Australian health workers demand strike action to address pay cuts, understaffing and unsafe conditions

Clare Bruderlin 7 June 2021

Opposition is growing among health workers across Australia, including mental health workers, nurses and midwives, paramedics and patient transport workers, to the continued attack by federal and state governments on jobs and wages, and dangerous levels of understaffing, worsened by the coronavirus pandemic.

The public health system has been pushed to breaking point, even before a major COVID-19 outbreak. Increased ambulance ramping and long wait times have been reported in recent months in every state and territory, with public hospital emergency departments overflowing. Reports have surfaced of wait times of over eight hours, and patients being treated in corridors due to bed shortages.

In New South Wales (NSW), sections of health workers have voted to strike in response to the Liberal-National state government's reneging on promised 2.5 percent annual pay rises, slashing them to 0.3 percent last year and 1.5 percent this year. This is effectively a pay cut, given the rising cost of living, especially surging housing and rental prices.

However, the opposition among workers is coming into conflict with the trade union apparatuses, which have shut down strikes and refused to mobilise broader support for workers, isolating struggles to different workplaces.

Late last month, the Ambulance Division Health Services Union (ADHSU) cut short a 24-hour statewide strike of at least 250 HealthShare Patient Transport Officers (PTO), without workers' demands for a wage increase being met, following an order from the NSW Industrial Relations Commission (IRC). Close to 90 percent of PTOs voted to take industrial action.

PTOs, like other health workers, work long hours in difficult and dangerous conditions. During the coronavirus pandemic, PTOs have been employed to

transport patients, with suspected and confirmed COVID-19 cases, between airports and hotel quarantine sites, and can be paid as little as \$25 per hour.

This resulted in a patient transport worker contracting the virus in Sydney last year, after transporting a family of three with confirmed coronavirus from the airport to hotel quarantine.

Orders not to engage in, or threaten to engage in, any industrial action, including strikes or work bans, were served by the IRC against the ADHSU on the day of the strike. Within hours the ADHSU meekly conceded, without any consultation with the PTOs, and instructed its members to return to work. The orders remain in force until June 30.

The union has made clear that it will continue to negotiate with the government, essentially to enforce its requirements, and stated it will ensure further action across the health sector is avoided if the state treasurer agreed to "come to the table with a decent and genuine pay offer."

The ADHSU said "many large businesses are reporting massive growth in profits, and their executives are paying themselves eye-watering bonuses," while health workers were "forced to take a pay freeze last year to repair the budget."

In reality, the trade unions enforced this real pay cut, which saved the state government an estimated \$2.8 billion. Unions NSW secretary Mark Morey last year ruled out any industrial action, stating that public sector workers would "continue to work because they are professional."

Over the past year, state, territory and federal governments have provided "stimulus" packages and low-cost central bank financed loans to big business, to the tune of over \$450 billion. While the latest federal budget

in May provided a further bonanza for the rich, the budget papers show public hospital spending rising by just \$1 billion, or 4 percent, per year. This is far less than needed, amid the worsening global pandemic and soaring medical costs.

This transfer of wealth to the corporate elite has only been made possible by the collaboration of the trade unions in stifling workers' resistance and backing the austerity demands of governments.

Expressing the mounting anger in the working class, on the same day that PTOs voted to strike, ADHSU paramedics, including on-duty paramedics, held a separate stopwork meeting, within an hour of the PTOs' meeting, and also voted for industrial action.

The ADHSU has announced that on June 10, NSW paramedics will undertake a 24-hour ban on all responses except for serious emergencies. Workers are concerned that this strike will also be shut down. A paramedic told the WSWS: "I was told [the ADHSU] plans to disregard IRC orders for about a day, but ultimately they will end the strike due to the fines they will receive for not following IRC orders."

The ADHSU's separation of the PTOs' and paramedics' meetings and industrial action is a conscious policy by the union to keep workers' struggles isolated. Moreover, the ADHSU and the Australian Paramedics Association (APA) have organised different forms of industrial action for paramedics on different days.

The APA refuses to join with ADHSU paramedics, despite admitting that its members had voted "almost unanimously to take action over this insulting pay offer." The APA's action will consist of refusing to report on any clinical key performance indicators (KPIs) and marking ambulance vehicles with chalk from June 7 to June 9—ending one day before the ADHSU strike.

Members of both unions are outraged. Responding to the APA announcement, one paramedic said: "This is pathetic. This is ridiculous that action is different for the same purpose!!"

On the ADHSU Facebook page, a paramedic stated: "You only have half of us with one union. Divided and conquered as usual we will be!"

Other workers called for public sector workers to strike together, including teachers, health workers and transport workers. One said: "IRC never has and never will support workers... About time the whole of the Public Service went out." Another wrote: "What needs to happen is every other public sector union to join this fight... Grind the state to a halt then perhaps the issues will get

noticed."

Last Thursday, over 200 nurses from Belmont Hospital and Mater Mental Health in the regional city of Newcastle went on strike for 24 hours over the pay cut as well as understaffing and unsafe conditions, while nurses at Bowral, Shoalhaven and the Blue Mountains stopped work for up to four hours.

When the IRC ordered the strike to cease, the NSW Nurses and Midwives Association (NSWNMA) posted the orders on its Facebook page but told workers to "stay the course." There was confusion among workers about whether the strike was still on. One nurse from Belmont told the WSWS that some NSWNMA members had stayed home for the strike but others had not, and there was no meeting or picket held on the day.

The mounting struggles of health workers are not limited to NSW. Mental health workers across Victoria have been undertaking industrial action since last November, and in March mental health workers in Western Australia voted to strike. Health workers in South Australia, including cleaning workers and support staff, voted for industrial action in April over threats of further privatisation of health services and job cuts.

As with the federal Fair Work Act, introduced by the Rudd Labor government, state legislation bans virtually all strike action, except during bargaining periods, and governments and or industrial commissions can outlaw any action deemed not in the "public interest."

Therefore, any concerted campaign to halt the assault on jobs, wages and conditions requires a turn to other sections of workers across Australia and globally. Such a turn would inevitably bring workers into direct conflict with the state and federal governments.

The unions have demonstrated their opposition to any such fight. To defend even the most basic conditions, new organisations of struggle are needed. Health workers must take matters out of the hands of the trade unions and establish independent rank-and-file committees, committed to the fight to mobilise other sections of workers everywhere.



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