



Community Working Group on Health (CWGH)

Press Statement:

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Patients suffer as strike escalates without solution

The Community Working Group on Health (CWGH) is worried by the escalating strike by doctors that has resulted in untold suffering of patients and even deaths that could have been avoided under normal circumstances. While we acknowledge the genuine grievances of the doctors and the financial position of government, we would like to urge the two parties to put patients at the centre of their focus to save lives and suffering.

People are dying in hospitals because there are no doctors and nurses. It is depressing to note that most hospitals have closed their outpatients departments and cancelled emergencies, denying people access to health care. As a result, the right to health care as enshrined in the Zimbabwe Constitution is violated.

The doctors want their on-call allowances raised, implementation of a motor vehicle duty-free facility and are demanding that government employ them upon completion of their two-year internship. Nurses have also joined the fray further worsening the crisis.

As the CWGH, we would like to encourage honest dialogue that delivers lasting solutions to the problems facing health workers while at the same time prioritising the lives of the majority poor that rely on the public health delivery system. We should bear in mind that nearly 90% of the 13 million people in Zimbabwe depend on the underfunded and understaffed public health system.

Surely, to allow the current situation to deteriorate further is an abrogation of duty and responsibility by the Ministry of Health and Child Care (MoHCC) and a lack of human compassion on the part of health workers. It is in this regard that we urged the MoHCC and the health workers to find each other on a roundtable to find an amicable solution to this perennial crisis.

In as much as the Minister of Health, Dr David Parirenyatwa has tried to address the grievances of health workers, we genuinely believe that the Ministry has been more reactive than pro-active. These kneejerk reactions of opening up 250 new post for junior doctors and 2 000 for nurses at the last minute just to avoid an impending strike breeds suspicion and

mistrust. The deployment of security medical personnel in the hospital is just a stop-gap measure, we need a lasting solution.

As CWGH, we would like the Minister to urgently and seriously consider the grievances of the health workers to ensure that the public health system remain functional for the sake of patients. There is need to urgently review the current establishment so that it speaks to the current disease burden and the population increase. It is unbelievable that the MoHCC is still using a staff establishment of 1983 when the country's population was only 7.5 million but has since doubled and disease burden increased. Such a situation has put the burden on the poorly remunerated health workers who work very long hours, under unsafe environments with inadequate or obsolete equipment.

It is against such a gloomy background that the CWGH urges the government to allocate enough resources to the Health Services Board (HSB) and give it the autonomy that it rightly deserves to enable it to determine the salaries and conditions of services of health workers as per regional standards. Presently, the HSB is scantily resourced and cannot carry out most of its mandates.

While it is factual that the economy has left the employer unable to fulfil obligations or address employees' concerns, we would like to encourage the government to seriously consider non-financial incentives to retain health workers and boost their morale. These can include, but not limited to, opportunities for professional development, meaningful career paths and training loans as well as improved working, living and social conditions. Health workers need incentives that address their social needs, such as transport, housing, children's education, electricity, community support and access to health care. These measures have been shown to improve retention of health workers and improve their performance.

As CWGH, we believe that any problem has a solution but that solution does not fall from heaven like manna without intervention. There is need for political commitment to address the grievances of health workers. It reflects badly on the Health Ministry that doctors and nurses strike over the same issues every year as if there is no principal authority.

We are worried by the Health Ministry's lethargic approach to the crisis in its house. As CWGH, we also strongly feel that there must be speedy, fair and impartial procedure for resolving disputes.

We would also like to see leadership from the HSB, as the employer of health workers in the country, to ensure resolution of this crisis. The public would like to be furnished with concrete steps, including timelines, the Ministry of Health is committing to address the current dispute. Burying heads in the sand – the ostrich style – and pretending that all is well will not only prolong the problem but deepen the crisis to unmanageable levels.

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