

Australian public mental health workers take stopwork action

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After participating in limited rolling stopworks for the past three months, public mental health workers in the Australian state of Victoria are due to hold a state-wide stopwork on May 26 over their poor pay and conditions.

They will meet in Melbourne and march to parliament in support of an overdue enterprise bargaining agreement (EBA), having not taken industrial action since 2016.

They are seeking a 4 percent annual increase over the life of a four-year agreement, a one-off immediate pay increase to bring them in line with other health workers, recognition of current skills and qualifications, and other improvements to conditions.

Health workers everywhere must support their fight. The Socialist Equality Party warns that the Health and Community Services Union (HACSU), which covers these workers, is seeking to “let off steam” and push through the demands of Premier Daniel Andrews’ state Labor government.

For months, the workers, including nurses, allied health workers, patient services assistants and administrative staff, have taken two-hour stopworks, put bans on certain paperwork, refused to work in unpaid breaks and outside normal working hours, and imposed bans on non-clinical duties.

They are in dispute with the Victorian Hospital Industry Association (VHIA) the industrial body representing the Andrews government, which has falsely claimed to be determined to repair the broken mental health system in Victoria.

Health workers everywhere are being driven to take action over conditions and wages. In Western Australia, mental health workers walked out in March over the disaster in child mental health services produced by staff shortages. In New Zealand, nurses are about to

strike over the Ardern Labour government’s wage freeze.

The mental health workers’ log of claims was submitted in February 2020 and has languished since then. HACSU called on the Andrews government to intervene in the bargaining process, but the government’s hand was shown in last week’s state budget, which seeks to limit public sector wage rises to 2 percent.

The government’s guaranteed public sector annual base increase will be cut from 2 percent to 1.5 percent, bringing it into line with the New South Wales Liberal-National government.

With the consumer price index forecast between 1.75 percent and 3.5 percent until mid-2023, a 1.5 percent cap means a real cut to wages.

Treasurer Tim Pallas claimed this was “for the overall wellbeing of the community” and “so we can have the capacity to provide the appropriate resourcing for the services the community needs.” That is the mantra of big business governments everywhere.

The wages cap shows the real attitude of the Andrews government to the entire public sector workforce, including teachers, nurses, paramedics and firefighters, who have worked under dangerous and onerous conditions as “essential workers” during the 2019–2020 bushfires and the COVID-19 pandemic.

The pandemic has intensified the mental health crisis to an alarming degree, coming on top of a 60 percent rise in hospital emergency department presentations since 2008.

Last July-August, during the partial lockdown in Melbourne, there was a 33 percent increase in young people presenting to emergency departments for intentional self-harm compared to the same period in 2019. There was a 10 percent increase in adults

presenting for intentional self-harm, a 19 percent increase for urgent and emergency mental health services, and an 11 percent increase in people contacting inpatient or residential program care.

There was also a 29 percent increase in mental health support by telephone, and clinical mental health services saw increased presentations from people who had not accessed their services in five years.

While politicians, both Labor and Liberal, may clap and laud health workers for PR purposes, their real outlook is exposed by the low pay and unbearable conditions in the public health system.

In 2014 both HACSU and the Australian Nursing and Midwifery Federation (ANMF) helped bring Andrews to office as premier, despite his record as health minister in the Brumby Labor government of 2007–2010, when he tried to eliminate nurse-to-patient ratios.

HACSU has overseen the chronic understaffing of the public mental health system, with 350 positions unfilled by the 2018 election, in which it supported Labor's re-election.

Since the 1990s, when mental health treatment was shifted from psychiatric to mainstream hospitals, the situation has only deteriorated as revealed by the recent Royal Commission into Victoria's Mental Health System, which the government called to deflect the growing anger of staff and patients.

Over the past two years, HACSU and the ANMF have engaged in a divisive demarcation dispute over coverage of nurses working in hospital emergency "hubs" for patients suffering a mental health crisis or alcohol/drug addiction. This wretched turf war is a diversion from the burning issue: the appalling conditions facing all health workers.

An adult mental health nurse, Peter, told the WSWS: "You can't go around and do normal activities of daily living, because you're responsible for half the medication of the ward.

"In the end you miss out on your patient's needs. Unfortunately, you don't get the opportunity to have a sit-down conversation with them. A lot of the work is observation... People may harm themselves if we aren't always monitoring them...

"If there is one person who is at high risk of hurting themselves or someone else, they need 'specialling'—one staff member to be with them the

whole time. But you have a floor with 30 to 40 people and sometimes there is only one staff member. It is not realistic.

"When you come to work, tension is a given for a mental health nurse. At the end of the day you're there to help people, but sometimes you can't. There is high attrition. In nursing generally, many nurses with burn-out leave before they have done nine years.

"Then there are a lot of people in mental health calling in sick... We haven't got the resources that we need."

The mental health workers face a decisive fight against the Labor government and the trade unions, which work hand-in-glove with it. Their urgently needed demands can be taken forward only by wrenching this struggle out of the hands of the unions and building rank-and-file committees to directly oppose the cost-cutting program of the Andrews government.



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