

40,000 Irish nurses to participate in series of one day strikes

Dermot Byrne, David Byrne

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Almost 40,000 Irish nurses, members of the Irish Nurses and Midwives Organisation (INMO), are to hold a 24-hour strike today over pay and conditions. A series of five further 24-hour stoppages is planned for the first two weeks of February. Over 95 percent of nurses voted for strike action, demanding a 12 percent pay increase.

Six thousand psychiatric nurses, members of the Psychiatric Nurses Association (PSN), will also ban overtime and mount a series of strikes in February. Meanwhile, the National Association of GPs is to hold a protest at Dail Eireann (Irish Parliament) on February 6 citing the collapsing of family doctor services in parts of the country.

Following public attacks on the nurses by Taoiseach (prime minister) Leo Varadkar, the 12 percent wage demand by nurses was rejected by the eight members of the Public Service Pay Commission (PSPC), all of whom were appointed by Paschal Donohoe, the current minister for Public Expenditure and Reform.

The degeneration of the Irish health service proceeds from the financial crash of 2008, in which the European Union, at the behest of the Irish government, bailed out the wealthy elite and the bankers to the tune of €62.7 billion. Savage cuts were made to public services. The Irish government cut public spending by a figure approaching 20 percent of GDP. The health service and the pay and conditions of nurses and other health workers were targeted.

Between 2008 and 2014, successive Fianna Fail and Fine Gael governments introduced a massive €2.7 billion of health service cuts, amounting to 20 percent of the health budget. These resulted in cuts to discretionary medical cards, home help supports, the introduction of prescription and hospital charges and chronic delays to infrastructure projects.

Both parties have presided over the introduction of a two-class health system. The wealthy use the booming private health sector, while the working class must make do with bed shortages, cancelled operations, and long hours waiting in Accident and Emergency Departments. The dysfunctional public system is operated by under-paid, under-resourced and over-worked nurses, doctors and ancillary workers.

Health workers have seen their wages decrease and staff levels plummet. The number of staff nurses fell by 1,754 between 2008 and 2018.

Since the strike was called at the beginning of the year, the INMO has held talks on three occasions with the Workplace Relations Commission (WRC) seeking a pretext to prevent a strike. The WRC, formerly the Labour Relations Commission, has been instrumental over the past decade in drastically impacting the lives of 300,000 public service workers. Its purpose is to enforce the dictates of the ruling elite against working people.

The WRC set down a new marker in imposing the costs of recession and the financial crisis on the working class. It acts on behalf of the government and in conjunction with the trade union bureaucracy to confuse and strangle the anger and resentment which nurses and other health workers feel about their pay and conditions.

The unions are currently part of the Public Service Stability Agreement which runs until December 2020. This agreement, which was facilitated by the WRC, is the latest of a series between the unions and the government to target public sector workers for pay cuts, longer working hours, and the elimination of jobs.

The most notorious of these was the Croke Park deal of 2010, in which the public service unions agreed a four-year strike ban in return for a series of worthless

promises on limiting future job cuts. Three brutal cuts budgets followed between 2010 and 2016. The unions therefore bear direct responsibility for the degeneration of the Irish health service over the past decade.

The INMO, despite its initial pose of opposing these agreements, accepted €1 billion in cuts without organising any protest action. They did nothing to resist the establishment of emergency powers during the financial crisis by the government, which allowed the pay and working conditions of public service workers to be altered unilaterally. The unions work consistently to facilitate cuts, while maintaining a pose of opposition in order to head off the mass struggles they fear will emerge.

In 2016, the INMO called off limited strike action as nurses' frustration and anger at understaffing and increased work levels came to the fore. Over 90 percent voted for strike action. But the INMO concocted a plan with management which Liam Doran, then INMO General Secretary, described as leading to "a deeper level of trust between hospital management and nursing staff."

The "resolution" to the threat of limited strike action worked out between the unions and the Health Service Executive (HSE) involved nothing more than weekly meetings between INMO representatives and HSE management to monitor overcrowding and the continuing crisis in the system.

The stitch up included "minimising emergency department overcrowding and trolley waiting times." However, figures for September 2017 showed almost 8,000 patients sleeping on trolleys waiting for beds. It was the worst overcrowding in a decade.

This time, as before, the INMO is seeking an accommodation with the HSE and government which will do little or nothing to further the interests of nurses and health workers. The series of 24-hour strikes are deliberately limited in scope and designed for show and to let off steam while a new deal struck within the confines of the government-brokered public service agreement is patched together.

When the series of one day strikes was announced some weeks ago, INMO General Secretary Phil Ni Sheaghda was apologetic, saying "Going on strike was the last thing a nurse or midwife wants to do."

The union has made no appeal for support to other sections of the working class or even an appeal to the

7,000 health workers in the Services Industrial Professional and Technical Union (SIPTU) who are working normally. This is under conditions where similar attacks are falling on every economic sector.

Ni Sheaghda has been at pains to confirm to the government that a deal could be worked out within the guidelines of the current public service deal, which would rule out other public service workers making claims. Prior to taking the INMO general secretary position, Ni Sheaghda worked for nearly a decade as its director of industrial relations.

The demands of nurses and other health workers cannot be constrained by what the Fine Gael government, the corporate media, and the trade union officials deem "affordable." The working class needs to combine its independent strength and demand the right of all people to high-quality, free health care which is provided by the necessary number of doctors, nurses, and other well-paid medical professionals.

Forging workers' unity and confidence cannot be done within trade union organisations that have become an industrial police force on behalf of the state and ruling establishment. The union bureaucracy is part of a privileged upper middle-class layer, which has a material interest in the defence of the status quo and opposes any struggle for social change.

The Socialist Equality Group (SEG) calls on health workers to organise independently of the union bureaucracy by forming rank and file committees to prepare for a nationwide strike and to forge alliances with health workers internationally.



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