

New Zealand doctors, midwives strike

Our reporters
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Around 3,300 junior doctors from New Zealand's public hospitals walked off the job for 48 hours on Tuesday to oppose attacks on working conditions. It was their third strike this year, following two stoppages last month, and is part of the broad resurgence of class struggles by workers around the world.

The doctors' union, the Resident Doctors' Association (RDA), this week confirmed that members voted for a fourth two-day strike on February 26-27, after negotiations with the 20 District Health Boards (DHB) for a new collective agreement broke down.

The DHBs want to extend the number of consecutive days that doctors can be rostered to work from 10 to 12. They also want the power to force doctors to work shifts longer than 16 hours and to relocate them anywhere in the country. Doctors already work under trying conditions. Long hours, including 30-hour working weekends, leave them exhausted, putting patients' and their own safety at risk.

RDA spokesman David Munro said union members had been "overwhelmingly consistent" in voting for industrial action, and called on DHBs to "accept that we will not give up essential clauses in our contract that safeguard our members."

About 1,000 hospital midwives are simultaneously holding a series of 12-hour rolling stoppages around the country this week over stalled pay talks with the DHBs, which began 18 months ago. On Monday midwives struck and held rallies in Whangarei, Northland and Auckland. The stoppages will conclude with a march to parliament in Wellington on Thursday.

The strikes follow a series of stoppages last November called by the Midwifery Employee Representation and Advisory Service (MERAS). Midwives are seeking a better offer than that imposed last year on 30,000 nurses and healthcare assistants. The sellout deal by the NZ Nurses Organisation (NZNO) included a rise of just 3 percent per annum

over three years, essentially a freeze in real wages.

MERAS proposed lifting the starting salary for midwives from \$49,450 to \$56,788, equivalent to the second step of the nurses' pay scale. According to MERAS, midwives have a high level of responsibility, study for a four-year equivalent direct-entry degree, and their practice includes high-level, clinical decision-making.

MERAS industrial officer Jill Ovens told the media the DHBs had put a proposal that "addressed our key issues" during a facilitation meeting on February 1, but gave no further details. She said if the proposal is confirmed as a formal offer, MERAS will recommend it to members for ratification.

The Resident Doctors' Association is meanwhile working to reach its own settlement with the DHBs before doctors are pushed onto individual contracts when their current agreement expires later this month. Talks are set to resume on Friday.

The RDA is not fighting to improve pay and conditions but is focused on retaining the "status quo" for doctors. The union has signalled it is willing to alter existing "safer hours" provisions to allow more "flexible" rostering. It has invited the DHBs and the senior doctors' union, the Association of Salaried Medical Specialists, to discuss ways to address "unintended consequences" of changes designed to make rosters safer following strikes in 2016-17.

While health workers enjoy overwhelming public support, they are confronted with trade unions working to isolate them, suppress strike action and prevent a coordinated political and industrial movement of the working class against the Labour-led government.

The NZNO sellout of the nurses' struggle set the pattern. The union deliberately dragged out the dispute to wear down the nurses and echoed the government's lie that there was "no more money." Union leaders called off one strike and presented one rejected offer

after another, ignoring widespread demands for an 18-20 percent pay increase and mandated staff-to-patient ratios.

The RDA, MERAS and other healthcare unions kept the respective struggles separate from each other and from other layers of workers facing similar attacks. Ovens told Radio NZ on December 14 that MERAS had been asked by the DHBs to “wait until the nurses settled” before negotiating their pay deal. The union agreed and was then offered the same deal the NZNO had accepted.

The NZNO has organized no support from nurses for doctors and midwives, and the Council of Trade Unions has maintained near total silence on the disputes. The turnout for the doctors’ pickets this week has been significantly less than in the previous two strikes.

The country’s largest union, the Public Service Association (PSA), which covers administration staff in the DHBs, actively undermined the doctors’ struggle by helping to establish a rival union, the 500-member Specialty Trainees of NZ (STONZ), which last year agreed to the DHBs’ clawbacks.

All health workers face the same political struggle against the Labour-led coalition government, which is imposing the austerity agenda demanded by big business.

A genuine fight by workers to defend their rights requires a rebellion against the corporatist trade unions, which defend the government.

The Socialist Equality Group (NZ) calls for the formation of new organisations of struggle, including independent rank-and-file committees. These would coordinate joint industrial and political action by workers throughout the health sector and more broadly, in opposition to the entire political establishment.

Workers cannot be restricted by what the Labour government claims it is able to afford. Their demands must be informed by a new political program: the fight for a workers' government and socialist policies.

The WSWs interviewed doctors picketing outside Wellington Hospital on Tuesday.

Will, a doctor at the Hutt Valley Hospital, near Wellington, said: “The main issues for us are retaining our union protections. Currently any major changes to our job descriptions and the way we work have to gain the approval of our union. In an example of institutional bullying, the DHBs want to unilaterally

remove any protections that we have.”

Will explained that DHBs opposed safe working hours. “The situation in different hospitals varies, but all doctors want to move to a situation where they are working as few days in a row as are safe.”

Asked about a fourth strike, Will said that “it’s important that we retain our conditions and we will keep striking until that happens.” He said it was “disappointing to not see the CTU and the PSA” supporting the strike and noted that the rival union (STONZ) had accepted a lot of clawbacks.

Will said he was “generally positive” about the Labour government, but then added: “There is always more money to be spent on health. Given their pro-union rhetoric leading up to the election, I would be quite happy if they put their money where their mouth was.”



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