

Strikers at University Hospital Essen speak about staffing crisis and the danger of war

Our Reporters
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On January 13-14, university hospitals in North Rhine-Westphalia (NRW), Germany's most populous state, participated in the public sector warning strike that took place in the context of ongoing collective bargaining negotiations.

Hospitals in NRW are facing a new round of austerity. Federal Health Minister Nina Warken (Christian Democratic Union, CDU) is planning savings of €1.8 billion at hospitals. According to an article in the *Westdeutsche Allgemeine Zeitung* (WAZ), NRW is expected to bear €377 million of this. Further losses threaten to result from the hospital "reforms" at state and federal level, with which hospital financing is being regulated anew. The goal of these "reforms" is to implement closures and orient remaining hospitals even more strongly toward profit.

University Hospital Essen has also felt the effects of this. Within the framework of the NRW hospital reform, it was instructed to stop performing heart transplants from April 2025, although it is a leader in research in this field. The hospital filed a lawsuit, which was upheld by the Administrative Court of Gelsenkirchen, but a final verdict is still pending.

At University Hospital Essen, about 230 employees took part in the two-day warning strike and met for a protest action at the rear entrance, where the service union Verdi provided loud music and advanced slogans calling for "perseverance." The entire event lasted only from 7:30 to 9:30 a.m., at a time when not many workers from other facilities and sectors could come to offer support.

Reporters from the WSWs spoke with strikers in Essen about their working conditions at the hospital, the development of war and the ongoing nurses' strike in New York, which highlights the necessity of an international movement of the working class against the capitalist oligarchy.

Andrea has worked at the hospital since the 1990s. At first, she was a nurse on the ward for many years until she switched to the internal transport service. She said, "More money is not enough. In terms of workloads, it is partly a

horror show. You cannot handle that much and those at the top are not interested at all."

She described her everyday life on the ward, which she finally could no longer endure: "If you have a night shift alone with 20 patients, the danger is great. I worked in neurosurgery. Due to the operation, patients are often disoriented, i.e., you have to be careful that they do not endanger themselves, you must position them, distribute medication, prepare and follow up on operations."

"I frequently had several patients who needed my help at the same time," Andrea said. "You can't keep up; at some point I was just afraid of making a mistake and endangering patients."

From her perspective, the problems in the hospital will not be solved with this strike, but she wanted to do what she could anyway. A few years ago, she had also taken part in a Verdi demonstration at the state parliament in Düsseldorf. But she was disappointed: "It is a lot of talk and nothing behind it."

At the same time, she observed the closures of factories in industry with great concern. When asked why no joint strike movement was being organised with industrial workers, she answered, "That is intended. The strikes in various sectors are partly so staggered in time and location that we do not get to a joint strike at all, even if one supports the protest actions mutually."

WSWS reporters emphasised that behind this lies the tactic of the unions, which isolate industrial struggles from one another and sabotage united resistance.

Andrea also criticised the military rearmament: "The money that is now being spent on the Bundeswehr (Armed Forces) should have been put into the structures of the health system, but also into schools and nurseries, for years."

She looked to America with particular concern: "Trump scares me more than Putin. He is even crazier; he wants to annex Greenland and other countries. He is tearing down part of the White House to build a ballroom for himself, which he will not even use in his current term of office!"

Peri and two colleagues, who preferred to remain

anonymous, have worked in the main kitchen of the hospital for over 20 years. They reported:

“Our working conditions are really hard. It is very cold in the kitchen because it is kept at about 9 degrees because of bacteria, it feels more like 7 degrees. The work has become much heavier and more onerous in recent years.”

They had hardly any skilled workers left; of about 120 employees in the kitchen, only 20 were still employed by the hospital, the rest come from a temp agency and were not sufficiently trained.

Peri continued, “We simply get too little money. Everything has become more expensive: rents are expensive, food is expensive, now the health insurance funds are raising their contributions again. For example, I am a single parent, and the money is simply not enough, so I have to do a side job.”

One of her colleagues is an assistant cook but is only paid as a kitchen helper: “They are taking us for a ride where they can. Of course they have money, but they don’t want to cough it up. They always want more work with fewer staff. Saving personnel everywhere, buying only the cheapest of the cheap regarding food everywhere and save, save, save. What kind of pressure do you think the temp agency is under? They always have to save, otherwise they are out.”

She was horrified by the growing rearmament for war: “The money should not go into the military. That is dangerous. I don’t know where it leads. You notice that something is brewing. Why, for example, was there suddenly this [nationwide] ‘warning day,’ this test alarm? The politicians always know more than us. And with Iran, it will perhaps start now. In social media, it is being hotly discussed that war is at the door.”

She had protested with her colleagues against the genocide in Gaza last year and would also support a general strike to “exert more pressure.” But the government was not changing its policy: “They don’t care about our opinion; they do what they want anyway. You can see that in Gaza. So many people took to the streets, then the government said: ‘Ok, we now have a ceasefire.’ But that is not the case at all. It goes on and on in Gaza, we see that on social media. But individually you can’t do anything, you can only do something as a mass [movement].”

Although she had seen Trump’s attacks on Venezuela, Greenland and Iran, she only heard about the major nurses’ strike in New York for the first time from the WSWs, which she fully supported because she knows that “in the US the health system is a catastrophe.”

Although the hospital workers had been involved in strikes since 2006, they have achieved nothing—except a little more money. “Nothing has changed regarding the general situation, the staff shortage, other problems in the hospital,”

she said.

She thought the perspective of the WSWs, to build internationally networked rank-and-file committees democratically controlled by workers and to prepare a joint struggle with colleagues in other countries, was very good. “Everyone must pull together. We are on the brink of a war. The biggest strikes took place because of Gaza, in Spain, Italy, France—everyone went on strike. That is right, it would have to be done like that for pensions, taxes or other issues too.”

The WSWs also interviewed a group of staff who work in a central diagnostic clinic area and wanted to remain anonymous. They described the extreme workloads due to a lack of specialist staff and a tough shift system.

They were particularly angry about night duty, which counts as an on-call shift, officially they should only work 45 percent during this duty, which is why they are paid only 80 percent of their salary: “In reality, one usually works straight through.” Before or after the on-call duty, an early or late shift is attached, so that they frequently work 12.5 hours continuously.

“The later the night gets, when it gets to 3 or 4 a.m. and you haven’t slept much, you have to pull yourself together so that things work and you don’t endanger patients.” Since they cannot work a regular shift the next day after night duty, they are charged negative hours, which they in turn must work off on the weekend.

“A change to these duties should actually be a demand in the negotiations,” a colleague added. “But in the hospital, it is no longer about the patient at all, but only about the numbers. We must do X patients per day—whether that fits in terms of time doesn’t matter. To make everything work, you have to work overtime.”

In view of their stressful work conditions, workers are outraged that the super-rich are not taxed and managers even get a wage increase: “We have unfilled positions and have to do the work of the missing skilled workers, while they [the managers] simply pocket the saved salary.”

If a war occurs, hospital workers would be burdened even more. A younger colleague explained: “The massive rearmament scares me, also [the reintroduction of] conscription. I have children, what does that mean for their future? I don’t know the times when there was war, but that is coming back now.”



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