but also to better working conditions for healthcare professionals.³

Health and social cooperatives exist in diverse forms, including user-owned clinics, workerled home and elder care services, cooperative pharmacies, and community based insurance schemes. Their flexible structures allow them to adapt to local needs, integrating medical services with social support, especially in underserved areas. Many actively engage women, older persons, and informal workers as members, providers, or decision makers, ensuring services reflect community priorities. They reinvest in service quality, workforce development, and innovation, while inclusive and participatory governance strengthens health literacy, accountability, and resilience. Above all, their deep community roots foster trust, an essential foundation for effective and equitable health systems.

¹ UNSG Report on Cooperatives in Social Development 2021: https://www.un.org/development/desa/cooperatives/2021/10/18/new-sq-report-on-cooperatives-in-social-development/

World Health Organisation report on measuring and monitoring quality of care: https://www.who.int/publications/i/item/9789240105737

³ UNSG Report on Cooperatives in Social Development 2019: https://social.desa.un.org/publications/cooperatives-in-socialdevelopment-2019-report

KEY CONTRIBUTIONS OF HEALTH COOPERATIVES

Health cooperatives offer flexible, people-centered solutions that improve service delivery, lower costs, and expand access, especially where public and private systems fall short. As explored in the Cooperative Health Report,4 their impact can be seen across five key

1. Providing Essential Health **Services**

Health cooperatives deliver a broad spectrum of care, from general medical services to specialized treatment, mental health support, rehabilitation, and dental care. These services are designed to be affordable, inclusive, and responsive to community needs, particularly in areas where public or private systems fall short.

In Uganda, KAMACOS reaches over 80,000 people through its cooperativerun health center and mobile outreach, offering free and low-cost care in rural areas. In Lesotho, the Village Health Workers Cooperative Society delivers primary healthcare through a savings and credit scheme, offering a sustainable, community-based solution that improves access and continuity of care.

2. Managing Health Facilities

Many cooperatives actively manage healthcare facilities that prioritize patient well being over profit. These facilities are guided by shared ownership, reinvestment in services, and democratic oversight.

Spain's Espriu Foundation integrates cooperative hospitals, insurance, and care services, reinvesting profits to improve access for 2.2 million users. It also hosts the International Health Cooperative Organisation (IHCO), amplifying cooperative voices in global health policy spaces.6

3. Expanding Access to Insurance

Health insurance cooperatives offer inclusive, community driven alternatives to commercial providers, often reaching individuals excluded from conventional coverage.

In the Philippines, CHMF covers 60,000 members through cooperative-affiliated plans⁷ and in Kenya, CIC Insurance serves over 1 million people with affordable microinsurance.8 Globally, the mutuals and cooperative insurance sector wrote over USD 1.41 trillion in premiums in 2022, capturing a record 26.3% share of the insurance market, according to the latest ICMIF report.9

4. Supporting Vulnerable **Populations**

Cooperatives play a vital role in delivering healthcare to marginalized groups, including Indigenous Peoples, migrants, older persons, and those with disabilities.

In Australia, the Ballarat and District Aboriginal Cooperative (BADAC) provides integrated health and social services grounded in cultural safety, including medical care, aged care, and rehabilitation support. 10 In Ireland, The Great Care Coop was founded by migrant caregivers to address low wages and exploitative conditions in the home care sector. Operating under the Buurtzorg model,11

It empowers care workers with decision making authority, fosters close caregiver client relationships, and delivers dignified, person-centered care. 12

5. Responding to Health Crises

The adaptability of health cooperatives became especially clear during the COVID-19 pandemic, when their community embedded structures enabled rapid response. From digital health services to flexible safety protocols, cooperatives mobilized resources quickly to protect their members and communities.

In Italy, Gulliver Cooperativa Sociale, which manages health centers and senior care homes, redesigned its operations to prevent infection, including new training, spatial modifications, and safety procedures. As a result, its Cialdini care home recorded zero COVID-19 cases, and half of its ten facilities remained COVID free during the crisis.13

6. Championing Data Sovereignty and Trust

Health cooperatives are uniquely positioned to ensure ethical data governance by aligning information systems with cooperative principles of transparency, accountability, and member control.

In Switzerland, MiData is a health data cooperative that enables individuals to manage and share their personal health data securely, with full transparency and democratic oversight. Members decide how their data is used, whether for care, research, or community benefit, ensuring that sensitive information remains under the control of those it affects most.14

International Health Cooperative Organisation (IHCO) & EURICSE (2018). Cooperative Health Report: Assessing the Contribution of Cooperatives to the SDG on Health and Well-being.

⁵ KAMACOS (Facebook page): https://www.kamacos.org/

Fundación Espriu, Spain: https://www.fundacionespriu.coop/

Cooperative Health Management Federation, Philippines: https://dev.chmf.coop/products/

CIC Insurance Group, Kenya: https://cicinsurancegroup.com

⁹ The ICMIF Global Mutual Market Share 2024 report: https://www.icmif.org/mms-2024/

Ballarat and District Aboriginal Cooperative (BADAC), Australia: https://www.badac.net.au/

¹¹ Buurtzorg is a Dutch home-care organization known for its nurse-led, self-managed teams and holistic approach to community care. https://www.buurtzorg.com

¹² The Great Care Co-op, Ireland: https://www.thegreatcarecoop.ie/

 $International\ Cooperative\ Alliance: How\ healthcare\ cooperatives\ are\ making\ a\ difference\ during\ the\ COVID-19\ crisis: \ https://ica.coop/en/newsroom/news/how-healthcare-cooperatives-resources-re$ 13 are-making-difference-during-covid-19-crisis

MiData, Switzerland: https://www.midata.coop/en/home/

COOPERATIVES IN ACTION: CASE STUDIES

Japanese Health and Welfare Co-operative Federation (HeW CO-OP)





The Japanese Health and Welfare Cooperative Federation (HeW CO-OP) brings together 96 cooperatives that provide integrated medical and social services across the country. A defining feature is its use of "Han groups," small neighborhood-based units that engage members in health promotion through activities such as exercise classes, healthy cooking, and cancer screening drives. These groups play a key role in preventing noncommunicable diseases while strengthening community ties. HeW CO-OP also invests in training medical and care professionals and integrates members and workers into decision-making processes, reinforcing accountability and responsiveness. By embedding health education into daily life and prioritizing prevention, it fosters healthier and more resilient communities.15

Uganda Health Partners Cooperative Limited (UPH)



Uganda Health Partners Cooperative Limited (UPHC)¹⁶ is a worker-owned cooperative that supports around 30 community-based health insurance cooperatives working with over 70 healthcare providers across the country. Together, these cooperatives offer prepaid benefits packages to more than 40,000 members, reducing out-of-pocket costs and improving access to care in underserved areas. UPHC also trains new cooperatives, promotes financial literacy, and supports data-informed planning, helping to scale sustainable and locally led models. By integrating insurance with service delivery and supporting policy engagement, UPHC demonstrates how cooperative health models can expand coverage, enhance equity, and complement national health systems.

Unimed, Brazil

Unimed¹⁷ is the largest system of medical cooperatives in the world, with 339 regional cooperatives, 166 hospitals, and more than 156,000 workers, serving over 20 million people across 92 percent of Brazil. It offers both private and supplementary services, with a strong focus on prevention, health education, and social responsibility. Through its National Policy on Social Responsibility, Unimed

supports community outreach, the inclusion of vulnerable populations, and environmentally sustainable practices. Physicians benefit from independence and shared resources, while patients receive accessible and high-quality care. Its scale and structure illustrate how cooperative models can deliver broad health services while remaining rooted in accountability and social values.

The Federation of Cooperative Pharmacists of Greece (OSFE)



The Federation of Cooperative Pharmacists of Greece (OSFE) ¹⁸represents over 5,000 pharmacists working in 25 regional cooperatives, supplying more than half of Greece's pharmaceutical needs. Its cooperative logistics network ensures access to medicines across urban, rural, and island communities, filling critical gaps in the country's healthcare system. During the COVID-19 pandemic, OSFE mobilized quickly to distribute face masks, selftests, and scientific information, while continuing to educate members on safety and treatment protocols. By balancing professional autonomy with equitable reinvestment and community service, OSFE shows how cooperatives can build strong and decentralized health infrastructure rooted in the public interest.

¹⁵ HeW CO-OP, Japan: https://www.hew.coop

¹⁶ UPHC, Uganda: https://www.healthpartners.com/about/community/international-development/

¹⁷ Unimed, Brasil: https://www.unimed.coop.br

¹⁸ OSFE, Greece: https://www.osfe.gr

UNLOCKING THE POTENTIAL OF **HEALTH COOPERATIVES**

Despite their proven contributions, health cooperatives often operate in policy blind spots, lacking formal recognition, access to financing, and integration into national health strategies.¹⁹ Structural and regulatory barriers, workforce shortages, and limited investment in care infrastructure continue to constrain their reach, particularly in low income and informal settings.²⁰ Many cooperatives remain underrepresented in global health data and research, making it difficult to quantify their full impact on universal health coverage and decent work. Still, momentum is growing. The World Health Organization has emphasized community based and people centered care as a global priority,21 while ILO research highlights the role of cooperatives in expanding home based care and HIV/AIDS prevention.²² Technological innovation and evolving social protection frameworks are creating new entry points for cooperative health models, particularly in remote, aging, or underserved communities. To fully realize this potential, health cooperatives require supportive legal frameworks, targeted investment, and inclusion in policy and financing mechanisms.



1. Strengthening Legal and Regulatory

Governments and policymakers should establish and enforce regulatory frameworks that acknowledge and support the unique characteristics of health cooperatives, and promote an ethical and equitable care economy through cooperatives. This includes recognizing cooperatives as legitimate healthcare providers, reducing bureaucratic barriers, and ensuring fair competition with public and private healthcare institutions through, but not limited to, a multistakeholder approach. Legislation should enable cooperatives to access funding, establish new healthcare models that have people at the center of their enterprise, including advancing data sovereignty, and integrate with national healthcare systems.



2. Expanding Financial Support and

Governments should create targeted funding mechanisms, including grants, low-interest loans, and tax incentives, to help cooperatives establish and expand their operations. Special financial tools should be developed to support new cooperative healthcare ventures, ensuring their sustainability. Public-private partnerships can also play a role in financing cooperative healthcare initiatives, leveraging private sector resources for the public good.



3. Enhancing Education, Training, and Research

Investment in education and training is essential for strengthening cooperative healthcare models. Governments, cooperatives, and academic institutions should work together to integrate cooperative principles into medical and business education curricula. Training programs should focus on governance, financial management, and healthcare service delivery within the cooperative framework. Research initiatives should explore innovative ways to improve cooperative healthcare models and assess their impact on public health systems.



4. Strengthening Cooperative **Networks and Advocacy**

Health cooperatives should unite under representative organizations to amplify their voice in policy making and healthcare reforms. Strong networks enable cooperatives to share best practices, pool resources, and advocate for policies that support their growth. Governments and international organizations should recognize and engage with these networks in policy dialogues, ensuring that cooperative models are considered in global health strategies.

As we mark the International Year of Cooperatives (IYC) in 2025, it is time to elevate their role in transforming health and well-being for all.

United Nations Secretary-General. (2019). Cooperatives in Social Development: Report of the Secretary-General (A/74/206).

ILO (2022). Care at the Core: Global Report on Care Workers

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Under the theme "Cooperatives Build a Better World," IYC 2025 aims to raise awareness, promote growth, and inspire leadership in the cooperative movement. This series explores how cooperatives drive progress toward the 17 Sustainable Development Goals (SDGs) by fostering economic inclusion, democratic participation, and social solidarity for over one billion members worldwide.

Established in 1971, the Committee for the Promotion and Advancement of Cooperatives (COPAC) is a multi-stakeholder partnership that champions and supports people-centered and self-sustaining cooperative enterprises. Its current members include the International Cooperative Alliance (ICA), the International Labour Organization (ILO), the United Nations Department of Economic and Social Affairs (UNDESA), the Food and Agriculture Organization of the United Nations (FAO), and the International Trade Centre (ITC)



Committee for the promotion and advancement of cooperatives





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