

Editorial

The Impact of Doctors Going on Strike

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In recent days, the issue of doctors going on strike has once again come to the forefront, sparking debates and concerns across the country. The decision of healthcare professionals to withhold their services is a potent form of protest, one that demands attention due to its profound implications on public health and the healthcare system as a whole.

Firstly, it is crucial to recognize the underlying reasons that compel doctors to take such drastic action. Often, strikes are not born out of caprice but out of necessity—stemming from longstanding grievances over working conditions, inadequate resources, or disputes regarding compensation and benefits. These are issues that directly affect the quality of care patients receive and the well-being of those on the frontlines of healthcare delivery.

When doctors strike, the impact reverberates throughout the healthcare ecosystem. Patient care is disrupted and these consequences are not merely inconveniences; they can result in serious health risks for patients who rely on timely access to medical services. Moreover, the broader societal implications of doctors going on strike are profound. Trust in the healthcare system can erode, as patients and the public may feel abandoned or betrayed by those entrusted with their health. In times of crisis or uncertainty, such as during a pandemic or natural disaster, the absence of healthcare professionals can exacerbate fear and amplify the impact of the underlying emergency.

Strikes raise a range of ethical issues, related to patient care and perhaps most fundamentally, what healthcare workers and society owe one another when it comes to healthcare (1). Overwhelmingly arguments both for and against have focused on patient mortality and other outcomes. Several studies suggest that during junior doctor strikes emergency department can become more efficient on several metrics (e.g. waiting time) with more senior staff on the frontline. It is also noteworthy

that in many cases, emergency services were able to be maintained or contingencies put in place to continue to deliver care with minimal disruption (2). In Sri Lanka Cancer care, Maternity, and child care services continue to function during a strike.

From a policy perspective, the occurrence of doctors' strikes underscores the need for effective mechanisms to address grievances and ensure the sustainable functioning of healthcare services (3). This includes fair negotiations between healthcare providers and administrators, transparent communication channels, and proactive measures to prevent issues from escalating to the point of strike action. Doctors, as influential members of society, can leverage public opinion and political ideologies to support their causes during strikes. Political parties or advocacy groups may also align themselves with healthcare professionals during labor disputes, amplifying the visibility and impact of the strike—through media coverage, public statements, or legislative support. A country like Sri-Lanka can easily be misled by such political influences.

However, it is essential to approach the issue with nuance. While strikes can be disruptive, they are often a last resort for healthcare workers who feel unheard or undervalued. It is incumbent upon healthcare institutions, governments, and society at large to listen attentively to the concerns raised by doctors and to work collaboratively towards solutions that prioritize both the welfare of healthcare professionals and the continuity of care for patients.

In conclusion, the decision of doctors to go on strike is a powerful statement that should prompt reflection and action from all stakeholders involved in healthcare. It highlights systemic challenges that must be addressed to ensure a resilient and equitable healthcare system. As we navigate these complex issues, it is imperative to prioritize dialogue, mutual respect, and the shared goal of safeguarding public health and well-being.

References:

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