

Australia: Public sector doctors to strike in Victoria

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Up to 10,000 public sector doctors across Victoria will strike for four hours on Thursday afternoon, opposing the state Labor government's wage cuts and the unsafe working conditions confronting medical staff. The action follows a four-hour strike on August 20, which was the first by doctors since 2002.

In an enterprise bargaining dispute that has been ongoing for some 14 months, the Labor government is seeking to inflict a further real-wage cut under its public sector wage policy, capping nominal pay rises at 3 percent per annum, well below even the understated official inflation rate of 3.5 percent.

The Australian Salaried Medical Officers Federation (ASMOF) has called for a 28 percent pay increase over four years, as well as measures to address burnout and excessive and often unpaid overtime, by capping shifts at 12.5 hours duration. Some doctors currently have to work up to 20-hour shifts, which doctors stressed are unsustainable and dangerous.

The union's pay claim, even taken at face value, is woefully inadequate, amid soaring living costs and coming after years of real wage cuts under previous union-government deals. The doctors have not had even a nominal pay increase since March 2025. Moreover, ASMOF's workload demands would do nothing to resolve the longstanding staffing crisis in the public hospital system, without any commitment from the government to a mass hiring program.

ASMOF was forced to call the stoppage after doctors powerfully opposed the union bureaucracy's last-minute cancellation of a 24-hour strike planned for September 15. After the strike was called off on September 14, more than 1,100 doctors attended an online union meeting, angrily objecting to the ASMOF leadership's shutdown of the action.

The ASMOF bureaucracy has called Thursday's stoppage to head off that anger and maintain control of

the dispute. As long as the union leadership holds the reins, it will continue to work with Labor and the Fair Work Commission (FWC) to shut down the struggle and impose the government's austerity demands.

This is underscored by the fact that ASMOF, along with the other health unions, is deliberately isolating the striking doctors. Also on Thursday, public sector allied health workers covered by the Victorian Allied Health Professionals Association (VAHPA), will strike for 24 hours, with a rally from 11:30 a.m. to 1:30 p.m., that is, concluding at the same time the doctors' strike begins.

These workers, along with nurses, midwives and the rest of the public health sector, face common issues—years of real pay cuts, chronic understaffing, unsafe and unsustainable workloads—and are up against a common enemy, the Labor government that has imposed these dire conditions in successive terms, ruling the state for 23 of the past 27 years.

But the union bureaucracies that claim to represent them are deliberately keeping their struggles apart, specifically to prevent a unified struggle against the Labor government and its austerity agenda, which would not only attract strong support from health workers, but the broader public sector and the working class as a whole.

In plain terms, ASMOF, VAHPA and the other public sector union bureaucracies are defending the Labor government against the interests of the workers they claim to represent. This poses the urgent need for new organisations of struggle—rank-and-file committees—to be built in every hospital and health service, politically and organisationally independent of the unions. These committees should bring together workers from every corner of the health sector, whether union members or not, to provide a democratic forum through a fight can be prepared and taken up for demands based on the real needs of health workers and the public hospital system itself, not what the government or the unions say is

affordable or possible. In the first instance, these committees will need to take up a struggle against the attempts by the bureaucracy to sell workers out.

In its initial statement advising the cancellation, ASMOF had matter-of-factly stated that the Labor government had used “technical and patient safety mechanisms available to it to seek to stop the action” and that, based on “legal advice and discussions in the Commission” the union had voluntarily withdrawn the strike.

The ASMOF statement went on to claim that the strike cancellation was, in fact, an “opportunity to seek the Fair Work Commission’s intervention.” In other words, the union bureaucracy was telling doctors the way forward was to plead their case in front of the very tribunal that would have banned their industrial action if ASMOF had not preemptively done it for them.

Clearly rattled by doctors’ rejection of this dead-end plan, ASMOF rushed out a statement declaring that the campaign was not over and further industrial action was being planned.

Thursday’s action, however, is intended as a tightly constrained affair, designed to minimise disruption to the state’s already overwhelmed public hospitals, and based on what the Labor government and the FWC are prepared to tolerate. As well as being limited to just four hours, doctors were required to individually notify management by midday Monday if they plan to take part, allowing rosters to be changed to replace those striking.

The main event of Thursday’s strike will be a rally on the steps of Parliament House in Melbourne, underscoring that ASMOF has no perspective to offer doctors beyond polite appeals to the Labor government, which is not only intransigently seeking to further slash their wages, but which has also repeatedly taken legal action to prevent them from striking in protest.

In a further sign of what is being prepared, a September 24 ASMOF statement threatened, under the pretext of the November 28 state election, “If an offer cannot be delivered in the coming weeks, there will be no improvement to doctors’ pay and conditions until at least the middle of next year.”

This statement should be seen as a warning that a rotten deal is being prepared behind closed doors by the Labor government and the ASMOF bureaucracy, which will be falsely promoted to doctors as a victory brought about by Thursday’s strike and the best they can hope for under the circumstances.

Doctors and allied health workers should draw stark

lessons from the recent dispute between public sector educators and the state Labor government. For the first time in decades, teachers repeatedly rejected a sell-out deal endorsed by the Australian Educators Union (AEU), forcing the union to hold two full-day mass strikes, with rallies in Melbourne involving more than 30,000 workers.

But above all, what the educators’ struggle demonstrated is that anger alone is not enough. Without an alternative perspective or leadership, the teachers were worn down and eventually accepted an AEU-Labor deal that was largely unchanged.

To avoid a similar betrayal, doctors and allied health workers need to take matters into their own hands. Rank-and-file committees must be built as a matter of urgency, and a fight taken up for a unified struggle by health workers, as well as broader layers of the public sector across the state, who confront similar attacks from the state Labor government.

This assault is not confined to Victoria, but part of a broader program of harsh cuts to wages and social spending being carried out by Labor governments, state and federal. The sharpest expression of this is the federal Labor government’s slashing of the National Disability Insurance Scheme, which will deny all support to hundreds of thousands of Australia’s most vulnerable people, while destroying vast numbers of care sector jobs and placing public hospitals, along with schools, under even greater strain.

What is required is not just an industrial fight but a political one. Doctors, like all health workers, confront the reality that a decent public health system is incompatible with the capitalist system, under which all human needs are subordinated to the profit interests of big business.

Such a struggle is inseparable from the broader fight by the working class for a socialist reorganisation of society, in which high-quality healthcare is provided as a universal social right, freely accessible to all and with fair pay and conditions for all staff.



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