

# New Zealand nurses' union cancels strike after pay offer

John Braddock, Tom Peters  
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The New Zealand Nurses Organisation (NZNO) announced Friday that it had cancelled a strike notice for July 29, following talks with the country's 20 District Health Boards (DHBs). Some 30,000 nurses and health care assistants struck on June 9, after rejecting a derisory pay offer of just 1.38 percent and voted for three further nationwide strikes on July 29, August 19 and September 9.

The DHBs' original offer was a pay cut relative to inflation (which is 3.3 percent) and contained nothing to address the staffing crisis in hospitals. The Labour Party-led government has announced a three-year wage freeze for the majority of public employees, including healthcare workers and teachers. It is imposing severe austerity measures to make workers shoulder the burden of the economic crisis triggered by the COVID-19 pandemic.

The NZNO told the media that "significant progress" was made in negotiations last week and the DHBs made a revised offer, "conditional" on the July strike being cancelled. Notices for the strikes on August 19 and September 9 remain in place.

The announcement comes as no surprise. The limited and spread-out stoppages were scheduled to allow the NZNO time to return to negotiations, repackage the same sellout deal and cancel the strikes.

On Friday, NZNO industrial services manager Glenda Alexander claimed that the revised offer addressed "some of the key issues [members] were concerned about." The union has not released any details and has told members the offer will be presented for ratification on July 22.

It is clear, however, that the offer remains essentially unchanged. Health Minister Andrew Little said it would cost \$NZ408m over the 27-month term of the agreement and would remain "within the government's

employment relations expectations for the public sector," i.e., within the pay freeze. Nurses had authorised the NZNO to demand an increase of 17 percent to salaries, with an immediate 10 percent lift, along with measures to address the staffing crisis.

Little indicated that, as far as he is concerned, the dispute is over. "Now that DHBs no longer have to spend time preparing to deal with the major disruption a strike would cause we can focus instead on resolving the main issue, which is the nurses' pay equity claim," he said.

The pay equity process is a diversion. It is separate from the collective pay agreement and involves members of NZNO, the Public Service Association and the Midwifery Employee Representation and Advisory Services (MERAS). For more than three decades, governments have made vague promises to lift healthcare workers' salaries to equate with similar male-dominated professions, but these have amounted to nothing.

Many nurses reacted with fury to the announcements. On the NZNO's Facebook page, one member commented: "You cancelled the strike without asking the NZNO members. Whattttttt who gave you the right? Are you on the nurses' side or the DHBs?"

In a letter to members, the union said: "Some members have expressed concern that NZNO did not have the right to withdraw the strike notice." It declared that under the Employment Relations Act, the union was entitled to do so.

Healthcare workers also denounced the media's coverage. Radio NZ (RNZ) received several angry comments on its Facebook page when it initially published a headline falsely reporting: "Nurses call off strikes, accept government pay offer."

One said: "NO NO NO!!!! Please stop spreading this

BS. We haven't seen the offer." Another called the headline an "outrageous LIE" and demanded that RNZ apologise to nurses.

Another commenter pointed out: "A) Nurses haven't called off the strike, the union has. B) Nurses haven't even seen the revised offer. C) Nurses have not accepted anything. Good ole media spin doing its best to misinform the public."

The government and union are using similar tactics as in the 2018 dispute. Then, the NZNO cancelled one of two scheduled strikes and presented nurses with multiple offers that were essentially the same—a wage increase of just 3 percent per annum, combined with empty promises of better staffing and steps towards "pay equity." The aim was to wear workers down, isolate them and convince them that no better deal was possible.

There is growing frustration and anger over the Ardern government's refusal to address the deepening crisis in the hospital system. Health workers booed Little off the stage outside parliament during the June 9 strike, while he was trying to defend Labour's record.

Last week Little refused to take up a nurse's challenge that he and Ardern spend 10 hours in Middlemore Hospital's emergency department (ED) to see the "terrifying" daily pressures health workers face. Middlemore's ED saw 415 people through the doors one day last month, compared with the usual daily number of 300.

The nurse who issued the challenge said in an open letter: "It is not uncommon for us to have up to 200 patients in ED at any one time with 60 or more waiting for a bed on the ward but there is simply no capacity to provide this. Every day we are bed-blocked and every day the situation becomes more dire."

Right at the point when the NZNO and the government are jointly moving to shut down the nurses' dispute, other sections of the health workforce are entering into struggles.

Midwives are currently voting on a proposed series of eight-hour rolling strikes next month after DHBs offered pay increases of between 1.5 and 2 percent. Meanwhile, anaesthetic technicians at three private hospitals plan to walk off the job for 24 hours on July 27, following a breakdown in talks with employer Evolution Healthcare.

Senior hospital doctors and dentists, who have never

before taken strike action, will hold stop work meetings starting on August 2 to discuss ongoing negotiations. DHBs have offered a zero percent pay increase and no improvement to conditions. A spokesperson for the Association of Salaried Medical Specialists (ASMS), however, said the union only wants "a very modest pay rise to simply reflect cost of living increases and inflation."

Like nurses and midwives, doctors are fatigued and suffering high levels of burnout with entrenched staffing shortages, overflowing hospitals and overstretched services. The crisis is the result of decades of underfunding, imposed by the health unions' suppression of any resistance. Before 2018, there had not been a nationwide strike by nurses since 1989.

The struggle by New Zealand health workers is part of an international upsurge of the working class, triggered by the ongoing COVID-19 pandemic. In every country, nurses and other workers confront not only management and governments, but the trade unions, which act as the industrial police force.

In Sri Lanka earlier this month, a strike by 25,000 nurses was shut down by the unions without any demands being met. In the UK, the unions are preventing any fight against the Boris Johnson government's gutting of the healthcare system and its homicidal policy of allowing COVID-19 to spread. Nurses have held strikes in several parts of the United States, with the unions seeking to isolate and defeat them.

A real fight against austerity requires new organisations: rank-and-file workplace committees run democratically by workers themselves. The International Committee of the Fourth International is calling for an international alliance of such committees, independent of and opposed to the corporatist trade unions and the entire political establishment, including Labour and its allies. For assistance in setting up a rank and file committee at your hospital, contact the WSWs.



To contact the WSWs and the  
Socialist Equality Party visit:

**[wsws.org/contact](https://wsws.org/contact)**