

Resident doctors in England renew strike mandate for pay restoration and to end employment crisis

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Resident doctors in England have voted decisively to continue their fight for pay restoration and to resolving the employment crisis within the National Health Service (NHS).

The result of the re-ballot of 54,000 members of the British Medical Association (BMA) announced February 2 returned a 93 percent majority for strike action on a 53 percent turnout.

The mandate to extend strike action until August 2026 shows the determination of resident doctors to defy Labour's Health Secretary Wes Streeting, who has spewed vitriol including the accusation they are "holding the country to ransom."

In mid-December resident doctors undertook their fourteenth round of strike action since March 2023. This was after they rejected a last minute "offer" by Streeting, which the BMA resident doctors committee (RDC) agreed to put immediately prior to the walkout over five days. This offer was rejected by 83 percent, as it failed to meet any of their basic demands. There was no change on the 5.4 percent award imposed for 2025, leaving pay erosion in real terms compared to 2008 at 21 percent. Streeting's response to the jobs crisis which saw 20,000 doctors locked out of speciality training last year was to expand the number of posts available by just 4,000. Even this was spread over three years and based on repurposed jobs rather than new positions.

By putting the derisory offer to a vote, the RDC sought to provide their accommodating to Streeting's ultimatum with the imprimatur of members approval. While not in a position to put a formal recommendation to accept without losing all credibility, RDC chair Dr Jack Fletcher claimed the government was "finally understanding the frustrations of resident doctors,"

In the re-ballot to strike the NHS FightBack stated: "A

resounding Yes vote is essential. But experience has demonstrated that this struggle cannot be entrusted to the BMA Resident Doctors Committee (RDC). If resident doctors are to win, the fight must be taken out of the hands of the BMA officials and placed under the democratic control of the rank-and-file, linked to a broader mobilisation of the working class against austerity, privatisation, and war."

The BMA aims to prevent a renewal of the fight This has been confirmed by the reaction to the strike mandate, with Fletcher stating in the press release, "None of this needs to mean more strikes. In recent weeks the government has shown an improved approach in tone compared with the name-calling we saw late last year".

"A deal is there to be done: a new jobs package and an offer raising pay fairly over several years can be worked out through goodwill on both sides, in the interests of patients, staff and the whole NHS"

Fletcher asks resident doctors to be grateful for Streeting desisting for now on further diatribes accusing them of "juvenile delinquency" and being "moaning minies." But the "reset" demanded by Streeting is based on what he failed to achieve through outright intimidation being delivered by the BMA via a pledge to block further strike action and engage in closed door talks after making clear it will accept a repackaged low-ball offer. Fletcher signalled this last November by calls on Streeting "to gradually reverse the cuts to pay over several years, giving newly trained doctors a pay increase of just a pound an hour for the next four years."

After nearly three years of strike action, resident doctors (formally junior doctors) have been here before with the previous settlement agreed between the BMA and Streeting in September 2024 to end their dispute. This "journey to pay restoration" has been weaponised against

resident doctors with the oft cited figures that their pay has risen by 28.9 percent over the last three years used to justify continued pay erosion by a fifth.

The rank-and-file alternative

The cause of resident doctors must be taken forward by ending their isolation. There can be no resolution of the employment crisis without defeating the agenda of the Starmer government which is imposing hundreds of millions of pounds of cuts packaged as “efficiency savings” while demanding greater productivity as it drives to dismantle and privatise the NHS.

Resident doctors who make up half the medical staff in hospitals have insisted they are fighting for the NHS and patient safety. However, this needs to be formulated in a strategy which rejects the entire framework of “affordability” used to starve the public health service of funds and push it to the brink of collapse.

This is a calculated policy to divert billions into the coffers of profiteers, including £2.5 billion to private providers from last January for an extra million treatments a year. Chancellor Rachel Reeves’ November budget confirmed that Labour’s “10 Year Health Plan” will revive in all but name the Private Finance Initiative, responsible for leeching billions, to construct 250 “Neighbourhood Health Centres” through a partnership with the private sector.

The £1.7 billion estimate to settle resident doctors demand for pay restoration of 29 percent, declared “unreasonable” by the Starmer government, is a fraction of the billions handed to the military. The Starmer government is increasing military spending to 2.5 percent of GDP—£13.4 billion extra annually from 2027, on the way to 5 percent.

Labour’s shock therapy dressed up in the bogus language of “reform” must be met with opposition by the one million plus healthcare workforce who have the necessary respect to win support across the working class.

The dead hand of the union bureaucracy can be lifted by the formation of rank-and-file committees prepared to overcome the sectional, professional and departmental divisions enforced from above so a collective fightback can be waged.

The broader imperative for this is shown by the role of

the official apparatus of all the health unions including Unison, Unite the GMB and Royal College of Nursing. They have ensured lower pay settlements than resident doctors across the NHS, 3.6 percent last year and an offer of 2.5 percent this year, by isolating every strike at Trusts around the country, against back door privatisation via Subco’s and countless other struggles.

As resident doctors re-balloted in England, the BMA called off the first strike action over pay restoration in Scotland by around 5,000 resident doctor members in the NHS in January. The two-year deal the BMA struck with the Scottish National Party (SNP) government to veto strike action in 2023 was another supposed “journey to pay restoration” that left pay erosion standing at 17 percent going into the current dispute.

In the on-line vote over a revised pay which closes on February 10. the BMA is recommending the deal which still leaves resident doctors 11.6 percent worse off in 2025-26 and 6.2 percent in 2026-27. This is their “credible road map.”

Resident doctors can draw encouragement from the strikes by doctors in France, Spain and the unprecedented strike action in the US by 15,000 of nurses in New York now entering its fourth week. which has been joined by over 30,000 Kaiser Permanente nurses in California and Hawaii.

Health care workers are on the front line against the subordination of healthcare to the demands of a rampant oligarchy epitomised by the would-be dictator Donald Trump and facilitated by the union bureaucracy and its alignment with the Democratic Party. In New York city under the self-styled socialist Mayor Zohran Mamdani, protesting nurses have been arrested by police and a state of emergency enacted to bring in an out of state strike breaking force.

NHS Fightback as part of the International Workers Alliance of Rank and File Committees is fighting to build a new leadership among health workers in the UK as part of a unified international counteroffensive of the working class. We urge all NHS workers: doctors, nurses and every grade to contact us and join the fight for a public health service based on socialist foundations.



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