## **Community Working Group on Health**



#### **Press Statement**

13 March 2019

# Problems in the health sector needs political action, commitment and leadership.

It is a pity that once-tolerant senior doctors (consultants) at Parirenyatwa Hospital have finally gone on strike protesting against severe and persistent shortages of medicines, equipment and even sundries at the country's major hospital. That senior doctors -- who are supposed to mentor and supervise junior doctors -- down tools in protest against the same issues that their juniors were complaining for years now, is an indictment on the part of government for failing address the pressing needs in the health sector.

The Community Working Group on Health (CWGH) fears that this industrial action, which could have been avoided if there was political will from the government in addressing the challenges in the health system that has been in decline for over 2 decades resulting in systematic decrease in the coverage of most basic services. As a result, the country is off-track towards attaining most of its health targets including the over ambitious SDGs.

The strike action could cripple operations in major health institutions resulting in untold suffering of innocent patients and possibly numerous avoidable and preventable deaths. If not handled with the care and urgency it deserves, this strike could degenerate into a national disaster with other health practitioners joining, not only in sympathy but because they experience the same challenges.

Problems in the health sector are not new, not to the current Health Minister. He knows them well, as he was for a very long time also a Chief Executive Officer of a Central Hospital (Chitungwiza). The general public wants to see action, leadership and practical long term solutions from the Minister in solving the perennial job action by the doctors. CWGH urges the Minister to quickly facilitate resolution to this endemic crisis by widening the participation of stakeholders in the development and implementation of policies for better health and developing innovative and new approaches in management and delivery of services in ways which enhance access, community satisfaction and local accountability.

It is worrying that the consultants -- who only a few months ago managed to persuade junior doctors to return to work after a prolonged job action -- are striking over the same grievances that juniors were complaining of and which the government had publicly pledged to quickly address to ensure normalcy in the health sector. The assurance by government to improve availability of drugs, refurbish infrastructure and working conditions has remained just that, prompting questions about the sincerity of the authorities in their promises.

Consultants rarely go on strike. What has happened shows that the situation in hospitals is dire and they cannot keep the problems hidden anymore. The health sector need more funding to enable the acquisition of drugs; buy modern medical equipment and refurbishing the dilapidated infrastructure. CWGH pleads with the government to prioritise the country's health delivery system and allocate at least 15% of its national budget to the health sector. That health has never secured the Abuja Declaration target of 15% of the national budget to health or 5% of the country's GDP, is a clear sign of lack of political commitment in addressing problems in the sector.

If the country's national budget cannot adequately fund health then there is need to find other innovative health financing strategies to domestically fund this important sector. This brings us to the issue of the Health Levy, which must be used to purchase medicines and sundries for the smooth running of the country's health sector. If there are no drugs, equipment and sundries in hospitals, where is the money collected under the Health Levy going? This fund must be used correctly, transparently and for its intended purpose.

It is worrying to learn that for January and February this year, the consultants have operated less than 20% of the elective cases they operated in the same period last year. It has been highlighted that waiting time taken before a patient goes to theatre is now too long as relatives have to privately source for all the necessary supplies. CWGH would like to remind the government that it has national obligation to see that its citizens have access to quality and affordable health services as guaranteed in section 76 of the country's Constitution. And that responsibility can only be achieved when health personnel like doctors, physicians and nurses are working normally.

Remember, the health workforce is central in any health system and gaps in adequate health workers are cited as one barrier in efforts to achieve health and development in Zimbabwe. Both for quality and equity, health systems need highly motivated health workers who are satisfied with their jobs, stay at their stations, deliver quality services and communicate well with clients.

It is disheartening that the strike by senior doctors comes at a time when there are regular outbreaks of cholera and typhoid across the country. The current situation spells doom for the country especially now when there is a critical shortage of basic medicines; some sold pricey in foreign currency and worsening economic meltdown. This means more suffering and deaths for the ordinary Zimbabweans who cannot afford to get foreign currency to medicines.

The strike also comes at a time the country's emergency services have been grounded due to poor funding from central government. Many ambulances do not have basic equipment or adequately trained staff to take care of patients during transit, also complicating their recovery or risking fatalities in transit. Emergency departments are under resourced, without adequate equipment and staff to cope with the critically ill patients coming to them, including patients who have delayed seeking care until they have an acute emergency.

It should be noted that CWGH does condone job actions because they exacerbate deaths and human suffering. We strongly feel that there must be speedy, fair and impartial procedure for resolving disputes.

The Community Working Group on Health (CWGH) is a network of national membership based civil society and community based organisations who aim to collectively enhance community participation in health in Zimbabwe.

### For further information, please contact;

### Itai Rusike (Mr)

Executive Director

Community Working Group on Health (CWGH)

4 O'connor Crescent, Cranborne Harare, Zimbabwe Mobile: +263 77236 3991 / 0719363991

Tel: +26-4-573285|573286 Email: itai@cwgh.co.zw Website: www.cwgh.co.zw

"Health is Your Right and Responsibility"