

LETTER

Dear Critical Health

A comment on the new Groote Schuur Hospital.

It takes more than a few heart transplants to cause a stir amongst the residents of Observatory, and not even this concrete monster growing on their doorsteps raises many eyebrows. The projected cost of this 1700 bed hospital being built here is estimated at R200million and it is scheduled to be completed in 1990. Until then passers-by could usefully consider a few of the implications of this project.

"It has been questioned in several countries by eminent medical authorities whether expensive and elaborate teaching hospitals are sometimes not the product of scientific fervour, careerism and lack of knowledge, coupled with the too free availability of funds, rather than real needs."

The above is a quote from a paper on National Buildings for Health Care by Mr TL Webb, then director of the CSIR's National Building Research Institute. This is a state-funded and state commissioned research institute. So it seems that the state is ignoring its own research findings.

What are the real needs Mr Webb speaks of?

-50 000 new cases of TB are reported annually, with an estimated 4 to 5 times this number actually infected.
-the infant mortality rate in some homeland areas is more than 30%.

-25 to 30% of the rural population are malnourished.

-3950 cases of cholera and 3723 cases of typhoid were reported in 1981.

-80 000 people were victims of a range of diseases including diphtheria, leprosy, malaria, rabies, measles, polio, typhoid, tuberculosis, viral hepatitis, tetanus, cholera and trachoma.

These facts all highlight that the building of this monument is an act of short-sightedness. South Africa is a third world country with third world needs. To meet these needs we need third world health priorities. On the one hand we must provide for peoples' basic needs of housing, sanitation and good nutrition. On the other hand we must distribute health resources according to these real needs through decentralisation rather than further concentration of facilities in urban areas.

As Mr Webb states further in his report, "... the best use of our limited resources may well have to be along different lines if we are to counteract what has been described as rural hopelessness."

To limit the debate to the question of what is decided, would be to ignore a more important issue, that of who decides. Health services in South Africa are controlled by the state and by the medical profession. Both are totally unrepresentative of South Africa's people, who remain passive participants in their own health care with neither the political nor the economic means to take control over their own lives.

So while we must accept that a new Groote Schuur Hospital is being built at a cost of R200million, we can draw hope from the fact that we live in a society in transition and that the society to emerge will be healthier because peoples' basic needs will be met.

Cape Town resident and concerned health worker.