Germany: 22,000 hospital physicians to strike

By Carola Kleinert
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On Thursday morning, March 16, thousands of physicians—members of the Marburger Bund trade union—stopped work for a day at 10 different locations throughout Germany. University clinics in Freiburg, Heidelberg, Munich, Würzburg, Bonn, Essen, Halle and Mainz were hit by the strike and a central demonstration was held in Mainz.

Marburger Bund Chairman Armin Ehl said physicians would return to work Friday to “make clear to employers the good will of the medical profession.” However, he said, an unlimited nationwide strike by all doctors would commence Monday, March 20. Earlier in the week, 98.4 percent of the 22,000 doctors employed in Germany’s state-run hospitals and university clinics voted to take strike action.

Emergency service for patients was established at all the hospitals closed by strike action on Thursday in order to ensure that seriously ill patients and the injured did not suffer as a result of the labour dispute. Representatives of the Marburger Bund stressed that the strike was not aimed against patients, but against public employers.

Collective bargaining talks, which began last year, have dragged on without any settlement between the Marburger Bund and the state tariff association (TdL), which represents state hospital and university hospital employers. The Marburger Bund, led by Frank Ulrich Montgomery, accused the state tariff association of “dogmatic inflexibility” with regard to the issue of doctors’ pay and the union broke off all discussions.

Of the total 146,000 doctors in public service (at a state and municipal level) around 100,000 are organized in the physicians’ trade union. Having severed links with the main public service trade union (Verdi) and the German Clerical Workers Union (DAG) in September of last year, the Marburger Bund is the sole union representing German doctors. With its strike call the Marburger Bund is pursuing its demand for basic salary increases of around 30 percent for hospital physicians, as well as improved working conditions and a “physician-specific collective agreement.”

Preliminary strikes by tens of thousands of hospital physicians in December last year in Berlin and other cities publicized the horrendous working conditions for German doctors. New working contracts, in particular for young medics, are usually temporary, with some contracts lasting no more than four weeks. Nightshifts are often followed by dayshifts without any breaks. Mandatory overtime, producing workloads of 70 hours per week, is common, and doctors receive neither extra pay nor compensatory free time.

The Marburger Bund has estimated that its members nationwide work an annual 50 million hours overtime with a “market value” of €1 billion. The enormous workload means that doctors have no time to train assistant doctors and nurses who could relieve them.

The average hourly wage of an assistant physician is currently €14 or US$17. This is nearly half the rate earned by a skilled worker in any other profession. Cuts have been also made in Christmas and holiday pay.

Moreover, a new regulation introduced on January 1, 2006, regulates the work performed by doctors in accordance with the cost-cutting measures the government is carrying out in the state-run health care system. The regulations put physicians under increased pressure to move the sick out of their beds in the shortest time possible in order to free up space for new patients. In addition, physicians are forced to do more paperwork for health insurance companies—leaving little or no time for research work, except during a physician’s “spare time.”

As a result of these miserable conditions, increasing numbers of physicians have felt obliged to seek work abroad, while health care has deteriorated considerably.
While the Marburger Bund is insisting on its demand for a 30 percent wage increase, it has signalled its readiness to the TdL to come to an arrangement over the latter’s demand for an official working week of 42 hours instead of the current 38.5 hours. In fact, an actual 42-hour workweek would represent a real reduction for almost all hospital physicians. On the other hand, the compensation offered by the state employers amounts to an effective reduction in salary, according to trade union spokesperson Athanasios Drougias.

The main TdL negotiator, Hartmut Möllring (finance minister for Lower Saxony from the Christian Democratic Union—CDU), who is taking a hard line against the current public workers’ strike, denounced the walkout by the physicians and declared that he did not have the slightest sympathy for their demands.

A number of politicians and media spokespersons have also condemned the doctors for being “unrealistic.” Social Democratic Party (SPD) health expert Karl Lauterbach described the physicians’ strike as “the most brutal attempt to recruit members by a trade union I have ever seen.... The winner of the strike is already certain, i.e., the Marburger Bund.”

If the Marburger Bund has a partial success with its wage demand, clinics are threatened with additional costs running into the hundreds of millions—money which they simply do not have, according to media reports and commentaries. These same commentators have endorsed the government’s previous health service reductions.

With astonishing openness, politicians from virtually all political parties and many media commentators have demanded that the crisis of the German health system—which has been drastically intensified by government measures aimed at relieving costs for big business—should be borne jointly by hospital employees and patients. This is the significance of the demand that physicians must make “their contribution towards the financing of the health system.” At the same time patients, as individual citizens, are also called upon to finance a better, optimized health system.

Instead of embracing the predominantly young physicians, leaders of Verdi—the public sector workers union that has been engaged in a six-week strike against the same employers’ organization, led by chief negotiator Möllring—have deliberately sought to undermine solidarity between the two sections of struggling workers.

Frank Bsirske, the chairman of Verdi, denounced the doctors’ wage demands as “completely exaggerated and unrealistic.” Acknowledging that there was widespread public sympathy for doctors required to work such long shifts, Bsirske asked Verdi members demonstrating at the University of Bonn last Thursday, “Are the physicians less tired after 60 hours work, when they receive 30 percent more money?”

It is not the first time that Verdi officials have sought to drive a wedge between public sector workers and physicians. Last summer Verdi health expert Heike Spiess criticized the doctors’ wage demands as “utopian and lacking in solidarity,” because achieving them would increase “the burden on other occupational groups.”

At that time Verdi and the Marburger Bund were still linked in a common collective bargaining process. When the Verdi leadership sought to arrive at a deal with employers that excluded the Marburger Bund, the latter quit the tariff community and emerged as a rival to Germany’s biggest public sector trade union.

At the time the World Socialist Web Site wrote: “Verdi is revealing its true face to hospital physicians in a much clearer fashion than was the case in many earlier labour conflicts. Attempts by the trade union to isolate the striking physicians and denounce them as some sort of privileged layer must be rejected. Their protest actions are the prelude to increasing resistance by university graduates and qualified technicians, whose working and living conditions barely differ from other sections of workers—and unemployed persons. They deserve complete solidarity.”

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