

New Zealand health workers speak out on lack of preparation for COVID-19 pandemic

Tom Peters
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Health workers throughout New Zealand are warning that a major outbreak of COVID-19 would rapidly overwhelm the public health system, which has been starved of funding and resources for decades.

There are 152 confirmed cases, with five currently in hospital. Following a petition to the government signed by thousands of doctors demanding a lockdown, Prime Minister Jacinda Ardern yesterday announced that by Thursday all workers will have to stay at home, except those in essential services and industries. Schools will be shut to prevent further spread of the virus.

Four positive cases have no link to overseas travel, meaning that community transmission has occurred and the number of cases could be far higher than the official figures. There is a shortage of test kits and just over 6000 tests had been carried out by the end of last week.

Health workers have been horrified by reports of overflowing hospitals in Italy and other countries, where thousands have died. “I have never felt as scared as I do now. Please stay home,” wrote intensive care doctor Paul Young on Twitter last night. “Hospitals being completely overwhelmed means that people die of heart attacks, strokes, accidents, etc.”

The *World Socialist Web Site* spoke with a worker in South Auckland’s Middlemore Hospital, who expressed alarm about the “crisis” in Tiaho Mai, the mental health unit.

A patient who had been tested for COVID-19 and is suffering a mental health crisis was transferred to the unit on Monday morning, after spending six days in the emergency department in isolation. Mental health staff had argued against transferring the patient into the unit, but they were overruled by management. The worker told the WSWs that staff remain uncertain as to whether the patient has been fully cleared of the virus, and are taking precautions. The worker said they were

concerned about two other patients who are being tested and could be transferred to the unit.

The unit, with 32 beds, is almost full, and coronavirus patients cannot be properly isolated. “A lot of nurses I know are saying: you can’t do this because we haven’t got the pressurised rooms, we haven’t got the equipment.” Staff and other patients were at risk of contagion, she said.

While nurses have gowns and face masks that they must wear when seeing the infected patient, they will not have time to put on this protective equipment if they urgently need to restrain the patient, something that requires three staff members. Staff often have to deal with patients who spit and bite them or who try to self-harm.

“Mates of mine are in a panic because they’ve got little kids and they’ve got older parents that they look after or stay with. I’ve heard that some of the staff, because they don’t want to infect their families, are going home and sleeping in their cars,” the worker explained. “Staff are very, very scared of what’s happening.”

The *New Zealand Herald* reported yesterday that doctors in South Auckland are concerned the virus could “rip through” the working class area, which has high rates of poverty and overcrowding.

The Middlemore worker said nurses were “treated like rubbish” in the hospital. “We’re understaffed, and staff are going to be tired and overworked. What’s their immune system going to be like? Management are still going home at good hours and they look well-rested, while staff who are running the hospital are getting run down.”

The mental health unit is so poorly staffed, with several people off sick and injured, that management is “calling staff back in who are on annual leave.”

There is now an urgent nationwide campaign to try to recruit more health workers, including retired doctors, nurses and those who have left the workforce.

The worker strongly criticised the lack of preparation by the Labour Party-led government, saying: “Why didn’t they do something sooner? They knew that there was an epidemic over in China. We had at least a couple of months before it got over here, but they didn’t put anything in place, they didn’t look for anyone. They didn’t take it seriously.”

The government should have established proper quarantine facilities for infected patients. “They haven’t, and now they’re running around trying to figure out where to put these people,” the worker said. People with COVID-19, apart from those in hospital, are told to self-isolate at home, which raises the risk of contamination.

The worker also denounced the New Zealand Nurses Organisation (NZNO) for selling out a nationwide nurses’ strike in 2018. The union ignored workers’ demands for safe levels of staffing in hospitals, including for a mandatory ratio of one nurse to four patients.

A nurse based in Christchurch, with three decades of experience, told the WSWs that “a major concern” is the shortage of PPE (personal protective equipment) in New Zealand hospitals. Nurses at her workplace had access to “a flimsy gown and a standard mask, not intended for this sort of thing.” She said they should be equipped with “proper filtering masks,” but instead have mostly “surgical masks that are only good for basically half an hour.”

“I think we’re all prepared to work and put ourselves at risk, but within reason. All the health workers are just going to get infected themselves, and then there’s going to be nobody to look after anybody,” she said. Doctor Lance O’Sullivan recently told the media that half of nurses in New Zealand are aged over 50, which puts them at greater risk from the virus.

“We should be doing far more testing,” the nurse said. “I think it’s probably rife in the community.” She had become sick from her daughter, who had returned home from overseas in January, but was told she did not meet the criteria for a COVID-19 test. “I don’t know whether I had it or not,” the nurse said, but she was concerned that as a health worker she had not been prioritised.

“If they don’t keep it under control, it’s going to be a disaster like everywhere else. They just don’t have the ICU [intensive care] beds.” There are fewer than 200 ICU beds in the country.

“The District Health Boards (DHBs) are so understaffed it’s just ridiculous,” the Christchurch nurse said. “We’ll just work ourselves into the ground doing 12-hour shifts seven days a week until we all come down with [COVID-19]. That’s what seems to be happening overseas and I can’t see that it will be any different here. I don’t know what’s going to become of Italy.”

She described the NZNO as “absolutely useless,” and said nurses “got nothing” from the 2018 dispute. “They seem to be working more for the District Health Boards than for the nurses, and they’ve done that for years.”

Like the Middlemore worker, the Christchurch nurse said that “the worst mistake” by the government was “not properly quarantining people at the start. This self-isolation is just a joke. They should have done what China did, have everyone in quarantine under watch. I think they’re being very naive to think that [everyone] will do what’s suggested.”



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