

Headline: [WATCH] Where SA's specialist doctors go when managers aren't looking

Blurb: Government hospitals face shortages of specialist doctors. To make it worse, not all of them are showing up to work.

- Health professionals at government hospitals are allowed to take on an extra job in the private sector so long as it doesn't interfere with their public sector work. Internationally this is referred to as 'dual practice'.
- Some health workers abuse this system by doing both jobs at the same time, allowing them to double up on paychecks. The result is that doctors who are paid with taxpayer money to work in government hospitals full-time spend large amounts of the working day treating private sector patients instead.
- The problem is particularly widespread among specialist doctors, who are some of the most well paid and crucial members of the government healthcare system.

South Africa has too few specialist doctors.

There are just 7 for every 100 000 people who use government hospitals.

But the problem is worse than it appears on paper.

Because while the government may be paying for that many specialists, not all of them are showing up to work.

The reason for this is something called dual practice – when government doctors and nurses take up a second job in the private sector. It's also called "moonlighting".

Health workers at government hospitals can apply to do extra work in the private sector after hours as long as it doesn't interfere with their government job.

Many health workers abuse the system by doing their private job during state work hours.

That way they double up on paychecks, even though they're not at the government hospital that they're paid to work at.

Experts and hospital staff say that this problem is particularly widespread among specialist doctors – the people with the largest salaries.

The results can be devastating for three reasons.

1. Desperately ill patients at government hospitals don't get the specialist care they need.

2. Other doctors become overworked since they're forced to pick up the slack for their corrupt colleagues.
3. Specialists-in-training (called registrars) get compromised training as the specialists who are supposed to supervise them aren't around.

Experts worry that moonlighting could cast a long shadow over the future of specialist care in South Africa.

*This story was produced by the [Bhekisisa Centre for Health Journalism](#). Sign up for the [newsletter](#).*