



56. The ethics of a physicians' strike in a labor dispute

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Ostensibly, a workers' strike does not go hand in hand with medical care. The unwritten contract between physicians and the public demands from us, physicians, to treat patients every hour of every day. Therefore, strikes should not be a part of our professional culture. Going on strike, a unilateral action taken by physicians against their employers during a financial conflict, is naturally met with harsh criticism.

The main point made against strikes in the healthcare system is that striking is an aggressive move that benefits the powerful side rather than the side of justice, and therefore is immoral. According to those opposed to strikes, striking harms a third party, namely the sick, patients – an innocent and captive public that cannot decide the fate of the strike. The purpose of strikes is to use patients to pressure employers and decision makers who may not personally suffer from the strike. All this could harm the public's perception of medicine as an altruistic profession that lies above the gray reality of labor disputes.

The transition from the Hippocratic age of medicine to the modern age of "managed medicine" transferred the responsibility for the patient from individual physicians to society at large, through employers and the State. Therefore, physicians are forced to direct their frustration with a collapsing healthcare system towards this new target [that is, employers and the State], and sometimes the only choice is to wield the weapon of striking.

There is sometimes a very blurry line between striking to benefit patients and striking to benefit physicians. When physicians strike due to unacceptable hospitalization conditions, overcrowding in the hospital departments, abbreviated hospitalization and rapid turnover of patients, a needed diagnostic or treatment method or even the time allocated to examining a single patient in the clinic, are they striking for their "terms of employment" or are they striking for the benefit of the patients?

Those that support allowing strikes in the healthcare system argue that those opposed to strikes hold physicians to a higher moral standard, and that physicians, like all people in society, have the basic right to strike in order to better their conditions of employment. They argue further that physicians should not continue providing less-than-optimal care to patients, even if achieving an improved standard of care entails the many short-term difficulties of an ongoing strike. Strikes, according to their supporters, will boost the awareness of the public, employers and state authorities to the flaws and deficiencies of public healthcare, which in turn will improve it.

The achievements of the latest physicians' strike include both an increase in physicians' income and a dramatic change in the quality and professional personnel in distressed medical professions and in hospitals in the periphery. This serves as further proof that improving physicians' conditions of employment is inevitably connected to improvements



in the quality of care given to the public.

The position paper regarding the ethics of physicians' strikes as a means [of pressure] in a labor dispute is intended to bridge the inherent tension between the physicians' commitment to society to provide continuous care and their right to protect their conditions of employment and the quality of the healthcare system in which they work.

Position paper

1. In general, physicians are required to provide medical care to any person at all times.
2. The social contract between physicians and the public imposes a responsibility on physicians to ensure that the healthcare system is strong and fair and is able to provide proper and impartial care.
3. Strikes in healthcare services are not only aimed at enhancing physicians' conditions, but also at improving patients' well-being, since these goals are intertwined.
4. The legitimacy of a strike in healthcare services, therefore, derives from the desire to improve the healthcare system and benefit the patients.
5. There is inherent tension between the physician's commitment toward society at large and going on strike. Therefore, a strike should always be the last resort after all other avenues have been exhausted.
6. Before striking, physicians should consider the anticipated damage to third parties in the specific circumstances versus the benefit to the strikers and the public.
7. With no other adequate option given by the state or employers, physicians can strike in a proportionate and careful way.
8. During the strike, the provision of emergency healthcare services and other vital services should be ensured.
9. During the strike, the maintenance of systems for monitoring and examining unusual cases should be ensured in order to minimize the harm done to patients.
10. During the strike, a public information system should be in place to provide the public with up-to-date information on the goals of the strike, the demands of the struggle, the actions taken by strikers and their effect on patients.
11. Physicians taking part in strikes are not relieved of their ethical and professional commitments to their patients.