

# 10,000 healthcare workers strike in New Zealand

**Tom Peters**  
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About 10,000 health workers in New Zealand held a nationwide 24-hour strike on May 16. The strike went ahead after the Public Service Association (PSA) union, the District Health Boards (DHBs) and the state's Employment Relations Authority failed to reach an agreement to call it off. The PSA members are continuing work-to-rule industrial action until May 20, which includes a ban on overtime and on working during breaks.

Thousands of workers and supporters took part in protests and pickets in Auckland, Wellington, Christchurch and many regional centres including Nelson, Blenheim, Rotorua, Tauranga, Whanganui and Palmerston North.

The allied health workers are employed in more than 70 occupations, including anaesthetic technicians, audiologists, occupational therapists, dental technicians, social workers and physiotherapists, and workers who process COVID-19 tests. Many of these workers are making little more than the legal minimum wage of \$21.20 an hour. Their pay has effectively been frozen since their previous employment contract expired 18 months ago.

The strike points to growing anger among working people at the soaring cost of living under the Labour Party-led government, as well as the crisis of under-resourcing in public hospitals. Annual inflation in New Zealand stands at nearly 7 percent, more than double what most workers are receiving in wage rises.

Lakes DHB occupational therapist Bridget Davey told the *Rotorua Daily Post* that her team was "notoriously understaffed" and staff were "leaving to go overseas" to try and make more money. Physiotherapist Grant Tuhaka added that staff were pushed to work too many extra hours and "everyone's either leaving or we're burning out and we're just

really tired."

A striking mental health worker, Scott Rusbridge, told TVNZ: "I probably put in an extra 10 hours a week in unpaid overtime. I've got a masters degree in social work and I still start off on a \$53,000 salary," about \$25.50 an hour.

Conditions for healthcare workers have dramatically worsened as a result of the government's decision last October to end its COVID-19 elimination policy and to allow the virus to spread throughout the country. According to the Ministry of Health, 986 people had died with COVID as of May 17—up from 59 at the end of 2021. The toll is likely to pass 1,000 deaths by the end of the week.

Hospitals currently have more than 400 patients with the virus, and thousands of hospital workers have been infected, leading to major staffing shortages and delays for essential medical procedures. On May 16, *Stuff* reported that 37-year-old mother Aroha Raynel?, who had recently had COVID, was told she would have to wait 17 hours for attention after she went to Waikato Hospital's emergency department suffering severe chest pains. Many other patients reported similar wait times.

Sue Stebbeings,? chairperson of the College of Emergency Nurses, said: "Chronic understaffing, space constraints, increasing [patient] presentations and more complex presentations are all factors" in long waiting times. Last Friday, Director General of Health Dr Ashley Bloomfield warned that hospitalisations for COVID-19 could more than double during the winter, which starts next month, making the situation even worse.

Southland Hospital in Invercargill was forced to close to visitors this week after several vulnerable patients tested positive for COVID, prompting fears that the

virus was spreading in the hospital. Dr Hywel Lloyd, a spokesperson for the Southern DHB, told Radio NZ that both patients and staff had to be protected, adding that “we have significant staffing shortages.”

Allied health workers had initially voted to strike in March, but the Employment Court banned the strike at the last minute, in an extraordinary anti-democratic ruling. The PSA had already sought to appease the authorities by calling off the strike in Auckland, but the court decided this was not enough.

Following the ruling, the union re-entered negotiations with the DHBs, facilitated by the Employment Relations Authority (ERA). The ERA recommended a deal which was agreed to by the PSA leadership, which said if it was accepted by the DHBs, then the strike could be averted. Last week, the DHBs presented an offer, which the union said fell short of the ERA’s proposal. No details of either proposal have been made public, leaving healthcare workers in the dark as to what the PSA has agreed to.

The union now says it wants to negotiate directly with the government’s new agency Health NZ, which is to replace the DHBs in July as part of a restructure that will centralise the public health system. Workers should have no confidence that this will produce a better deal; the government has made clear that it supports the offer made by the DHBs.

Health Minister Andrew Little revealed to Newstalk ZB on May 16 that under the DHBs’ offer, “those on the lowest rates [of pay] would go up to about \$52,000 a year,” i.e., hardly more than the minimum wage. He nonetheless backed the offer, implying that workers who were unhappy with it should wait for a separate “pay equity” deal, which the government claims will significantly boost wages.

The details of the “pay equity” deal—supposedly meant to address long-standing underpayment in the sector—have not been determined, and Little admitted that “we don’t even know when agreement is going to be reached.”

Nurses have strongly objected to a similar “pay equity” deal hatched between the government and the New Zealand Nurses’ Organisation, which falls short of the increased cost of living and will not address the staffing crisis.

The situation facing healthcare workers, and the working class as a whole, exposes the unions’ lies that

the Labour-led government would enact progressive reforms. In 2020, the PSA campaigned vigorously for Labour’s re-election, declaring in one statement that the party had a “commitment to workers’ rights and wellbeing” (September 19) and in another that its policies “signal a shift toward secure work with decent pay and conditions for all” (September 14).

In reality, the Labour-Greens government has used the pandemic to carry out the biggest transfer of wealth to the rich and big business in New Zealand’s history, through multi-billion dollar subsidies and quantitative easing. The accumulated debt is to be repaid through brutal austerity measures, at the expense of healthcare and other essential services.

Throughout the world, from Sri Lanka to the United States, Europe and Australia, workers are seeking to fight back against the out-of-control cost of living, and to stop more needless deaths from COVID-19. They are hamstrung and divided by the trade unions, which are enforcing government and corporate austerity and have suppressed opposition to the dismantling of public health measures.

The Socialist Equality Group calls on healthcare workers to break from the unions and build new organisations: rank-and-file committees that workers themselves control, and that are politically independent of Labour and all other capitalist parties. This is the starting point for organising workers across the country, and building links with workers internationally, in a political and industrial fight based on a socialist perspective against austerity and for a fully-resourced policy to eliminate COVID-19 and end the pandemic.



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