SEP (Australia) meeting on NSW nurses strike provokes lively discussion on role of unions, fight against pandemic

Our reporter
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A Socialist Equality Party (Australia) public meeting, called in support of a statewide strike by New South Wales nurses this Tuesday, provoked a lively discussion on the political issues confronting health workers and the working class as a whole.

These ranged from the role of the unions in enforcing the dire conditions in hospitals, to the need for independent rank-and-file committees to organise a genuine industrial and political fightback, and what the pandemic and the criminal official response to it have revealed of the bankruptcy of capitalism itself.

More than one hundred people participated in the Saturday meeting, representing doctors, nurses, aged care and disability workers, and other sections of the working class across Australia and internationally. It can be watched in full below.

Chairing the meeting, SEP Assistant National Secretary Max Boddy placed the strike in the context of the massive Omicron surge that has swept across Australia as a result of the official “let it rip” policies. More than 2,300 deaths have been recorded this year.

The first report was delivered by Katy Kinner, a US health worker, writer for the WSWS and member of a rank-and-file committee at the Kaiser Permanente healthcare conglomerate in Southern California.

Katy explained that the struggle of healthcare workers in NSW is identical to the struggle of healthcare workers around the world. All of the issues confronting workers, from chronic staffing shortages, to underfunding of the public system, excessive hours and the dismantling of infection controls, were the same.

The second speaker, Jess, an Enrolled Nurse in a major hospital in south-western Sydney outlined the dire conditions that had provoked the strike.

She explained that the ward she works on is a general surgical unit catering for pre- and post-operative patients. However, she said, “Now we are taking on patients who are COVID-positive, but who have come into the hospital for health reasons under our speciality scope. This is a recipe for spreading the virus to other patients.”

Jess explained that minimal staffing ratios had never been adhered to, even prior to the pandemic. But now, “long hours, a lack of support from management and minimum nurse-to-patient ratios not being met is severely damaging patient outcomes, as well as nurses’ mental health. Senior nurses, new grads and junior nurses leave the industry as they cannot manage.”

The final speaker, SEP National Secretary Cheryl Crisp, detailed who was responsible for this state of affairs. It was the outcome of decades-long funding cuts implemented by state and federal governments, Labor and Liberal-National alike, and their turn to “herd immunity” pandemic policies based on a rejection of all public health measures that would impede production and the capitalist economy.

The New South Wales Nurses and Midwives Association (NSWNMA) has fully backed these profit-driven policies. It had suppressed any action by nurses since 2013, when nurses struck over the same issues they face now. The union only called Tuesday’s stoppage because of the explosive anger of nurses, but it was doing everything possible to keep the action as isolated and limited as it could.

Crisp explained that the global surge of the pandemic and the abandonment of mitigation measures by governments everywhere pointed to the burning need for workers to build a socialist movement directed at...
the abolition of capitalism. This would need to be waged in opposition to the unions, and their promotion of the lies that big business parties such as Labor and the Greens are a “lesser-evil.”

The establishment of health workers’ rank-and-file committees was crucial to broadening the strike, breaking the union isolation operation and preparing a broader mobilisation of the working class.

As the speakers were delivering their reports, dozens of comments were posted in the chat, several of them outlining the situation health and other workers confront.

One wrote that they support the nurses’ strike and “hopefully action in aged care will happen soon. A pay rise would be good! I get $24 an hour and I work one day a week at my old job in retail. It’s ladies’ fashion and I get $5 an hr more than from the aged care. No wonder everyone is leaving!!! No one will be left in a few years to look after the growing aged population. Everyone is tired.”

Another posted: “All staff and visitors to the hospital I work at are given surgical masks. The only N95s are used by staff in Surgical wards. I have to buy my own supply of N95s to wear to work.” They added: “Most nurses are casually employed, many older nurses (formally retired) have been asked to come back in to work to meet demand and there are always short-staffed wards. The hospital had to shut one ward completely due to lack of staff.”

Critical questions were posed about the role of the unions. A nurse suggested that the NSWNMA was hamstrung by a lack of action from its members and other health workers.

In response, Crisp and other leading SEP members reviewed the development of the trade unions. They had always defended capitalism and its nation-state system. In an earlier period, they fulfilled this function by securing limited concessions from nationally-based employers and governments.

With the globalisation of production, this perspective was no longer viable, and the unions transformed themselves into an industrial and political police force of big business. They had implemented the demands of finance capital for four decades and the privileged bureaucracy had accrued substantial wealth in the process.

A key turning point came in the late 1980s when the unions joined hands with the Hawke and Keating Labor governments and the corporations to enforce sweeping economic deregulation, mass job cuts and privatisation.

Crisp again emphasised the political issues, raising that this agenda was to be deepened amid the current crisis of capitalism which was also threatening war and dictatorship.

Addressing questions about the way forward for health workers, Katy relayed crucial experiences in the US. The unions there had also sought to block any struggle. Last October, for instance, 30,000 health workers at Kaiser Permanente in California voted by 96 percent for strike action. Less than 24 hours before the strike, a tentative agreement was worked out between the hospital and the union which did nothing to improve staffing levels and contained real wage-cuts. The strike was called off.

In opposition to the union, the WSWS and workers such as Katy had initiated an independent rank-and-file committee. It published continuous exposures of the machinations of the unions, gave voice to the sentiments and experiences of frontline workers, and provided them with a perspective for unifying with far broader sections of the working class. As many people noted in the comments section, nurses in NSW and across Australia needed to take the same step.

The point was reinforced by a member of the Committee for Public Education (CFPE), a rank-and-file teachers group initiated by the SEP in Australia. The CFPE member brought greetings to the nurses and expressed support for their fight. She emphasised the need for a unified struggle by health workers and educators who are being herded into unsafe classrooms and universities by the very same governments responsible for the nurses’ dire conditions.

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