

# Australia: Striking New South Wales nurses call for unified struggle by all health workers

Our reporters  
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Thousands of New South Wales (NSW) public hospital nurses struck yesterday for the second time in six weeks, holding more than 20 rallies across the state.

Nurses at the Sydney and Newcastle protests told Socialist Equality Party (SEP) campaigners that nothing had changed since the first strike was held. The workers expressed anger and confusion as to why the NSW Nurses and Midwives' Association (NSWNMA) had again isolated the strike to only public hospital nurses.

The SEP advanced the perspective that workers must build independent rank-and-file committees in every hospital and workplace to take the strike action forward. (See: "Australia: New South Wales nurses again defy government-court ban in statewide strike").

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The WSWs spoke to **Emma** and **Samira**, nurses from the Prince of Wales hospital. Emma said: "We are here for better patient to nurse ratios, because everyday is a struggle. We need a change for our ward, for our patients, for everyone."

Emma explained: "COVID has caused higher rates of nurses leaving, higher burnout, more patients admitted. The reopening was very politically driven. Obviously, people need surgeries, but nobody knows what it is like in the hospitals except us. They don't have any solutions for what is going on from COVID. They are just letting the effects of COVID happen, acting like everything can run like normal, but it can't." Asked what the political drive was to reopen and end COVID safety measures, Emma said, "money."

Samira added: "Zero COVID has not been a thing in the hospitals. It goes from a few cases to a full ward. Ever since COVID was labelled a pandemic, we knew it was here to stay. Even with the vaccines, eradication wasn't spoken about in the hospitals or anywhere. It

was branded as a new respiratory virus like influenza."

Asked if there had been Long COVID cases in the hospital, Emma said: "Absolutely. The symptoms are fatigue, extreme shortness of breath from exertion, lethargy, inability to do regular tasks that you could do pre-COVID, memory fades. It affects everything, you are functioning at 65 percent of what you usually are."

Samira said that since the February 15 strike: "Everything is the same. If anything the situation is worse. We had hoped that things would change, the fact that they remained the same made us feel like our efforts were for nothing and we weren't heard. I have lost hope to be honest. I don't have anything positive to say about our union, because we are here for the second time. So obviously something is not working."

Emma added: "What we have got is not working. I feel like everyone supports us in the hospital, allied health, doctors and nurses, they want us to strike, because it helps them too. There should be unified action... it has not been organised deliberately."

**Evie**, a midwife from Shoalhaven, said: "We are striking for better pay, COVID leave and hazard pay, something we haven't had even though we have been working throughout this pandemic as frontline workers.

"The 'let it rip' ideology has been detrimental. It is scary in our workplace. Initially, because we are on the south coast, we didn't really see the impact on staffing. Now, we are seeing more and more people exposed, we are really suffering with staffing.

"I think ultimately our profession and a lot of other professions are taken advantage of. Our goodwill is something governments can rely upon. That is what they are exploiting."

"Nothing changed from the first strike. That absolutely has to do with the fact unified strike action hasn't been called. If we are isolated and in our own

bubbles it is easier to keep us apart, then we don't work together.

"I come from a family of teachers, and ultimately we strike for the same things and come from the same ideology. Why are we not striking for one another?"

**Fin**, a nurse who has only been working three months, said: "We are just drowning. COVID has meant we have constant PPE, sweating litres every day, pressure injuries on our noses. I've been thrown into it. I have seen firsthand how stressed and tired everyone is. The opening of the country is a kick in the teeth. They have left us to cop all the new infections and COVID cases.

"The government always talks about Australians, especially in the floods, as being resilient people, but we have to be resilient because they are not giving us any help. It is interesting how much money goes to different places. The rich get richer and the people who really need it don't get anything.

"I was working during the first strike, but nothing has changed since then. There should have been ambulance workers and other health workers here. We are all coping it the same way. The more of us here, the more we will be heard. I think there should have been a call for unified strike action by the union," she said.

**Karen**, a mental health nurse in Sydney, stated: "Nurses need a voice and to let the government know that we are at breaking point, and we've had enough. Nurses are leaving in droves, especially the older nurses. It has created a brain drain on the system, because the younger nurses don't get the mentorship they need. Ultimately, the health system is failing."

Karen criticised the NSWNMA and other unions for preventing a broader mobilisation of workers, instead carrying out industrial action "one at a time." She said: "It's not going to work if not everybody stands up."

**Kaitlin**, a nurse from Newcastle, said: "So many senior staff are leaving because of pay and conditions. These problems existed before COVID-19, but the pandemic has added all this additional pressure. Many nurses are going into early retirement. One could ask, why would they want to stay?"

"There are a lot of people doing overtime, which isn't just a couple of hours. Overtime means you are staying for another shift, such as a 10-hour night shift. How are you expected to make good decisions and keep people safe when you are working that many

hours? What's worse, it's in our award that management can enforce 'reasonable' overtime."

Kaitlin said it was "awful" that only public hospital nurses were included in the strike. She said: "I work at a semi-public, semi-private hospital and our branch said we can't strike, or we would be fired on the spot. I came out during my free time after finishing my night shift, and I am back at work tonight.

"I used to be the secretary for the Belmont branch of the union, and I find it completely bizarre that the unions are not collaborating. Paramedics struck last week; we share the same issues on the job."

**Heather**, a nurse from Port Macquarie, said: "Nurses, healthcare workers, paramedics, we all need to be going out together saying that we have had enough. Paramedics had a strike last week. Why aren't we striking together with them?"

"I'm past being burnt out, we're just being exploited now. Every day I get text messages sent to my phone asking if I can fill in for shifts. It's not one shift, it is multiple shifts across the hospital where gaps are not being filled.

"During the pandemic there have been black-out periods and booked annual leave was cancelled. A shift that starts at 7 a.m., with overtime, can extend to 9:30 p.m. or even longer. You can start at 1 p.m. and work right through until 7:30 a.m. You are lucky if you even get a break in that period. It is not uncommon for nurses to be staffed 1 to 6 patients in a single shift.

"I'm barely keeping my head above water, the cost of living has gotten so high. No one becomes a billionaire in their lifetime by doing a nine-to-five job, workers are exploited so a few people can get that rich. Look at Jeff Bezos for example at Amazon."



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