Health workers in Sri Lanka walked out on strike on June 29 and 30 in protest against the lack of fuel and their inability to get to work. It followed the Rajapakse-Wickremesinghe government’s announcement on June 20 of a virtual national two-week shutdown.

The lockdown is another desperate measure to deal with extreme shortages of fuel and other basic needs produced by the worsening collapse of the economy. The country’s heavily-indebted economy was seriously hit by the COVID-19 pandemic and then catastrophically impacted by the US-NATO proxy war against Russia in Ukraine.

Last week’s strike involved public health inspectors (PHIs), family health service employees, ECG and EEG recordists, laboratory technicians, health entomology science officers, dental doctors and nurses.

The walkouts disrupted work at several hospitals across the island, including the National Hospital in Colombo and provincial hospitals in Polonnaruwa, Wathupitiwala, and Balapitiya. Health workers also took action on July 2 at provincial hospitals in the Puttalam district.

In a separate campaign over the same issue, doctors, nurses and junior health staff members joined a march on June 29, organised by the Alliance of Health Services, from the National Hospital in Colombo to Prime Minister Ranil Wickremesinghe’s residence. Police forcibly blocked the march before it reached the residence.

Health workers from the Lady Ridgeway Hospital in Colombo, the country’s main children’s hospital, protested outside the facility on the same day. They carried handwritten placards saying, “End to patience,” “Stop the collapse of the health service,” and “Provide transport facilities,” and demanded the government resign.

Interviewed by the media, protesters denounced the government, accusing it of allowing the health service to collapse by not providing health workers with transport or fuel. The government claimed workers could get fuel from specified filling stations. This was rejected by protestors, who told the media that some had been forced to wait in queues for over a week to get small amounts of fuel.

The official monthly fuel allowance for PHIs, moreover, is just 1,200 rupees (US$3.35), which is not enough for three litres of petrol at current prices. Health workers said their entire monthly wage would be spent on the fuel they needed to travel to work.

Last week’s strikes and protests by health workers are a part of a rising wave of industrial action by the working class over fuel shortages and the collapse of transport. On June 28, postal workers began strike action over their inability to report for work, forcing them to do a week’s work in a three-day period. On July 1, railway workers walked out for several hours in protest over the same issue.

These struggles are part of the working-class uprisings that erupted in April and May over worsening scarcities and skyrocketing cost of essentials, such as food, fuel and cooking gas, and hours-long daily power outages.

On April 28 and May 6, millions of workers participated in general strikes demanding President Gotabhaya Rajapakse and his government resign. On May 9, health workers and other key sections of the working class played a leading role in the walkouts over the violent attacks in Colombo on anti-government protesters by ruling-party goons.

These struggles are part of rising class struggles internationally, not just in South Asia, Middle East, Africa, and Latin America, but also the imperialist centres, including in the US, UK, Europe and Australia.

The recent action by Sri Lankan health workers was organised by eight health sector trade unions: the Public Health Inspectors Union, the State Midwives Service Association, the Family Health Services Officers’ Unions, ECG and EEG Recordists’ Unions, Associations of Technicians of Medical Laboratories and Public Health Laboratories, Health Entomology Science Officers’ Associations and the Dental Association.

These unions claim that putting pressure on the government through protests and limited strikes will force the government to grant workers’ demands, but these organisations, along with the other health unions, have betrayed health workers’ struggles over the past two years.

By contrast, the Socialist Equality Party (SEP) has insisted that the working class can only secure decent wages, secure jobs, better social conditions and, above all, the supply of essentials like fuel, food and cooking gas at affordable prices,
in a political struggle against the government and the profit system.

The SEP insists that workers need to form independent, democratically-functioning networks of action committees in all factories, plantations, workplaces and working-class neighborhoods to unleash their social power and defeat the capitalist onslaught.

These action committees need to link up with the International Workers Alliance of Rank-and-File Committees, initiated by the International Committee of the Fourth International, to establish the unity with their class brothers and sisters internationally in a common struggle against ruling class onslaught on their basic social and democratic rights.

Notably, the Federation of Health Professionals (FHP), the main health union alliance, did not participate in the June 29–30 industrial action and protests, and maintained a stony silence over the desperate situation facing their members.

FHP leaders previously declared they were “managing the anger of their members” in order to block ongoing strikes. This, however, was becoming increasingly difficult, they said, and called on the government to be “wise,” and to “assist” them in this endeavour.

FHP president Ravi Kumudesh recently promoted Prime Minister Wickremesinghe—a pro-US, right-wing figure—declaring that he could be pressured into granting concessions for working people. Kumudesh advised Wickremesinghe not to turn his back on the people, saying he had become prime minister because of the people’s struggle.

Government Nursing Officers Association (GNOA) chief Saman Ratnapriya, who is another FHP leader, has been promoting government attempts to get health workers, including nurses, to look for foreign employment. This perspective, which is in line with International Monetary Fund demands for major cuts in public sector jobs, will worsen the dilapidated state of the health sector, already in deep crisis over the lack of drugs, equipment, staff and essential facilities.

Kumudesh, Ratnapriya and the FHP leadership played a key role in winding down the anti-government uprising in April and May, replacing the general strikes and other industrial action with limited protests.

The lack of fuel and the government’s declared shutdown has brought the country to a grinding halt. Major cities, including the capital Colombo, increasingly resemble ghost towns. Public sector offices are limited to skeleton “essential” staff, schools are closed and replaced with online education, and the private sector has been asked to implement “work from home” practices.

Workers are being forced to use scarce filled-to-capacity trains or buses. Rising numbers of deaths and serious injuries are being reported, caused by dangerous riding on the footboards and roofs of buses and trains.

The ruling establishment, including the corporate media, is becoming increasingly nervous about a revival of mass working-class struggles. A July 2 editorial in the Island nervously warned: “Industrial action tends to snowball, and the unions that down tools at this juncture are likely to trigger a wave of strikes, which will deliver the coup de grace to the economy on oxygen support.”

WSWS reporters spoke with health workers from several areas about the harsh conditions they confront.

A nurse from Marawila Base Hospital in the Northwestern province explained that she had been queuing for fuel late into the night on July 1, even though the government had claimed that day that fuel was supplied for all health workers.

“Our salaries are actually being cut by the government through the exorbitant prices of essentials. The trade unions are maintaining a stony silence about these issues and don’t even call a meeting to discuss the situation,” she said.

She denounced the government’s calls for nurses to get foreign jobs in order to reduce state sector jobs and agreed that the implementation of socialist measures through an international working-class movement was an important strategy for their struggle.

A striking public health inspector from Payagala in the Western province, said: “We are prohibited from talking to the media but what we have to highlight is that we cannot cope with these exorbitant fuel prices in order to perform our specified duties. If we spend our meagre salary on fuel then our families will have to starve and die.”

A junior staff health worker from the Kandy National Hospital said a 20,000-rupee salary increase would not be enough to deal with the current situation and overtime payments had been curtailed.

“We are disgusted about the trade unions,” he said. “The workers are aware that the parliament will not solve these problems of the working class. Expropriating the profits of big business seems to be a more viable solution,” he said, adding that he supported the Health Workers Action Committee at the Kandy National Hospital.