

## LETTER TO THE EDITOR

# Health reform in Fiji

Health reform takes on sinister connotations when the media and politicians battle out issues which they both seem to ill understand. The public does not need to remain confused about matters relating to their health and well being.

Health reform in Fiji is about stopping the rot that has set in as a result of mismanagement, destroying the whole medical infrastructure. The three tier system of primary health care as implemented by the Buimaiwai Administration was a well intended strategy recommended by the World Health Organization. It aimed to provide primary care at each tier with its respective standards with the maximum thrust being at the primary care level.

Unfortunately, with a centralized administration, we have paid a heavy price in terms of poor planning, inappropriate resource/finance management, and a very high attrition rate of health care providers. Primary care was not given its due and we see nursing stations and health centers without funding and resources, particularly medicines. The public have rightly perceived that it is best to travel to the base hospital, even at the risk of dying. A week's supply of medicines at least may be assured even if the consultation is agonizingly slow.

Medical politics has resulted in medical practitioners taking on administrative positions based on the assumption that they will make equally good administrative decisions. The human science of medicine has proved to be incompatible with hardline administrative decisions. The politics in Fiji with its all encumbering ramifications – nepotism, provincialism, clans and negative racism – has resulted in wasted time, effort and funds.

Health reform is about regrouping, replanning, retraining, refocusing and forging ahead in times of great need. We need to stop the rot and decay from destroying this nation.

We applaud the Ministry of Health's patient information system (Patis project) and the decentralization schemes. We look forward to the nursing stations and health centers becoming centres of excellence with adequate staff, funds, medications, and technology.

We look forward to the subdivisional hospitals having trained medical and surgical personnel for minor operations and having basic technology in the form of laboratory equipment, X-rays, scans and some inpatient facilities.

We look forward to reform at the divisional hospitals with accident and emergency services and appropriate technology for critical and complicated cases.

We look forward to a 'Shared Care System' of patient services between the private and government sectors. We look forward to a National Health Insurance scheme for all our citizens. This is what reforms are all about. This is the way we will move forward in our social development.

If we continue to have unconcerned politicians, incompetent medical administrators and an unthinking media, the rot which has set in will destroy us all.

Neil SHARMA  
*Fiji School of Medicine,  
University of the South Pacific,  
Suva,  
Fiji*