Togo doctors strike over disastrous state of public hospitals

By Eddie Haywood
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In late March, doctors and nurses, fed up with the deteriorating state of Togo’s public health care system, walked out on strike, completely shuttering hospitals and clinics in the capital city, Lomé. Patients were turned away at various hospitals and were encouraged to seek care at privately run facilities, with existing patients discharged.

Speaking to the popular support for the strike among Togolese, prominent activist Farida Nabourema told the New York Times, “People have a lot of respect and consideration for the doctors. The strikes are a key part of the resistance.”

The issues underlying the strike are the miserable conditions experienced by medical personnel and patients alike throughout the entire public health care system. The government is starving funding for health care, spending the criminally negligent amount of just $16 per person in a country of nearly 8 million.

The ratio of available doctors per patient in Lomé, Togo’s largest city, with a population 837,000, is extremely low—four for every 10,000. This is in contrast to international standards, which call for 20. Medical facilities are plagued by obsolete or non-functioning equipment, and for every 13 patients, there is one nurse, when the standard calls for one for every four.

According to a report in the New York Times documenting the deplorable conditions present in a neonatal ward at the central hospital in Lomé, air-conditioning had malfunctioned, leaving infants on the ward languishing in the sweltering heat common to the West African region. Worse still, there was only one nurse to attend to the care of two dozen newborn infants, all suffering from life-threatening conditions.

Mothers of infants on the ward were compelled to implore family members and friends for money to purchase basic supplies from pharmacies elsewhere in the city. Public hospitals suffer a chronic shortage of medicines, thermometers, bandages, and even clean water.

The Times noted the case of Tresor Tsolenyanou, an infant born in February afflicted with gastrochisis, a condition in which the intestines are exposed through a hole in the abdominal muscles. The survival rate for newborns in Togo stricken by gastrochisis is nearly zero. By comparison, in the United States, the survival rate of an infant born with the condition is 90 percent.

Expressing the utter helplessness felt by medical staff after decades of chronic neglect for health care in the country, Dr. David Dosseh, a surgeon at the central hospital in Lomé, told the Times, “When you accept to work in these conditions, you might be complicit in a situation that could cause death. You are responsible. So at a certain moment, you have to ask if it’s better to just stop working.”

Many employed in the health care sector work long hours and receive low pay and remuneration for their service of providing health care for the Togolese masses. A new doctor just out of medical school can expect to make less than a taxi driver.

The central hospital in Lomé has come to be known among Togolese as “the Morgue.” Underscoring the ghastly appellation, a surgeon at the hospital, Dr. Atchi Walla, told the Times, “In the emergency room, if you don’t pay, you die.”

Owing in large part to government corruption, medical personnel in the course of their duties must cope with broken equipment, lack of electricity, and a lack of water. Frequently, due to persistent blackouts suffered throughout the country, surgeons perform operations in the light provided by a cellphone.

Underlining the deplorable state of health care in the
country, Dr. Agbessi Amouzou, a Togolese public health professor at Johns Hopkins University, who studies public health systems in sub-Saharan Africa, told the *Times* that public health care in Togo was a complete disaster.

Expressing the contempt of the government of President Faure Gnassingbé for the doctors, and the abysmal state of the public health care system, Minister of Health Moustafa Mijiyawa hung up without saying a word when the *Times* called for a comment regarding the strike and the overall dismal state of public hospitals.

The doctors’ strike comes amid growing social opposition to Gnassingbé, whose family has ruled Togo for half a century.

In September last year, the eruption of social opposition to dynastic rule took the form of near-revolutionary dimensions when thousands of Togolese took to the streets of Lomé and throughout the country to express their disgust with the government, calling for the immediate resignation of the president. In response to the uprising, police forces detained, tortured and killed scores of demonstrators.

Police arrested and jailed Ihou Majesté, vice dean of the University of Lomé medical school, in March for comments he allegedly made on an audio clip circulated online in which he compared the Ministry of Health to a broken-down car.

Togo is among the most impoverished countries in the world. In a country with a GDP of $4.4 billion, according to UNICEF, 81 percent of the population lives on $2 or less per day. On the other end of the economic scale—as one example—Lomé-based Ecobank presides over a financial empire spread across 36 African countries, and holds assets totaling $24 billion. The bank’s annual revenues of $3 billion are nearly equal to Togo’s GDP and dwarf the paltry $128 million provided for the health care of millions in the country.

The World Bank in 2015 declared Togo friendly for business, with the country rising 15 places, to 149 of the most business-friendly nations, surpassing Nigeria. As a result, there has been a scramble by international banks and corporations for the profits to be made in Togo.