

Nurses and health workers strike in Northern Ireland

Our reporters
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A strike by 20,000 health workers in Northern Ireland, less than one week after the British general election, marks a major escalation of the class struggle. Those on strike included 9,000 members of the Royal College of Nursing (RCN), an organisation that has never taken strike action in its 103-year history. Six thousand five hundred more nurses, members of Unison, also struck, as did around 5,000 members of the public services union, NIPSA.

Picket lines were established at hospitals across Northern Ireland. The RCN nurses struck for 12 hours, while Unison and NIPSA members withdrew their labour for 24 hours. NIPSA members include ambulance drivers and paramedics.

The strike followed two weeks of action short of striking, including overtime and unpaid working bans. Workers also refused to update records other than individual case notes.

Workers are striking over pay, staffing levels and the general disintegration of health services in Northern Ireland. Although there are specific regional issues, workers are in effect opposing the assault on the National Health Service (NHS) across Britain.

Since 2017, a sharp pay differential has developed between workers in Northern Ireland and those in the rest of the UK. A Northern Ireland nurse on the lowest salary band earns £22,795. Nurses in England and Wales on the same band earn £24,214, while in Scotland they earn £24,670. In real terms, nurses' wages in Northern Ireland have declined by 15 percent since 2012.

The differential has emerged because the British government, currently running Northern Ireland directly from Westminster, has refused to keep health workers' wages in line with those in Scotland, England and Wales.

The RCN was forced into holding its first ever strike ballot this October, resulting in a 96 percent support for industrial action short of a strike, and 92 percent supporting a strike. Unison members voted by 92 percent for strike action.

Despite the huge majorities, strike action was delayed until after the British general election, held last week. Another union, the Royal College of Midwives, intends to ballot its Northern Ireland members in January next year.

The WSWs spoke to workers at a picket outside the Antrim Area Hospital.

Denise Kelly, a registered nurse for 27 years, said, "There's a border down the Irish Sea when it comes to pay." Denise was concerned about "safe working conditions, and high vacancy rates, with nurses going to work in Scotland, England and Wales. Nurses are now accessing food banks to live, but like everyone else they are entitled to a decent standard of living."

Denise said she had seen massive changes in the health service, and these conditions had driven her to this action. "I didn't expect to be standing outside fighting for terms and conditions for members and patients, our human rights."

At the Royal Victoria Hospital, Belfast, hundreds of workers picketed two entrances.

Louise Mitchell, a nurse for 35 years, explained, "The health service is not replacing aging equipment. It is creating another sector, a private sector. Staffing levels are inadequate. I love my job, every day of it. It's the best job in the world, but we need to get the pay to reflect that. You can't blame agency staff for working for between one-and-a-half and double our wages and getting to choose their hours."

Earlier this year, the RCN reported that 11.6 percent of nursing posts were vacant—the equivalent of over

2,100 jobs—while 421 nursing assistant posts were also unfilled, one in eight. The use of insecure agency staff had increased dramatically between 2012-13, when £10 million was spent on agency staff, against £32 million last year. Use of agency staff also provides a consistent revenue stream for the employment agencies, another form of surreptitious privatisation.

Health provision is also in sharp decline. In England and Wales, one in 14 of the population is on a waiting list for inpatient or outpatient treatment, but in Northern Ireland the figure is one in six. Waiting times in Accident and Emergency Departments are the longest in the UK.

Press commentary, trade union statements, along with statements from the British government and leading members of Sinn Fein and the Democratic Unionist Party (DUP) have all presented the dispute as arising primarily out of the suspension, since 2017, of the Northern Ireland Assembly in Stormont.

New talks on restoring the Assembly opened this week. But when it was sitting, Stormont's sectarian political duopoly imposed all the requirements of British government cuts.

The health service strike points to the real role of the Assembly, as a means to manipulate and divide the working class. This is why, under conditions of a sharp escalation in class struggle, Stormont's resuscitation is so vital for the ruling class.

The NHS has been torn apart across Britain by successive Labour and Conservative administrations intent on transforming the immensely popular and valuable service into a source of super-profits for the private predator health corporations circulating the service. The election of Boris Johnson will escalate this to a new pitch.

Similar class pressures are building up in the Republic of Ireland. Earlier this month thousands of doctors, members of the Irish Medical Organisation, began voting on strike action on pay and staffing. Recent reports warned of 200,000 children on waiting lists, while over 100,000 patients were left on hospital trolleys.

What is posed is not the revival of the discredited Northern Ireland sectarian institution, but a turn to the methods of the class struggle. Workers in the North of Ireland are posed with uniting their struggles with those of workers in Britain and in the Republic. Rank-and-

file committees of health workers, independent of the trade unions and the hated sectarian political apparatus and seeking a socialist strategy, should be formed to take this forward.



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