

The way forward in the Australian psychiatrists' dispute: A unified struggle of health workers

Health Workers Rank-and-File Committee
30 January 2025

The protracted dispute between the New South Wales (NSW) Labor government and public sector psychiatrists raises critical issues for all health workers.

There is seething anger among the specialists over inadequate pay and a massive staff shortage. But that opposition has been led into a dead end by the Australian Salaried Medical Officers Federation (ASMOF), which promoted a mass resignation campaign, supposedly to try and pressure the state Labor government to grant concessions. That perspective failed. With the government intransigent and the resignations now due, psychiatrists are being left to make an individual choice.

The Health Workers Rank-and-File Committee (HWRFC) says that staying or resigning as an individual is not the real choice facing psychiatrists. The real choice is accepting defeat and the onslaught against the public health system, or taking up a unified struggle involving all health workers, against the government and the subordination of health to privatisation and austerity.

The HWRFC includes doctors, public hospital and mental health nurses, pathology workers, and ancillary health workers. Like NSW psychiatrists and every section of the public health workforce, our wages and conditions are under attack. That is why we are striving to establish a network of rank-and-file committees in hospitals and health facilities, controlled by workers themselves, to coordinate the fight against this profit-driven assault.

Our perspective is diametrically opposed to that of ASMOF, whose resignation campaign cuts psychiatrists off from other doctors, including the rest of the union's 15,000 members and other health workers, and forces the specialists to act as isolated individuals.

ASMOF promoted illusions that the resignation threat would force the government to meet psychiatrists' demands, including for a 25 percent pay rise, without the need for any organised industrial action. In fact, Labor has not blinked, even after more than two-thirds of the already depleted workforce—121 of the state's 416 staff specialist psychiatrist positions were unfilled before this dispute—handed in their notice.

Unmoved, the Labor government has insisted that the impact of the resignations can be negated through greater use of locums, deals with private hospitals to take on public mental health patients, and the imposition of higher-level duties upon nurses and other health workers.

In the face of this intransigence, the ASMOF bureaucracy continues to issue plaintive appeals to the Labor government. As recently as January 21, the union declared, “[NSW Premier] Chris Minns can still

save our public mental health system.”

What a fraud! The NSW Labor government, along with its counterparts in other states and federally, is utterly hostile to the demands of any section of workers for real improvements to wages and conditions. With the cooperation of the union bureaucracies, the Minns government is seeking to impose its woefully inadequate 9.5 percent-over-three-year pay “rise” throughout the public sector, including through resort to the industrial courts to shut down and declare illegal strikes and other industrial action.

The Industrial Relations Commission (IRC) and its federal counterpart, the Fair Work Commission, are not “independent umpires,” as governments and unions frequently claim, but anti-worker tribunals tasked with suppressing workers' struggles and imposing the demands of corporations and the state.

Psychiatrists be warned! The upcoming IRC case will resolve none of your issues. It will be used to entrench the country's lowest pay in the field for another three years, worsening the already chronic shortage of staff. Sharp conclusions should be drawn from the fact that ASMOF's only criticism of the case is that its March 17 start date does not come soon enough.

Meanwhile, the mass resignation of psychiatrists has been seized upon by the government as an opportunity to accelerate the further privatisation of public mental health.

Labor's so-called “contingency measures” were immediately welcomed by Brett Heffernan, chief executive of the Australian Private Hospitals Association. Salivating over future profits, he said the government's proposed contracts with private hospitals had “the potential to drive significant reforms in the way mental healthcare is delivered in NSW and, indeed, nationally.”

Health Services Union (HSU) secretary Gerard Hayes declared that “every crisis is an opportunity” and that allowing “the broader workforce” to take up the duties of staff psychiatrists would “ensure tax payers get maximum value.”

In other words, the union leader, also an influential Labor Party member, is championing the destruction and reorganisation of the public mental health system, and a massive increase in the workload of a section of the workers he claims to represent, in order to slash the health budget.

This is not an aberration, but an expression of the role of all trade unions as an industrial police force, enforcing the demands of governments and big business and suppressing any opposition by workers.

While the NSW Nurses and Midwives' Association (NSWNMA)

has publicly criticised Labor’s “contingency measures” and directed members not to perform duties outside their field of expertise, the union leadership has done nothing to mobilise its membership against the government’s attack on staff psychiatrists and the mental health system.

The reality is that the HSU and NSWNMA bureaucracies oppose a real pay rise for psychiatrists for the same reason as the Labor government—because it would undermine their continued suppression of the broader struggles of health workers.

The catastrophic state of NSW mental health is undeniable—75 percent of psychiatrists report symptoms of burnout, while people with mental illness presenting to emergency departments wait more than eight hours, on average, before being admitted to hospital.

This is a product of a decades-long assault on and sweeping privatisation of mental health care, which began in earnest with the Wran Labor government’s 1983 Richmond Report. Seizing on the outdated and oppressive conditions in the state’s mental asylums, this “reform” program called for and sanctioned the closure of these facilities across Australia over the next ten years. As a result, many people with mental illnesses were forced into dilapidated boarding houses, homelessness or the prison system, dependent on public hospitals and chronically underfunded community health providers for mental health care.

The situation in mental health is only one sharp expression of the crisis throughout public health, which is in its deepest meltdown in decades. Every department lacks adequate staffing and resources as a result of decades of union-enforced government funding cuts and privatisation. This has been exacerbated by the ongoing COVID-19 pandemic and the decision of federal and state governments to scrap all safety measures and let the virus rip in the interest of corporate profits.

As such, the demands of NSW psychiatrists for decent wages and an end to chronic understaffing cannot be won through protests appealing to the Labor government, including the individual act of resignation. The dire state of public health, mental and physical, can only be resolved through the joint fight of doctors, nurses and other health workers against the deepening attack on wages and conditions and the public health system itself.

This is impossible within the framework of ASMOF, the HSU, the NSWNMA, or any other union, all of which are tied by a thousand threads to Labor and the political establishment and which have enforced every cut to the wages and conditions of health workers and the public health system of the past four decades.

New organisations of struggle must be built. Through rank-and-file committees, independent of any union, psychiatrists along with other doctors, nurses, midwives and health workers can begin to work together, democratically, on a set of demands and a plan of attack.

As a starting point, these should include:

- An immediate pay increase of at least 30 percent across the entire public health workforce, with a monthly cost-of-living adjustment to maintain and improve workers’ living standards
- All vacant positions throughout public health must be filled, and their number expanded in line with what rank-and-file workers determine is necessary to provide high-quality physical and mental health care to all who need it, without need for staff to work beyond their ordinary hours. This will require a massive coordinated program to attract, educate and train new graduates in all disciplines
- Privatisation of health care must be halted and reversed! Existing private hospitals and other health facilities must be brought under

public ownership. Health care is a human right, not a profit centre!

The Labor government and the union bureaucracy will declare that these demands are impossible—there is no money in the budget. This is a lie! The resources exist, but they are being diverted into tax cuts for the wealthy and military spending, rather than into essential public services.

Posed before psychiatrists and other health workers is the need for a political and industrial fight against Labor, which, with the aid of the industrial courts and the unions, is determined to ram through further sweeping cuts to public sector wages and social spending.

Fundamentally, what they are up against is capitalism itself. The decades-long sell-off of large swathes of public health has produced vast returns for health corporations, insurance companies and investors, whose profits are derived from cherry-picking the most lucrative elective procedures and the wealthiest patients. Emergency medicine, as well as most complex care, is left to the public system, where extended delays and dire staffing shortages are an everyday reality.

This highlights the incompatibility of capitalism with the needs of society, including access to health care of the highest standard.

There is a political alternative, socialism, but it must be fought for. Hospitals, other health facilities and all essential public services, along with the major corporations and banks, must be placed under democratic workers’ control and ownership. Only then can society’s vast resources be directed towards meeting human needs, including free, high-quality medical treatment, with fair wages and conditions for all staff, instead of the demands of the financial and corporate elite.

The Health Workers Rank-and-File Committee urge psychiatrists, nurses and all other healthcare professionals to contact us today to discuss how to establish a rank-and-file committee at your workplace.

Contact the Health Workers’ Rank-and-File Committee (HWRFC):

Email: sephw.aus@gmail.com

Twitter: [@HealthRandF_Aus](https://twitter.com/HealthRandF_Aus)

Facebook: facebook.com/groups/hwrfcaus



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