

# NSW nurses and midwives: Build rank-and-file committees to fight Labor government pay cut!

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Nurses and midwives, along with other health workers across New South Wales (NSW), face the prospect of another three years of real-wage cuts, under a state Labor government pay “rise” offer that is well below inflation.

The government, led by Premier Chris Minns, has offered nurses, midwives and other public sector workers a nominal pay increase of just 3.5 percent this year, with 3 percent increases to follow in 2025 and 2026.

The latest Australian Bureau of Statistics (ABS) figures show the inflation rate at 4 percent over the year to May, having increased each month since February. The so-called “cost-of-living” relief in Labor’s offer—a \$1,000 one-off payment—only applies if inflation exceeds 4.5 percent, virtually guaranteeing that wages will go backwards in each year of the deal.

Moreover, official inflation measures are a major understatement of the cost-of-living crisis confronting the working class. The prices of essential goods and services, such as rent, utilities and fuel, continue to rise far more rapidly.

The latest “offer” follows years of real wage cuts imposed both by the current Labor government and the previous Liberal-National administration, with the total collaboration of the NSW Nurses and Midwives Association (NSWNMA) and other public sector unions.

The NSWNMA is calling for a 15 percent pay rise this year, which, even at face value, would be woefully insufficient to make up for previous cuts and the soaring cost of living. The reality is that even this meagre claim is nothing more than a smokescreen to cover the sellout being prepared by the NSWNMA bureaucracy.

Nurses and midwives should draw sharp lessons from the experiences of the past two years.

In 2022, statewide strikes involving tens of thousands of nurses and midwives were atomised by the NSWNMA into hospital-level demonstrations, and ultimately a government offer of a 3 percent pay increase was rammed through.

The NSWNMA claimed nothing more was possible under a Liberal-National government, and the limited industrial action was dissolved into an election campaign for Labor. This, the union promoted as a panacea, promising that a Labor government would grant workers significant pay increases and nurse-to-patient ratios.

In reality, Minns made clear well before the election that any pay increases under a Labor government would have to be tied to “productivity gains,” in other words, the destruction of jobs and conditions.

More than a year on from the election of the Minns Labor government, the first “minimum and enforceable shift by shift nurse-to-patient ratios,” have only been announced for four emergency departments across the state, out of the more than 200 public hospitals in NSW.

Last year, after initially advancing a 10 percent pay increase—after this was demanded by nurses and midwives at a stop-work meeting—the union dropped this demand within a month and adopted a “neutral” position on the Labor government’s 4 percent offer. With the union offering workers no way forward, the offer was narrowly approved, with just 58 percent of members voting to accept the offer.

The actions of the NSWNMA bureaucracy show that, as long as they are in charge, nurses and midwives can expect nothing but a repeat performance.

This week, the union is holding rallies outside individual hospitals across the state, keeping workers isolated in small groups. Nurses and midwives have been invited to attend “in their own time,” that is, at their own expense and inconvenience, ensuring minimal impact on hospital management or the Labor government.

The purpose of these events is to boost the credibility of the NSWNMA leadership by promoting their bogus 15 percent claim and give the most vocal workers an opportunity to let off steam.

By contriving to keep the demonstrations as small as possible, the bureaucracy can promote the conception that

nurses and midwives are simply not willing to carry out a serious fight. This lie will be used to justify the abandonment of the 15 percent claim and the imposition of the Labor government's cuts.

Besides these limited rallies, the official NSWNMA campaign has largely consisted of urging nurses and midwives to wear union badges and T-shirts, plaintively appealing to the state government to "value us."

Two key developments earlier this year point to both the rising opposition among nurses and midwives to the ongoing attack on their wages and conditions, and the determination of the NSWNMA bureaucracy to suppress this dissent and impose the demands of the Labor government.

In April, some 1,200 nurses and midwives signed a letter calling on the NSWNMA to fight for a 30 percent pay increase, backed up by a campaign of industrial action, including "closing beds, rolling Stop-Works across LHDs [Local Health Districts], not prioritising ambulance offloads, stopping theatres and withholding registration fees."

Obligated under the NSWNMA Rules to hold a Special General Meeting to discuss the motion, the union called the meeting for a Friday evening, with less than a week's notice, and required in-person attendance at one of just seven locations across the entire state.

In a further effort to undermine the meeting, the NSWNMA leadership made clear from the outset it had no intention of complying with the demands of its members. It stated that even if workers voted in favour of the motion, this would not be binding, and would merely be conveyed as a "recommendation to Council."

As a result, the meeting had an attendance of just over the required quorum of 250 members, and when attendance fell below this number the union abruptly ended it declaring that no vote would be taken on the demand.

Several weeks earlier, a Facebook group, "delayforfairpay," was started, urging nurses and midwives to hold off on renewing their professional registration with Australian Health Practitioner Regulation Agency (AHPRA).

This was inspired by a similar action by paramedics late last year, which, although undermined by the Health Services Union (HSU) bureaucracy, did result in a slightly improved pay offer.

The interest in this initiative was clear. Within weeks, the delayforfairpay group grew to 14,000 members, almost one-third of the public sector nurses and midwives in NSW.

An organiser of the group told the *World Socialist Web Site* he approached the NSWNMA leadership, proposing that the union endorse the campaign as a bargaining tool in wage negotiations with the Labor government. But the executive of the union refused, he said, claiming "they were unable to

support a grassroots movement like this because it had been generated outside their democratic processes."

This response underscores that not only is the NSWNMA leadership hostile to a genuine struggle by nurses and midwives, but that it cannot be reformed. Any attempt, no matter how broadly supported by the membership, to push the bureaucracy in a more militant direction will be suppressed in order to deliver on the demands of the state government.

Nurses and midwives need new organisations of struggle that are politically and organisationally independent of the NSWNMA bureaucracy. Workers need to take matters into their own hands and build rank-and-file committees in hospitals and other health facilities.

Through such committees, nurses and midwives can prepare demands based on their actual needs—not what Labor and the NSWNMA bureaucracy say is "reasonable"—and a plan of action through which to fight for these demands, and for a top-quality public health system.

Rank-and-file committees are the only means through which nurses and midwives can break the isolation imposed by union bureaucracies and link up with other public sector workers across the state, who all confront the same cuts to real wages.

This includes health workers covered by the HSU, who are this week voting on the Labor government deal. The HSU leadership has presented the offer to members without comment, effectively endorsing the real wage cut and sending a clear message to workers that nothing can be done to oppose it.

A unified struggle involving public hospital workers across the state would be a powerful start to what is required—a political struggle against Labor and the unions, and a fight for a socialist alternative to capitalism under which even the most basic public needs, including health care and decent wages, are subordinated to the profit demands of big business and the banks.



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