

SHUNTING OF PATIENTS:

ANOTHER EXAMPLE OF RACIALLY DIVIDED HEALTH SERVICES

There is a long history in South Africa of segregation of hospitals according to skin colour, and, moreover, according to patients' so-called 'ethnic' background. More recently, the Transvaal Provincial Administration has tried to draw the lines of racial discrimination even further by shunting patients from one hospital to another, according to their racial classification.

The action of the hospital authorities

For a long time, so-called 'African' patients coming to Coronation Hospital have been labelled with a 'red dot' which means that these patients should be transferred to Baragwanath Hospital as soon as possible.

In late January 1986, the Transvaal Provincial Administration has issued a directive which says that patients must be treated at their 'regional hospital'.

Regionalisation

This directive was issued in the name of the policy of 'regionalisation'. Regionalisation of health services is carried out in many parts of the world, so as to avoid duplicating facilities, to give people more easy access to health services, and to simplify administrative matters and follow-up of patients. What is called a 'regional' health service in other parts of the world, though, is very different from what the South African health authorities mean by 'regionalisation'. In other countries where the health services are allocated more equally, the health services are divided up into several large areas. People from one area would attend the

primary health facility responsible for their area, and if they show more complex symptoms of an illness, they would be referred to the next hospital in the area which has special facilities to treat that illness.

In South Africa, however, white hospitals are excluded from the regionalisation programme. This means that patients attend a health service not according to its accessibility, but according to the racially exclusive areas in which they live.

Reasons for 'regionalisation' in South Africa

The Transvaal Provincial Administration says that the reason for the directive is the overcrowding at certain hospitals, notably Coronation Hospital. This reasoning, however, does not hold water when we consider that other hospitals, to which patients are to be referred on the basis of their racially divided residential area, are just as overcrowded, if not more overcrowded. In fact, compared to Hillbrow Hospital and Baragwanath Hospital, Coronation Hospital is one of the less overcrowded hospitals.

Hospital	Approved Beds	Present Occupancy	Beds	Surplus Patients
Baragwanath	2621	115%	-	917
Hillbrow	744	100%	-	148
Hillbrow Annex	152	7%	110	-
Coronation	585	111%	-	181
J.G. Strijdom	540	70%	154	-
Johannesburg	1800	50%	540	-
Total	6442		704	1246

What appears as the real reason for issuing this directive is the attempt by the health authorities to further entrench apartheid in health services, this time in the guise of the tricameral constitution. When the Transvaal Provincial Administration in 1985 opened the Annex of the Hillbrow Hospital as a 'New Indian Hospital', there was a public outcry. Very few patients went to this hospital. In January 1986, the TPA very quietly closed this hospital. It appears that the recently issued directive is an attempt to force Indian patients to go to Hillbrow Hospital, and to make Coronation a 'Coloured Hospital'.

What the racialisation of health services means in practice

The proposed 'regionalisation' of health services therefore, in effect, means a racialisation of health services. It would mean that patients from Lenasia must drive past Baragwanath and Coronation Hospitals to Hillbrow Hospital in order to be treated. If, for instance, a family from Lenasia is injured on the Golden Highway, the parents have to go to Hillbrow Hospital (which is to be the 'New Indian Hospital') and the children to Coronation Hospital (because Hillbrow Hospital has no children's ward).

How serious the consequences of the directive are, can further be shown by some examples of patient referrals where the patients were critically ill.

The response

Patients

Patients have been turned away from the hospital at casualty. Some of these patients tore up their referral notes. At the antenatal clinic, pregnant mothers who have been attending Coronation Hospital regularly for months, were turned away; they responded with great distress.

REFERRAL OF PATIENTS -

Three Examples

Mr P is 22 years old and comes from Lenasia. He came to Coronation Hospital on 3 February 1986. He had vomited blood the night before, and had pain in his abdomen. The Casualty Officer examined him and said he needed treatment by a surgeon. The surgeon would look into his stomach to see where he was bleeding from. Before he could be seen by the surgeon, however, he was transferred to Hillbrow Hospital, and the special examination was delayed until then. Mr P could have bled to death before arriving at Hillbrow.

Mr W is 39 years old and comes from Alberton. He came to Coronation Hospital on 18 February 1986. He was coughing green sputum, had a high fever, and had lost a lot of weight. He is zoned for Boksburg Benoni Hospital (BBH) and the form for his transferral was completed. It was only because Boksburg Benoni Hospital had no space that he was given a bed at Coronation. Mr W was very ill with tuberculosis and pneumonia.

Mr R is 71 years old and comes from Boksburg. He came to Coronation Hospital on 10 March 1986. He had severe chest pain and was coughing yellow sputum mixed with blood. He also could not breathe easily. His family were unhappy with his treatment at BBH and brought him to Coronation Hospital; but Coronation Hospital staff were told to refer him back to BBH. A Coronation Hospital doctor insisted he be admitted. He was found to be dehydrated and suffering from pneumonia.

The Community

Various meetings were held to inform community organisations about the directive and its implications. An ad hoc hospital crisis committee was formed of doctors and community workers.

At the initial meeting, the following resolution was passed:

This meeting of health and community organisations, NOTING the recent TPA directive on regionalisation of hospital services which refers patients to hospitals in their own group area;

BELIEVING that such action constitutes:

- 1) the extension of apartheid in hospitals by further segregation along racial lines
- 2) contravention of accepted principles of medical ethics
- 3) an attempt to consolidate the rejected tri-cameral system

RESOLVES to:

- 1) call for the immediate withdrawal of this directive
- 2) urge the immediate alleviation of overcrowding by the full integration of all hospitals including the Johannesburg Hospital and the J.G. Strijdom Hospital, and
- 3) work, with all resources at our disposal, for the establishment of a non-racial, just and equitable health service for all South Africa's peoples.

Doctors at Coronation Hospital

Following a meeting called by the Superintendent to discuss ways in which the directive could be put into practice, doctors at Coronation Hospital issued a public statement in protest against the directive. The statement reads:

"We, the doctors at Coronation Hospital, mindful of our Hippocratic Oath, are unable to comply with the directive compelling the transfer of patients to other hospitals against their wishes or against the assessment of their health care.

We see the optimum use of presently under-utilised hospitals on a non-racial basis as a solution to the over-crowding at Coronation."

It became clear that no doctor was willing to assist in applying the directive. So the Superintendent said that he would go ahead and implement the directive single-handedly. Following these events, a meeting was held between the Director of Hospital Services and the Medical Advisory Council (MAC) of Coronation Hospital. It was apparently decided to start implementing the directive "in a humane way" through a "phasing in period".

In response, the Doctor's Liaison Committee (DLC) at Coronation Hospital has issued the following statement":

"We, the undersigned doctors of Coronation Hospital, wish to state our support for the principle of regionalisation of health services in South Africa.

We believe that, integral to such a system, must be:

- 1) A non-racial organisation of health services on a regional basis, and
- 2) Equal access by all to equitable health facilities in these regions

Until such time as the recent directive on regionalisation fulfils these requirements, we are unable to comply with the directive."

This statement is supported by many doctors. The DLC has submitted this statement to the MAC.

It now appears that the Superintendent has, in fact, made attempts to carry out the instructions of the directive single-handedly. At the end of January, a second instruction sheet, issued by the Patient Affairs Department, was circulated among Coronation Hospital staff. This instructs nurses and clerks to report any patient from a different 'region' directly to the Deputy Superintendent for referral. In this way, patients do not even see the examining doctor. Doctors at Coronation Hospital see this as an attempt to undermine their opposition to the directive.

The National Medical and Dental Association (NAMDA)

The NAMDA Transvaal Regional Council issued the following statement in protest against the directive:

"The attempt by the authorities to make Coronation a "Coloured" hospital is another proof that economic sense and a reasonable and equal standard of health care for all South Africans are subservient to the policy of racial segregation.

We do not believe that the new directive thrust onto Coronation Hospital is aimed primarily at

improving health care for "local" patients. It is apartheid masquerading as geography, and will further divide South Africans. It will inconvenience sick people and pregnant mothers seeking care at the hospital.

We believe that the problems of overcrowding should be solved within a single non-racial health care system, planned with the involvement of all South Africans. Health care needs should be the only factor in distributing resources geographically. Health care delivery should not be made to serve apartheid.

We support the staff of Coronation in their desire to provide health care to those who need it, in a place they find most convenient to seek it."

The Coronation Hospital Board

The Coronation Hospital Board was informed of the directive before it was issued. But it appears that the members of the Board were not fully aware of what the directive would mean in practice. The directive was presented to them as a measure to relieve overcrowding at Coronation Hospital. Also, most of the members of the Board are not health care workers themselves, and are therefore not familiar with the health care needs and health services in the community. The Board accepted the directive. One member of the Board, Ms Dorothy Cornelius, resigned in protest against the directive.