
The struggle for better working condition for maternity staff at Baragwanath Hospital

In 1987 an issue arose at Baragwanath Hospital concerning the working conditions of 200 nurses working on the 'maternity section' of the hospital. This article outlines the nurses' grievances and the involvement of the Health Workers Association (HWA) in assisting the nurses in their struggle for better working conditions.

Unfair conditions of leave

At Baragwanath Hospital six weeks annual leave is usually granted to the maternity staff. In July 1984, however, the chief matron indicated that two of the six weeks must be 'accumulated'. This did not mean, however, that the nurses could take this accumulated leave when they wished. The leave may only be available many years later. Furthermore, the accumulated leave would be forfeited if the nurse moved to another province.

The argument forwarded by the matrons in favour of this new regulation was a severe 'shortage of staff'. The regulation was implemented without discussion with the nurses concerned.

The nurses' response

The maternity staff reacted to the action by following the usual 'lines of authority' in order to highlight their problems. This occurred during the period July 1984 to May 1987.

- The problem was raised at monthly sectional meetings;



Baragwanath Hospital - the 'maternity nurses' had many problems with their working conditions

- they raised the issue with the sectional matron;
 - a meeting was held with the matron-in-charge of Baragwanath Hospital.
- All this was to no avail.

Finally, on June 15 1987, a letter was sent to the superintendent of the hospital, outlining this grievance as well as other problems the maternity nursing staff had been experiencing with their working conditions. These grievances included:

- The reduction of the previous six weeks leave to four weeks, with the compulsory accumulation of the remaining two weeks.
 - Night duty hours worked overtime forced to be accumulated on the same basis. It is compulsory for nurses to work 44 hours per week on night duty. In reality, nurses work up to 48 hours a week.
- The nurses demanded the extra four hours per week be allowed to be taken as a day off, after two weeks of night duty (as the overtime would now total eight hours - the equivalent of one day's work).
- No payment for the days accumulated while on maternity leave - therefore forcing mothers to take a period of unpaid leave.
 - Student midwives requesting days to do practical procedures, being given night duty so that the 'practicals' could be done during the nurses' 'resting days'.
 - That only two people per year were allowed further academic training, thereby slowing down the academic progress of many nurses.

This letter, however, did not result in any change in the situation. Frustrated in all their efforts, the maternity nurses approached the HWA to assist them in their struggle. The HWA offered advice and guidance. Regular meetings were held

which identified major problems and possible solutions. The unity of the group affected was of utmost importance as there was a threat and evidence of intimidation from the matrons. The matrons requested names and singled out individual staff members. It had become apparent that the authorities were not going to accede to the demands put forward. Legal advice was therefore sought.

Solidarity on the 'general side' of the hospital

Although the issue was mainly confined to the 'maternity side' of the hospital, the nurses on the 'general side' were made aware of the plight of the maternity nurses through discussions in various wards and clinics. When it was raised at a meeting of the 'junior sisters' on the general side of the hospital, the matron at the meeting dismissed it as a problem of the 'maternity side'. This was seen as a totally unsatisfactory answer and as a clear attempt to isolate the maternity staff's struggle. Other health workers were beginning to show concern.

Confrontation averted

The first group of sisters who were compelled to take their leave in January 1988 decided not to do so and to continue working. A confrontation had developed which would clearly have affected the whole hospital.



Collective action can help to protect nurses against victimisation

A series of meetings were held in December 1987, which involved senior matrons, the superintendent, SANA and the affected nurses. When it became clear that these meetings would not resolve the problems, the nurses decided to take the issue to court.

However the senior matrons agreed to scrap the compulsory taking of 4 weeks leave before the issue came to court. They also agreed to look into the other grievances.

The authorities and SANA had been made to realise that the problems of nurses and health workers could not be neglected. The autocratic behaviour of matrons had also been challenged.

Lessons to be learned

As with the 1985 Baragwanath nurses' strike, SANA once again had failed to resolve the problems experienced by black nurses. A problem of 'shortage' affecting white nurses at the Johannesburg Hospital at about the same time had been promptly addressed by SANA. An alternative body was needed to help address the plight of the nurses.

National Education and Health Allied Workers Union (NEHAWU) is one body that may be able better to represent nurses' and other health workers' interests. NEHAWU unionises all health workers including nurses. Many nurses have already been unionised, especially in the private sector.

Unity is very important. Intimidation of health workers can be effectively countered if there is solidarity from others involved in the health sector.

Initially some of the other demands made by the nurses were met. However a few months later, after attention was no longer focused on the issue, the authorities reverted back to the previous regulations. Therefore, unless there is ongoing organising and continuous vigilance, the hard won gains could be lost.