

Australia: Tens of thousands of NSW public sector nurses walk out against Labor's pay caps

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Over 10,000 nurses and midwives angrily protested outside the New South Wales (NSW) parliament in Sydney on Wednesday to demand higher pay, increased staffing levels and better conditions. NSW nurses and midwives are the lowest paid in Australia's public health sector.

The demonstration was part of a 24-hour statewide strike by 50,000 NSW Nurses and Midwives' Association (NSWNMA) members, the third industrial action in as many months. Hundreds also demonstrated in Armidale, Broken Hill, Coffs Harbour, Crookwell, Moruya, Lismore, Port Macquarie, Tweed and Taree.

The NSWNMA has called for a 15 percent rise to be paid this year. Even if granted, this would not compensate for the soaring cost of living, or make up for previous low-pay union-government deals, as well as a wage freeze endorsed by the union in 2020.

The Minns government is refusing to lift its cost-cutting 3.5 percent wage offer for this year, with 3 percent raises in 2025 and 2026. Amid soaring housing costs and ongoing hikes to essentials, those would amount to another real wage cut. The government has threatened to move to formal arbitration when talks resume in the Industrial Relations Commission later this month.

Premier Minns told the media that a 15 percent pay rise in the first year of any future agreement was impossible and would force the government to withdraw a previous promise, widely promoted during the last election by the union, to improve nurse-to-patient ratios. In other words, the union's wage demand must be paid for with even deeper attacks on working conditions.

While the striking nurses and midwives angrily rejected these threats—scores of protesters carried hand-made placards denouncing the government and highlighting the escalating crisis in the state's public hospitals—NSWNMA officials are desperately working to contain and dissipate nurses determination to fight.

Addressing the demonstration, officials stepped up their

efforts to isolate and divide them from other public sector employees and the rest of the working class by claiming that they were being discriminated against because they were part of a predominantly female workforce.

NSWNMA general secretary Shaye Candish told nurses that they were fighting “structural and covert” gender bias and that their low wages indicated “appalling disrespect” for women by the government.

Candish's claims of gender bias ignore the fact that there are 7,000 male nurses and midwives in the sector who are subject to the same attack as their female colleagues. Likewise, every NSW public sector worker—male and female alike—is impacted by Labor's cost-cutting wage cap.

Candish cited Labor's decision on Monday to grant NSW police officers a 39 percent wage rise, describing it as another example of gender bias. This demonstrated, she said, that “there is one reality for male-dominated workforces and another for female-dominated workforces.”

These claims are bogus and reactionary. Labor's increase in police wages had nothing to do with gender. To equate police with health workers, as the union and government habitually do, should be rejected with contempt by nurses and midwives. The police do not save lives, as health staff do. They are a key part of the capitalist state, dedicated to oppressing the poor and suppressing opposition, including from workers, which is why they have been rewarded with a pay hike.

Candish declared that other NSW public sector workers—health union members, transport staff, teachers and others—had won increased wages in new agreements without sacrificing conditions. “No other industry is expected to fund their resources from out of the pockets of their workers,” she said.

This is simply false. Minns' wage-cap policies, like those of his state counterparts across Australia, all involve the imposition of productivity increases, the elimination of hard-won conditions or other cost-cutting measures negotiated

and imposed by the unions.

And it this decades-long, never-ending race to the bottom involving the NSWNMA and every other union, which has created the disaster in public hospitals and the worsening assault on nurses' and midwives' wages and conditions.

NSWNMA assistant general secretary Michael Waites admitted that the union had not raised the question of a long-term wages commitment in its discussions with Minns prior to the March 2023 state election.

Waites said the talks focused on staffing ratios as “the number one issue” because “there was no cost-of-living crisis at that time. Not even the RBA foresaw it.”

Waites is lying through his teeth. Contrary to his claim, the working class was being hard hit by record price increases with inflation reaching a peak of 7.8 percent in the 2022 December quarter.

The cost-of-living crisis prompted a movement of public sector workers, including nurses and midwives who held mass strike rallies in 2022. The NSWNMA wound that movement up, transforming it into part of Labor's state election campaign. It did so, under conditions where Minns was very explicit that even nominal increases to public sector wages would be paid for through productivity increases.

Waites and the NSWNMA bureaucrats are thus hoping that workers have very poor memories, and cannot recall what the union officials were saying little over two years ago.

With Labor in office at the federal level, in NSW and most states and territories, the offensive on real wages has only deepened. According to the latest figures, workers have lost about 9 percent of their purchasing power nationally over the past three years—an historic cut to working-class living standards.

There was an evident contradiction in the rally speeches. Waites, Candish and co. continued to hail the staffing ratios they negotiated with Minns, even while admitting they had changed virtually nothing in the public hospitals. In reality, the ratios apply to emergency departments at only a handful of hospitals. Under conditions of an enormous staffing shortage, produced by decades of government austerity and the low-wage regime, ratios are meaningless because there are not enough workers to implement them.

Candish and Waites both shouted about how they would not back down and how angry they were at the government. For all the pantomime theatrics, they complained that it was Minns who would not negotiate and expressed their willingness to “negotiate.” Having already rejected, in the most antidemocratic manner, calls from rank-and-file nurses

for a higher pay demand, the NSWNMA officials will not hesitate to “compromise” on the 15 percent, as they have time and time again.

Neither speaker mentioned the possibility of a unified struggle by all health workers, or of turning to other public sector staff in a common struggle against the government.

Instead, with 10,000 angry members in front of them, the union bureaucrats and their flunkies encouraged nurses and midwives to book appointments with their local MPs for a chat.

Wednesday's 24-hour statewide strike demonstrated, yet again, that nurses and midwives want to fight. The first step in this struggle, however, is to recognise that they are in a political struggle, not just with the Minns Labor government but the union bureaucracy, which functions as its industrial police agency and imposes its demands.

To take forward a genuine fight for their wages, jobs and conditions, nurses and midwives must take the current struggle out of the hands of the NSWNMA bureaucracy. This requires new forms of organisation, rank-and-file committees that operate independently of the union apparatuses and are democratically controlled by workers themselves.

Nurses and midwives need to discuss and advance a pay rise, staffing ratios, working hours and conditions that suit their needs and guarantee best practice and safe conditions in all public health facilities. This should include an immediate 30 percent wage rise and the development of strikes and other forms of industrial action that seek to involve all other public health workers and other sections of the state public sector to fight for it.

Such a struggle must be animated by an understanding that public health and the wages of those who work in these and other vital social services—education, transport, welfare—cannot be determined by what governments or big business deems to be affordable. We urge nurses, midwives and all health workers to read and circulate copies of the Health Workers Rank-and-File Committee's November 12 statement, discuss with your fellow workers and contact us today to speak about how to develop a rank-and-file committee in your workplace.



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