Effect of Health workers’ strike on Mortality

Health workers’ strikes have taken place throughout the world and are not unique to Kenya. Strikes are known to have adverse effects on health care service provision wherever they occur. Researchers at the KEMRI-Wellcome Trust research programme embarked on a study to measure the effect of these strikes on mortality in Kilifi county in Kenya.

Previous reports used data collected from hospitals which do not identify deaths that take place outside hospitals. The team used the well-established Kilifi Health and Demographic Surveillance System (KHDSS), which collects data on births, deaths and migration for everyone living in the area. These data are updated every four months.

The strikes considered in this analysis were those that took place between January 2010 and November 2016. Six strikes were identified within that period ranging in length from 9 to 42 days. The research showed no obvious change in overall mortality during strike periods; on average there were 9 deaths for every 1,000,000 people observed each day during the strike periods compared to 10 deaths for every 1,000,000 people observed each day during non-strike periods. This difference was not statistically significant. When the data were analyzed according to age group, the researchers found weak evidence of variation in mortality during strikes by age group. There was an apparent decrease in mortality during strike periods among infants aged 1-11 months and an increase among children aged 12-59 months. The researchers concluded that this variation could have been due to chance. The three month strike period of December 2016-March 2017 and June 2017-November 2017 were not included as these data is not yet ready.

Dr Anthony Etyang who led the study, speculated that these findings could have been the result of several different factors. He states, “The surprising findings could have been due to the combined effects of continued private and limited public health care during the strikes, the relatively short duration of the strikes that were analysed, a high proportion of out-of-hospital deaths even when the health workers are not on strike and limited number of deaths that occurred within the region”.

He notes that more work needs to be done in order to gauge the true effects of the health workers’ strikes especially where the strikes are prolonged and believes that these can be teased out after analyzing the longer strikes experienced in 2017.