Junior doctors completed the last of four consecutive days of strikes Monday—the latest in a series of industrial actions ongoing since March. The World Socialist Web Site spoke with doctors on the picket lines in London and Leeds.

Ellie, a junior doctor at King’s College Hospital in London explained, “The strike is about pay restoration to stop us losing doctors. Doctors are struggling to pay the bills, to just live. There is a newer generation of doctors with massive student loans to pay off. The cost of living is rising. We’ve got lots of fees that are inherent to the profession: indemnity fees, exams every year, GMC [General Medical Council] fees. They amount to upwards of £3,000 a year. I don’t think people realise how we are struggling to make ends meet.

“This Conservative government advocates for a free-market economy and what’s happening at the moment is doctors leaving for where pay is better. I’ve lost count of the number of people I went to university with who have gone to Australia and New Zealand and are probably going to stay there. That used to be a thing that you did for a year, and then you’d come back. But people are staying, and I don’t blame them.

“A lot of people are doing two or three doctors’ jobs. Even the General Medical Council, our regulatory body, have come out and said that they are concerned because the amount of GMC registrations is going down every year. I think it was about 10,000 last year, a huge concern.

“You end up having responsibility that is overwhelming. During the pandemic people were putting their lives at risk. In any other industry where you put your life at risk, your family’s lives at risk, you get compensation. People have got to the point now where they can’t carry on. Some are leaving the profession altogether. A couple of friends of mine have quit to open a café. It’s such a waste of training.”

Speaking about the pandemic, Ellie told our reporters, “It was a really hard time. I did put my life at risk, I did repeatedly catch COVID, I did repeatedly get asked to work with sub-standard protective equipment and have a lot of responsibility when I’d only just graduated. And we were then rewarded with another pay cut.

“I’ve had colleagues who have passed away, or been really unwell, and colleagues who are still ill—have had to stop working because they’re still unwell from COVID. Either mentally or physically. It’s a stark contrast when you know the government were out partying and we were swimming in a sea of COVID signing death certificates. It’s baffling that there hasn’t been more outrage about that.”

Describing the impact on the health system, she said, “We know that there were excess deaths in the pandemic, compared to other countries with similar healthcare systems. We know there are excess deaths in the UK now. I think it’s like a planeload of people every week, 400 odd deaths a week, that could have been prevented but weren’t due to the strains on the service.

“That’s definitely part of why people leave. It’s hard to begin every patient interaction with an apology. The abuse of NHS [National Health Service] staff is at an all-time high, both verbal and physical. Patients are frustrated, understandably so. Waiting lists are at an all-time high.

“It is a system that has run on good will for so long, from doctors and nurses and cleaners and porters that have stayed that little bit longer once or twice a week. I didn’t mind staying an hour late once a week, or whatever—and that was part of the job before. But then it gets to a stage where you can’t do your job and...
people won’t be okay unless you stay an extra three hours a day every day, because half your colleagues have left.

“I think it’s really quite worrying the amount of work the private sector is taking on. It’s not regulated in the same way. I can definitely see a point in the future where the NHS won’t be the safe option for people and that really, really worries me.”

At Leeds General Infirmary (LGI), the WSWS spoke to Victoria, who is “working as a supernumerary on a paediatric ward where I am supervised by registrars and senior house doctors. I am learning to take bloods and write up discharge summaries.

“I feel pessimistic because of the negative reporting in the media. If we don’t get a pay increase of more than six percent a lot of doctors will just emigrate. There will be a real problem. I think it will take something like the offer made to Scottish junior doctors to resolve the dispute. Our pay needs to be in line with medical practitioners in other countries.”

James explained he had just begun working as a trainee general practitioner (GP) in Leeds. He had previously worked in Liverpool for four years.

He said, “We need to keep pushing. The pay issue is obviously part of it. But there’s so many things that aren’t being covered at the moment like retention of staff. We’re losing so many people’s jobs. And whilst the pay is getting a lot of publicity, because it’s an easy thing to highlight, you can’t really put a number on how many people were losing.

“Ten or 15 years ago we used to be the place that people wanted to come and work in. It feels like things have been made worse in a calculated manner.

“I think this dispute represents a very, very wide issue. It’s about the state of the NHS. It feels like we’re at a very big fork in the road, that the path of least resistance would lead to more privatisation. It is a fundamental issue, the possible dismantlement of the NHS. We can’t allow that to happen.”

Rashida and Emena are both starting their first year of foundation training after graduation from medical school. Rashida is based in St James Hospital in Leeds while Emema is in general surgery at Harrogate Hospital.

Rashida said, “It’s disappointing the government seem unwilling to get around the table and discuss pay and improved pay. I think we have come at it from a very reasonable angle. We are asking for pay restoration for what doctors were paid in 2008 [in real terms].

“We’re not worth 26 percent less now than we were in 2008. So, I think it’s disappointing that they seem reluctant to offer more than a 6 percent pay rise. I think we’re worth more than £14 an hour. Some of the hours I’ve had this week, are not worth £14. I would rather have paid not to have worked them rather than be paid £14.”

Emena said, “I really don’t know what would get the government to compromise. I think we’re doing what we can to keep the biggest leverage of strike action. I think we’re so united and I don’t think it’s going to stop on our part.”