

South Australian nurses to strike at Adelaide hospital over Labor government wage cuts

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17 February 2026

Nurses and midwives at one of Adelaide's largest hospitals, the Lyell McEwin, will walk off the job for 24 hours on Thursday, February 19, in a dispute over wages and conditions that has exposed the deepening crisis of the public health system under the South Australian (SA) Labor government of Premier Peter Malinauskas.

The Australian Nursing and Midwifery Federation (ANMF) has described the walkout as the first in "a string of planned stoppages" across Adelaide's metropolitan hospitals. The 20,000 nurses and midwives across the state want to fight further wage cuts and dire conditions, including chronic staff shortages, overwork and worsening delays in emergency departments, but the union is working to isolate their struggles to individual hospitals.

Tomorrow's strike was unanimously endorsed at a meeting of Lyell McEwin nurses and midwives on Monday. Industrial Relations Minister Kyam Maher made Labor's hostility to the workers clear, threatening that wage rises above the government's meagre offer would have to be paid for through "hiring freezes," while Malinauskas declared that meeting nurses' demands would "completely destroy the fiscal position of the state."

Earlier this month, nurses and midwives across the state rejected an offer from the government for a cumulative pay rise over three years of 11.14 percent—4 percent backdated to January 1, 3.5 percent next year and 3.25 percent in 2028.

With the inflation rate already at 3.8 percent and the Reserve Bank of Australia expecting it to reach 4.2 percent by June, Labor's offer would likely be a pay cut in real terms.

This would come on top of real wage cuts already suffered by nurses and midwives as a result of previous union-government agreements. In November 2022, when inflation was already above 7 percent, the ANMF pushed through a deal with the recently elected Malinauskas government locking in three years of 3 percent per annum pay "rises," hailing this as a "strong outcome" and a "welcome pay boost."

Moreover, official inflation figures dramatically understate

the impact of the soaring cost of living, especially for housing, the largest expense by far for most working-class households. Since 2022, while nurses' pay has increased by just 9.27 percent, average advertised house rents in Adelaide have risen by 88.5 percent and unit rents by 45.3 percent.

The figures make clear that the ANMF's current pay claim of around 21 percent over three years is woefully inadequate. The union has already reduced its demand from over 23 percent and in its log of claims calls only for "a wage increase that shows respect for nurses and midwives." This should be a warning to health workers that the ANMF bureaucracy is preparing the way for a sell-out deal to be presented as a "win."

To carry this out, the ANMF bureaucracy, along with the other health unions, is deliberately isolating the struggle. The "rolling stoppages" are structured to hit one hospital at a time, allowing nurses and midwives to let off steam, while causing minimal disruption to the Labor government in the lead up to the state election next month.

In a further act of division, the ANMF leadership has adopted an almost apologetic tone for calling any action at all, insisting that the decision to stop work was taken "reluctantly and as a last resort." This is a conscious effort to promote the conception among nurses and midwives that industrial action needs to be kept to an absolute minimum in order to "keep the public onside." The reality is that vast swathes of the working class, including all other health workers in the state and the public sector more broadly, confront the same assault on their wages and conditions, spearheaded by the Labor government.

The ANMF bureaucracy's isolation of nurses is compounded by the fact that other major public sector unions have already rammed through sell-out agreements over the past year:

- Public-sector doctors had been demanding a 30 percent pay rise over three years, before the Australian Salaried Medical Officers Association cancelled a planned strike and pushed through a four-year 13 percent deal in July last year
- The Health Services Union, which covers allied health

workers, imposed a four-year 13.5 percent pay “rise” deal in mid 2025

- In November, the United Workers Union shut down a campaign that had included numerous strikes by hospital workers including orderlies, cleaners and catering staff, accepting the Labor government’s offer of 11 percent over three years

- The Public Service Association, after a protracted dispute involving prison lockdowns and court closures, signed a deal late last month containing “increases” of 3.75, 3.5 and 3.25 percent

The continued slashing of real wages by the Labor government, aided by the unions, exposes the fraudulent character of the 2022 state election campaign. The crisis of the public health system, exacerbated by the reckless dismantling of COVID-19 mitigation measures, was a central factor behind Labor taking office.

Ambulance ramping—patients stuck on stretchers outside emergency departments—became a potent symbol of the system’s collapse under the previous Liberal government. The Ambulance Employees Association ran a high-profile campaign, with “Ash the Ambo” urging voters to “vote Labor like your life depends on it.”

In fact, since the Malinauskas government took office, the situation has only worsened. Australian Medical Association figures show that South Australian patients spent more than 45,000 hours ramped in 2023–24, compared with just over 30,000 in 2021–22.

Throughout Labor’s term, the health unions, which are integral components of the Labor Party and its governments, have maintained a complicit silence as conditions deteriorated, culminating in their ramming through of sell-out enterprise agreements across most of the sector. The same process has been carried out around the country, as state and federal Labor governments, aided and abetted by the union apparatus, have slashed health workers’ wages and gutted social spending as part of a broader austerity agenda.

The fight of South Australian nurses is part of a global struggle by healthcare workers against the gutting of public health systems. In the United States, more than 31,000 Kaiser Permanente healthcare workers in California and Hawaii have been on an open-ended strike since late January, alongside 15,000 nurses at New York-Presbyterian and other New York hospitals who have been on the picket line for more than six weeks.

In both countries, the same essential dynamics are at play. Healthcare systems are starved of funding. Staffing levels are chronically unsafe. Wages have stagnated while the cost of living soars. And in every case, the trade unions have worked to isolate and contain the struggle—refusing to unite

different sections of workers, negotiating behind closed doors, and imposing sell-out deals.

New York nurses recently delivered a powerful rebuke to the New York State Nurses Association (NYSNA) by rejecting a thoroughly inadequate tentative agreement that the union bureaucracy had tried to ram through in violation of its own bylaws. The *World Socialist Web Site* and rank-and-file healthcare workers’ committees have called on nurses to take the conduct of the struggle into their own hands by forming rank-and-file strike committees independent of the union apparatus.

South Australian nurses confront the same fundamental questions. The ANMF’s strategy of isolated, one-hospital-at-a-time stoppages is designed to contain nurses’ anger and deliver a so-called “victory” that does nothing to resolve the plummeting wages and dire conditions of nurses and midwives.

The fight for decent wages and safe staffing cannot be waged within the union framework of plaintive appeals to a Labor government that is hostile to the interests of the working class. Nurses and midwives must form rank-and-file committees at every hospital, democratically controlled by workers themselves, politically and organisationally independent of the ANMF.

Such committees must fight for a unified struggle involving doctors, paramedics, hospital orderlies, cleaners, other health workers—all of whom face the same crisis—to join a common fight against Labor and the capitalist system itself. The struggle for wages and conditions is inseparable from the fight for a fully funded public health system of the highest quality, freely accessible to all.

This requires a new political perspective—a fight for a workers’ government to implement a socialist program, including placing hospitals and other vital infrastructure, as well as the major corporations and banks, under democratic workers’ control and public ownership, so that society’s vast resources can be reorganised according to human need, rather than profit.



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