editorial

The Crisis in Morale

Everyone is crying wolf wolf! "Standards are dropping", "The system has collapsed", "I'm too well qualified to work in this country!"

These are some of the things I keep hearing.

Others say, "It's all a question of money. GPs are earning too little, so we have to dispense to make a living." On the other hand, hardened old hands in the public sector say, "I cannot take this unresponsive bureaucracy any more. I'm getting out."

My view is that job fulfilment is a more important issue than merely earning above the doctor-breadline. Politicians and professional associations need to respond to these issues rapidly. Uncertainty cannot be kept at high levels for too long in any system without doing considerable damage.

In the public sector the morale can easily be improved by adopting participative management and delegating more authority for appointment and expenditure to local managers. No central or provincial government can respond to rapid local changes in time to avoid a crisis.

Our population is redistributing itself from areas of poor service provision into services previously inaccessible to them. To cope with this, adaptations need to be rapid. Once the morale is broken and the service has collapsed it takes a long time to pick it up again.

Recently SATV News was reporting on the collapse of the state hospital system while Minister Zuma was debating her budget vote. The next morning the Cape papers had no health headlines. The Cape Times reported some amusing anecdotes of no consequence. Marie Hudson of Die Burger gave a few lines from the minister's speech under the subtitle, "Geld nodig vir klinieke op platteland." The Minister emphasised that the process will take time. We are in trouble now. It is correct to blame the previous government for discriminatory distribution of resources. It is the root cause for our present crisis. The minister however, needs to do something now that will inject hope before it is too late.

The GP-Breadline is important in all this and is likely to influence the supply of professionals who positively contribute to the health of our Nation. Few doctors, if any, physically die of hunger, many are bankrupt, but the biggest sting comes in the disparity between the earnings of specialists and GPs. In the private sector, specialists earn two/three times as much as GPs. In the public sector there is parity. The disparity in the private sector is leading to all kinds of practices that is ruining our credibility as a profession. We must sort this out. We need to stop concentrating on "Survival" issues and switch our energy to the welfare of our patients and the population we are responsible to.

Perhaps a doubling of the consultation fee will bring procedures and profit from medicines into appropriate balance within our system.

Until health workers are able to develop a positive vision to work for, the present low morale will do more to destroy our health services than the increase in work load. Most difficulties turn into challenges if there is hope within the system.

Sam Jehrsen