

# Sri Lankan nurses campaign for improved safety

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The Sri Lankan government deployed Navy nurses to the Cancer Hospital in Maharagama, a Colombo suburb, on July 28 to undermine protest action by nurses. The campaign was in support of their colleagues in the chemotherapy unit who have been demanding improvements to basic safety. The nurses took strike action on July 22 and 27 for their demands.

Chemotherapy involves the use of powerful drugs that can have harmful effects on those involved in their preparation and administration. The nurses are demanding protective gear, proper training, four new Cytotoxic Safety Cabinets (CSC) and a monthly risk allowance of 10,000 rupees (about \$US90). At present, there is only one CSC for the preparation of chemotherapy drugs.

The nurses are also demanding a central dispensing unit rather than preparing treatments in separate wards. Due to the lack of protective equipment, the drugs are frequently mixed in the open by hand allowing traces to escape into the air. According to the nurses, their colleagues have suffered from a high number of birth abnormalities. A central dispensing unit would provide some protection.

Three unions—the All Ceylon Health Services Union (ACHSU), the Government Nursing Officers' Association and Independent Health Workers Union (IHWU)—were involved in the protest. The Government Services United Nurses Union (GSUNU), led by the Buddhist monk Muruththettuwe Anand, has openly lined up with the government and refused take part. Despite the union's refusal, its members participated in the action.

Nurses in the chemotherapy unit told the WSWs that

it was years before they understood the dangers to which they were exposed and started to press for proper safety measures. They wanted to take action previously but had been opposed by union leaders who adapted to the government's threats against anyone disrupting its war against the Liberation Tigers of Tamil Eelam (LTTE).

Early last year, the nurses handed a list of demands to Dr. Atula Kahandaliyanage, the secretary of the Health Ministry. In August 2008, he agreed to study the issue and meet their demands, but that promise was not kept.

When nurses started a go-slow campaign in June, Health Minister Nimal Siripala de Silva immediately transferred all 53 nurses in the unit to other hospitals and sent 25 trainee nurses to the unit on July 15. Silva's action revealed the government's contempt for both the nurses and patients who are now in the care of untrained nurses.

The unions took the matter to the Supreme Court, which, on July 22, suspended the transfers until July 31. However, the government ignored the ruling. The Cancer Hospital management under the direction of the health ministry refused to allow the transferred nurses to report for the duty. De Silva told the media that all "nurses at the Maharagama Cancer Hospital who do not accept the transfer notifications and continue to strike will be considered having left their employment."

Hospital head Dr. Sulochana Yoganathan told last weekend's *Sunday Leader*: "There is no truth to these charges as the health ministry has taken all precautionary measures to prevent any harm to those who mix the chemotherapy medicines."

However, Welagedara, an IHWU member and experienced nurse, told the WSWs that their demand for safety measures is not only relevant to nurses but to patients and visitors as well. The drugs are volatile and

if inhaled can affect pregnant mothers and young children.

IHWU president Priyanka said: “Without protective gear and enough CSCs, nurses are at risk when administering the injections. I have been working here since 1992. There are many nurses like that. They have settled near the hospital and send their children to nearby schools. How can mothers care for their children if they are transferred suddenly like this?”

Dr. Niroopa Weerasekera from the Cancer Hospital told the WSWS that if chemotherapy injections were not carefully handled there was a risk to the nurses. She said that those administering the injections should have proper training. “I think protection should have been given from the beginning,” he added.

Other nurses were concerned about the situation. One nurse pointed out that at times essential drugs like Ifosfamide and Gemcitabin are not available in the hospital. This year chemotherapy drugs were also not available for about three months. Only patients who could afford to pay for the drugs—ranging from 6,000 to 10,000 rupees—were treated. Nurses also explained that the hospital needed 850 nurses but had only 375 with 25 trainees.

Cancer patients often have to wait for more than a year after registering for a bone scan. Even after getting an appointment, it can be further postponed due to lack of equipment failures. The radiotherapy unit is also very crowded and suffers from machine breakdowns. The hospital does not have enough beds and patients, often in pain, have to sleep on the floor.

Nurses at the Cancer Hospital have been supported by other health employees, including at the general hospitals in Galle and Kandy, who held protests.

A nurse working in chemotherapy unit at the Ceylinco Health Care Centre, a leading private hospital in Colombo, told the WSWS: “We take blood tests every six months [to check for side effects]. We give injections to relatively few patients here but the nurses at the Cancer Hospital are giving it to a large number of patients. So they should get their demands.”

Patients and relatives also criticised the government’s action. Because of the strike on July 27, many patients had to wait for hours. Himali Damayanthi, a patient from Aluthgama, told the WSWS: “I came here at 3

a.m. with my mother to admit her to the hospital. But now it is past noon. If the government considers the patients then it must grant the nurses their demands. Why should the nurses work under risk?”

Another patient’s wife, K. Shanthi, said: “We came from Moratuwa at 6.00 a.m. Hospital officials asked us to wait until noon. My husband can’t wait. How many times have I wept because of my husband. The government should care about us. The nurses treat the patients kindly. The government has to give them their demands immediately and care about us.”

The government’s actions against nurses at the Cancer Hospital are not isolated. Having defeated the LTTE, President Mahinda Rajapakse has declared that he will wage an “economic war” to “build the nation”. That means imposing the economic burden of the government’s huge military spending and the deepening global recession onto working people through savage cutbacks to public spending in all areas, including essential social services such as health care and education.

Under the IMF loan approved last week, the Rajapakse government has agreed to intensify its austerity measures in order to slash the budget deficit. The punitive transfer of the Cancer Hospital nurses is a sharp warning of the type of measures that will be used against any opposition by working people. The police state apparatus built up during decades of war will be turned against the working class.

The working class must come to the defence of the nurses. Free, high quality health care as well as decent pay and working conditions for health care workers are basic rights. But the unions have called only limited protests to try to pressure Rajapakse. What is needed is a political movement of workers against the government on the basis of socialist program—that is, one that puts the basic social needs of the majority ahead of the profit requirements of the wealthy few.



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