



# POSITION PAPER

## The state of Health Service delivery in Harare

**Date: 18 August 2020**

- 1. Introduction-** Health service delivery across Harare has been in a bad state for quite some time. The situation has worsened during the Covid-19 pandemic. Most of the 65 clinics operated by the City of Harare have closed. A number of reasons have been cited for the closure of health institutions, and chief among them is the shortage of Personal Protective Equipment (PPE) for health personnel. Nurses at community clinics have not been spared. Resultantly, they have resorted to industrial action, calling for safe working conditions which minimise the risk of contracting Covid-19. The striking nurses are also demanding the availability of other essentials needed for effective health service provision such as drugs and better remuneration. The few remaining clinics lack some or all of the essentials needed for smooth and effective health services provision. In a bid to appreciate the gravity of the situation at hand, the Harare Residents Trust (HRT) carried out a survey covering 15 clinics across Harare.
- 2. Justification-** The survey sought to uncover the situation in Harare regarding the state of clinics. The paper provides valuable information to concerned policy makers and decision-makers in the government, Harare City Council and the Ministry of Health and Child Care. It reveals the actual state of affairs on clinics by unveiling the gaps which need attention. Therefore, the paper can inform policymaking and be used as a tool to improve health service delivery in clinics across the Harare Metropolitan Province.
- 3. Methodology-** A data collection questionnaire was prepared and administered through members of the Harare Residents' Trust in the communities. Most responses came through an established COVID-19 updates Whatsapp platform, with HRT members providing information on the state of clinics in their suburbs of residence. Convenience sampling was used to come up with the study participants. Members of the HRT who were available and able to visit their local clinics participated in the survey. The availability of Anti Retro-Viral drugs, maternity services, Tuberculosis (TB) medication, baby clinic, Blood Pressure (BP) check and general medication at clinics were the themes followed on data collection and presentation. Survey participants managed to provide information on 15 clinics in Harare. The surveyed clinics were; Rutsanana (Glen Norah), Glen View Polyclinic, Kuwadzana Polyclinic, Mufakose clinic, Edith Opperman

Maternity, Mbare Flats, Sunningdale, Highfield Satellite, Highfield Polyclinic, Kuwadzana Extension, Rujeko (Dzivarasekwa), Glen Norah B, Glen View 2, Warren Park and Kambuzuma Polyclinic.

#### 4. State of clinics in Harare (Services available and unavailable in clinics)

##### 4.1. Clinics open and closed

	Open	Closed
1	Glen View Polyclinic	Rutsanana clinic (Glen Norah)
2	Kuwadzana Polyclinic	Mufakose clinic
3	Mbare flats clinic	Edith Opperman clinic (Mbare)
4	Sunningdale clinic	Highfield Satellite clinic
5	Highfield Polyclinic	Kambuzuma Polyclinic
6		Kuwadzana Extension clinic
7		Rujeko clinic (Tynwald and Dzivarasekwa)
8		Glen View 2 Satellite clinic
9		Warren Park clinic

Kuwadzana Extension clinic was closed on 28 July 2020 at around 1500hrs due to a Covid-19 suspected case. Rujeko clinic which serves residents from Tynwald South and Dzivarasekwa was closed on 27 July 2020. Patients are being referred to Kuwadzana 4 Polyclinic. Nurses at the clinic are demanding PPEs in order to resume operations. However, at Kuwadzana 4 Polyclinic, only the Sister in Charge is working and patients are referred to Mbuya Nehanda Maternity Home.

	Yes	No Distribution
1	Rutsanana clinic (Glen Norah)	Mufakose clinic
2	Glen View Polyclinic	Highfield Satellite clinic
3	Edith Opperman clinic	Rujeko clinic
4	Glen Norah B clinic	Glen View 2 Satellite clinic
5	Kambuzuma Polyclinic	
6	Mbare Flats	
7	Sunningdale clinic	
8	Kuwadzana Polyclinic	

9	Highfield Polyclinic	
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#### 4.2. ARV Distribution in clinics

#### 4.3. Maternity Services

	Available	Not available
1	Glen View Polyclinic	Rutsanana clinic
2	Edith Opperman clinic	Mufakose clinic
3	Mbare Flats clinic	Kuwadzana Polyclinic
4	Highfield Polyclinic	Highfield Satellite clinic
5		Kambuzuma Polyclinic
6		Kuwadzana Extension clinic
7		Sunningdale clinic
8		Rujeko clinic
9		Glen View 2 Satellite clinic
10		Kuwadzana Polyclinic
11		Warren Park clinic

Sunningdale clinic does not offer maternity services. However, expecting mothers who register there deliver at Edith Opperman clinic in Mbare National. They are not taking bookings until Edith Opperman clinic reopens. Although Kuwadzana Polyclinic has most of the required services available, it is not receiving people for maternity. Maternity patients are being referred to Mbuya

Nehanda Maternity Home. At Highfield Polyclinic, expecting mothers are being asked to come when they are in labour pain. They are required to pay their fees on the day.

#### 4.4. TB Medication

	Available	Not available
1	Rutsanana clinic	Mufakose
2	Glen View Polyclinic	Kuwadzana Polyclinic
3	Mbare Flats clinic	Highfield Satellite clinic
4	Edith Opperman clinic	Kambuzuma Polyclinic
5	Sunningdale clinic	Kuwadzana Extension clinic
6	Kuwadzana Polyclinic	Rujeko clinic
7	Highfield Polyclinic	Glen View 2 Satellite clinic
8		Warren Park clinic

#### 4.5. Baby clinic

	Open	Closed
1	Rutsanana clinic	Mufakose clinic
2	Glen View Polyclinic	Edith Opperman clinic
3	Kuwadzana Polyclinic	Highfield Satellite clinic
4	Mbare Flats clinic	Kambuzuma Polyclinic
5	Sunningdale clinic	Kuwadzana Extension clinic
6	Highfield Polyclinic	Rujeko clinic
7		Glen View 2 Satellite clinic
8		Warren Park clinic

#### 4.6. BP Check and Medication

	Available	Not Available
1	Glen View Polyclinic	Rutsanana clinic
2	Mbare Flats clinic	Mufakose clinic
3	Kuwadzana Extension clinic	Highfield Satellite clinic
4	Sunningdale clinic	Kambuzuma Polyclinic
5	Highfield Polyclinic	Rujeko clinic
6		Glen View 2 Satellite clinic

7	Warren Park clinic
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**5. Recommendations-** In view of the key challenges being experienced in council clinics, the HRT makes the following key recommendations;

- 5.1. There is need to avail adequate work force, financial and material resources, and hear the voice of the community on their needs and rights.
- 5.2. Provision of adequate water at all local health centres is critical.
- 5.3. At least four referral district hospitals for Harare's 46 wards are necessary to minimise the pressure on central government hospitals, especially Harare Hospital, now Sally Mugabe Hospital and Parirenyatwa.
- 5.4. At least 15 percent of annual council budget should be dedicated to funding health services provisions, in particular, drugs, infrastructure and remuneration of health services personnel. Central Government has constitutional obligation to ensure that health rights are respected. The government may need to consider allocating a significant chunk of the national budget towards contributing to funding of health services provision in local authorities. For example, some people from Murewa, Goromonzi, Domboshava, Epworth, Mazowe and Zvimba come to Harare's clinics for medication. On its own, the City of Harare is unable to meet the demands of society on health services delivery; therefore, government's financial support is necessary.
- 5.5. Health should be accessible, acceptable, patient -nurse safety first, person centred and affordable to the majority of the citizens. Nurses should be involved in the decision-making processes in order to respond appropriately to situations. They spend most of the time with patients and would therefore know better about how to address the challenges they face in providing health services.

**6. Conclusion-** Only five of the 15 clinics included in the survey are open every day. The majority of the health centres closed more than a month ago. Health services delivery remains constrained without adequate equipment and financial resources. On top of that, they are also demanding adequate PPE that limits the risk of contracting Covid-19. Essential drugs such as ARVs, TB and BP medication are also not available at most of the clinics. Expecting mothers are unable to access maternity services at local clinics. They have to travel long distances to neighbouring communities and in some instances, be referred to referral health institutions. The situation at local council clinics is dreadful and needs urgent attention. There is increasing number of people dying in their

homes and others who are dying while travelling to health institutions far away from their areas of residence.

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