

Public health crisis deepens as many doctors leave Sri Lanka

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14 July 2024

Sri Lanka's public health service has sharply deteriorated over the past year as President Ranil Wickremesinghe's government imposes its International Monetary Fund (IMF) austerity program on the masses. In response, thousands of doctors have left Sri Lanka.

In fact, nearly 10 percent of the island's medical professionals, including over 1,700 doctors, have migrated from the country over the past two years and the understaffing crisis is poised to worsen.

On June 21, the Government Medical Officers Association (GMOA) warned that 5,000 doctors, or 25 percent of the 20,000 doctors in government health institutions, have sat the necessary exams to seek employment abroad. This includes specialists in emergency medicine, anaesthesia, pediatrics, psychiatry, neurology, and cardiac surgery—almost 400 in total—in the past two years.

GMOA spokesman Dr. Chamil Wijesinghe recently told the media that the migration of doctors would become a “huge problem” for the country's health sector. He said it had already impacted the National Hospital of Sri Lanka (NHSL), located in Colombo and the largest in Sri Lanka, and on the rural hospital system, forcing patients “to sometimes travel hundreds of kilometres to get their surgeries done.”

At least two main hospital units were completely closed last year due to the lack of medical staff. These included the professorial paediatric ward at the Anuradhapura Teaching Hospital because four paediatricians resigned and left the country; and the surgical unit at Mullaitivu Hospital in the Northern Province because it had no surgeon.

Lahiru Prabodha Gamage, 35, now a senior house officer for Britain's National Health Service (NHS), told *Al Jazeera* on June 20, “No matter how much

money I earned, I had to pay back huge loans” and therefore had no choice but to leave. Gamage said that his basic monthly salary was 64,000 rupees (\$US213) and with overtime, he could earn around 220,000 rupees, but after loan repayments and other costs he was left with only 20,000 rupees.

Gamage explained how the Sri Lankan government was deliberately using the COVID-19 pandemic crisis to open the way for the private sector to increase profits. He and another doctor developed a contact tracing app and did a presentation for Sri Lanka's COVID-19 Presidential Task Force.

Gamage told *Al Jazeera* that a member of the task force made some notes about their app but “sometime later, we suddenly heard that the app—with some faults—has been produced by a private company.” In other words, it had been handed over to a private entity.

In March last year, President Wickremesinghe said that 30 to 40 percent of nurses trained in Sri Lanka had decided to emigrate. The All-Ceylon Nurses Association reported in February this year that 2,528 nurses had left the profession in the past two years.

Acknowledging, but seeking to downplay, the growing staff crisis, Director General of Health Services Dr Asela Gunawardena told the *Daily Mirror* on July 1: “Despite a significant number of doctors in the pipeline and plans to appoint more interns, the decision of specialists opting to leave the country is beyond our control.”

Last May, however, D.I.I. Amarasinghe, a Nursing Officer (Education), told the media that nursing in Sri Lanka faced numerous challenges, including significant shortages of qualified nursing staff. This was particularly severe in rural areas, where the lack of trained professionals in healthcare facilities had led to increased workloads and was compromising patient

care.

In December 2020, the World Health Organization (WHO) reported that Sri Lanka only had 37 doctors, nurses, and midwives per 10,000 people, compared to the 44.5 per 10,000 recommended by the WHO's global strategy. Recent statistics from the Sri Lankan Ministry of Health reveal that rural areas often have nurse-to-patient ratios well below the WHO standards.

Pharmaceuticals shortages have forced patients in government hospitals to seek alternative medicines at private pharmacies, at significant cost. This is particularly acute at the NHSL in Colombo where patients must pay higher prices for medications from private pharmacies. The majority of those affected are from low-income families.

On May 3, the *Daily Mirror* reported significant shortages of vital medical supplies, including various diameters of ureterical stents for both paediatric and adult patients. This information was sourced from Swastha, a drug availability information management system. Common medications like amoxicillin are also in short supply.

Deputy Director General (Medical Services) Dr G. Wijesuriya acknowledged the ongoing shortage and claimed that alternative treatments were being employed to mitigate the problem. Government Pharmacists Society President Thushara Ranadeva told the media in May this year that the supply of some drugs has decreased by 20 to 30 percent.

The crisis confronting Sri Lanka's public health system will worsen as the Wickremesinghe government intensifies the cost-cutting assault demanded by the IMF. Colombo is privatising state-owned industries, including sections of health and education, reducing the sectors to a skeleton to repay foreign debt and boost investor profits.

In 1990, there were 44 private hospitals in Sri Lanka. This figure rose to 145 in 2013 and 250 by the end of 2022, with six new full-time private hospitals that year, and an overall total bed capacity of 5,602.

Noting the excessive and rising cost of medical supplies, medicines, laboratory tests and consultation fees, the Central Bank's annual report for 2023 said increasing numbers of Sri Lankans were unable to use

the country's public hospitals.

Dr. Anuji Gamage, a senior medical faculty lecturer at the Kotelawala Defence University, noted in a late November 2023 research paper that high Out-of-Pocket Expenditure (OOPE) was blocking many Sri Lankans from accessing proper healthcare.

The current crisis in the Sri Lankan health sector will be exacerbated by more health emergencies. The WHO has recently cautioned Sri Lankan health authorities to remain watchful following the detection of avian influenza, popularly known as bird flu, in India and other neighbouring countries.

Sri Lanka's limited free public health, education and other services, which were hard-won by workers and the rural masses, have been systematically undermined by consecutive governments over the past four decades and are now on the chopping block.

From the major capitalist nations through to the underdeveloped and former colonial countries, public health and education are key targets of a crisis-ridden profit system which cannot and will not provide for the most basic needs of the working class and the poor. The defence of public health and education is part of broader struggle against the Wickremesinghe's IMF austerity measures and the capitalist system and for a workers' and peasants' government based a socialist program.



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