

EDITORIAL

In April 1984, the outpatient fees at the provincial hospitals in the Cape and Transvaal were increased by up to 250%.

Government spokespersons on health have come up with reasons for these increases. They are concerned about cutting back government expenditure on public institutions like education and health. They argue that peoples' standard of living has gone up, and that people can therefore afford to pay more for their health needs.

But, in fact, this is not correct. A closer look at black working peoples' incomes shows that their wages have gone down in real terms over the years. This is what the article on "Income, Unemployment and the Cost of Living" in this issue of Critical Health explains.

In the mean time, health workers have seen the effects of the increases in public health fees. They see many patients who come only when they are seriously ill, and patients who do not come for check-ups and follow-up treatment, simply because they cannot afford the cost of transport and treatment.

Health care is becoming a commodity that only few people can afford. This is borne out by the fact that there is hardly any difference in provincial hospital fees and private doctors' fees. The government is encouraging the private sector to take over more of the health care expenses. Already, private clinics are being built in and around the townships. They provide mainly curative services for those who can afford it. The privatisation of health care takes attention away from the state's responsibility to see to the health problems which it produces with its policies of division and inequality.

The article on "Raising the Price of Provincial Health Care" shows the effects of the increases. This article, furthermore, shows how the fees are structured and makes

suggestions for a different, more fair fee structure that is more in line with peoples' real income and health needs.

The following article, "Health and Health Care in Mhala", shows the poverty in one of South Africa's rural "homeland" areas. That is where the diseases of poverty are even more rampant than in the cities, and people have even less access to health care. This article looks at ways of improving health care even within the unsatisfactory conditions caused by apartheid divisions.

As unrest and police violence in the townships continue, more and more people get detained. More evidence is coming to light about the conditions in which detainees are being kept. The affidavit by Dr Wendy Orr concerning the torture and ill-treatment of detainees in the Eastern Cape has highlighted the role of district surgeons. It has shown, once more, that state health officials, such as district surgeons, tend to put their obedience to the orders of the state before the duty to their patients. The same is true of many provincial hospitals who allow the unrest victims to be treated under police guard and released into detention. The Detainees' Counselling Service is one of the organisations which is concerned with the rights and health of detainees. The article on the "Psychological Effects of Detention" describes the post-traumatic stress disorders from which many detainees suffer, and suggests ways of dealing with these problems.

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