

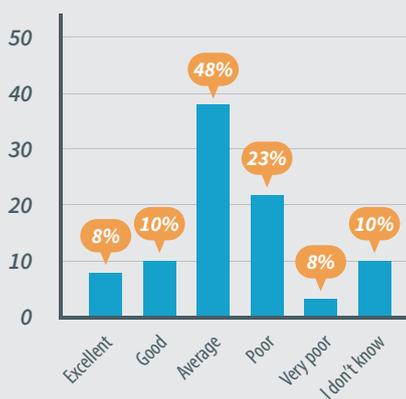
What do we think of our health services?



A SHORT SURVEY IN WINDHOEK INFORMAL SETTLEMENT AND RECOMMENDATIONS TO OUR MINISTRY OF HEALTH

In order to celebrate the Universal Health Coverage Day, OYO organized two events in Katutura (Goreagab dam and Okahandja Park settlements). People were asked to reflect on the quality of health services in their area. 40 people answered a questionnaire, four answered one on one interviews and 30 people attended a focus group discussions.

Do you think public health services in Namibia are:



The majority of respondents don't rank public health facilities very high. Yet 75% are going to the clinic when sick (13% go directly to the hospital, 10% to the private doctor and 3% to a witch doctor). While 55% think the private doctor is better than the hospital doctor, only 20% say that they can afford it. For 80% of the respondents private hospitals such as medi-clinic and rhino-park are not affordable.

63% of respondents say that public health services in Namibia are NOT free of charge

One interviewee explained 'in Goreagab there's no hospital or clinic so if you are sick you have to travel far to Wanaheda. You have to pay transport to go to the clinic first and then if they refer you to the hospital you also have to pay to get there.' This story of going to the clinic first doesn't work. You are sick and you go to the clinic. They send you home with tablet



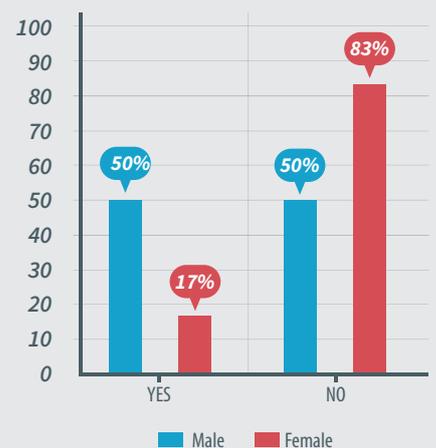
83% of female respondents think that people in Katutura are not serious about using condoms

and then you get more sick and now they send you to the hospital but it's too late. You just go to the hospital to die.' At the hospital they say you must go to the clinic first but it is just a waste of time and it doesn't work. Let people be free. People must be able to get to the hospital directly if they feel like it.'

A lot is done in Namibia about HIV, including making condoms available. However female respondents in particular are of the opinion that people in Katutura are not serious about using condoms. 60% of male respondents say that it is not easy to find condoms in Namibia.

However 63% of female respondents think it is easy (and that men use that as an excuse). 90% of the male respondents also think it is difficult to get an HIV test in their area, and therefore may use it as an excuse not to know their status. 53% of the female respondents think it is easy to get an HIV test if you want it.

Do you think people in Katutura are serious about using condoms?



78% of respondents do not have toilets or pit latrines at home

In our sample, 63% of the respondents have access to clean water but 78% do not have access to any form of toilets. In an urban area such as Windhoek, this is unacceptably high.



Windhoek informal settlements have to face outbreaks such as Hepatitis E. The lack of basic infrastructures such as toilets is a huge problem.

87,5% think that the Ministry of Health and Social Services should do more to support them.

One of the interviewees was quite harsh with her comments 'honestly the public health service sucks in this country: the nurses are worse than our sicknesses and they are heartless.' An example given was that 'I had pregnancy pain but the nurse insulted me and told me she is not the one that opened my legs so I don't have to come and mourn here. She just sent me away.'

During the focus group discussion people also referred to an incident when a lady was not assisted at the Okuryangava clinic and had to give birth in the street. Another comment was 'you never see a Minister admitted in a public hospital. Why is that? It's because they know our hospitals suck.'

Suggestions to improve on services include bringing services closer to people. Lines at clinics and hospitals are too long and people wait too long. If more clinics can't be built then at least mobile clinics should patrol the streets of Windhoek more regularly.

Alternatively more nurses could be employed. Also in the past it was easier to get HIV testing but nowadays you have to go to the clinic and queue for it. In some places they even ask you to go to the hospital to get a referral from the doctor for a test.

There should be more centres where people can be tested regularly. There should be more mobile clinics for HIV and more mobile clinics for other health services. Another point

discussed was the fact that people are afraid to visit clinic for HIV testing as they might know someone. They prefer anonymous centres like mobile clinics but those are not available in their area.

Respondent also complained that tribalism is at times a problem in clinics and the MoHSS should really address this issue with its nurses: a nurse should deliver the same quality service to every patient regardless of their ethnic group.

Another suggestion was for the ministry to monitor the work of their nurses. They would then notice their nurses spend more time on their cellphones than attending to patients. A suggestion was to lock the nurses' phones away while they work.

This short survey allowed us to give a voice to people in Windhoek Informal Settlements. We hope the Ministry of Health and Social Services will take note of their comments and suggestions.



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