**Future Archives Transcript:**

**‘Nursing Strike Tropical Diseases Ward’ by Gillian Lever**

**Audio Info:**  
(2:58mins)

Interview with nurse on Tropical Diseases ward, Austin Hospital, Melbourne. This recording was made during the Carer’s Strike in 2025. Carrie French is a nurse working on the Emergency Essential Clinical Services (EECS) Team at the Austin Hospital, to maintain the most important clinical services while many healthcare professionals are on strike. This recording was made by a journalist at The Herald Sun, and is part of researcher Anna Jones’ archival web resource The Care Revolution.

**[FUTURE ARCHIVE I.D.]**

[English]:

Future Archive File 114

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Future Archive File 114

**[Background sounds of an Emergency Ward]**

**[Soft beeping]**

**Nurse Carrie French:**

Yeah, you can follow along on my round if you like. I’m covering this half of the Trop Diseases ward today. Before all this I was in Orthopaedics but the hospital has closed those wards while the strike’s on. I haven’t done infectious diseases since my training days, but here we are!

I think it’s ridiculous, by the way. I know our wages are low and our patient ratios are getting worse and worse, but that’s just nursing, in my opinion. There are more pressures on health care everywhere in the world, with people getting older, and the polar malaria spread.

You don’t see nurses in the UK complaining and leaving their posts, do you? And they’ve got way worse ratios than us, always have.

If you didn’t sign up to work hard and help others, then why are you in nursing in the first place?

My conscience just wouldn’t allow me to leave these patients, you know?

Before the orthopaedics wards closed, I had a lady who was getting a hip replacement. She told me she was scared to be admitted, because she had heard that nurses were about to walk off the wards. She’s got Parkinson’s disease, and if she misses a dose by an hour or so, she freezes up and can’t move. She was petrified that she’d be left alone, frozen in her bed alone. Well, she got her hip replacement, but she was right, you know?

There is no way I can get my drug rounds done in time, looking after a dozen patients at once, and mistakes keep happening. Yesterday we had a Code Blue and I had another patient have a seizure, because he had missed 2 days of his meds.

Two days!

**[Coughing patient in background]**

There’s only one Code Blue team at the moment, so they had to split in two to try and attend to both patients at once. It’s unworkable.

At the moment I’m just dealing with so much stress. I’ve got patient families complaining, demanding that I do something. I can’t do anything!

I don’t agree with this in the first place, and I’m certainly not going to be able to swing the union’s opinion, I’m not even a member. They’re a bunch of hypocrites as well. Two months ago they were denying their members would even strike. Patients are more important, they said!

Now look at them.

Once they saw the rallies in the streets and the public we’re getting behind the child care staff and the nursing home staff, well then they changed their minds and they decided that the patients weren’t more important after all.

**[Beeping sounds get louder and stronger]**

I’ll tell you this though, all those patients that miss their pain medication, or get the wrong antibiotics, or who die from these unethical actions, their blood will be on the union’s hands.

Also I can only imagine the law suits that will come from this, once they’ve given up shouting slogans in the street and gotten back to work.

Their rallies won’t seem too smart once they’re facing a negligence charge, I can tell you that!

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