

Australia: New South Wales doctors reject Labor government pay offer

Gary Alvernia
21 September 2025

Earlier this month, doctors in New South Wales (NSW) overwhelmingly voted down a miserly pay offer from the state Labor government of Premier Chris Minns. Labor's proposed deal contained a nominal pay rise of 3 percent per annum, backdated to start from July 2024.

Doctors were not just rejecting the rotten deal, but its tacit endorsement by the Australian Salaried Medical Officers Federation (ASMOF), which promoted illusions that workers could accept the "interim" offer and patiently wait for arbitration in the state Industrial Relations Commission (IRC) to deliver further improvements to pay and conditions. The offer would have required that doctors commit to a total ban on industrial action until the IRC proceedings are complete, which is unlikely to be earlier than next year.

The rejected offer fell far short of what is needed to keep up with the rapidly increasing cost of living, including on housing and other essentials, let alone recoup losses incurred under successive real wage cuts imposed by Labor and Liberal-National governments with the assistance of ASMOF.

Doctors' wages in New South Wales public hospitals are up to 30 percent lower than other Australian states, while NSW has the highest cost of living in the nation. First year doctors—who have already completed at least six years of university education, racking up enormous debts—are paid a base rate of \$76,000 per annum, or just over \$38 an hour. NSW doctors have not had a pay rise since 2023.

In addition to pay, NSW doctors also face onerous and unsafe working conditions, with unpaid overtime so rife that NSW Health last year settled a class action with 20,000 junior medical officers for \$230 million over the practice.

NSW doctors have indicated their desire to fight against both wage cuts and the deteriorating conditions of the public hospital system. There is a widespread recognition

that public healthcare is in crisis, with inadequate infrastructure and understaffing contributing to blowouts in ambulance ramping, waitlists for surgery, staff burnout, and dangerous delays for essential care. Nothing in Labor's rejected offer would have addressed any of these pressing issues.

Such concerns motivated the three-day doctors' strike in April, the first in NSW since 1998. But that strike was confined by the ASMOF leadership to plaintive appeals to the Labor government, and shut down by the union as quickly as possible. As with industrial action by nurses, midwives and other health workers across the state, the union has collaborated with a Labor government that has remained intransigent, determined to crush the struggles of all public sector workers for improved wages and conditions.

In a media release following the ballot result, ASMOF stated that "doctors have lost confidence in this [Labor] Government's ability to put public health and the safety of the people of NSW ahead of politics," and that "today, our members have again sent a clear message. Enough is enough."

However, reviewing the record of ASMOF demonstrates that it has acted against the demands of doctors by shutting down or diverting strike action in collusion with Labor and the industrial courts.

When negotiations started last year, ASMOF initially advanced a pay demand for 30 percent. But just hours before the start of the April strike, ASMOF officials offered to cancel the walk-out in exchange for a mere 10 percent "interim" pay rise, which the Minns government rejected.

When tens of thousands of doctors walked off the job, in defiance of anti-strike orders from the IRC and threats of de-registration, rather than defend doctors and seek to expand the strike, ASMOF moved to shut down industrial action after just three days, having gained nothing for

their members.

Since April, ASMOF has promoted false hopes in IRC arbitration, despite a long track record of industrial courts siding with the government's austerity agenda against workers. Moreover, the IRC is part of the draconian industrial relations framework that divides workers into individual workplaces and professions, seeking to prevent a joint struggle of workers.

In August, amid clear indications doctors would reject Labor's pay offer, ASMOF officials held a series of "town hall" meetings in which doctors were encouraged to accept the pay deal and IRC arbitration, which was met with hostility by attendees. The vote was then delayed by ASMOF, recognising that rejection would be followed by demands for further strike action, which the union opposes.

Since the vote, ASMOF has proposed no further industrial action, only to "meet with members and delegates to determine the next phase of action, while also continuing its arbitration case" through the IRC. In effect, ASMOF plans to continue the strike ban, giving doctors no way to fight the rotten deal they have rejected.

ASMOF has pursued a similar line with public hospital psychiatrists, who it encouraged to resign en masse in February, which the union claimed would put pressure on the Labor government to increase wages and resolve longstanding staffing shortages. Despite the government's intransigence, ASMOF continued to prevent industrial action by psychiatrists, much less in coordination with other doctors and health workers. As a result, psychiatrists remain mired in IRC arbitration, their issues unresolved after more than six months.

It is not only in NSW that health workers face government attacks and a complicit union bureaucracy.

In Queensland, despite 95 percent of midwives and nurses voting for strike action in June, the Queensland Nurses and Midwives Union (QNMU) defied demands for industrial action from their 50,000 strong membership, eventually enforcing a strike ban and accepting a totally inadequate 11 percent pay rise over 3 years from the state Liberal-National government. Doctors in the state have been offered a measly 8 percent over 3 years, an offer which ASMOF presented as the best offer available.

The NSW doctors' rejection of the Labor government's latest pay offer is an important signal of their determination to fight. But it is only the first step. Sharply posed before doctors is the question of how to take their struggle forward, under conditions where the ASMOF bureaucracy is working to impose the government's

demands.

To fight for decent wages and conditions, and for a free high-quality public healthcare system, NSW doctors must conduct a unified struggle alongside nurses, midwives, as well as other health and public sector workers, who face a similar onslaught from the Labor government.

Such a struggle is impossible under the domination of the ASMOF bureaucracy or that of any of the other unions, which continually isolate and divide workers in different sections of the workforce, even among their own membership. This is a deliberate policy aimed at suppressing opposition to the dictates of management and government.

Therefore doctors and other health workers need to take matters into their own hands. Rank-and-file committees, democratically controlled by workers themselves and politically and organisationally independent from the union leaderships, must be built in every hospital and health facility. Through these committees, workers can discuss and implement a unified struggle across workplaces and professions for demands based on their actual needs, not what governments and their collaborators in the union apparatus dictate.

Contrary to the claims of governments and unions, the funds to provide high quality healthcare and good wages exist, but are squandered by capitalist governments on the defence of corporate profits and conducting imperialist wars.

The alternative is a fight by the working class against exploitation and the destruction of public services, animated by a socialist perspective placing human life over profit.

Contact the Health Workers' Rank-and-File Committee (HWRFC):

Email: sephw.aus@gmail.com

Twitter: [@HealthRandF_Aus](https://twitter.com/HealthRandF_Aus)

Facebook: facebook.com/groups/hwrfcaus



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