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PRINCE MSHIYENI MEMORIAL HOSPITAL

Doctor's death highlights toxic working conditions in SA hospitals

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THE death of intern Dr Alulutho Mazwi at Prince Mshiyeni Memorial Hospital, in Durban, has sparked out-Hospital, in Durban, has sparked out-rage among healthcare professionals, who are calling attention to the toxic working conditions that plague South African hospitals. Mazwi, who was doing his in-ser-vice training at the hospital's paediat-rics department, died while on duty. The Public Servants Association (SA) algored that Mauzi, an only

(PSA) alleged that Mawzi – an only child – died after he was forced to work while critically ill, by his medical manage

Manager. Nathi Olifant, spokesperson for the KZN Department of Health, said the medical manager had been placed on

medical manager had been placed on precautionary suspension. "The department went to Prince Mshiyeni Hospital to establish what had happened. We are investigating all the allegations raised," he said. Following this incident, several doctors have condemned the working environment at provincial hospitals and have highlighted their personal experiences. They declined to be named for the fear of victimisation. A doctor, who qualified in 2023, said in 2019 there was an email detail-ing the toxic behaviour of medical

ing the toxic behaviour of medical managers at a Pietermaritzburg hos-pital. She said the medical managers

"Many doctors lose their lives to poor mental health, year after year because of this toxic work environ-

because of this toxic work environ-ment. "Dr Mawzi's death is heartbreak-ing and terrifying. The humanity we are expected to extend to patients is denied to us. "The government does not hire enough doctors and the hospitals are falling apart. The public doesn't understand that the two doctors they see on duty are doing the work of six or seven. We are stretched further and further a the expresse of ourselves." further, at the expense of ourselves,' she said.

She claimed that ward rounds and meetings often turned into "humilia-tion rituals". "Bad behaviour is allowed to go

unchecked. It may be one or two bad apples but the rest of the department and the hospital management remain silent and are therefore complicit.

"The Health Professions Council of South Africa also offers no support to doctors.

"They don't even answer emails. It is their log books that are used to coerce interns into compliance, the



DR ALULUTHO Mazwi died on duty recently. TikTok

same with the Colleges of Medicine of South Africa for registrars. We are all afraid to speak out publicly because these people hold the keys to our career progression. They are exam-iners and/or sit on panels for future employment.

"The scarcity of jobs means the environment is fertile ground for exploitation," she added. Another doctor said she felt anger

and share at the profession because not enough was being done to address the systemic issues that contributed to Mazwi's death.

Mazwi's death. "My internship was undoubtedly the most challenging period of my life. Entering the medical workplace for the first time, knowing that lives depended on my actions, was an immense responsibility. "Sadly, the system does little to alleviate that pressure. The expecta-tion is that as long as we are physically able, we must fulfil our duties. I recall a particularly difficult shift where I had

an IV line attached to my arm and still attended to patients.

"There was another incident where I dislocated my shoulder the night before a 24-hour call and only returned home from the emergency room at 1am.

"When I requested to be excused from my shift, I was told to find some-one to cover for me, or I would have

"Unfortunately, I couldn't find anyone, so I completed the shift, which involved significant physical labour, despite my injury. "This ultimately led to complica-

tions that required surgery later on," she said. The doctor said mental health was not prioritised in the same way it was

for their patients. "Having struggled with depression having struggied with depression and anxiety for years, I only truly began to address these issues after leaving clinical medicine. During my internship, I often felt inadequate for experiencing these challenges, a sentiment echoed by many of my collecting colleagues.

"This stems from a system that instils the belief that the job must take precedence over one's own well-being, and that anything less was a sign of weakness

"The longest shift I worked lasted 32 hours. I know of colleagues who have endured shifts exceeding 36 hours

"Many facilities lack adequate rest areas, forcing us to take breaks in our cars or on empty hospital beds if we

"Often, we were too busy to eat or take bathroom breaks. I once drove an hour home after a long shift and lost control of my car due to exhaustion," said the disappointed doctor. She added the inhumane working

environment and the challenges in her internship, made her pursue a career in research.

A senior doctor told the POST that during her internship she learnt about the Patients' Rights Charter and Batho Pele.

"However, it is equally important for us as healthcare providers to under-stand our own rights and feel empowered to advocate for them. Addressing these issues is complex, as they arise from a combination of entrenched toxic practices and an overburdened

toxic practices and an overburdened healthcare system with insufficient resources," said the senior doctor. She said that the supervisor was not solely to blame, but the whole system at hospitals was flawed. "I believe the system, from top to bottom, shares the responsibility. "Management and senior staff often struggle to accommodate leave requests due to staffing shortages and a lack of resources to hire locums. This places the burden on the individual a lack of resources to fine focums. This seeking leave to find a replacement, which discourages necessary breaks. This is something that needs to be addressed at a higher level. "Additionally, interns face pressure to complete rotations without inter-

to complete rotations without interruption, often being threatened with the prospect of repeating gruelling months if they take unexpected leave. "This fear can compel interns to

work while unwell. "The toxic culture within medi-

cine is something we, as a profession, have the power to change. Most of us entered this field out of a desire to help others, yet we often fail to extend that compassion to our colleagues. "The overwhelming workload can

lead to frustration when a colleague is absent, but we must remember to treat each other with the same care we provide our patients. As healers, we need to support one another and foster a healthier work environment," said the senior doctor.

A retired doctor said staff needed "Often, we as superiors are also tired but it is important to practise

humanity.

"At the end of the day, we try to do our jobs and help people. But we tend to overlook humanity and push

people who deserve a rest. "In the pursuit of glory, we take advantage of others and push intern doctors to their limit. I remember my

doctors to their limit. I reinember my own intern doctors. "If they were sick, they were given their leave. I did not believe in push-ing tired people. I always made a way for them to take the day off, rather than have them miserable at work. Can you imagine your doctor, who helps you, not being able to help themselves heal? It's truly terrible," he said. he said.

The Public Servants Association (PSA) said it had consistently warned the KZN Department of Health about the inhumane working conditions and Memorial Hospital. "We picketed and delivered mem-

oranda to the head of department and the MEC for Health, raising serious concerns about ill-treatment of staff. To date, no meaningful investigation or intervention has been conducted. "The department instituted a flawed internal investigation meant

to cover up wrongdoing, particularly shielding a senior matron who has been widely accused of bullying man-agers and staff. Instead of restoring trust, this investigation further eroded confidence in the department's will-ingness to confront abuse of power.

"We warned that failure to act would result in resignations, burn-out, and loss of life. Tragically, that warning has now become reality. This is not an isolated case.

"Many doctors and healthcare workers across KwaZulu-Natal con-tinue to suffer under hostile, exploit-ative and toxic management, often working under impossible conditions without support," said the PSA in a statement statement.

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