

Australia: SEP candidate opposes closure of maternity ward in Sydney's west

Our reporters
2 March 2005

Mike Head, the Socialist Equality Party candidate for the Werriwa by-election, spoke at a rally late last month against the closure of the maternity unit at Camden Hospital. Camden, which lies just outside the Werriwa electorate in Sydney's outer south western suburbs, is an area now dominated by new housing estates, occupied by young working families, usually with large mortgages.

Before the rally, about 1,000 people marched through the centre of Camden, waving banners and chanting slogans against the imminent closure. Previous demonstrations against the downgrading of the hospital had drawn between 400 and 500 people. Nevertheless, the New South Wales state Labor government headed by Premier Bob Carr confirmed the closure on the very eve of the march.

Head won warm applause as he voiced his support for the demands of the community, telling the rally that like every other growing area, "Camden needs a full hospital and full maternity ward." Labor's contempt for the working class had been summed up, Head noted, by the announcement of the ward's closure the day before the community protest.

Head explained: "We have government by lies and deceit—at both the national and state level. At the national level we have lies from the Howard Liberal government about the Iraq war; at the state level we have lies from the Labor government about the reasons for the closure of basic public services. The truth is that public health is being run down everywhere to boost private insurers and private health."

He said he was standing in Werriwa for the SEP in order to put forward "a genuine socialist alternative to Labor and Liberal, which both carry out the requirements of private profit and the accumulation of wealth at the expense of the needs of the vast majority

of ordinary people".

Rally organiser, local businessman Steve Wisbey, thanked Head for his speech, saying: "I am not a socialist yet, but that was very interesting."

The Carr government placed the hospital's birthing unit under review in December, just nine months after an earlier inquiry had recommended it continue, and less than two years after the government opened the unit to win votes in the area on the eve of a state election.

Citing falling numbers of births at the hospital, and the general shortage across Australia of doctors specialising in obstetrics and anaesthetics, the review argued that specialist resources should be concentrated at the larger Campbelltown Hospital, some 15 kilometres away. As a sop to local outrage, it suggested that a midwifery service re-open at Camden, allowing only women with low-risk pregnancies to give birth there.

The review began from the standpoint of what is "sustainable"—i.e., affordable—in a dysfunctional public health system characterised by inadequate infrastructure, staff shortages and an overall funding crisis. It ignored the main reason for the decline in birthing numbers at Camden—deterioration in the standard of care caused by inadequate funding.

In late 2003, nurses at Campbelltown and Camden hospitals spoke out against patient safety being seriously compromised at both facilities due to chronic understaffing. Substandard care was ultimately blamed for the deaths of 21 people, including Natalia Lalic, a newborn who died because faulty equipment and untrained staff prevented an emergency caesarean being performed.

The intense media coverage of the scandal ensured that a number of pregnant women were reluctant to use

either Camden or Campbelltown. The recommendation to consolidate the available specialists at Campbelltown does nothing to redress the underlying cause of the problems.

If and when the midwifery service commences, women who seek to give birth at Camden will have to go elsewhere if complications arise. Campbelltown Hospital is approximately 20 to 30 minutes away by car. Liverpool Hospital, the next closest facility, is even further.

Aggravating the potential for tragedy is the fact that Narellan Road, the main connection between Camden and Campbelltown, is prone to heavy traffic. As expectant mother Rachel Costa told the *Sydney Morning Herald*: “To be quite honest, giving birth at Campbelltown scares me. I have quick labours and Narellan Road is a disaster at the best of times. I am actually stressing a little bit and quite scared of being stuck giving birth on the side of the road.”

Speaking to the WSWS before the Camden rally, Lorraine Peacey from Elderslie was bitterly opposed not only to the closure of the maternity unit at Camden Hospital but the deterioration of the public hospital system nationally. She said Camden Hospital had been “marvellous” when she had two children there more than a decade ago. Now, it was being run down, despite a crying need for maternity services for the growing population of Camden and its outlying areas.

She had personally experienced the appalling state of the public hospitals throughout Sydney’s western suburbs. She waited four years for an operation at nearby Campbelltown Hospital. Once when she required urgent hospitalisation two years ago, medical staff had been unable to locate a bed for her, including in the major teaching hospitals at Liverpool and Penrith.

“The public hospitals are getting no support at all from governments,” Peacey said. “For the sake of people and our society, the hospitals have to be funded in order to encourage medical staff back into the system.”

The population within Camden Council, which is currently 48,000, may grow by more than 150,000 over the next 20 years. Housing subdivisions are being developed around Elderslie, Spring Farm, Mount Annan and Harrington Park, while there are plans to construct at least 30,000 new homes in Bringelly.

In the main, the new residents will be young couples buying their first home and intending to start families. To meet the basic requirements for the population, the state must provide not only vastly expanded health services, but new child-care centres, schools, parklands, recreation facilities, public transport and other basic services.

The exact opposite is taking place however. For more than two decades, both Labor and conservative governments have lowered business taxes and gutted social services in an effort to meet corporate demands for Australia to be “internationally competitive”.

The millions of ordinary people who cannot afford to pay for private health and education are being left with second-class services. This has been highlighted by further revelations about the conditions confronting doctors, nurses and patients at Campbelltown Hospital.

Staff shortages have forced the closure of four beds in the surgical gynaecology ward, and 10 beds in paediatrics over the last month. An internal hospital memo from early February, obtained by the local newspaper, the *Campbelltown-Macarthur Advertiser*, stated that nurses from the wards needed to be “redeployed to assist areas that now have substantial gaps in their rosters”. The wards with the gaps included coronary care, intensive care, peri-operative and surgical short stay units.

A nurse, who declined to be named, warned of the implications for patient’s safety: “General nurses are required to perform extra shifts in other areas which, although they are fully qualified nurses, do not have the necessary experience to work in those different wards. After a double shift, the nurses are tired and exhausted and it’s not safe work practice.”



To contact the WSWS and the Socialist Equality Party visit:

wsws.org/contact