

New Zealand nurses prepare more strikes as healthcare crisis worsens

Tom Peters
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About 30,000 nurses, healthcare assistants and midwives in public hospitals around New Zealand voted earlier this month to hold another three nationwide strikes. The members of the New Zealand Nurses Organisation (NZNO) held an eight-hour strike on June 9 after rejecting a derisory pay rise offer of just 1.38 percent. The District Health Boards' offer was effectively a pay cut relative to inflation and contained nothing to address the staffing crisis in hospitals.

The Labour Party-led government announced a wage freeze in May for the next three years for the vast majority of public sector employees, including healthcare workers and teachers. The government is imposing severe austerity measures to make workers shoulder the burden of the economic crisis triggered by the COVID-19 pandemic.

Workers in New Zealand, as in other countries, are seeking to fight back. The main obstacle they confront is the unions, which support the government and function, as they do in every country, as the industrial police force for the state and corporations.

The first 24-hour strike is scheduled for July 29, followed by an eight-hour strike on August 19 and a 24-hour strike on September 9. In announcing these deliberately spread-out dates, the NZNO made clear that it is allowing time to return to negotiations with the DHBs, cobble together another sell-out deal and cancel the strikes.

On July 6 a union spokesperson said recent negotiations had "given us some hope a resolution can be found around pay and safe staffing." No details were given to support this claim.

The union bureaucracy is using similar tactics as in the 2018 dispute. Then, the NZNO cancelled one of two scheduled strikes and presented nurses with multiple offers that were essentially the same—a wage

increase of just 3 percent per annum, combined with empty promises of better staffing. The aim was to wear workers down, isolate them and convince them that no better deal was possible. The NZNO's 2018 deal set a benchmark for similar sellouts of doctors and teachers.

Three years later, the result is a worsening crisis in the healthcare system. Even though New Zealand has so far not experienced a major outbreak of COVID-19, the country remains extremely vulnerable, with only one tenth of the population fully vaccinated. The virus is spreading more rapidly than ever worldwide, with catastrophic consequences across Europe, in Indonesia, Fiji and many other countries. Through sheer luck, New Zealand avoided an outbreak last month when an infected person visited from Sydney, Australia, where the highly infectious Delta variant is has since surged.

Numerous reports show that NZ's hospital system is already overwhelmed with winter-related illnesses, revealing that nothing has been done to prepare for an outbreak of COVID-19.

The severe staffing shortage is placing both hospital workers and patients at risk. The government's border restrictions, some of the harshest in the world, have contributed to the crisis, since a significant proportion of New Zealand's health workforce are immigrants.

According to the NZNO, Auckland City Hospital has nearly 400 nursing and healthcare assistant vacancies. Last month, the Royal Australasian College of Surgeons told *Stuff* that nationwide "shortages in just about every part of the hospital system, from specialists and technicians through to administrative staff, are seriously affecting patient care at all levels." Surgeries, including for cancer patients, are being routinely delayed and cancelled because of the shortage of staff and beds.

On July 9, the Taranaki DHB told Radio NZ (RNZ)

that H?wera and Taranaki Base hospitals had “reached critical levels of demand” with “very high occupancy,” including cases of RSV (Respiratory Syncytial Virus).

The potentially deadly RSV has spread throughout New Zealand in recent weeks. Government statistics show there were 688 confirmed cases in the week to July 4, up from 538 cases the week before. The *New Zealand Herald* reported last week that 22 children were in intensive care or high dependency units with RSV or other respiratory viruses. A 63-year-old Auckland woman reportedly died on July 12, possibly from RSV-related complications.

Christchurch Hospital and Burwood Hospital have experienced record numbers of patients in the past week. To try and prevent the spread of RSV, the hospitals have limited visitor numbers.

Earlier this month the Counties Manukau DHB and Auckland DHB warned of longer waiting times for emergency care, and told patients to seek help from a general practice if possible. On July 1, RNZ reported that 11 sick babies were “being cared for in a playroom at Middlemore Hospital [in South Auckland] because it has run out of space in the regular wards.”

Stuff reported that Wellington Hospital’s emergency department was seeing “overcrowding at record levels.” The crisis has been escalating since March, with the department “often exceeding 100 percent occupancy.” DHB spokesperson Joy Farley said higher volumes of patients across the hospital meant emergency patients had to wait longer to be admitted to wards.

“It’s just unmanageable. It’s a ticking time bomb. Patients are going to die, especially the ones in the corridors,” one nurse told *Stuff*.

On July 12, TVNZ reported that patient Emma Maguire was told by Wellington Emergency Department staff that there was a seven or eight hour wait for her to get an X-ray for a suspected broken leg. She went home instead of waiting, potentially causing further injury. ED staff have issued a Provisional Improvement Notice to hospital management, saying that last Tuesday they were unable to see all patients, and there were no systems in place to manage patients safely.

Health Minister Andrew Little was booed off the stage by healthcare workers outside parliament during the June 9 strike, while trying to defend the

government. He has recently feigned concern for nurses, telling Newstalk ZB on July 7 that nurses “have been undervalued for so long.”

In fact, the government has rejected nurses’ demand for an immediate pay increase of 17 percent. As in 2018, Labour is again telling healthcare workers it does not have enough money to fix the crisis in the health system.

The government says it is working on a “pay equity process” to lift nurses’ salaries to a level comparable to male-dominated professions with similar workloads. This has been promised for more than three decades, but never implemented. In 2018, the NZNO cynically exploited the government’s vague pay equity pledge as an argument to vote for its sellout deal.

The crisis in the health system is the result of decades of underfunding, which has gone unopposed due to the unions’ suppression of any resistance by the working class. Before 2018, there had not been a nationwide strike by nurses since 1989.

A real fight against government and corporate austerity requires new organisations: rank-and-file workplace committees run democratically by workers themselves. The International Committee of the Fourth International is calling for an international alliance of such committees, independent of and opposed to the corporatist trade unions and the entire political establishment, including Labour and its allies.

Above all, workers need to fight on the basis of a socialist perspective to abolish the profit system and place the resources of society under workers’ control. The government’s lie that there is no money for decent healthcare services should be rejected with contempt. The tens of billions of dollars hoarded by the super-rich and the banks must be redirected into hospitals, schools and other vital public services.



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