

A nurse's experience

This article attempts to illustrate some of the problems faced by nurses in their daily lives. These problems will not change unless nurses unite to challenge their working conditions as well as the socio-economic and political environment of the communities they serve. Together with other health workers and these communities, nurses can play an active and important role in fighting for better conditions for themselves and for equal, adequate and accessible health care for all in South Africa.

My day begins at 4.30 am when I wake up and prepare myself and my family for the day ahead. Most days when I am on duty, I have to work from 7 am - 7 pm.

I have worked as a registered nurse at a local hospital for approximately 15 years and have only recently been promoted to a Senior Registered Nurse's post.

Besides my job, I also have to care for my family. Two of my three children are still financially dependent on the family and the third has left her small child in my care. The hospital where I work only provides a creche for white children and so I pay for a childminder to take care of my grandchild while I am at work.

My husband is employed in town and is actively involved in community organisations. This involvement often causes conflict and tension in the home. He cannot understand my reluctance to take part in community and political activities that affect our day to day lives. Taking part in evening activities is difficult, however, as it is I who stays home to do the domestic chores and care for the children. In addition the nursing authorities expect me to be apolitical.

The hospital where I work is situated about 30km from where I stay. This means I spend a significant proportion of my time and salary on transport. Unlike white seniors at the hospital, I am not entitled to a transport allowance and because it is far, I often come to work late. I am always reprimanded for being late because the matron is not sensitive to my problems and only sees me as another "pair of hands". This leaves me feeling depressed, frustrated and angry. I will often displace this anger by picking on those whom I have authority over - my patients and student nurses.

The ward is usually full of very ill patients in need of constant care. The only thing that keeps me in nursing is my love for people. Many of my friends, however, have left because they were not prepared to endure the high levels of stress with little support, reward or recognition, especially from the nursing management. If one complains about the conditions under which one is forced to work, one is liable to be called a 'troublemaker' and one's chances of promotion could be affected.



Many nurses spend a significant amount of their time and salary on transport to and from work

When the doctor comes in to do ward rounds I have to leave my other duties to attend to him/her. I have been trained to be courteous towards the doctors at all times and to attend to their needs as a priority.

By lunch time I am tired and hungry. I take my lunch break in the dining room reserved for trained nurses.

There are separate eating facilities in most hospitals; one for doctors, one for senior nursing management staff, one for other lower categories of nurses and one for domestic workers. In some hospitals, eating facilities are further segregated in terms of race. The quality of food also tends to vary according to the status of the people.

My lunchtime is often taken up with my colleagues and I complaining about the day and the pressures of the job. We talk about the frustrations of not being able to voice these feelings outside the diningroom for fear of being victimized by the hospital authorities.

During the busy afternoon shift I am often left with only two student nurses. At times, the student nurses are new in the ward and most of the work will not be familiar to them. This makes work very difficult. In this kind of situation, 'getting the job done' is about all that can be managed and duties such as teaching students, or attending to anything other than the purely medical needs of my patients becomes impossible. Our main goal becomes 'finishing the routine'.

By the end of the day, I feel like a robot; checking patients' conditions, writing reports, checking the drips, giving the prescribed drugs and finally writing a matron's report.

It is a great relief when the night staff come in. I have been on my feet the whole day, trying to make ends meet within the constraints and limited resources. What is most frustrating for me and for other nurses as well, is that there seems to be no reward nor recognition for the hard work done. At the end of the day, most nurses are happy to get away from the hospital and its bureaucracy.