

Rising death toll from health sector cuts in New Zealand

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New Zealand's desperately underfunded healthcare system has resulted in shortened life expectancies, dying babies and increased suicides, according to recent media reports.

Recently seven babies died within seven weeks at Waikato Hospital. On September 19, One News told the horrific story of Kate, a pregnant mother rushed to hospital when she started suffering severe pain. Due to staff shortages it took 12 hours for her to be seen by an obstetrician and a further 5 hours before she received a scan. She started vomiting black fluid and went into cardiac arrest, caused by an aneurysm that ruptured her uterus and leaked eight litres of blood into her abdomen.

Her baby was delivered with suspected brain damage. After three weeks, unable to breathe by herself, the baby developed pneumonia and died.

Auckland Hospital has a shortage of midwives, with up to 25 percent of roles unfilled earlier in the year. A woman who spoke to Radio New Zealand on October 18 had to have her baby's birth delayed and wait 8 hours for pain relief.

In the Dunedin area, at least six prostate cancer patients have had their life expectancies shortened because of massive delays in the Southern District Health Board's urology department. A 62-year-old patient waited ten months for treatment he should have received within three weeks, after being diagnosed last year. The cancer has now spread and he is expected to survive only five years.

Across the country, patients seeking emergency care have been turned away from overflowing hospitals. South Auckland's Middlemore Hospital frequently displays a sign at its entrance telling patients to seek care elsewhere or wait at least eight hours. An internal email reported by the *New Zealand Herald* on

September 5 revealed the hospital was at 104 percent capacity, with the medicine and surgical area at 116 percent.

Waikato Hospital has gone over its maximum capacity several times this winter and, on September 12, cancelled surgeries unless they were emergencies or for cancer. Beds had to be set up in corridors because the wards were all occupied. At Palmerston North Hospital there have been reports of patients waiting up to 15 hours to be seen.

Poverty and inequality are exacerbating the crisis. Pharmacy Guild president Graeme Blanchard told Fairfax Media on September 26 that he saw a 25 percent decrease in filled prescriptions after the government increased the cost of subsidised medicines to \$5 from \$3 in 2013.

A Ministry of Health survey found that between 2015 and 2016, 15 percent of prescriptions went unfilled in the most deprived parts of the country due to cost, and up to 19.3 percent among Pacific Island adults. Patients with chronic conditions such as diabetes and high blood pressure require up to ten different medicines that can total \$30-\$50 per script.

Mental health services are also under severe strain, with suicides at record levels: 606 people took their own lives last financial year, up from 579 the previous year and 564 the year before that. District Health Boards (DHBs) throughout the country report severe shortages of mental health staff.

Successive Labour and National Party governments bear responsibility for the healthcare crisis. The defeated National government increased the health budget by just \$888 million in the past year to \$16.8 billion, far below what is needed to keep pace with population growth, the ageing population and inflation.

During the election campaign, Labour promised to

reverse the cuts to health services by the National government over the past 8 years. While basic services are being starved of funds, however, all the parties in parliament support a \$20 billion military upgrade over the next 15 years to strengthen integration with US and Australian allied forces and prepare for war.

Despite gross underfunding, DHBs face constant government pressure to reduce costs by millions of dollars. Jonathan Coleman, health minister in the outgoing National Party government said there is a minimum \$117 million deficit total across all DHBs.

Canterbury DHB has been ordered to cut its deficit from \$54 million to \$17 million. Waikato hospital faces a \$32.5 million deficit. Counties Manukau DHB told Radio New Zealand its projected deficit is \$50 million and an extensive cost-cutting program would only reduce it to \$20 million.

The country was divided into DHBs in 2001 by the then Labour government to absolve the government of direct responsibility for health spending and reduce administration costs, with elected bodies giving the veneer of democratic control.

The health crisis was a major concern for the working class during the 2017 election campaign. However, the incoming Labour-led coalition government will continue to starve the health system of funds.

In a televised debate between Coleman and Labour's health spokesperson David Clark on September 3, Clark admitted that Labour planned to keep spending at roughly 6 percent of GDP. He said that to return health spending to what it was in 2009 would require an extra \$2.3 billion, and promised Labour would back-fill the spending gap. However, just \$800 million will be added in Labour's first budget, a measly 4.76 percent increase on 2017.

A return to 2009 per-capita funding levels still would be woefully inadequate. Health care suffered significantly under Helen Clark's Labour government between 1999 and 2008. In 2003, four Auckland hospitals were amalgamated as one Auckland City Hospital, reducing the number of beds by 7 percent.

A 2008 review by the Australasian College for Emergency Medicine found that a shortage of hospital beds was killing as many people as road accidents every year, which was 400 at the time. The review called for a 15 percent increase in beds.

Suicide rates peaked in 1998 but remained high

throughout the last Labour government. In 2005, the suicide rate for 15-24 year olds was the second highest in the OECD. The suicide rate for Maori men in 2004 was 29 deaths per 100,000 population.

The Labour Party said it wants an inquiry into the mental health system aimed at reducing suicides. However, the health crisis and suicides are the outcome of decades of pro-market economic reforms, begun by the 1984-1990 Labour government. It oversaw mass redundancies in public services, the impoverishment of thousands of people and the introduction of user-pays health services. According to researcher Andrew Dean, from the early 1980s to the mid-1990s the youth suicide rate almost tripled, from 10 to 30 per 100,000.

Jane Kelsey's book *The New Zealand Experiment*, reported that waiting lists for surgery increased 61 percent from 1981 to 1991, and the proportion of health funding from public sources fell from 88 percent to 81.7 percent.

Under Clark's Labour government, the figure fell even further to 77 percent, while private hospital providers such as Southern Cross and Wakefield Health Group expanded rapidly. According to a *New Zealand Herald* report from January 2007, the government pushed 35,000 people off public hospital surgery waiting lists in the space of just 12 months, declaring there was not enough money to fund all types of surgery.



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