Australia: New South Wales nurses again defy government-court ban in statewide strike

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Tens of thousands of nurses and midwives at more than 160 public hospitals across New South Wales (NSW) walked off the job yesterday in their second statewide strike in just over six weeks. The health workers are demanding minimum nurse to patient ratios, overall increases to staffing, an end to the punitive 2.5 percent wage growth cap and urgent improvements to their dire working conditions, which have been exacerbated by the COVID-19 pandemic.

Yesterday’s strike, and the previous one on February 15, were both declared illegal by the NSW Industrial Relations Commission (IRC), which upheld applications from the state government to ban the actions on the grounds that they would “pose a risk to public health and safety.”

The nurses proceeded with the strikes, defying the anti-worker industrial court, demonstrating the anger, frustration and hostility to the government building among health staff and the broader working class. (See: “Australia: Striking New South Wales nurses call for unified struggle by all health workers”).

In the past, the NSW Nurses and Midwives’ Association (NSWNMA) has repeatedly used IRC rulings to justify shutting down strikes, but the palpable fury of workers, greatly intensified by the ongoing pandemic, has forced the union to adopt a different strategy of suppression.

These single-day strikes are openly designed to wear nurses down, convince them they are powerless to change their situation and ultimately force them to accept a sell-out agreement.

Again, the NSWNMA limited the strike to nurses and midwives working in public hospitals, excluding whole sections of health workers, including paramedics and aged care workers, who also confront a crisis and who have recently taken industrial action over similar issues.

NSWNMA assistant general secretary Shaye Candish admitted at the Sydney rally yesterday that the union had, in effect, sabotaged the strike by complying with NSW Health’s demands for “higher levels of staff [during the strike] than most of you have had in the last few weeks or months.” As a result, many nurses could not join the stoppage, or had to return to work immediately after the protest.

Rallies were held in 28 locations across NSW. The Sydney demonstration was again outside the state parliament, underscoring the character of the protest as an appeal to the Liberal-National government of Premier Dominic Perrottet.

Speaking at the Sydney rally, NSWNMA general secretary Brett Holmes stated that, in the six weeks since the last strike, nurses’ workloads had not gotten any easier, there had been no improvement to staffing, and COVID-19 had not “gone away.”

Holmes said NSW Health Minister Brad Hazzard had “made it absolutely clear to me he does not support ratios.”

Despite this acknowledgement that appeals to the government were futile, Holmes said the purpose of the rally was for “a whole lot of angry nurses to send a message to this mob inside [parliament].”

After complaining that Hazzard and Perrottet had not come back to the union with a proposal since a meeting on February 21, Holmes declared: “If they don’t negotiate, we’ll be back here again and again.” In other words, the NSWNMA will continue to hold isolated and limited protests, directing nurses to issue plaintive appeals that everyone knows will fall on deaf ears. The transparent purpose is to wear the workers down.

Both Holmes and Candish presented the health care crisis as a problem unique to NSW and its Liberal-National government.

Candish said: “Since our last strike, the South Australian government has been kicked out and a new government’s been appointed that’s committed to giving ratios. So that’s South Australia, Queensland, ACT and Victoria, all with ratios. And here we are, in New South Wales, working like we’re in the dark ages.”

In reality, “mandatory” nurse to patient ratios mean nothing in the face of the chronic understaffing and underfunding of public health resulting from decades of spending cuts imposed by state, territory and federal governments, Labor and Liberal-National alike, and
enforced by the NSWNMA and all other health unions.

Other speakers to the rally reported numerous aspects of the catastrophic state of the public health system, including remote medical facilities with no on-site doctors, only telehealth, and regional emergency departments or entire hospitals left in the hands of “very junior staff” or “agency nurses.”

Despite this, Holmes, Candish and NSWNMA president O’Bray Smith presented nurse-to-patient ratios as the sole issue. Even the question of a pay rise was mentioned only in passing, under conditions where nurses, along with all other NSW public sector workers, face a 2.5 percent annual wage rise cap, less than the official inflation rate of 3.5 percent.

The major issue of the past two years, for nurses and the entire global working class, the ongoing and resurging COVID-19 pandemic, went virtually unmentioned, although Holmes acknowledged “many of your comrades are now furloughed and sick with COVID.” In fact, as of March 28, 4,296 NSW health workers were infected or in isolation as a result of COVID-19.

The longstanding nationwide health crisis has been compounded by mass infection, illness, hospitalisation and death from COVID-19 as a result of the “let it rip” policies of all Australian governments. This would not have been possible without the backing of the unions, including the NSWNMA, which shut down strikes over pandemic safety concerns and welcomed the move in late December to force potentially infectious nurses back to work.

One of the first actions of the newly elected South Australian Labor government was to slash close contact isolation periods and mask mandates.

The false claim that conditions for health workers are better in these Labor-led states and territory is calculated both to prevent any unified mobilisation of workers beyond the NSW border and to promote illusions in the Labor Party.

With a federal election due next month, the union is trying to divert nurses’ anger into support for Labor and its leader Anthony Albanese, on the basis of fraudulent claims that they are a “lesser-evil.” In reality, Labor governments have been at the forefront of the privatisation of healthcare. Albanese’s key pitch in the election is an attempt to convince the corporate elite that Labor is best placed to implement sweeping pro-business restructuring and a further assault on workers’ conditions.

Making clear the orientation of the campaign to the big business political establishment, Candish declared nurses would “remind voters every day” of the Perrottet government’s “failures” on health. While promoting the NSW state Labor opposition in this manner, she did not explicitly mention its leader Chris Minns, who has refused to issue even a token pledge for nurse-to-patient ratios or an end to the effective wage freeze.

Health workers need to recognise that the isolated, one-off, disparate strikes are not part of a campaign by NSWNMA to win the conditions they need. Instead their purpose is to wear you down through endless dead-end appeals to the state government, attempts to channel your anger into support for Labor and then the promotion of despair and demoralisation when nothing changes.

Nurses need their own rank-and-file committees, independent of the unions, to link up with other health workers, across NSW, the country and internationally, as well as other sections of the working class, including teachers. The fight for decent wages and working conditions is inseparable from a struggle against the official pandemic policies, which are based on the subordination of social need, including health and life, to private profit.

The Morrison government has demonstrated its priorities in the budget, with an almost 7.5 percent increase in military and defence spending and a $10 billion cut to health. This will flow down the line to whatever stripe of government rules in NSW and elsewhere. In his budget reply, Albanese did not announce a cent for public hospitals, and also declared a Labor government would increase funding to the war machine.

Instead of plaintive appeals to big business governments, nurses and other workers must take up a struggle for workers’ governments, which would implement socialist policies. This includes placing hospitals and schools, as well as banks and major corporations under public ownership and democratic workers’ control, and directing trillions of dollars to the healthcare system.

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