Poland: Widespread opposition to health reforms

Doctors and nurses threaten general strike

Richard Tyler 10 February 1999

At the same time as Poland was hit by farmers' protests, the imposition of reforms in the health service provoked strikes by anaesthetists facing low pay and worsening conditions. Many doctors and nurses earn less than the average monthly salary of \$350.

The restructuring of the health service has created chaos for patients and provoked widespread unrest amongst doctors and nurses. As well as withdrawing their services for all but emergency operations, a mass resignation action affected over half of the country's 2,500 anaesthetists.

Base salaries for anaesthetists are as low as \$225 a month. Przemyslaw Jakubowski, a leading figure in the protests, said, "The cleaners at the Ministry of Health earn more than I do." Jakubowski, a professor of anaesthesiology, only pushes his pay up to about \$500 a month by taking on extra 24-hour shifts and on-call duty in addition to his teaching.

The government has introduced elements of freemarket practice into what was previously a largely statefunded health system. In August last year, a series of medical insurance plans and healthcare funds were established. From January, the 16 regional healthcare funds are the principal providers of medical services. Through their budgets they effectively control the flow of funds to hospitals, outpatient clinics and doctors surgeries, which themselves will have to be managed more like private enterprises.

The thinking that has motivated the reforms was clearly spelled out by Deputy Health Minister Jacek Wutzow: "Doctors must realise that they work in a profession subject to free-market rules."

Despite an initial deal between the government and anaesthetists' unions at the end of January to increase their pay to between \$715 and \$850 a month, the protests show no signs of decreasing. In the Southeast and parts of the West, no anaesthetists are working.

Iwona Furma quit her job at a Warsaw hospital in protest. She told the press, "Many times when I get to the end of the month I am not able to pay all my bills. I don't need to live like a doctor in America, but I do want to be able to put food on the table."

There has been widespread criticism of the reforms from those working in the health service. One hospital director said, "We will be cutting back on laundry services and reusing disposable medical instruments many times." Another doctor in a Warsaw hospital said, "The new system forces us to reduce spending to the detriment of patients."

Following the action by anaesthetists, nurses staged a week-long sit-in at the Ministry of Health, which only ended January 29 when they signed an accord guaranteeing them stable and regular pay. The nurses said they would temporarily end their protest, but put the government on notice that they could take further action to seek improvements in salaries which only rise to about \$130 a month.

The Freedom Union (UW), junior coalition partners in the government headed by Solidarity Election Action (AWS), have been particularly critical regarding the implementation of the health reforms. UW party leader Leszek Balcerowicz said, "We cannot take responsibility for these un-thought-through and poorly prepared changes."

Many press commentators dubbed the recent struggle within the Polish coalition as almost "clinical death". The crisis has dominated front pages in Poland since mid-January. The *Warsaw Voice* writes, "Following a

series of meetings between AWS and UW leaders, the fratricidal bickering seems to have stopped--for now. As well as firing a deputy Minister of Health, the AWS has agreed to an investigation into the implementation of the health reforms, to report in two to three weeks."

The Committee for Defence of Healthcare, which includes some 70 percent of this sector's 600,000 employees, has threatened a general strike for February 19 unless the government provides more funds. They are demanding health insurance contributions be raised from 7.5 percent to 11 percent.



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