

# German doctors strike raises fundamental political questions

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For more than four weeks local doctors from 700 German hospitals have been on strike against ever worsening conditions of work in the form of unpaid overtime, unpaid additional paperwork and the dismantling of social gains.

In a ballot held at the end of June, 97 percent of unionised physicians voted for strike action. This latest action follows the 13-week-long strike by 22,000 physicians at university hospitals, who had also fought for better conditions of work and higher salaries. An estimated 70,000 local doctors are now involved in the latest strike.

Many of the predominantly young assistant doctors are taking part in a union-organised strike and protest actions for the first time in their lives. Banners and posters at protests and demonstrations express their indignation over the fact that, after years of study and training, they are then forced to work under utterly precarious and uncertain conditions involving interminable shift work and poor wages that make any serious planning for the future impossible.

The strike by physicians is significant because it is indicative of the shape of future social conflicts. An increasing army of highly-qualified technicians, engineers and scientists are confronted with very similar problems.

It is therefore important to draw attention to the political problems which physicians face in their strike. The grand coalition government of Angela Merkel—Christian Democratic Union (CDU), Christian Social Union (CSU) and Social Democratic Party (SPD)—and on federal level social democratic ministers—have made decisions leading to huge cuts in social funding which in turn precipitate drastic savings that are then imposed on a local level.

The trade unions, whose functionaries are in the main SPD members, support these policies, point to the empty coffers, and use such strikes as merely a means of letting off steam. As has been the case time after time in recent years, after a few weeks on strike and some radical demonstrations, the union agrees to a collective agreement involving a perceptible worsening of conditions for the workers involved.

In this respect the Marburg Federation (MB), which poses as a politically independent agency specialising in the interests of physicians, represents no real alternative. There now arises the very real danger that the strike by doctors—despite the militancy of many strikers—could end in defeat. Local physicians could be the last major group to be subordinated to the new collective agreement that came into effect last year involving considerable worsening of conditions.

At the beginning of October last year, the service trade union Verdi and the national and regional public employers association incorporated the federal employee wage agreement (BAT), which had been valid since 1961, into the collective agreement for the public service (TVD). The move was the result of two years of negotiations between Germany's former SPD-Green Party government and representatives of German municipalities, and, in the name of "modernization" and "increased flexibility," finally came into effect in September 2005.

The significance of this new collective agreement, which initially covered 2.1 million national and local public service workers, consisted in opening up the tariff structure to allow employers to impose worsened working conditions, working times and rates of pay on a local basis, or even according to individual workplaces.

With its agreement to the TVD the public service union Verdi gave the public employers a free hand for the continuation of a bargaining system which will result in a succession of further cuts and a decline in working conditions. For years public employers have reacted to the constant cuts in public funding—which arise from the tax concessions made by the government to big business and the wealthy—with drastic job cuts, the compulsory transfer of workers and the switching of whole departments and public services to cheap, privately operated companies. In addition, public service employees in Berlin were forced to accept large cuts in pay while the public employers quit the prevailing collective agreement—all in the name of a "budget crisis."

Verdi undertook to impose such conditions at the behest of the employers on the basis of maintaining a "widespread tariff agreement."

The result has been substantial losses in income for more highly qualified university graduates and employees within the framework of the TVD. According to various calculations, the cuts in pay supplements, including Christmas and holiday bonuses, and the new career payment table can lead to income losses of up to €100,000.

The discussions on the TVD deal have led to a series of ever larger protest actions and demonstrations by health workers commencing in 2004. Bed eliminations, the amalgamation of hospitals and job cuts have led to an unrelenting increase of pressure on hospital physicians and nurses. Local doctors work an estimated total of 50 million hours overtime per year without pay, with working weeks of 60 hours and marathon shifts of up to 30 hours commonplace.

At a national day of strikes and protests held in Stuttgart at the start of September 2005, 5,000 physicians demanded the Marburg Federation terminate any cooperation and negotiations with Verdi. A few days later the MB carried out this step and announced it would negotiate a collective agreement for physicians with the public employers independently of Verdi. The move led to a flood of new members. Although most unions have lost large numbers of members in recent years, the MB was able to increase its membership from 85,000 to 105,000 in a short period of time.

The main demands of the Marburg Federation were wage increases of over 30 percent—to compensate for previous losses—and a resolution of the overtime problem. The aim was to enforce a "collective agreement specific to physicians" in negotiation with the German states and municipalities.

This spring the Marburg Federation commenced negotiations with the employers—firstly with the Tariff Community of German States (TdL), which employs approximately 22,000 physicians at local and university clinics, and afterwards with the Local Employers' Association (VKA), which employs 70,000 local physicians.

The leading TdL negotiators made clear they were not prepared to make any concessions, and the Marburg Federation saw itself forced to call state and university physicians out on strike. Up to 13,000 took part in the first large-scale strike by physicians in the history of the Federal Republic.

From the first day of the strike the Marburg Federation was subjected to a barrage of abuse that claimed that the MB reflected the “egoism” and “the lack of any restraint by physicians,” which would inevitably lead to the closure of hospitals and the loss of further jobs. It was publicly announced that the doctors’ actions would lead to cuts at the expense of other groups of hospital employees.

Most importantly, however, the Marburg Federation was denied the support of other trade unions and remained completely isolated. Verdi, the most important public service trade union, went even further and stabbed the Marburg Federation in the back by organizing strikebreaking in the interests of the public employers and the government.

One year previously Verdi had negotiated a deal with the TVD in secret and behind the backs of its membership. It now feared that an improved collective agreement for physicians, secured by the Marburg Federation, would expose the role it had played on behalf of the employers.

Verdi boss Frank Bsirske and other members of the Verdi leadership warned of “excessive concessions to the medical profession” and tried to mobilise nurses and other hospital employees against the striking physicians. Echoing the employers, Verdi functionaries maintained that the “privileges enjoyed by the physicians” were at the cost of other hospital workers, because the “budget available for the hospitals” could only be distributed once.

In order to increase the pressure on the Marburg Federation, Verdi concluded a deal with the TVD and state employers on May 19 and declared that the deal also applied to the striking physicians. The MB refused to accept this provocation and continued to strike. However, following this increased pressure and the stubborn refusal by public employers to make concessions the MB agreed a deal on June 16 after 13 weeks of strike. The settlement contained none of the basic demands raised initially by the physicians.

Apart from retaining Christmas and holiday pay, and some increased pay for senior doctors, the MB accepted the same payment table and clauses weakening the collective tariff agreement that had already been agreed by Verdi. Individual states and even individual hospitals can impose harsher working conditions on doctors in the event of an “emergency situation.” In “individual cases” and with the permission of the Marburg Federation the numbers of hours worked per week can even be increased to 66 hours (the Verdi contract stipulates 58 hours). The overtime problem remains, and wage differences between East and West Germany going back to the period of German reunification will remain in force until at least 2010.

The same fate now threatens physicians employed at the local hospitals. Currently 14,500 regional physicians from 121 cities are involved in strike action. Like the university doctors they too face a united front composed of the government, public employers and Verdi.

Negotiators for the Local Employers Association (VKA) have refused to agree to the “minimum demand” of the Marburg Federation, i.e., the collective agreement for physicians arrived at by the German state employers.

The negotiator for the VKA, Otto Foit, announced that the incomes for local hospitals could not be allowed to increase indefinitely because they were linked to the budgets of health insurance companies. The income for the hospitals was “legally limited” and could only increase by around 0.63 percent in 2006. The president of the VKA, Thomas Böhle, complained of the “egoism” of the physicians and declared that it was irresponsible to “unnecessarily endanger patients and hospitals.”

Referring to the increase of just 0.63 percent, the managing director of the German Hospital Company (DKG), George Baum, stressed that

whoever asked for more was “endangering workplaces” and increasing the “pressure for rationalization.” The existence of 430 of a total of 700 regional hospitals would be threatened, he continued, if the physicians were successful in achieving their salary claims.

Verdi has continued its policy of strikebreaking and unreservedly supports the arguments of the employers and government. The leader of the Verdi organisation for Lower Saxony-Bremen, Wolfgang Denia, condemned the doctors’ strike. If the hospitals are to receive only 0.63 percent more funding then a demand for a 30 percent wage increase is “completely abstruse and cannot be justified,” he said, warning that any wage increase for physicians would lead to sackings of hospital staff and privatisations.

The chairman of the Marburg Federation, Frank Ulrich Montgomery, was accused of accepting the risk of sackings: “If Montgomery is indifferent to where the money for the wage demand comes from, then it means he does not care about the healthcare of the population, which is the job of local hospitals.” The Marburg Federation only wants “to fill the pockets of the doctors without any consideration of the economic situation of the hospitals,” Verdi charged.

The Marburg Federation has rejected the tirades and abuse hurled at it by Verdi leaders, together with the systematic attempts to incite nurses and other hospital staff against the striking physicians. But from the outset the arguments of the MB itself were sharply limited. On many demonstrations Montgomery stressed that most hospitals had sufficient funding to fulfil the demands of the physicians and, according to Montgomery, savings could be made in other areas. The chairman of the Marburg Federation also regards privatisations as a viable way of improving the economic efficiency of many hospitals.

At no point has the Marburg Federation sought to oppose the anti-social policies of the German government, which have resulted in substantial cuts in the social fabric while generous tax rebates have been handed out to big business and the rich—policies which have led to considerable cuts in local budgets and severely worsened the financial situation of many hospitals.

In accelerated form a process has taken place in the Marburg Federation—in the short space of one-and-a-half years—which previously took much longer with other established trade unions. Regardless of the hopes invested in the MB by many striking physicians, its leadership is preparing to capitulate and sign a collective agreement which is no way better than that agreed by Verdi.

The weeks-long doctors strike contains important political lessons. It makes clear that the problems facing doctors and other sections of workers and professionals are not of an organizational nature and cannot be solved by the organizational separation from other trade unions such as Verdi.

The problem is not just this or that functionary of the trade union, the bureaucratisation of the union apparatus, or the hierarchical structure of a certain union organization. The problem is the bankruptcy of the entire trade union perspective under conditions of a deep social and political crisis.

This is bound up with the fact that the trade unions are rooted in the soil of capitalist property and production relations. Due to the fact that their major task consists of negotiating wages and conditions of work, the trade unions unreservedly recognize the capitalist wage system. Or to put it in the simplistic terms of the trade union official: “You do not bite the hand that feeds you.”

Today’s conditions of deep international crisis render impossible any improvements within the context of existing social conditions. Even the defence of existing wages and social standards requires a political perspective which opposes the logic of capitalism and elevates the needs of the population over the profit interests of big business. This is the significance of a socialist perspective for immediate struggles and strikes.

For the physicians this means recognising that they must understand

their labour dispute as part of an increasing broad political mobilization against the policies of the Merkel government and her social-democratic ministers. It is necessary to make contact and join forces with others who are affected at present by a wave of mass redundancies and develop new forms of resistance.

This is the only way to incorporate the physicians' strike into a broader mobilization for socialist policies and so direct it in a progressive direction. The Socialist Equality Party (Partei für Soziale Gleichheit—PSG), which is currently participating in the state elections in Berlin, sees its task as drawing the lessons from the political bankruptcy of the trade unions and developing a new socialist party.



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