## Australia: Victorian public sector nurses and midwives must oppose union-government wage cut

Margaret Rees, Martin Scott 18 March 2024

Nurses and midwives throughout Victoria face the prospect of another four years of real wage cuts, as the state Labor government of Jacinta Allan seeks to impose the burden of its financial crisis upon public sector workers, in full collaboration with the unions.

The Australian Nursing and Midwifery Federation (ANMF) has called a statewide stop-work meeting on Thursday to discuss the new enterprise bargaining agreement (EBA) being worked out between the union bureaucracy and the government.

The Health Workers Rank-and-File Committee warns workers that what the union is preparing is a sell-out that will give the Labor government everything it wants.

The ANMF has not advanced a pay rise demand, demonstrating that the union leadership is completely on board with the Labor government's punitive wage policy, which limits nominal pay increases across the public sector to 3 percent per annum, with an additional 0.5 percent lump sum payment.

This is a substantial wage cut in real terms. Official inflation over the 2023 calendar year was 4.1 percent, while the cost of essential goods and services rose 4.8 percent. Rents rose 7.3 percent last year, and average mortgage repayments have increased by \$400 a week since May 2022.

Nurses and midwives have already endured years of declining real income, after the ANMF agreed to an eight-year wage deal in 2016, meaning nominal wage rises were locked at 3 percent, even as inflation soared to almost 8 percent in 2022.

The "log of claims" published by the ANMF makes clear that it intends to keep the EBA dispute entirely within the Labor government's terms. The first page notes that "nurse/midwife patient ratios are not included in the EBA."

The message to workers is clear. The issue of ratios—critical to safety, workload and patient care, and currently implemented in name only—cannot be discussed and fought for in the EBA campaign, the only time when workers can legally strike or take other forms of industrial action related to pay and conditions.

Underscoring the ANMF's total agreement with the government it is supposedly in dispute with, the note continues: "The Andrews/Allan Government continues to implement election commitments to introduce and improve ratios."

The framework of Labor's Wages Policy is adopted entirely. Seven of the twelve headings under which proposed improvements to conditions are listed are copied verbatim from the government document, which requires that "all agreements must be fiscally sustainable and funded from indexation, revenue, appropriate cost offsets or a Government approved funding strategy."

The claims themselves, while no doubt based on genuine concerns expressed by nurses and midwives, are nothing more than window dressing to conceal the ANMF's collaboration with a Labor government that is determined to continue slashing real wages and eviscerating the public health system.

The announcement of the March 21 meeting prompted a string of discussion on the ANMF Facebook page, complaining about the prospect of the 3 percent wage deal. One nurse commented: "My guess is that the ANMF will be very quick to encourage us to accept some pathetic offer like last time."

This was met with contempt from the union: "The 2016 EBA 8-year wages deal was voted for and campaigned by public sector members who wanted pay parity with NSW."

In fact, what the ANMF effectively did in 2016 was underwrite the Labor government and its austerity measures—dictated by banks and corporations—with an eight-year halt on wage increases in a key section of the workforce. Now, it is seeking to repeat the exercise.

A Western Australian nurse wrote: "I hope you're more successful with overcoming the ridiculous 3% wage policy, unlike W.A. [Western Australia]"

This points to the need for Victorian nurses and midwives to draw sharp lessons from the recent experiences of their colleagues in Western Australia, as well as in New South Wales, where struggles including mass strikes were sold out by the union leaderships.

In Western Australia, the union initially agreed to the Labor government's wage offer behind the backs of nurses and midwives, only agreeing to hold a strike after workers rejected the sell-out deal.

After a single one-day strike, the state industrial court, in close collaboration with the Labor government, threatened to deregister the union and impose a record-breaking \$36 million fine. The union immediately declared that no further industrial action would be carried out, and, after negotiating the penalty down to \$360,000, rammed through the 3 percent pay deal.

In New South Wales, multiple statewide mass strikes of nurses and midwives in 2022 were diverted by the union leadership into a

campaign for a Labor government in the 2023 state election. Since taking power, Labor has delivered further real wage cuts and introduced only token measures to improve staffing ratios, so far in only two hospitals.

In each instance, nurses and midwives were isolated by the state ANMF bureaucracy and worn down by attrition, with the unions giving them every reason to believe that a fight for decent wages and conditions was impossible.

This underscores the need for nurses and midwives to build new organisations of struggle, rank-and-file committees, democratically controlled by workers themselves and politically independent of the ANMF bureaucracy.

Through such committees, health workers can discuss demands based on their needs, not what the Labor government and the union leadership say is affordable. As a basic starting point, these should include:

- An immediate increase to all pay by 20 percent to compensate for decades of real-wage cuts, with automatic monthly cost-of-living adjustments to keep pace with rising expenses.
- No cuts to public health! Nurses and midwives will not be made to pay for Labor's budget crisis!
- Public health measures to combat COVID-19, including the reinstatement of paid pandemic leave, the provision of free, high-quality N95s or better for all staff and adequate ventilation/air filtration. All decisions on safety must be made by workers, not management and governments.
- Immediate hiring of thousands of health workers to end chronic understaffing and punishing workloads. Ratios must be more than just words!
- Permanent full-time jobs for all health workers who want them.
- Massively expand spending on public health. End the privatisation of essential social services.

The fight for improved wages and conditions for nurses and midwives is inextricably linked with the broader crisis engulfing public health.

According to a Productivity Commission report released on January 31, Victoria's annual expenditure on public hospital services—\$3,330 per person compared to the national average of \$3,484—has been the second lowest (ahead of South Australia) in the country since 2019–20.

With just 2.3 public hospital beds per 1,000 people, Victoria shares bottom place with Western Australia, behind the already grossly inadequate national average of 2.5. In 1992, Victoria had 3.5 hospital beds per 1,000 people. While it was the Liberal government of Jeff Kennett that initially slashed this to 2.5, the cuts have been continued and deepened under Labor, which has been in power for more than 20 of the past 25 years.

Intensified pressures on the public health system and staff were unleashed by the pandemic. COVID-19 saw exhausted nursing staff fall ill as aerosol infection went unchecked in hospitals and other medical settings, staffing shortages were exacerbated and the hospital system was brought to its knees. Under cover of the pandemic, privatisation of essential health services proceeded apace.

In April 2020, the Andrews Labor government legislated a

temporary waiver to the Safe Patient Care Act, which enshrines nurse to patient ratios, allowing hospitals to breach the ratios as long as the ANMF was consulted, and the union concurred. This arrangement remained in place for more than six months.

Now that the Labor government, backed by the ANMF, has declared falsely that the pandemic is over, staff in hospitals and aged care facilities are left to deal with the continuing infections from the evolving virus, while the official conspiracy of silence is maintained, all in the interests of private profit.

As nurses and midwives strive to take up the defence of their own wages and conditions, there is no bypassing the political situation they face. That is, the need to defend the most elementary social right of access to high-quality health care. But this cuts across the insatiable demands of the profit system, placing workers in direct conflict with the whole capitalist political establishment, including Labor and the unions.

To take forward the fight for real improvements to wages and conditions for health workers, and against the destruction of public health, nurses and midwives will need to wage a political and industrial struggle against the pro-business Labor government.

This is impossible within the framework of the ANMF bureaucracy, which is tied by a thousand threads to Labor, and which has presided over decades of attacks on public health. What is needed is a fight to establish rank-and-file committees in every hospital, and a turn to broader layers of workers throughout the health sector and beyond, not just in Victoria but around the world, where workers confront similar attacks.

Above all, nurses and all health workers confront major political issues. The experiences of the past four years, and of the decades before the pandemic, have demonstrated that high-quality public healthcare and decent conditions for those who staff it are incompatible with a society based on the accumulation of private profit by corporations and the ultra-wealthy.

The banks and major corporations must be placed under public ownership and democratic workers' control to free up the resources required for public health in a complex mass society. That requires a political struggle for socialism against capitalism and all the forces that defend it.

Only the Health Workers Rank-and-File Committee is fighting for this perspective. We urge health workers to contact us today.

## **Contact the Health Workers Rank-and-File Committee:**

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