

Victorian nurses: Oppose union-government wage cuts! Build rank-and-file committees to fight back!

Health Workers Rank-and-File Committee

29 May 2024

Last week, nurses and midwives in Victoria delivered a strong message of opposition to the state Labor government's union-backed attempt to impose further real pay cuts after an effective eight-year wage freeze.

The overwhelming "no" vote by 3,000 health workers at the May 20 meeting dealt a blow to the Australian Nursing and Midwifery Federation (ANMF) leadership, which had sought to ram through the rotten deal with a campaign of secrecy, censorship and obfuscation.

The Health Workers Rank-and-File Committee hails the decision of Victorian nurses and midwives to stand up to the ANMF leadership and reject the wage-cut deal. But we warn that this is only the first step.

The shock of rejection has not affected the bureaucracy's determination to impose a sell-out deal in accordance with the state Labor government's punitive wage policy.

That is clearly expressed in their refusal to reinstate "Stage 2" industrial action measures. These were shut down mere hours after they began on May 17, based on the union's claim that Labor had made an offer "worth considering." That this was a fraud became evident by the fact that workers were given no details about this deal until the mass meeting on May 20 where they were expected to vote on it.

The anti-democratic methods employed by the union bureaucracy inside the meeting were also on stark display outside. When Health Workers Rank-and-File Committee members and supporters tried to hand out leaflets warning nurses and midwives that a betrayal was being prepared, they were accosted by security guards and more than a dozen police were called.

Having now unequivocally rejected this "offer," workers remain stripped of the right to carry out the industrial campaign they voted for. This is a travesty! Far from leading the nurses' struggle, the ANMF bureaucracy is working to sabotage and curtail it.

Hoping that the union leaders respond to nurses' depth of opposition and feeling is entirely futile. They will try to secure the wage-cutting deal through behind-the-scenes manoeuvres in league with the government.

This means that nurses and midwives need to build rank-and-file committees independent of the union leaders to advance the struggle for real improvements to wages and conditions. Through these committees, workers can fight for demands based on their

actual needs, not what the government says is "affordable."

Such committees should insist that "Stage 2" measures, including bed closures and work stoppages, are immediately resumed as the first phase of an industrial and political struggle against the state Labor government.

The ANMF bureaucracy is doing the opposite, intensifying its campaign to ram through the deal, holding workplace-level meetings across the state. Their hope is that, isolated in small groups, nurses and midwives can be deceived into believing that last week's "no" vote was merely a misunderstanding.

Rattled after last week's meeting, ANMF state secretary Lisa Fitzpatrick hit out at workers, insinuating that the highly educated professional nurses and midwives present had not been "able to grasp the concept" of the deal's convoluted and largely hypothetical pay "rise."

The union claims the offer would have delivered "wage increases of approximately 18 to 23 percent over four years."

In fact, the only concrete wage rises included were 3 percent per annum nominal increases, well below the official 3.6 percent inflation rate, and therefore cuts in real terms.

The bureaucracy's deliberately opaque calculations appear to depend on the outcome of the aged care work value case currently before the Fair Work Commission (FWC). They claim this will deliver a pay increase of "between 4.5 percent and 12.3 percent during the life of the agreement." However, there is no guarantee that any or all of such an increase, even if it is awarded, would be applied outside of aged care.

Furthermore, the work value case premise is to address systematic previous underpayment, which was overseen and enforced by the ANMF and other health and aged care unions. Claiming it as a component of pay rises in an enterprise agreement is a fraud.

In addition, full-time workers would receive payments of up to \$6,100 this year and \$1,000 next year, with less for part-time and casual workers. Using one-off payments as a "sweetener" to impose sub-inflationary wage "rises" ensures that nurses and midwives will continue to fall further behind in real terms.

Moreover, the payments are insufficient to compensate for current inflation, let alone losses sustained in past years under previous union-Labor agreements. Victorian public sector nurses and midwives had not received a pay rise since a 3 percent

increase in December 2022, less than half the official inflation rate of 7.8 percent.

Over the course of the last four-year enterprise agreement imposed by the ANMF, weekly pay for a first-year registered nurse (RN) has increased from \$1,188.40 to just \$1,298.60. Had this risen in line with the consumer price index (CPI), first-year RNs would now earn \$1,392.70. In other words, they are almost \$100 per week worse off in real terms.

Contrary to Fitzpatrick's slander, the "no" vote reflects the increasingly clear "grasp" these workers have of what they confront: yet another union-government attack on wages, as the cost of living continues to rise, especially for essentials such as housing and utilities.

Over the three years to December, real wages across Australia fell by an average of 5.1 percent. Underscoring the leading role of the union apparatus in enforcing these cuts, the decline was even sharper, at 6.1 percent, in the public sector, where union coverage is highest.

Under these conditions, the "no" vote by Victorian nurses and midwives expresses a clear sentiment: "We can't live like this anymore!"

Hundreds of thousands more public-sector workers in Victoria and throughout the country are in a similar situation. In Victoria alone, more than 5,000 paramedics and a similar number of firefighters, as well as thousands of TAFE educators, are currently undertaking or preparing industrial action in opposition to the Labor government's wage cuts.

The situation is particularly stark, however, for health workers, for whom the decline in real wages has been accompanied by a massive increase in workload, pressure and safety concerns over the past four years.

The ongoing COVID-19 pandemic, allowed to flourish by the profit-driven removal, spearheaded by Labor governments, of even the most elementary public health protections, has exacerbated already chronic understaffing and underfunding and brought the hospital system to its knees.

These same conditions, which produced last week's "no" vote by Victorian nurses, are also stoking an atmosphere of incipient rebellion against the union bureaucracy elsewhere.

Last month, 1,200 public sector nurses and midwives in New South Wales (NSW) demanded that the Nurses and Midwives' Association (NSWNMA) hold a special general meeting to discuss raising their wage rise demand from 15 percent to 30 percent.

While the NSWNMA bureaucracy was able to undermine the meeting and block a vote, the experience revealed a strong current of oppositional sentiment among workers, fuelled by bitter experiences of betrayals by the unions in previous years.

It also shows that anger alone is not enough. In order to take on the union bureaucracy, workers need new organisations of struggle. Rank-and-file committees need to be built in every hospital and health facility in order to fight for demands based on workers' actual needs.

Through a network of rank-and-file committees, nurses and midwives in Victoria can link up in a unified struggle with their counterparts in NSW and elsewhere, in health and more broadly.

The Health Workers Rank-and-File Committee proposes the

following as a starting point:

- Immediate across-the-board pay increase of 30 percent. Index wages to the current cost of living and introduce automatic monthly cost of living adjustments.

- Mandatory and enforced minimum nurse-to-patient ratios throughout all hospitals, as determined democratically by health workers based on what is required.

- Implement public health measures to combat COVID-19, including free, high-quality N95s for all staff and adequate ventilation/air filtration. Reinstate paid pandemic leave so workers have ample time to recover and are not under financial duress to work while possibly infectious.

- Immediate hiring of thousands of health workers to end the current punishing workloads.

- Massively expand spending on public health and education. End the privatisation of essential social services and place all hospitals under public ownership and workers' control.

This fight requires an understanding of what workers are up against. The slashing of public sector wages by Labor governments at state and federal level is not an isolated process. It is part of Labor's broader austerity agenda, aimed at forcing the working class to shoulder the burden of the cost of the deepening capitalist crisis and the descent into war.

This underscores the need for a political struggle against Labor, the unions and all other representatives of the capitalist profit system, which is fundamentally incompatible with the basic social rights of ordinary people, including access to high-quality public healthcare, with decent pay and conditions for workers.

This poses the need for workers to fight for a political alternative, socialism: the reorganisation of society, by the working class, to meet social need, not private profit.

The Health Workers Rank-and-File Committee offers every assistance to nurses and midwives in their fight and in the development of rank-and-file committees.

Contact the Health Workers Rank-and-File Committee today to get involved and discuss these critical questions.

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