THE ROAD TO UNIVERSAL SOCIAL PROTECTION: HOW COSTA RICA INFORMS THEORY

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ABSTRACT

How are universal social programs built in countries on the periphery, where resources are more limited and initial inequalities higher than any ever seen in OECD countries? Historically it has been very difficult, and even those countries that committed themselves to serious welfare efforts did so with stratified, rather than universal, transfers and services. Yet there have been some exceptions, and Costa Rica ranks among the most successful. The bottom-up expansion of social security, along income/class rather than occupational lines, was very important in the creation of a basic floor of benefits among the low and low-middle salaried population. Gradually, the middle and upper-middle groups were later on brought on board as well, in sharp contrast with the rest of the region where social insurance was shaped for and according to the preferences of various middle-class groups.

This paper explores the origins of Costa Rica’s successful universalism through a historical institutional analysis of the creation of social insurance in the early 1940s. We explicitly avoid single-factor explanations, emphasizing the confluence of political and technical factors and domestic and international influences instead. Our study acknowledges the importance of political leadership, which created windows of opportunities in a democratic context, but gives more weight to other factors. In particular, technocrats played a central role in adapting international ideas to the local context, in shepherding the program through the legislative process, and in leading the implementation of the program. The absence of powerful veto powers and a friendly international policy environment completed the set of necessary conditions behind the foundation of universalism.

RESUMEN

¿Bajo qué condiciones se construyen programas sociales universales en países periféricos donde los recursos son limitados y las desigualdades iniciales mayores que las nunca experimentadas en los países de la Organización para la Cooperación y el Desarrollo Económico (OCDE)? Históricamente ello ha sido difícil incluso en aquellos países con un alto esfuerzo fiscal en materia de bienestar, en los cuales las transferencias y los servicios fueron generalmente estratificados antes que universales. Sin embargo, ha habido algunas excepciones y Costa Rica se encuentra entre las más exitosas. La expansión de la seguridad social “desde abajo” de la estructura socioeconómica, a partir de criterios de ingreso y clase antes que de ocupación, fue muy importante en la creación de un piso básico de beneficios entre la población de salarios bajos y medios bajos. Gradualmente se fueron luego incorporando también los sectores medios y medios altos, en marcado contraste con el resto de la región adonde el seguro social fue moldeado para a partir de las preferencias de variados sectores medios.

Este artículo explora los orígenes del exitoso universalismo costarricense a través del análisis histórico de la creación del seguro social a inicios de los 40s. Tratamos de evitar explicaciones unidimensionales, enfatizando, en su lugar, la confluencia de factores políticos y técnicos, domésticos e internacionales. Nuestro estudio reconoce la importancia de los liderazgos políticos en crear ventanas de oportunidades en escenarios democráticos, pero le da un peso específico mayor a otros factores. Concretamente, la tecnocracia tuvo un papel fundamental en adaptar ideas internacionales al contexto local, en blindar el programa a través del proceso legislativo y en liderar su implementación. La ausencia de poderes de veto poderosos y de ambientes internacionales de política amigables completan el conjunto de condiciones necesarias en la instauración de bases del universalismo.
INTRODUCTION

How are universal social programs built in countries on the periphery, where resources are more limited and initial inequalities higher than any ever seen in Organisation for Economic Co-operation and Development (OECD) countries? The rediscovery of the positive contribution to equity and welfare of policies that reach the entire population, with similar generous transfers and high-quality services provided for everyone rather than for targeted groups only, has placed this question at the heart of debates in political economy. While targeting promotes two-tiered societies depending on people’s access to public or market social services, universalism brings various social classes together in facing a similar fate. Empirical evidence demonstrates that building universal social policies in the periphery has historically been very difficult. High concentrations of power, prevailing informal economies, political instability, and macroeconomic volatility hinder their creation and expansion. Those countries that commit themselves to serious welfare efforts do so with high levels of stratified, rather than universal, transfers and services. Still, a small group of countries in Latin America and Africa have managed to overcome these obstacles and establish sound redistribution and some degree of universalism.

Among these select countries, Costa Rica ranks as one of the most successful. In the 1930s, its social policy was underdeveloped, and the country’s living conditions were not particularly impressive from a comparative perspective. Infant mortality, for example, was 159 per 1,000, a rate higher than that found in Ecuador, El Salvador, or Mexico during the same period. By 1960, however, Costa Rica outperformed all three countries with a rate of 87 per 1,000. Transformations similarly remarkable took place across other policy sectors. Poverty reduction was rapid, and by the 1970s Costa Rica became one of the countries with the strongest human development indicators. This was largely due to the prominent role played by universal social policy, which had a unique integration of social insurance and social assistance and represented a successful modified version of

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2 We agree with John Stephens’s observation that our analysis of a single case over a short period of time
the “workerist” model (Seekings 2010). Some observers have gone so far as to argue that Costa Rica is the social policy equivalent of the East Asian economic miracle and the best example of social democracy in the periphery (Sandbrook et al. 2007).

Explanations as to how this was possible are far from satisfactory. Scholars tend to take for granted the role of pressures “from below” (Huber 1996), underemphasizing the role of actors involved in statecraft (Rosenberg 1979, 1981). Alternative accounts rely on the political projects of “great men” (Segura-Ubiergo 2007). Overall, in regard to the periphery, the weakness of empirical evidence tuned to contemporary theoretical debates contrasts with a large and empirically rich body of literature on social policy and welfare regimes in OECD countries.

To explore these matters we focus on social insurance, the keystone of the Costa Rican universal welfare regime. This policy for old-age pensions and healthcare provision was created from scratch in 1941 under a unified system, reaching people from the bottom up: first workers and later on, their families. Throughout this process, democratic arrangements played a role as a necessary but not a sufficient condition. All four Latin American countries that managed to create robust welfare institutions during the twentieth century (Argentina, Uruguay, Chile, and Costa Rica) experimented with long-term democratic arrangements. Only Costa Rica, however, managed to establish universal, rather than highly stratified, social policies (Filgueira 1998).

Drawing from a historical-institutional approach, this study engages with the available literature on welfare states in the periphery and proceeds to a qualitative analysis of primary and secondary sources. We focus on the process of policy formation rather than on the long-term structural factors behind it. By going beyond structural factors and concentrating on critical junctures, we can explain why policies were adopted at particular moments. By paying attention to specific laws, we are able to offer a rich empirical picture of who intervened in policy and who did not and we can also account for the specific architecture of the system. By concentrating on the foundational moment
of policy, we are able to trace the key factors that influenced Costa Rica’s subsequent trajectory.2

Our findings have implications for our understanding of how basic universal social policy can be established in the periphery and as such provide significant clues for contemporary policy formation. We argue that the successful enactment of these new policies reflects the interaction among (a) political leaders responding to (internal or external) threats; (b) international policy menus that expand available policy options; (c) internationally embedded technocrats who become carriers of these ideas, and (d) weak veto players. Our research on Costa Rica’s successful statecraft highlights the importance of technocrats and international policy environments for those countries where political leaders pursue the formation of universal social policy in contemporary times.

**UNIVERSAL SOCIAL POLICY AND ITS THEORETICAL DETERMINANTS**

Securing a high level of social spending in countries on the periphery is complicated (Wood and Gough 2006). Weak states that have insufficient resources and strong political and economic elites with excessive power face significant constraints. Even successful economies like that of East Asia have been unable to create a large welfare system outside education and basic health. Putting social investment to the service of equalizing rather than reproducing market inequality is yet another challenge: countries may focus decommodification on people who have more market power to start with.

Building universal social programs benefiting the entire population equally is particularly complicated. Social programs are usually highly segmented with benefits targeted to relatively small segments of the working or middle classes. In most cases, the poor have traditionally been incorporated through social programs driven by clientelistic mechanisms that have a limited effect on the promotion of equity, the reduction of vulnerabilities, and the expansion of capabilities and rights.

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2 We agree with John Stephens’s observation that our analysis of a single case over a short period of time tends to privilege voluntary decisions and actions and to downplay the structural constraints that limit some options of historical actors and encourage others. Elsewhere, we have aimed to stress structural factors for the period 1950 onwards (Martínez Franzoni and Sánchez-Ancochea forthcoming).
The scarcity of successful cases of universal social policies is unfortunate, because historical evidence shows that universal social policies can have a stronger redistributive capacity than segmented-corporatist and even targeted policies alone. Among developed countries, this is clearly the case. Unlike liberal welfare regimes such as that of the United States, the social-democratic welfare regimes established in the Nordic countries were successful in the promotion of publicly provided, universal services for all citizens. The public sector directly produced a large range of services, including “health care…day care, elder care, job training programs, temporary employment programs in the public services, and after school programs…along with improvement of maternal and parental leave” (Stephens 2002, 310). The result of these policies has been a much greater income redistribution in social-democratic regimes than anywhere else. In the early 1980s, for example, the Gini coefficient in Sweden decreased by 52 percent as a result of taxes and transfers compared to 38 percent in Germany, 21 percent in Switzerland, and 26 percent in the United States.

The positive impact of universalism on different dimensions of inequality is also a valid assumption for peripheral countries. This becomes evident from considering the trajectory of Kerala, Costa Rica, or Mauritius during the second half of the twentieth century, when each adopted inclusive social policies and, more specifically, inclusive social security (Sandbrook et al. 2007, 11). All three countries reached a higher life expectancy than their level of income would have predicted, together with lower poverty rates and a steady wage growth across the board. For example, in Kerala between 1974 and 1985 the wage of male paddy laborers increased by 106 percent (Heller 1995)—faster than Kerala’s GDP and wages in other parts of India—while Costa Rican inequality rapidly decreased during the 1960s as universal policies were expanded: between 1962 and 1971 the Gini coefficient went from 0.52 to 0.44 (Román 2009).

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3 Sandbrook et al. (2007) also analyze the case of Chile after 1990. However, they acknowledge that Chile has a more segmented welfare regime than the other three countries and, as a result, higher levels of inequality.

4 The coefficients for 1962 and 1971 are not strictly comparable because they use different methodologies and come from different sources. Nevertheless, they give a sense of the general improvement in distributional outcomes during this period.
If we consider universalism a desirable policy approach—an idea that is becoming increasingly popular in Latin America and beyond (see, for example, the calls for “basic universalism” in Molina 2006)—the question is what its policy determinants are. How can we explain the adoption of universal social policies in a few successful peripheral countries? How valid is the experience of OECD countries to explain these unique cases?

**Dominant explanations for OECD countries**

The extensive literature on comparative political economy and welfare regimes in OECD countries constitutes an obvious point of departure from which to answer these questions—and to explore them in a development context. Although a full examination of the debate is beyond the objectives of this paper (see Amenta 2003), it may be useful to concentrate on three different drivers. The nature of the welfare regime may be the result of (a) pressures from below coming from organized actors; (b) preferences from the business sector; or (c) a state-led project. In parallel to these drivers, many authors also highlight the role of policy paradigms and political ideas in creating opportunities for expanding universalism at specific moments in time.

The power resource approach argues that universal policy resulted from working-class pressure (in many cases, in coalition with small farmers), both directly and through left-wing political parties. Policy formation was the outcome of the pressure and demands of excluded groups and of subordinate classes. The business sector may have accepted some of these policies, but did not drive them (Rueschemeyer, Stephens, and Stephens 1992; Huber and Stephens 2001; Collier 1999; Esping-Andersen 1985).

The alternative varieties of capitalism literature argues that approaches such as “power resource theory, and their lack of production or growth discussions, are simply of no help in understanding how capitalism has thrived in large redistributive welfare states” (Iversen and Soskice 2009, 439). Rather than the outcome of workers’ demands, social policies respond to business needs to secure a highly skilled labor force and to increase productivity in Western Europe (Mares 2003). Since firms will only invest if profitability

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5 The power resource literature is vast, and it would be impossible to do justice to it in a short literature review like this.
is high, they must have assurance that high wages and a generous welfare state go hand in hand with high productivity. Generous social policies with high redistribution power ultimately result from the economic strategy of the private sector—and will tend to be universal in their construction.6

State-driven explanations constitute an alternative to the former two society-driven approaches. In comparing the social responses to the Great Depression in the United States and Sweden, Weir and Skocpol (1983), for example, highlight differences in state structure. In Sweden, the centralized political system gave progressive technocrats the opportunity to push their own agenda and opened the door for a political coalition in favor of generous social policies. In the United States, state institutions were more fragmented and thus there were more opportunities for vetoes from local elites. Other researchers have also emphasized the role of state capacity (one of the significant variables in Hicks and Swank 1992) and federalist structures (Ikenberry and Skocpol 1987).

Cutting across all these potential drivers is the importance of ideas—which much of the literature all too often takes for granted. Yet the lineage of research that looks at the role of ideas in the formation of policy preferences goes back to Heclo (1974), who claimed that actors, in addition to “powering” need to “puzzle.” Once the role of ideas is acknowledged, the role of diffusion and the actors and mechanisms behind diffusion—whether national, international, or both—becomes important (Collier and Messick 1975).

**Explaining welfare regimes and the absence of universalism in the periphery**

These three broad approaches to the explanation of welfare regimes (pressures from below, preferences from the economic elite, and bureaucratic projects from above, with the role of ideas cutting across all three) have become starting points for explanations concerning the formation of social policy in the periphery and the general absence of

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6 Some of the recent work on varieties of capitalism has also emphasized the importance of the type of political system (proportional vs. majority representation) in explaining redistributive outcomes. Nevertheless, these variables are ultimately the result of historically determined business preferences: “the type of capitalism determines national political systems. In our argument embryonic patterns of capitalist industrialization—the presence or absence of coordinated, co-specific investments at different territorial levels, and whether or not co-specificity linked town and country—predate and explain the choice of national political systems” (Iversen and Soskice, 2009, 479).
universal policies. Early on, Mesa-Lago (1978) showed how the prominent role of pressure groups led four contrasting Latin American countries (Argentina, Chile, Peru, and Mexico) to establish highly stratified social insurance. In his model, the state, political parties, and the bureaucracy all played an important role as long as they responded to, anticipated, or mediated demands set by pressure groups (Mesa-Lago 1978, 9).

Recent debates in the region have reflected the growing accent on societal actors in the literature in OECD countries. For example, in a 2009 special issue of Economy and Society, Schneider and Soskice (2009) argue that the weakness of redistributive policies in the region come out of the lack of dynamism of family-based economic groups and transnational companies, which have a large influence over the political system. Yet their contribution is more suggestive than definite and there is little explanation of the nature of social policy and its evolution over time. Coming from a power resource perspective, Huber and Stephens (2011) depict a more optimistic scenario that also improves our understanding of intra-regional diversity. Their statistical analysis of 15 Latin American countries shows that sustained democracy, coupled with left-wing parties in the Executive power, accounts for larger degrees of redistribution, particularly in two social policy areas, education and healthcare. Their work contributes to understanding differences between Latin America and the OECD countries but tells us little about causal mechanisms, and their classification of left-wing and right-wing governments and how they have changed over time is, for some countries, somewhat problematic.

In a very ambitious study on social policy determinants across Latin America, East Asia, and Eastern Europe, Haggard and Kaufman (2008) consider both pressures from below (which depend on the nature of the political regime) and economic preferences. Differences between Asia and Latin America from the 1950s to the 1980s, for instance, are primarily explained by contrasting social coalitions (involving stronger urban working classes in Latin America) and different requirements of human capital in light of contrasting economic strategies. In Latin America, import substitution allowed urban workers to enjoy increasing social services without harming firms’ profits. By contrast, in Asia, export promotion demanded the development of human capital and cost containment policies.
Haggard and Kauffman offer a sensible explanation of broad differences between regions and correctly distinguish between the post–World War II and the post-1980s neoliberal periods. Yet they may underestimate the role of the state and its various dimensions—including political leadership, technocracies and bureaucracies. Previous research clearly shows that, at least in the case of bureaucracies in charge of industrial policy, state capacity was significantly higher in East Asia than in Latin America (Evans 1995; Jenkins 1991; Woo-Cumings 1999). We also know that the political elite played a fundamental role in the process of modernization and labor incorporation in Latin America and other parts of the periphery. As Segura-Ubiergo (2007, 27) highlights in his comparative study of the development of welfare regimes in Latin America, “rather than being the passive object of class pressures, many Latin American states initiated top-down social policies as a mechanism to control (by way of co-optation) increasingly mobilized labor movements and urban middle classes.” Haggard and Kauffman’s multi-regional study also pays relatively limited attention to the existence of exceptional cases in each region—that is, countries that depart from the norm and have succeeded in developing generous social policies with a universal reach.

Taking a closer look at exceptional cases like Costa Rica and considering the role of the state is precisely what Sandbrook and his colleagues (2007) do in their study of social-democratic regimes, understood as those that have “reconciled the exigencies of achieving growth through markets with extensions of political, social and economic rights” (3). Their historical analysis highlights the social and productive role of the state and how it interacts with various social forces—under a theoretical interpretation that is at times a little convoluted.

In addressing modernization in the periphery largely as a process of state building, Sandbrook et al. (2007) point to the importance of considering historical structural processes when discussing social policy. There is no doubt, for example, that historical patterns of land distribution may have played a constructive role in the generation of Costa Rica’s universalism. It is also true that their work stresses many of the variables that we have identified as instrumental in the Costa Rican case, including some social consensus and international ideas and pressures. Nevertheless, they do not
pay enough attention to the role of played by key state actors such as technocrats in triggering policy changes at specific moments in time.  

Malloy (1979, 1991) argues that in Brazil, and more generally among Latin American early adopters, social insurance emerged as the result of “preemptive acts by political and policy elites controlling the Executive branch of the state who monopolized the ability to define the substance of the social question and structure the main response to it” (1991, 16). Citing Mesa-Lago (1978), he argues that, although “groups used whatever power they could marshal to bargain for their own specific patterns of social insurance coverage,” they only reacted after the policies were already in place (Malloy 1991, 16–17). In explaining the creation and expansion of social insurance in Costa Rica, a late comer rather than a pioneer, Rosenberg (1983) also finds abundant evidence for this kind of top-down state building. During the 1940s, the creation of social insurance reflected a combination of political determination, bureaucratic leadership, and absent or weak organizational pressures. This is consistent with our own research which shows the limited influence of trade unions and business demands in the initial creation of the welfare state in Costa Rica (Martínez Franzoni 2008; Sánchez-Ancochea 2009).

Yet emphasizing the role of the state is not enough since states themselves are composed of many arenas, actors and interests. When the literature on social policy formation addresses the role played by the state, it is not all that clear who are the primary actors leading state formation. Is it all about bureaucratic initiative as shown by Malloy (1979) for the creation and expansion of Brazilian social insurance? In the Costa Rican case, Rosenberg (1983) makes no distinction between elected politicians and technocrats. Do they, however, participate in the policy process following the same rationale?

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7 Here we concentrate on the discussion of the political limitations of much of this literature. Elsewhere we emphasize an additional problem: the somewhat simplistic analysis of the interactions between the production and welfare regimes and between the state as promoter of growth and the state as promoter of welfare (Martínez Franzoni and Sánchez-Ancochea forthcoming).

8 Alliances put together were, Malloy argues, diverse: in Brazil there was a direct alliance between a powerful Executive and techno bureaucratic elites; in Chile such relationships were mediated by political parties (Malloy 1991, 16).

9 Some scholars refer to the bureaucratic as techno bureaucratic capacities (e.g., Malloy 1991; Martínez Franzoni 1999).
Any analysis of the role of the state in social policy formation should thus distinguish among political leaders, technocrats, and bureaucrats and explain how they interact in response to various domestic and international pressures. Political leaders open windows of opportunity to build a social state and can be instrumental in supporting the work of other state actors. Yet we should avoid an excessive emphasis on unique political leadership when explaining social policy—a problem shared by Segura-Ubiergo (2007) and Rosenberg (1981) for the Costa Rican case and by the literature on caudillismo and public policy.

Technocrats are experts who enter the policy process because they are appointed by politicians to put their knowledge to the service of a given political project. As Centeno and Silva put it (1998, 2), “technocrats derive theirs [i.e., entrance into the policy process] from success in organizational settings far removed from interactions with the population…their careers are in the hands of their hierarchical superior.”

Technocrats are different from bureaucrats in the Weberian sense. The latter are experts with careers in the civil service and not totally in the hands of their political superiors. While bureaucrats may claim expertise on policy affairs, their primary source of legitimacy is their place in the hierarchy. Technocrats, by contrast, must use “their claim to knowledge (as opposed to representation or authoritarian rule) to affirm their right to rule” (Centeno and Silva 1998, 2).

Much of technocrats’ influence comes from their link to the international policy environment. They acquire ideas from abroad and translate them into domestic conditions. Their participation in networks of people and organizations, conferences, and publications play an important role in the spread of shared norms (Sugiyama 2011).

Our own approach

In explaining the factors behind Costa Rica’s unique success at building universal policy, we pay particular attention to the role of various state actors. If they played an important role in OECD countries, their role was even more prominent in peripheral countries, where the process of modernization was to a large extent a process of state-building.

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10 Neoliberal economists, very likely the most studied technocrats, are but one specific kind of technocratic elite. Technocratic thinking, moreover, is not exclusive to one specific political ideology.
As Filgueira argues for Latin America as a region, the expansion of social policy was more the history of elite accommodation, elite state building and elite attempts to co-opt and control non-elite sectors than a history of popular achievements and shaping from below” (2007).

In order to draw implications for contemporary policy formation, once all this is said, we must establish which policy initiatives came from whom and why. In exploring how Costa Rica’s social insurance was founded, we thus ask the following three questions: (1) Who were the key actors that pushed for the programs? (2) Why did they do it? And, (3) where did the primary features of the program come from?

To answer these questions, we analyze the three basic stages of the policy process: agenda setting, policy adoption, and policy implementation. Factors that are important in the first stages of the policy process may be relatively unimportant later on. Depiction of the policy process around each of these stages helps organize data and identify the constellation of factors involved in each of them. We are aware that these stages often overlap, leading to a much more complicated picture of the policy process than the notion of cycle may suggest.\textsuperscript{11} We neither expect a mechanical sequence between one stage and the next nor give the policy process explanatory power. Instead, we take the policy process as a useful methodological device to depict a historical process in light of analytical categories. We aim to show constellations of factors made of necessary as well as the more rare sufficient conditions.

Our research has the potential to throw new light on the way countries can go about building universal social programs in the future. We also move beyond the most influential historiography on Costa Rica, including Rosenberg’s path-breaking work on the creation of the Caja Costarricense del Seguro Social. Rosenberg’s is a wonderful piece of historically based political science, conducted according to a state-centric approach. His sources included interviews with key actors throughout the policy process, particularly during the 1940s. We draw extensively from his 1979 and 1981 articles and his 1983 book. We depart from Rosenberg’s analysis in three ways: our more prominent

\textsuperscript{11} For instance, actors involved in implementation have room for maneuvering disputes and changing agenda settings as may happen during policy adoption.
treatment of power relations; our stress on domestic policy formation as embedded in an international policy environment; and our emphasis on showing the different role played by technocrats and bureaucrats during the policy process.

EXPLAINING THE FOUNDATIONS OF COSTA RICAN UNIVERSALISM

Until the early 1940s, Costa Rican social policy comprised social assistance, primary basic healthcare reaching people in need, and public education that primarily reached the better off. Social insurance protected a few occupations, namely soldiers, often soldiers’ widows, and some public employees, in case of old-age, death, and disability. Larger programs of social insurance had been debated among Costa Rica’s Social-Christian politicians but never as a redistributive instrument. Yet in 1941 a unified system of social insurance for the whole population and with unique universal features was created. Why did this happen? Why wasn’t social insurance created until 1942? And why did it have certain features that made it more redistributive and less segmented than in many other countries?

To answer these questions we cannot point to a single factor (say, democracy or great men) but to the confluence of a set of political and technical factors both domestic and international. In particular, as mentioned above, we highlight the combination of: (a) political leaders responding to (internal or external) threats; (b) changing international policy paradigms that expand the available options regarding the redistributive nature of social insurance; (c) internationally embedded technocrats who become carriers of these ideas; (d) weak veto power of the social actors, whether in capital or labor organizations, who would oppose the new policy.

Agenda Setting—Political Leadership, Technocrats and International Ideas

Social insurance was not a popular demand and played no role in the 1940 process in which President Calderón was elected. The president himself had only once addressed social insurance publicly as a candidate—the night before the elections (Creedman 1994). This may have been partly to avoid alienating the oligarchy unnecessarily, but it was also because social insurance at that moment was hardly a popular public matter. It was,
instead, a subject reserved for the expertise of political elites and technocrats. Besides, the lack of any competitor but the Communist Party meant that Calderón’s campaign primarily revolved around anticommunist ideas, which secured him overwhelming support.

Yet social insurance soon became a priority of the new government. Following international debates on the subject, the new program was less segmented than in other countries and benefited poor workers from the very beginning. We emphasize the role of ideological struggles during key times as well as technocrats as carriers of available international ideas regarding social insurance. In this way, the evidence presented in this section challenges scholars who have approached social insurance as the outcome of largely nationally contained projects (Rosenberg 1983) or the outcome of sharp, visionary leaders (Segura-Ubiergo 2007, 208). Without downplaying the role of political leaders in policy formation we must make sense of their role as part of larger streams of thought, of international paradigms concerning social policy.

A Social Catholic president and the ideological struggle

“[Los seguros sociales] constituyen un verdadero progreso para nuestro régimen democrático, y serán un instrumento de paz social…que tienden a corregir situaciones injustas en que se encuentra…la masa que depende su trabajo para vivir….”

Calderón Guardia (1941, 34–35)

“El país no ha vivido aún las agitaciones y luchas de clases que han dividido y sangrado a otros pueblos…[pero] existe un verdadero problema social, derivado esencialmente del bajo salario y de la imposibilidad de las clases trabajadoras para hacer frente a la circunstancias anormales de la vida, como…la enfermedad, la invalidez, la vejez, la muerte, y la cesantía.”

Secretaría de Gobernación, Policía, Trabajo y Previsión Social (1941, 21)

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12 I. Molina (2007) argues that Calderón was not so worried about alienating sectors of the oligarchy, which he had confronted years earlier when he endorsed the participation of the Catholic Church in public education. Instead, he wanted to avoid a public debate with proficient communist cadres who offered a comprehensive program on social and labor matters.

13 “[Social insurance] is a real progress for our democratic regime and will become an instrument for social peace, which tends to make up for the unjust situations in which the masses who rely on their work to make a living find themselves….” (our translation).

14 “The country has not experienced the turmoil and class struggle that has divided and bled other people…[but] there is a real social problem, essentially derived from low wages and the fact that it is
Social insurance had been on the agenda of Costa Rican Catholics since the 1920s. In 1924, Jorge Volio’s Reformist Party promoted the creation of social insurance. In 1928, the Catholic presidential candidate Carlos María Jiménez gave social insurance a prominent place in his electoral platform. He was defeated but his liberal opponent did pass a bill that introduced social insurance. The law, however, was never fully implemented due to the 1929 great crash. Ten years later, in 1938, a prominent Social Catholic, Max Koberg, gave his political support to a platform that, among its 20 items, included the need for old-age social insurance.\(^\text{15}\)

By promoting social policy Costa Rican Social Catholics sought to confront the growing influence of the young Communist Party, at the time electorally the most successful in Latin America following Chile’s (Hytrak 1999).\(^\text{16}\) The party’s growth since its creation in 1931, from 5 percent of the electorate in 1934 to 10 percent in 1940,\(^\text{17}\) deepened reformist political preferences among Social Catholic politicians, who conceived of communism as undermining Catholic values and therefore the very core of Costa Rican national identity (Molina 2007). With its daily newspaper, increasing union strength, a reformist policy program, and representation in Congress and local governments, this very active communist party reshaped and gave new prominence to the social question (Molina 2007, 10).

Yet despite its steady growth, the Communist Party was still small, and Costa Rica certainly lacked a large industrial workforce that could in and of itself threaten traditional parties or the capitalist system (Segura-Ubiéro 2007). The objective threat was thus relatively weak and cannot, on its own, explain the growing attention to social policy. However, once we place these domestic conditions within an international ideological environment, it is easier to understand how Costa Rican Social Catholics came to address social policy matters.

\(^\text{15}\) Koberg’s platform addressed the need for a broader organization of medical services to assist the sick more effectively as well as to prevent infant mortality (La Tribuna, 1938, December 13). It is interesting that he also promoted the creation of subsidies for poor parents (i.e., family allowances), which would not enter the policy agenda in Costa Rica until the 1970s.

\(^\text{16}\) Chilean communists obtained 11.8 percent of all votes in 1941 (Scully 1992).

\(^\text{17}\) Electoral support reached 16 percent in the mid-term 1942 election, despite successive electoral reforms passed in 1939 and 1941 that introduced barriers to the party’s participation.
Since the late 1800s, across Europe and Latin America, following the Encyclicals of Leon XII and Pius XI, Social Christians had conceived of social insurance as a policy instrument to avoid class conflict, build class collaboration, and achieve social peace. Contra Marx’s ideas in Das Kapital, they advocated cross-class collaboration between capitalists and workers to prevent social conflict.

Calderón Guardia’s election should thus be seen in the context of growing ideological struggle over the direction of societies all over the world. He was clearly a formidable politician with progressive ideas—he had studied in Europe and was familiar with Social Christian initiatives. Yet he should be treated less as a unique and indispensable political figure and more as a representative of a collective effort. His decision to introduce social insurance to secure Costa Rica’s social peace and to catch up with all other “organized nations” (Calderón Guardia 1941, 34–35; Secretaría de Gobernación, Policía, Trabajo y Previsión Social 1941, 19) was not the isolated decision of a great man. Rather, his election and the social reforms he promoted reflected many years of collective collaboration among the Catholic elite in response to the real and perceived Communist threat.

**Progressive technocrats and international environments**

“No pretendemos que este sea un proyecto original. Los lineamientos…que proponemos son los mismos en todas partes, y el texto se ha inspirado en las leyes chilena y peruana, las cuales a su vez han aprovechado las experiencias de Europa.”

Secretaría de Gobernación, Policía, Trabajo y Previsión Social (1941, 42)

When Calderón announced his social insurance project, it went well beyond traditional Catholic ideas of social provision. Instead, he argued for a program targeted on the dispossessed, whether salaried or not, as a tool to reverse the set of social problems addressed at his inauguration. “[L]a enfermedad, la invalidez, la vejez y la muerte, son las causas constantes del desamparo de muchos costarricenses; y si el Estado no se decide a establecer un verdadero sistema de previsión, no hará más que socavar sus cimientos, y a

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18 "We do not claim that this is an original project. The guidelines…we propose are the same elsewhere, and the draft was inspired by Chilean and Peruvian laws, which in turn have benefited from European experiences” (our translation).
que ninguna sociedad puede fundarse en la injusticia.” (Calderón Guardia 1941, 34–35). The final project was highly inclusionary and created a unified system in which the working poor were incorporated earlier than other groups.

How did the overall concern with social insurance translate into a progressive policy design? We emphasize here the interaction between changing international ideas and progressive technocrats. The latter introduced an entire policy menu revolving around social insurance which nourished the design of the new program. These experts, many of them with long political trajectories, enjoyed one key asset: the president listened to them and created adequate conditions for them to flesh out and design policy proposals.

Calderón’s inner circle mostly comprised physicians and lawyers (Rosenberg 1981; Molina 2008). Creedman (1994) lists the Minister of Health and Sanitation Mario Luján; Solón Nuñez, formerly minister of health and sanitation for over 15 years; Rafael Calderón Muñoz, father of the president; and lawyer Guillermo Padilla. Additionally, Rosenberg (1981) mentions Jorge Volio, Carlos María Jiménez, José Alvertazzi Luján and Francisco Calderón Guardia, the president’s brother and secretary of state. At least three had studied in interwar Europe where Communist, Fascist, and Catholic ideas met and interacted. They were also well informed about changing regional and international debates on social insurance and its desirable or undesirable role in promoting cross-class collaboration. As a lawyer, Padilla Castro drafted the social insurance bill and kept control of its contents throughout the process (Rosenberg 1983). Their ideas came from several sources, including the United States, the International Labour Organisation (ILO), and some Latin American countries. In the United States, the 1935 social insurance law was adopted as part of Roosevelt’s New Deal, in the context of

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19 “Sickness, disability, old-age, and death are recurrent causes of destitution for many Costa Ricans; and if the State does not decide to establish a real protection system, it will but undermine its pillars, since no society can be based in injustice” (our translation).

20 In Latin America, a whole generation of physicians entered into politics in the 1930s and promoted new social programs (Palmer 2003). Calderón Guardia was born in 1900 and graduated in 1927. Salvador Allende was born in 1908 and graduated in 1926. Others were Arnulfo Arias in Panama, Ramón Grau San Martín in Cuba, and Jucelino Kubitschek in Brazil. In Costa Rica, the favorite presidential candidate for the 1940 election was also a physician, Ricardo Moreno Cañas. He was assassinated by a patient, but his martyrdom as a physician did help his fellow physician Calderón Guardia win the election by exciting public sympathy for the profession.
furthering state intervention in economic and social affairs. The US reform established a unified pension system but failed to incorporate healthcare services. At that time, the ILO was actively promoting social insurance and indicating two possible expansionary directions: either the creation of multiple, occupationally based funds or the establishment of a single fund mandatory for all workers.

The ILO’s position on the best way to establish and expand social insurance progressively changed. In 1936, the Labor Conference of American States held in Santiago, Chile, recommended that social insurance should be compulsory and extended to all workers (whether salaried or not) and should seek to prevent, cure, and manage social risks. The primary targeted population was workers, as well as their dependent families who would be unable to cope with social risks on their own. Thus, governments were advised to establish wage limits that would render the better-off exempt from making contributions and ineligible to receive social insurance (International Labour Review 1936, 654). The conference highlighted the Chilean experience and underscored that its social insurance was mandatory to all workers (even those in agriculture), included all benefits (namely sickness and maternity as well as old-age and others), and was financed by an independent fund. Yet the conference still pointed at funds for various occupations as another possible road for the expansion of social insurance.

By 1941, however, the leading expert at the ILO’s social insurance section based in Geneva, Oswald Stein, endorsed unified social insurance as a desirable option with managerial benefits (namely, single enforcement and tax collection). He drew from specific examples of reforms that were moving in this direction, whether by reaching all blue- or all white-collar workers. Although Stein was not involved in the initial draft of legislation to establish social insurance in Costa Rica, starting in May 1941 he did correspond with the Costa Rican experts who were drafting the social insurance bill and

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21 Social insurance, particularly for disability, old age, and death, was to follow the introduction of workmen’s compensation particularly for well-off employees. “Health insurance has, save in Chile, been established at a later date than pension insurance” (ILO 1936, 668).
maintained direct contact and communication after the Caja Costarricense de Seguro Social (CCSS) was established (Diario de Costa Rica 1941, July 21).

While the influence of the ILO was important in the realm of ideas, for several reasons it was less important in terms of advice on the overall policy design. First, between the mid-1920s and mid-1940s Costa Rica was the only Latin American country that did not belong to the ILO. Second, worldwide, direct assistance from the ILO largely revolved around actuarial matters, far from the overall architecture of social protection (Seekings 2010). Third, late comers such as Costa Rica were getting into policy design at a time when the ILO was moving headquarters from Europe to Canada and was less capable of providing any kind of advice.

Lessons from Chile, in the context of shared international norms for social insurance, played a more significant role than international institutions in Costa Rican design. Newspapers followed the Inter-American Congress’s progress on social protection during its meetings held in Santiago in 1941 (La Tribuna 1941, October 22) and announced that Chilean policy experts supported the creation of social insurance in Costa Rica (Diario de Costa Rica 1941, October 2).

Why Chile? The southern country, policy makers argued, was the example to emulate because it was a pioneer country with strong cultural ties to Costa Rica. Yet so were Argentina and Uruguay, on the one hand, and the United States, on the other. In fact, the United States was probably more influential in Central America and had considerably closer ties than Chile. Its social security system was brand new, but so was Chile’s: formally established in 1924, the Chilean system was only seriously

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22 After 1942, the ILO promoted a broader conception of social insurance as social security (namely, social assistance in addition to social insurance). Even though the ILO continued to stress social insurance rather than social assistance (Seekings 2010), this debate got the organization closely focused on a larger set of institutional matters. By then, however, the institutional design of Costa Rica’s social insurance was basically in place, and it would take the country a few decades to establish social assistance as part and parcel of “social security.”

23 Thus, policy makers were hardly exposed to these ideas until 1941, when Costa Rican experts visited Chile and became totally wedded to the ILO’s 1936 recommendations.

24 Actuarial matters involve long-term statistical calculations regarding available resources, benefits, and reserves to give financial sustainability to social insurance.

25 Specific names were Miguel Etchebarne (manager of the Chilean Social Insurance agency) and Rolando González (actuary at the Ministry of Labor).
implemented in the late 1930s after the Popular Front won the 1938 national elections. By 1941 in Chile, progressive professionals, including socialist top officials Etchebarne and Allende, were part of a large group of left-of-center professionals promoting an expansion of social insurance for blue-collar workers. But by this time, Chileans had been active members of the ILO for several decades, attending meetings and voicing their own opinions as a “new” country. They had recently hosted the 1936 meeting of the Americas where European experts and Latin American policy makers produced state-of-the-art recommendations.

However, a more prominent factor to explain why Costa Rica drew lessons from Chile seems to have been the close ties between the head of the Chilean social insurance agency, Miguel Etchebarne, and Costa Rica’s Minister of Health Mario Luján and Calderón’s technical advisor Padilla, all of whom became friends in France in the mid- to late 1920s. The Costa Rican presidential advisor Padilla experienced the Chilean policy environment first hand during a visit to Santiago, where interactions with progressive technocrats, including the Chilean delegate to the ILO, Moisés Poblete Troncoso, were as important as specific assessments of the Chilean social insurance system itself. Drawing from all of these inputs, Padilla put together a draft and mailed it to the Costa Rican president who in turn shared it with three prominent lawyers. One of them, Horacio Castro, later led one of the two Congressional commissions that discussed the bill. Another was a close advisor to the banana companies. Both were very enthusiastic about the bill. The third advisor, Tomás Elias Soley, was not so enthusiastic. He feared such a policy would mean an undesirable intervention of the state in private matters and was concerned about a potential overlap with the National Insurance Institute, which he had fathered. We thus have two distinct, heavily technocratic moments involved in agenda setting: one international, which primarily revolved around the adoption of ideas

26 On paper, Chilean social insurance was the first to seek protection for all manual workers under one single fund and to launch healthcare services along with old-age pensions. In practice, the system was highly fragmented with services and benefits distributed unevenly among occupations.

27 Regrettably, there are no official records of Padilla’s stay in Santiago de Chile. While Padilla was in Chile, Etchebarne and other top officials at the Seguro Obrero were suspended from active duty pending an investigation into a possible misuse of public funds, which would explain the lack of official records concerning the visit.
internationally available; and the second domestic, which primarily had to do with the “filtering” of these ideas.\textsuperscript{28}

The introduction of the bill explicitly highlighted a novel idea, one that would have a long-term and positive effect for universalism. The draft submitted to Congress established mandatory insurance for blue- as well as white-collar workers—both salaried and self-employed—under one single fund. The draft established a unified, single agency to avoid the fragmentation and overlap of services that took place in Chile while also drawing into the system as many contributors as possible. Among ideas that were not novel but that helped reach lower income workers was a wage ceiling: social insurance would be mandatory for everyone with a monthly salary under the ceiling. Medical professionals in Costa Rica and elsewhere in Latin America believed that the public delivery of services would be the end of their private practice (Rosenberg 1983). Wage ceilings reassured powerful physicians, many of them in Congress,\textsuperscript{29} that social insurance would not threaten their clientele.

**Policy Adoption—A Second Technocratic Take on Policy Contents**

Based primarily on archival research in Costa Rica’s Legislative Assembly, newspapers, and select interviews, we stress the role of technocrats with international connections in securing approval of the law and shaping the technical debate around it. The growing consensus about the need for social insurance also reduced the influence of social veto players—who were, in any case, weaker than in larger, more developed countries to start with.

*The role of technocrats in the legislative process*

Having enough votes in Congress to pass new legislation is obviously important. The National Republican Party (Partido Republicano Nacional, PRN) had won the 1940 presidential election with 84.5 percent of the electorate (Molina 2008) and had obtained

\textsuperscript{28}There is some indication that the Executive branch also created a commission involving prominent people who had some expertise on the matter (e.g., administration, finances, and actuary matters) (Secretaría de Gobernación, Policía, Trabajo y Previsión Social 1941, 5), which would have been another instance of filtering.

\textsuperscript{29}Between 1920 and 1940 physicians averaged 39 percent of all legislators (Palmer 2003). There is no reason to think the trend would have changed by 1941.
all 45 Congressional seats but one, which went to the Communist Party. The existence of this clear majority did not mean, however, that there were not divisions and conflicts that could derail the project or change its characteristics. In fact, the ruling party was deeply divided. The PRN, created in 1932 as a liberal party, was, by 1941, clearly divided between the liberal and Catholic wings (Díaz 2009). Both were equally committed to anticommunism but they approached the social question rather differently: liberals were more conservative and Catholics more progressive and interested in promoting social reforms (Molina 2007). Conflicts deepened so rapidly during that period that by the 1942 mid-term election liberals had created a new partisan organization, the Democratic Party.

Despite these growing divisions, social insurance was passed with only one unfavorable vote and with very few changes. Technocrats played a central role in securing this support and driving the law through Congress. They were the most active actor in the process of consultation and used their technical legitimacy to make sure that the law only experienced minor changes. The draft was submitted to Congress by the Secretary of Governance, Police, Labor and Social Protection on July 14, 1941. The draft was in two Congressional commissions during three months, between July 14 and October 21.

30 Conflicts were triggered very early in the administration around who would become the majority’s Congressional leader. This in turn was intertwined with Costa Rica’s international relations. One of the leadership’s candidates (not supported by President Calderón) was Otton Cortes. Cortes had gone to Germany in 1937 and not only did he receive an award from the Nazi leader, but he would later proudly say that after shaking hands with Hitler he avoided washing his hands for hours. In the newspaper, supporters of Calderón went as far as to claim that “El Führer don León wants to put Herr Otto in Congress” (Creedman 1994, 188; our translation).

31 Towards 1943 tensions between the Democratic Party and the then coalition between the PRN and the Communist Party deepened. The former stressed the communist character of this coalition and therefore of the government for joining it (Diario de Costa Rica 1943, September 17, September 18, September 19, October 1, and October 2). In turn, the Communist Party portrayed the Democratic Party as an enemy of the president’s social policy (Diario de Costa Rica 1943, September 21, September 22, September 29, and October 1), and more specifically of social security (Diario de Costa Rica 1943, October 5).

32 The opposing vote came from Otto Cortes (son of the former president) (Diario de Costa Rica 1941, October 21), probably in response to Calderón’s failure to support his candidacy for the leadership in Congress.

33 According to newspapers, the lack of a public debate during Congressional hearings reflected the high degree of consensus around the law (Diario de Costa Rica 1941, October 21). The same was pointed out by the Congressional commission that discussed and modified the bill before it went to the floor (Congreso Constitucional 1941a, 1).

34 Based on interviews, Rosenberg (1983) reports two commissions, although the Congressional record refers to a single commission report.
October 14. Similarly to other bills passed during the 1940s, once on the floor, social insurance was rapidly approved. The legislative process was controlled by the Executive and specifically by technocrats trusted by the president. Guillermo Padilla—who had played a central role in designing the initial draft—was obviously instrumental, but was by no means the only one. Ernesto Arias, actuary of the National Insurance Bank, for example, was prominent enough as to be the only expert mentioned by the commission’s final proceedings (Congreso Constitucional 1941a).

Modifications were agreed to by the Executive following technocratic agreement (La Gaceta 1941, October 17, 2009–2011). This was recurrent throughout the policy process, both during adoption (1941) and during implementation (1942–43). All changes except those introduced by the Communist Party had also been discussed and agreed upon between the Secretaría de Previsión Social and the National Insurance Bank.

The legislative commission declared that the various changes it had introduced were not substantive but intended to simplify the bill and to allow more time for learning and evaluation (see Secretaría de Gobernación, Policía, Trabajo y Previsión Social 1941; Congreso Constitucional 1941a; Diario de Costa Rica 1941, October 15), while maintaining the overall contents of the proposal “for one of the most glorious and noble

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35 The Congressional commission was comprised of six members, five elected from San José and one from Cartago, half of them substitutes: Ernesto Marten Carranza (then signing “Ernesto Martín”), Horacio Castro Rodríguez, Juan José Monge Madrigal, Gilberto Charpentier Monge (substitute), and Manuel Monge Cervantes (substitute), all elected for San José, and Rodrigo Sánchez Cervantes, elected substitute for Cartago.

36 For example, the reforms of social insurance and the Labor Code both passed in 1943. Others included the reform of article 15 of the social insurance law (1942), the creation of preventive medicine under the coordination between the Ministry of Public Sanitation and the Social Insurance Fund (1942), and the reform of the social insurance law (1943).

37 This involved four rounds of approval. The first entailed approving the commission’s report; the rest approved bills in first, second, and third debates. In the case of social insurance this happened on October 21, 22, and 23, respectively.

38 Rosenberg makes a somewhat ambiguous argument. On the one hand he treats Congressional changes as taking place in an arena totally separate from the Executive. On the other hand, he addresses Padilla’s supervisory role. Without undermining Padilla’s role, evidence suggests that the Executive was hands on in ways other than having one single technocrat “on call” during the Congressional process.

39 Ernesto Marten, a legislator rather close to the president, also played an important role in mediating relations between Congress and the Executive (Rosenberg 1983).

40 Drawing from Padilla, Rosenberg (1979) argues that Calderón was not pleased with the changes. We have found no evidence of this, though we did find evidence as to how involved and hands on during the process the Executive was.
deeds of the Calderón administration.” The bill therefore kept the overall policy
principles and instruments while postponing specific issues for the decisions of the new
board which would inform its decision-making on the evaluation of measures
incrementally implemented.

Table 1 distinguishes contents in the initial draft from changes introduced during
the legislative process—either by Congress itself or by the Executive—and shows how
minor these changes were. Some were aimed at simplifying the bill, while others stressed
incremental implementation. Simplification involved eliminating many details regarding
benefits41 and was very much in line with the Executive’s notion that the social insurance
agency would have to learn and introduce changes as it went along (Secretaría de
Gobernación, Policía, Trabajo y Previsión Social 1941, 5).

The one substantive change introduced during the legislative process entailed
depriving the new agency of its financial and administrative autonomy. Like many other
changes, this one was proposed as an attempt to increase flexibility in the process of
implementation and a buffer to technical uncertainties and insufficient knowledge about
the likely trajectory of the new program. Explicitly, this uncertainty provided grounds to
create a supervising body, involving the Finance Ministry, the Costa Rican Bank, and the
National Insurance Bank, to oversee the financial management of social insurance.
Implicitly, there might have been more to it than just uncertainty (Congreso
Constitucional 1941a; 1941b, art. 26). After all, the new agency would command a very
large amount of resources (Diario de Costa Rica 1943, September 17a).42

41 The original bill involved a public debate regarding benefits to be included under social insurance (see:
Secretaría de Gobernación, Policía, Trabajo y Previsión Social 1941, articles 39–69). The bill just includes
a very brief reference to benefits (see article 2 in Congreso Constitucional 1941a, 1941b).
42 The news indicated that the process involved the Secretary of Labor and “an expert in insurance who had
come [to the country] to study our problem in this regard.”
# Table 1

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Draft</th>
<th>Bill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target groups</td>
<td>Blue- and white-collar workers, public employees, domestic workers, interns</td>
<td>A lower and single wage ceiling for white-collar and freelance workers; anything else up to the new agency</td>
</tr>
<tr>
<td>Special funds</td>
<td>Mandatory insurance for new employees in occupations with special funds</td>
<td>Unchanged</td>
</tr>
<tr>
<td>Benefits / Services</td>
<td>Social insurance addressed all risks</td>
<td>Eliminated detailed account for each program</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Must launch pensions and healthcare insurance first</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Timing to pass ordinances (introduced by the Communist Party)</td>
</tr>
<tr>
<td>Strengthening of all healthcare services</td>
<td>Incremental transfer of services from Secretary of Sanitation and coordination of charity institutions</td>
<td></td>
</tr>
<tr>
<td>around the new agency</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contributions</td>
<td>Board established contributions and Executive approved them</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Employers consolidate cash and in-kind income</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Contributions by employees cannot exceed those of employers&lt;sup&gt;43&lt;/sup&gt;</td>
<td></td>
</tr>
<tr>
<td>Enforcement</td>
<td>Created body of inspectors</td>
<td></td>
</tr>
<tr>
<td>Use of resources</td>
<td></td>
<td>External board controls investment (Finance Minister, National Insurance, and Costa Rican banks)</td>
</tr>
<tr>
<td>Governance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Board</td>
<td>Executive appoints board; composition of board follows banks</td>
<td></td>
</tr>
<tr>
<td>Management</td>
<td>In charge of personnel, wages, budget and fees for board members</td>
<td></td>
</tr>
</tbody>
</table>

Source: Our own elaboration based on draft and bill.

<sup>43</sup> The draft included the matter in its introduction yet lacked a specific article for it. The article added in the bill was submitted by the communist leader Manuel Mora.
Another key change reflects the international policy environment—as understood and transmitted by technocrats. A wage ceiling, unified across occupations and institutional locations, was established at 1941 US $50 per month, somewhat lower than the highest wage ceiling initially drafted in the bill. Social insurance was not mandatory for people earning more than the ceiling. The wage ceiling had been made part of the 1936 recommendations elaborated at the first ILO meeting of the Americas, probably as a mechanism to deal with veto points and to secure a unified rather than occupation-based insurance. Still, Costa Rica was, as Rosenberg argues, the first country to stratify social insurance according to class (i.e., income) rather than occupations (Rosenberg 1979).

**Absence of veto players**

Organizational pressures hardly played a role in the process of design. Through *Trabajo*, the Communist Party called on “the Costa Rican people” and the “working class” to mobilize around social security and the “progressive attitude” of the Costa Rican president (*Trabajo* 1941, September 27; *Trabajo* 1941, October 18). No newspaper, however, provides evidence of mobilizations actually occurring. Official documents and newspapers also indicate that only official actors, mostly bureaucrats and appointed officials, were called to the commission (Congreso Constitucional 1941a, 1941b; *La Tribuna* 1941, October 22). Unofficial actors, such as chambers or unions, were not involved.

The only explicit request not to join the new system came from the Judiciary. The bill established that all special regimes already in existence would continue but that the newly hired would enter the unified system (Congreso Constitucional 1941b, Artículo 43; *Diario de Costa Rica* 1941, October 22). The Judiciary argued that this would threaten the financial sustainability of their special fund and that maintaining their own fund was consistent with the separation of powers. This was in a letter addressed to the Secretaries of the Constitutional Congress by the President of the Judiciary system (Secretaría de la Corte Suprema de Justicia 1941) upon publication of the bill.

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44 The only union reported in the newspapers as giving explicit support was the Bakers’ Union from Alajuela (*Diario de Costa Rica* 1941, October 12).
Business raised doubts. In wartime, was not work and food more important than social insurance? Business did not, however, act in an organized fashion or advocate against social insurance. In the Congressional records there are references to only two firms and their doubts about contributions to social insurance.\textsuperscript{45} We also reviewed the three main Costa Rican newspapers for the period 1941 to 1943 in search for the private sector’s official position but could not find any. There are only a few articles with comments from entrepreneurs, and they generally present supporting statements from specific companies. Even the United Fruit Company showed willingness to pay social insurance for the workers in its manufacturing activities in Costa Rica.\textsuperscript{46}

**Policy Implementation—The Rapid Creation of Institutional Capacities**

Implementation has first and foremost to do with the creation of state capacities to deliver transfers and services. According to Skocpol (1985), inasmuch as states have control over their territory, such capacities depend on securing funding and personnel. The latter includes the recruitment and retaining of qualified and committed people. The former involves the collection and deployment of resources established by laws and other norms.

In most countries of the periphery, the transformation of laws into actual policies is riddled with difficulties. Lack of resources can render new programs totally ineffective. The absence of specialized bureaucracy and its “capture” by interest groups or excessive involvement in partisan politics can result in poor services and bad design. In addition, influential and informed collective actors may try to shape the new programs while a majority of the population remains uninterested or even opposes the policy, as occurred with social insurance in Peru in the 1930s, Mexico in 1943, and Guatemala in 1946 (Mesa-Lago 1978; Rosenberg 1981).

Costa Rica’s success—which we study through newspaper analysis and official sources—was based on two factors. First, the Catholic Church, the media, and the Communist Party—which together had more mobilizing power than any other political or

\textsuperscript{45} Right after he got the draft, Congress’s head clerk or senior official sent letters to the management of the Tabacalera Costarricense and the Republic Tobacco Co., asking for their reactions to the draft in so far as it directly affected the industry.

\textsuperscript{46} *Diario de Costa Rica* (1942, November 3).
social institution—strongly supported the implementation of the new law. In doing so, they contributed to a rapid expansion of those insured and a favorable environment for the new program. Second, powerful social actors with veto power were mostly absent, particularly in the case of healthcare. Finally, technocratic leadership contributed to a rapid deployment of resources and an effective design of the new institutions.

**Strong social support and weak veto actors**

In a context of “public indifference” (Rosenberg 1983) and lack of strong interest groups, the media, the Catholic Church, and the Communist Party played critical roles in shaping public opinion and mobilizing organizational resources to draw support towards social insurance.

_The media_ favored the creation of social insurance. Listing from the most pro-government to the most anti-government, there were _La Tribuna, Trabajo, and Diario de Costa Rica_. All three favored implementation of social insurance. Over and over again they argued that people had not fully understood the important role of social insurance in their lives (_Diario de Costa Rica_ 1942, July 21). _La Tribuna_ depicted social insurance as the “most advanced” social legislation ever established in the country (_La Tribuna_ 1942, July 19). Owned by a strong supporter of the president and a businessman himself, the paper stressed and encouraged business endorsement of social insurance. The _Diario de Costa Rica_ was the most critical and yet, its criticisms mostly involved debating specific measures to implement social insurance (e.g., whether or not to start with public servants).

Regarding the _Catholic Church_, upon request from the president, in April 1942 the archbishop published a pastoral letter entitled “The Catholic Church supports social insurance” (_El Mensajero del Clero_ 1942, April 4). Pastoral letters are expected to be read in Sunday mass and priests are highly disciplined, so it is very likely that this one letter was extensively used.

The _Communist Party_ secured the support of labor. Social insurance was a turning point in how this party assessed the president, from oligarchic to one capable of introducing progressive policy (_Trabajo_ 1941, July 19; _Trabajo_ 1941, October 4; _Trabajo_ 1941, October 25). _Trabajo_, the official newspaper of the Communist Party, devoted numerous articles to explaining the importance of healthcare insurance for the working
Arguments supporting social insurance were twofold: the program was scientifically organized and it looked after workers as a matter of right. Services would have nothing to do with public charity. Personnel were highly committed to serve and ready to help workers with healthcare matters that had previously been totally out of reach, such as workers’ teeth and vision (Trabajo 1943, February 6). Trabajo praised employers “who are excellent and pay” but encouraged union delegates to take a personal interest and closely oversee payroll taxes, for example, by going to the capital city of San José to double check that employers had indeed transferred due contributions on behalf of all workers (Trabajo 1942, September 12).

In contrast to this growing support, interest groups with particularistic agendas were weak. The few vetoes that existed were all directed towards pensions—not to healthcare—and came from public employees at the capital’s municipal government, a public bank (Trabajo 1942, September 25), and customs (Diario de Costa Rica 1942, August, 2). Overall, the primary request was that new employees should be allowed to join special funds. These requests were successful in so far as preexisting funds endured and, as time passed, a few new ones were also created. At the same time, most workers ended up insured under the single collective fund created under the Caja.

Firm owners did not become a strong veto actor either. They did not present a unified position against the 1941 law, and there is no evidence that they created any obstacles to its implementation. This lack of active opposition is surprising but can be explained by two combined factors: (1) the structure of Costa Rica’s private sector; and (2) features of the policy created.

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47 The communist newspaper had a section of questions and answers about social insurance. There, the paper explained, for example, why services had to be expanded gradually, which in turn meant that neither spouses nor children would be reached until later on (Trabajo 1943, May 15).

48 The only “warning” message came from a legislator who was also a physician. When asked about the launching of services he showed dissatisfaction with the lack of opportunity for people to choose their own physicians.

49 Local governments did not have a homogeneous position regarding this matter. In cities such as Heredia and Cartago authorities supported social insurance (La Tribuna 1942, July 30; Diario de Costa Rica 1942, July 30 and August 5), while in the capital city of San José employees, not authorities, opposed it (Diario de Costa Rica 1942, July 30; La Tribuna 1942, July 21; Diario de Costa Rica 1942, August 5; 1942, July 30). The social insurance agency opposed segregation (Diario de Costa Rica, 1942, July 21).
By the early 1940s, the Costa Rican economy highly relied on coffee, the most influential sector in the economy. Coffee producers and, especially, coffee processors and exporters were the most powerful group within the economic elite and had more political influence than any other (Stone 1975). Since social insurance was initially implemented in urban areas, the coffee elite was not particularly threatened. Moreover, the 1941 law excluded all employees who worked less than 180 days per year—which was the case of many coffee laborers, particularly in small and medium plantations.

Service and manufacturing firms in the urban sector were immediately affected by the creation of social insurance, but their political and economic influence was quite weak. Their companies were relatively small and their mobilization capacity unimpressive. In fact, the Chamber of Industries was not created until 1943 after the actual approval and implementation of social insurance.

**The rapid expansion of capacities**

Social insurance, especially healthcare insurance, was launched very rapidly, even, many argued, abruptly (La Tribuna 1942, July 19 and August 27; Diario de Costa Rica 1942, July 21; Trabajo 1943, January 30). Once the two primary managerial positions were filled, the new agency appointed two kinds of personnel: administrators and physicians. The former were hired first. Technocrats involved in agenda setting and policy adoption appointed the first three administrators. Padilla recalled these as “progressive students” at the School of Law (Rosenberg 1983).  

These people ran or worked in two critical departments: “social education and marketing” and “enforcement.” The former was in charge of organizing meetings to explain the benefits of social insurance for all, regardless of whether they would be

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50 Two of them were, in fact, active members of the Communist Party. The third, well known for his contribution to writing the labor code and supporting the creation of social insurance in Guatemala, is only recently known as having been a promising member of the Communist Party back in the early 1940s as well (Molina 2008). This is important because it shows the Communist Party at the very least allowing its cadres to be directly involved in the creation of bureaucratic capacities. It helps explain why weeks after services were in place the Communist newspaper stated that “the launching of services was accomplished by the Caja’s employees and his actuario” (Trabajo 1942, September 12), instead of giving credit to the president or other political actors.
targeted sooner or later (CCSS 1943, 141).\textsuperscript{51} The second aimed at \textit{ensuring} that payroll taxes were collected.

But launching social insurance required a much more specialized knowledge that in the long run would help balance prospective income and spending for a given targeted population. For some reason social insurance needed to rely on foreign \textit{actuaries}. This is somewhat surprising since two Costa Rican actuaries from the National Insurance Bank were involved during policy adoption (Walter Dittel and Ernesto Arias) in addition to one Chilean expert (Guillermo de la Maza), who was a trained administrator rather than an actuary (Rosenberg 1983). The ongoing war in Europe, including Nazi persecution, made these experts somewhat more difficult to find. The Chilean government had offered support which only got to Costa Rica months later, in May 1942. Rosenberg (1983, 70) records this problem as being deliberated by the board on at least three occasions early in 1942. Newspapers also report the visit of a Chilean expert (e.g., Diario de Costa Rica, 1942, July 21) and of an ILO European expert (late 1943).\textsuperscript{52}

The agency started with eight \textit{physicians} who would provide services throughout the four cities involved in the initial implementation (\textit{La Tribuna} 1942, August 29). Hiring physicians rather than relying on what we would refer to today as a voucher system was something that many well-established physicians would later resent.

The law set a two-year limit to establish proceedings and start “implementing old-age, sickness and maternity among those sectors of the salaried population in which it was easier to implement them” (Congreso Constitucional 1941b, art. 15). The social insurance board prioritized health care and sought to launch services as rapidly as possible: the goal was to show that contributions were worthwhile (Rosenberg 1983). Giving up part of their wages to access services that were not quite in place yet was a very abstract notion. Until then, no policy had involved collecting payroll taxes from

\textsuperscript{51} There is evidence that the School of Social Work sought to monopolize the supervisory role (Congreso Constitucional de la República de Costa Rica, folio 49).

\textsuperscript{52} Late in 1943 the official magazine of the CCSS, \textit{Su Seguridad}, reported the visit of yet another expert, Dr Emilio Shoenbaum, who preceding his arrival to the Americas had spent 40 years studying and supporting the creation of social insurance in Germany, Czechoslovakia, and Greece but who had joined the ILO after fleeing from Nazi persecution. By the time he visited Costa Rica he had helped design social insurance in Bolivia, Paraguay, Ecuador, and Mexico. Tensions between Costa Rican technocrats and bureaucrats may have reflected preferences for relying on international expertise or domestic capacities, respectively.
employers, the state, and workers alike. The speed at which the new agency managed to deliver services was extremely important to draw support from a constellation of actors.

Starting on September 1, the social insurance agency launched a campaign that called for employers to register their workers at the social security agency (*Diario de Costa Rica* 1942, September; 1942, September; 1942, September 9; 1942, September 10; 1942, September 30). This campaign publicized that insurance was mandatory and that there were severe penalties for those who did not comply. Noncompliance could involve non-enrollment, retaining workers’ contributions, and/or taking business contributions from wages. In addition to stressing sanctions, the campaign praised the very good employers who rushed to join social insurance (*Diario de Costa Rica* 1942, September 18). It also applauded the good will of employers who themselves took care of labor contributions without workers having their wages reduced.

Along with having services up and running, the new agency cut back on the initial contributions, very likely due to the decision to postpone old-age insurance for later on. Taxes were initially less than had been established by law (*Trabajo* 1942, September 12). Public funding available to the social security agency in August of 1942—the considerable amount of 1942 US $177,000 for the first twelve months—were drawn from increased taxes on alcohol and drinks (*La Tribuna* 1942, August 27).

It is interesting to notice that although registration was centralized in San José, monthly contributions could, from the onset, be made through banks available in all four cities where social security was first implemented. In September 1943 newspapers registered the first sanction against an employer who discounted payroll fees from employees but kept the fees for himself. The social insurance agency denounced it to the judiciary which gave the employer two options: pay a fee or be incarcerated for 500 days (DCR 9/21/1943, 1–3). Services were not, in and of themselves, innovative: they were initially provided by former charity hospitals that by 1940 were overseen by the Ministry of Public Sanitation (Rosenberg 1983). What was innovative was that workers had access to and were treated by physicians who had been hired for that purpose. Just a few months

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53 The communist newspaper argued that social insurance personnel had made this decision to avoid “violent reactions from the *clase patronal* [managerial class]” (*Trabajo* 1942, September 12).
after launching services, the hospital, based in San Jose, was looking after an average of 25 people per day (Trabajo 1943, February 6). Between September and December of 1942, the insured numbered 14,000, and more than 10 percent, that is, 1,500 people, had received healthcare services provided by the brand new agency (CCSS, 1942)). Medicines were either directly provided by social insurance or purchased with social insurance in private pharmacies. Pricing would soon become a source of tension, leading to the creation of a pharmacy within the social insurance agency (Trabajo 1943, June 19).54

Social insurance was first of all, and for many years to come, an urban matter. Targeted populations lived in the main cities located in the Central Valley: San José, Alajuela, Cartago, and Heredia – although by October of 1943, services expanded to two small cities, Turrialba and Puntarenas (La Tribuna, October 8).55 In September of 1942, newspapers estimated eligible workers between 12,000 and 15,000 (La Tribuna 1942, September 2). So far it was targeted to workers only; families would come later.

In 1943 authorities and bureaucrats at the CCSS— with the technical support of an expert commissioned by the ILO to support the new agency— lobbied for a Congressional reform to the 1941 bill, which gave way to the enactment of a brand new law. This reform would accomplish two goals: establish coverage for all manual and intellectual salaried workers56 and secure financial and managerial autonomy from the Executive (Secretaría de Gobernación, Policía, Trabajo y Previsión Social 1943, 2–3). The former was argued on financial terms: in the long run, it was necessary for social insurance to be sustainable. The latter had been initially established in the draft sent by the president to Congress in 1941 but was later removed, so that all decisions made by the social insurance board were to be overseen by an external body. The draft and its policy adoption can be considered a bureaucratic accomplishment. Unions supported this measure as one badly needed for social insurance to accomplish its goals (Diario de

54 The Congressional record for the 1943 reform could find preceding legislative initiatives between 1941 and 1943.
55 Other than in the capital city of San José, this is precisely where collective action sought to defend the president’s social policies (Trabajo 1943, April 3; Trabajo 1942, May 9; Diario de Costa Rica 1943, September 2 and September 9).
56 It would be up to the social insurance agency to decide when and how to reach the self-employed. Wage ceilings remained. They would be gradually lifted, for social insurance to reach an ever larger proportion of workers, until altogether removed early in the 1970s.
Costa Rica 1943, September 5). Overall, however, this reform was rarely debated publicly or even mentioned more than once or twice in newspapers.

**CONCLUDING REMARKS**

In the early 1940s, Costa Rica adopted an inclusive social insurance system that constituted the first step towards universal social policy. The bottom-up expansion, along income/class rather than occupational lines, was very important in the creation of a basic floor of benefits among the low and middle-low salaried population. Later on, the middle and upper-middle groups were brought on board as well, in sharp contrast with the rest of the region where social insurance was shaped according to the preferences of various middle-class groups.

How can we explain the adoption of this path-breaking initiative? Why was Costa Rica successful where others failed? Our study indicates that political leadership under democratic arrangements may be a necessary but is by no means a sufficient condition for the design, adoption, and implementation of universal policies. Besides, we have avoided single-factor explanations, emphasizing the confluence of political and technical factors and domestic and international factors instead. In particular, we argue that Costa Rica’s success can be explained by the interaction among: (a) political leadership drawing from progressive policies to confront a threat; (b) the changes in international paradigms for redistributive social policy; (c) the absence of social veto actors with enough power to stop the new program or modify it to conform with particularistic interests; and (d) the central role at all times of technocrats who brought the international debates to Costa Rica, put the ideas of political leadership into practice, and built a technical consensus around the new program.

Our research sheds new light on the Costa Rican experience, but our contribution goes well beyond a single-country experience. Our analysis demonstrates that there is more than one path towards universalism—at least in countries on the periphery. Costa Rica did not follow the Scandinavian path from a liberal regime to a universal one based

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57 Arguments revolved around the importance of having an agency autonomous from government and short-term political calculations as established in the 1943 draft.
on services and transfers funded with general taxation. Instead, it used a contributive system with unique features to slowly implement universal provision of health and pensions.

This is important for several reasons. First, it emphasizes that developed countries are just a very particular sub-set within the complex universe of social policy building. Introducing paradigmatic cases to the discussion will enhance our understanding of this process of policy building significantly—a point also stressed by Mares and Carnes (2009) in their excellent review of social policy in the periphery. Second, our research underscores the need to pay careful attention to the origins of social programs. Initial architectures will always tend to shape subsequent trajectories, a matter underlined by the literature on policy legacies (Pierson 1993). It may thus be useful to compare the initial design of new healthcare programs or new conditional cash transfers in different countries to determine likely trajectories in the medium and long run. In designing new universal programs in particular, countries should be careful to first include the poor and lower-middle income groups.

What about the political determinants of policies? What lessons can Costa Rica bring to our understanding of social policy in other parts of the world? Our methodology may help us to identify key variables that influence social policy better than alternative approaches focused on structural factors or longer periods of time. Of course, all approaches enhance our understanding of social policy (structural factors, for example, may determine the opportunities and constraints different actors face at specific moments in time), but process tracing of specific instances of policymaking can provide particularly rich empirical evidence.

The analysis of the creation of social insurance in Costa Rica in the early 1940s highlights the role of political leadership, technocrats, and international ideas and policy paradigms. Political leaders create windows of opportunity for new policies and frame discussions and debates. In doing so, they often construct threats (e.g., the communist threat) based on a combination of internal and external sources. Yet political leaders seldom drive the design of new policies; this is commonly the responsibility of technocrats. Technocrats have direct access to political leaders and also know the state of international debates well. They thus become intermediaries and translators of
international ideas and use them to shape the policy discussion and the ultimate policy
design.

If also valid in today’s changing world, our accent on technocrats and
international ideas constitutes good news for the prospects of universalism in Latin
America and other parts of the periphery. After decades of promoting residual approaches
to social policy, a growing number of institutions within the United Nations system and
beyond now recognize the usefulness of universalism (ILO 2011; UNRISD 2010). And in
a growing number of Latin American countries, progressive technocrats are becoming
even more powerful than neoliberal cadres.

Although societal pressures and preferences played a relatively minor role in the
Costa Rican case, we are aware that they have played a more important role elsewhere in
the past and also today. Particularistic interest groups can impact the way social policy is
allocated, and reactionary elites have been strong in many countries. The challenge,
however, may be how to implement new policies gradually and carefully so as to reduce
the strength of the threat posed by social vetoes to universal policies badly needed for
human development and redistribution.
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