## UK junior doctors defiance of government contract curtailed by BMA

Tony Robson 24 August 2016

Junior doctors remain defiant against the planned imposition by the ruling Conservatives of a regressive contract for all doctors below consultant grade in the National Health Service (NHS) in England.

However, this opposition continues to be curtailed by the junior doctors committee (JDC) of the British Medical Association (BMA), under conditions in which the contract is to be enforced from early October.

Junior doctors rejected an agreement reached between the BMA and the government on a revised contract in May, after further industrial action was suspended. This followed five rounds of nationwide strikes that started in January. In April, this culminated in doctors walking out in the first ever all-out strike in the nearly 70-year history of the NHS.

The result of the ballot, announced on July 6, recorded a 58 percent majority against acceptance. This was based upon a participation rate of over two thirds of those eligible to vote—approximately 37,000 junior doctors.

This forced Dr. Johann Malawana, the chair of the JDC, to resign. Malawana had recommended the inferior deal after fraudulently claiming the government had been forced to respond to doctors' grievances. Those junior doctors who turned to social media to voice their opposition were accused of scaremongering.

The rejection of the deal was a vote of no confidence in the BMA. The BMA used materials jointly agreed with the Department of Health and NHS employers to promote the deal in 120 "roadshows" held across the country.

The agreement between the BMA and government left intact the bulk of the attacks on unsocial payments for weekend working, with Saturday and Sunday between 9 a.m. and 9 p.m. reclassified as normal working days and nightshift rates reduced, along with the elimination of automatic pay progression. The removal of these entitlements is aimed at paving the way for the government's "seven-day service," without any

commitment to additional NHS funding. This can only lead to a further overstretching of services and overworking junior doctors.

The response of health secretary Jeremy Hunt to the doctors throwing out the deal was to announce the imposition of the contract—the "nuclear option"—a threat made consistently throughout the negotiations. Hunt praised Malawana and claimed that the government had achieved a "historic" settlement in the interests of patients and the NHS. He then put the onus on the BMA to whip junior doctors into line, stating, "it had stirred up anger amongst its own members it is now unable to pacify."

That such a widely reviled health secretary, most closely associated with the ruling elite's mission to privatise the NHS, could make such claims is an indictment of the BMA. It committed itself to ensuring a "cost neutral" agreement that served to conceal the real implications of the contract and its connection to the undermining of the NHS for patients and health workers.

Only after standing down and abandoning junior doctors to their fate has Malawana decided to say anything approximating the truth. In a July open letter to Hunt, he stated that the government is responsible for dismantling the NHS and referred to it being "starved of funding," with a "population in desperate need of health care."

Despite the unprecedented move by the government to impose an inferior contract, Malawana's interim replacement as JDC chair, Ellen McCourt, continues the false narrative that the dispute is not political. McCourt was elected by other JDC members on July 6.

In her speech to a BMA conference in late June, she stated, "The BMA is an apolitical organisation; we campaign and lobby without political bias ... attacking individuals on a personal level diminishes our power, our leverage and brings them down to their [politicians] level."

McCourt has moved to silence opposition to the

capitulation of the BMA, in order to head off a rank-andfile rebellion while invoking the cause of unity.

This is why Hunt welcomed her appointment as BMA head, enthusing over the "constructive discussions with her during the negotiations."

The record of the BMA demonstrates that the only politics that are truly excluded is that based upon the independent interests of the working class and a broader mobilisation against the government's assault on the NHS.

The BMA has been unable to placate its membership because Hunt and the government would not retreat on the regressive contract, which is aimed at setting a precedent for tearing up the terms and conditions of over a million NHS workers.

The "no politics" policy is aimed at the disenfranchisement of an oppositional movement that has been provoked by over eight years of non-stop austerity and rising social inequality since the world financial collapse of 2008.

The resistance of junior doctors is part of a broader renewal of the class struggle in which workers are coming forward to fight. Many health workers recognise that unless the rot is stopped, future generations will be condemned to a life of social misery.

The defence of even the most basic terms and conditions brings workers into conflict with the trade unions, which have completed their transformation into appendages of management, the corporations and government.

For all the talk about accountability and putting the interests of BMA members first, the immediate response of McCourt and the JDC was to stall the mandate their members gave to take forward the fight against the government.

Instead, the BMA conducted a survey, which closed on July 25, under the pretext of establishing what type of further industrial action would be supported. It included the option, according to McCourt, of whether members "wanted to be involved in implementing the new contract."

Finally, McCourt announced that on August 11 that the JDC executive had made a formal request for a special meeting of the BMA Council to authorise a rolling programme of industrial action to start in early September. This action is proposed to go ahead just a month before the contract is to be enforced.

A vital cover for the BMA's betrayal is provided by a "left" member of the JDC, Dr. Yannis Gourtsoyannis. He

portrays the BMA's belated and token gesture of industrial action as "the trade union dispute of this century."

Gourtsoyannis is promoted by the pseudo-left Socialist Party and Socialist Workers Party because this empty tub thumping offers a free pass to the Labour and trade union bureaucracy who have refused to lift a finger as the government has taken on the junior doctors.

Gourtsoyannis' position on the deal in May is thoroughly unprincipled. He, along with fellow "left" JDC member Pete Campbell, called for the contract to be rejected but sought to counteract any movement by the rank and file.

Their joint blog claims that "gains" had been made, while simultaneously acknowledging that even the minimal standards junior doctors would accept had been reneged upon.

They called for junior doctors to get back behind the BMA bureaucracy, stating, "By voting No we affirm that there is room for significant improvement to the present offer. We are absolutely confident the BMA, backed by its members, will be able to extract those improvements from the government over the coming months."

This has only served to demobilise junior doctors as the government moves closer to imposing the contract.

The junior doctors' dispute confirms the analysis of the Socialist Equality Party, and its NHS Fightback initiative, that there is no "cost neutral" solution to austerity or a "non-political" defence of the NHS for patients and the workers who provide its services. The fight to defend access to health as a social right must be based on a socialist perspective to break the domination of the financial and corporate elite over economic and political life.



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