

Australia: More than 10,000 health workers to strike in Victoria

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More than 10,000 public sector health workers across Victoria, including orderlies, cleaners, kitchen staff, security guards, theatre technicians, and administration staff, will walk off the job on Tuesday in their second statewide strike in two months, and rally outside the Victorian Trades Hall Council building in Melbourne.

The workers are opposing ongoing poor working conditions and the Victorian Labor government's efforts to impose further real pay cuts in a new enterprise agreement, part of a broader austerity agenda being spearheaded by Labor governments federally and in the states.

The Health Workers Union (HWU) has been compelled to call the strike after workers repeatedly rejected the government's miserly pay offers and voted overwhelmingly for industrial action. But under the control of the bureaucracy, the strike will be nothing more than an exercise in workers letting off steam, while union leaders issue plaintive appeals to the Labor government to "come to the table" and negotiate.

Moreover, the HWU leadership is trying to divert workers' anger by promoting the false dichotomy that workers must choose between improved health infrastructure and decent wages.

Prior to a last-minute change of venue this morning, Tuesday's rally was to be held outside the newly constructed Frankston Hospital in Melbourne, timed to coincide with its official opening by state Labor Premier Jacinta Allen. The HWU had stated that the aim of the rally was to "disrupt" the opening, and that the new Frankston hospital means "BILLIONS for buildings. SCRAPS for the people inside them."

By tying the strike to the opening of the hospital, the union is effectively pitting health workers against the broader working class, based on the bogus premise that any improvement to their wages and conditions must come at the expense of cuts to spending on new infrastructure or elsewhere in the hospital system.

In truth, the crisis facing health workers is part of a broader assault on public healthcare, in which essential

public services and wages are systematically starved of funds, threatened with cuts to desperately needed services and outright closures, while billions of dollars are made available federally for big business, military weapons and massive tax cuts for the rich.

Such diversions are a well-worn tactic of union bureaucracies. In recent years a similar position has been most notoriously advanced by the Health Services Union (HSU) in New South Wales (NSW), with which the HWU is affiliated. Lining up with the most aggressive sections of the ruling elite, the HSU bureaucracy has insisted that governments need not increase health spending, but instead that funding for improved wages and conditions can be found through the elimination of "waste" and "rorts." Meanwhile, the HSU has repeatedly blocked industrial action in order to facilitate successive real wage cuts by the NSW Labor government.

In October last year, members voted overwhelmingly to reject the Labor government's derisory 3 percent wage offer—well below the official inflation rate at the time of 3.8 percent—and for a campaign of industrial action, including strikes.

This vote expressed the determination of health workers to fight back against the government's deepening assault on public healthcare, wages, and conditions. As with nurses, and doctors and others, they face chronic understaffing, unsafe workloads and widespread burnout.

On December 4, HWU members from across 80 public health services went on strike for the first time over 25 years. Yet from the outset, the union sought to contain workers' anger and limit any demands.

The HWU leadership advanced a call for a 6 percent wage increase, itself inadequate and only "in line with other public sector agreements." HWU members are among the lowest-paid in the health sector and this demand is totally insufficient to keep pace with the soaring cost of living or recoup decades of real wage cuts.

After the single-day strike, the HWU introduced only token work bans in December. HWU lead organiser Jake

McGuinness underscored the union's determination to prevent any genuine confrontation with the government, declaring that "the HWU wants more direct engagement with the Minister so that further industrial action—and further patient inconvenience—can be avoided."

Behind closed doors, union officials entered new talks with the government, which resulted in a slightly revised offer of 3.75 percent per year for two years, without back pay or improvements to conditions.

The HWU presented this barely altered offer to members for a vote, signalling its readiness to push through an effective wage cut. It did not call for a rejection of the offer, instead washing its hands of responsibility by insisting that "your pay deal is in your hands."

After workers rejected the offer again, the HWU was compelled to escalate industrial action, including with suspensions of support for Category 2 and 3 elective surgeries, the closure of one-in-four hospital beds and suspension of staff training and onboarding. These measures, however, remain tightly controlled and aimed at diffusing anger.

The HWU's conduct is entirely in line with the state Labor government's broader offensive against public healthcare. The Allen government, like its federal counterpart, has carried out a brutal attack on the state's public health system, ordering hospital administrations to cut hundreds of millions of dollars from their annual operating budgets. Years of "efficiency dividends," budget restraints, and staff reductions across hospitals have resulted in a deepening crisis in Victoria's public hospitals.

This is not the result of a lack of money, but of the priorities of capitalism, a system which services the interests of corporations and big business, at the expense of workers and patients alike.

The same role is being played by health unions across the country, which act not as organisations through which workers can advance a fight for demands that meet their needs, but as partners with governments in enforcing an assault on the working class.

In NSW, strikes by public sector nurses and doctors have been shut down by their respective union bureaucracies and the disputes transformed into multi-year legal operations before the pro-business Industrial Relations Commission. As a condition of these protracted court proceedings, the unions have accepted without hesitation bans on any form of industrial action.

To fight back, health workers must take matters into their own hands. The fight for decent wages, safe staffing levels and properly funded hospitals cannot be left in the hands of the HWU or any of the union bureaucracies that work to protect the interests of capitalist governments and the

corporate elite.

This poses the need for the establishment of rank-and-file committees in every hospital and health facility—democratically elected bodies controlled by workers themselves, not union bureaucrats. These committees would unite nurses, doctors, cleaners, orderlies, and all other health employees in a common struggle, based on the needs and demands of workers, not what governments or unions say is "affordable."

Workers must reject the line of the HWU that they should be forced to choose between new hospitals and fair pay. In fact, the struggle for decent wages and conditions for health workers is inseparable from the fight for a high quality public health system, freely accessible to all.

The situation confronting Victorian health workers is not confined within the state, or even national, borders. This is powerfully demonstrated by the ongoing multi-day strike by more than 15,000 nurses in New York City over real wage cuts, unsafe staffing levels and dire working conditions. They too confront a union bureaucracy that is seeking at every turn to isolate nurses and shut down the strike. A further 31,000 California health workers employed by Kaiser Permanente are preparing to begin a strike on January 26.

Rank-and-file committees, politically and organisationally independent of the unions, are the only venue through which health workers and the working class more broadly can link up their struggles, across national and industrial borders, against the common assault on jobs, living standards, and public services.

What is required is not only an industrial struggle, but a political one, against Labor and the capitalist system itself, under which all human need, including for decent health care, is subordinated to the profit demands of big business.

The alternative is the fight for a socialist perspective. The vast wealth currently controlled by the corporate and financial elite must be expropriated. Hospitals and other vital public infrastructure must be placed under the democratic control and ownership of the working class, so that they can be operated in the interest of the needs of society, not to further enrich the wealthy few.



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