

Over 700 Joliet, Illinois nurses go on strike for better wages and safe working conditions

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6 July 2020

On July 4, Independence Day, 720 nurses at St. Joseph Medical Center in Joliet, Illinois went on strike, their first walkout since 1993, to demand adequate staffing, decent pay and an end to management intimidation. The coronavirus pandemic has only further exposed the precarious working conditions faced by many health care workers, who are asked to place themselves on the frontlines, but in return are hit with furloughs and wage freezes.

Nurses at St. Joseph Medical Center voted 558 to 53 to authorize a strike against AMITA health system. A nominally nonprofit Catholic and Adventist health system founded in 1973, AMITA Health is one of the largest health systems in Illinois, with approximately \$4 billion in annual net patient revenue from 19 hospitals and more than 230 care facilities. The conglomerate operates in nine states, with 45 hospital campuses and more than 8,200 beds, which provide treatment to over five million patients a year.

Even before the pandemic, nurses across the country were fighting against rising patient-to-nurse ratios forced upon them by hospital administrators. With the pandemic, they now face the deadly consequences of understaffing and the lack of protective equipment. At least 735 frontline health care workers have died from COVID-19 in the US, according to a study by the *Guardian* and *Kaiser Health News*, and an estimated 78,000 have tested positive.

Nursing staff are being asked to assume more responsibilities, such as accepting more shifts or longer ones, leaving them exhausted and placing their patients at risk of injury or errors in treatment.

The strike in Joliet follows on the heels of a ten-day strike of 500 nurses against HCA Healthcare subsidiary Riverside Community Hospital in California over unsafe conditions and understaffing. The nurses at Riverside are set to return to work today with no indication that their demands have been met.

Strikes and other actions by health care workers are becoming a growing international phenomenon. Nurses in Zimbabwe went on strike last week for the second time this year over poverty wages and a lack of personal protective

equipment (PPE). Also last week, doctors treating coronavirus patients in Sierra Leone launched a strike over unpaid bonuses and the government's misuse of funds for the pandemic response. Last month, health professionals in Piauí, in Brazil's Northeast, started a statewide indefinite strike over the failure of the Health Department to give a promised 40 percent risk bonus, as well as the low quality PPE provided them.

Strikes in the health care sector are part of a global response of workers across industries to the dangers posed by government back-to-work drives, placing the health and lives of workers at risk. Workers are going on the offensive in defense of their working conditions and rights. In the US, shipyard workers at the Bath Iron Works in Maine are continuing their strike over the company's paltry wage offer and plans to bring in contract labor.

On June 29, more than 2,000 Amazon workers launched a two-day strike at six facilities in Germany to protest the company's refusal to provide adequate protection from the coronavirus. On July 1, thousands of delivery workers struck in more than 10 Brazilian capitals, as well as in cities in Argentina and Mexico, demanding better working conditions.

On July 2, hundreds of thousands of Indian coal miners employed by government-owned Coal India Limited launched a three-day strike against the privatization plans of Prime Minister Narendra Modi's government. Some reports indicate more than 500,000 full-time and contract workers have downed tools.

During the surge of the coronavirus pandemic in Illinois in April, nurses at AMITA St. Joseph were working at four-to-one and five-to-one ratios with COVID-19 patients, when the hospitals, by their own directives, had recommended one-to-one care of COVID-19 patients who required intensive treatment. The chaotic working environment stemmed from insufficient numbers of health care workers in the emergency department and the ICU [intensive care] and COVID units. Many nurses fell ill after contracting infections, aggravating the situation.

In a statement, the INA said, “The nurses of St. Joseph Medical Center have called a strike due to unfair labor practices committed by the hospital and failure to reach an agreement regarding safe staffing, preservation of sick leave, PTO [paid time off] benefits, and fair wages. St. Joseph Medical Center has instead been granted bailouts by the federal government and sold out its workers, including wage freezes and failure to address unsafe work conditions. To this, nurses say NO! In 2019 alone, nurses documented 205 days of unsafe patient care conditions.”

Despite these deplorable conditions and nurses’ readiness to fight them, both the INA at St. Joseph Medical Center and SEIU Local 121RN at Riverside Community Hospital have worked to isolate the strikes and defuse the tide of nurses’ anger by promoting the lie that appeals to corporate management and the Democratic Party will lead to an improvement in working conditions. This is the same pattern that has led to the defeat of countless nurses’ struggles, including the University of Chicago nurses’ strike last year and the protests this spring in Florida against HCA Healthcare.

In all of these cases, the unions have worked to prevent work actions from expanding into a united and broad coalition of health care workers across hospital systems, state lines and national borders. The demands being raised by nurses are, in fact, universal, as health care workers fight for safe conditions for their patients and themselves, adequate access to PPE and N95 masks, paid sick leave and decent wages and conditions.

In the US, the giant health care conglomerates have lost revenue due to the cutbacks in elective surgeries and other services. The Illinois Health and Hospital Association has estimated that hospitals statewide have been losing approximately \$1.4 billion a month. Hospitals are now seeking to increase their bottom line by extracting more profits in the form of attacks on nurses’ and other health care workers’ wages and working conditions.

In general, these strikes follow a predictable playbook. After several weeks of fruitless negotiations, a strike vote is called and strike action authorized, largely to allow nurses to blow off steam. Ample notification is provided to the hospital to divert ambulances, cleanse its census of patients, cancel elective surgeries and recruit “fill-in” nurses from strikebreaking companies to manage patient care. The strike then proceeds for a fixed time period, after which some modest proposals are agreed that are termed “the best offer we could get.”

AMITA St. Joseph, having received fair warning of the nurses’ strike, has used recruiting agencies to find temporary replacements, some from out of state, to staff the hospital during the strike. The most recent offer AMITA

provided to union negotiators included a three-year wage freeze at current pay levels, with a \$500 bonus for full-time workers and \$250 for part-time workers. The health system has since said it rescinded the wage freeze, but this did not prevent the nurses from proceeding with their strike. AMITA has also requested that the nurses withdraw their unfair labor practice complaints.

The INA is countering with a demand for yearly wage increases of 2 percent, 3.5 percent and 3.5 percent, which is barely above the rate of inflation. The union is requesting an extended illness bank for current nurses and new-hires that would allow them to receive pay for illnesses and injuries that extend beyond four days. Additionally, it is requesting the introduction of a staffing minimum for specialty care (with a maximum limit of four), a 150 percent increase for extra shifts considered critical, and mutual agreements on schedule changes. Even this pittance of demands has been met with intransigence by St. Joseph officials, who cynically praise nurses who are risking their lives on a daily basis as “heroes,” but in fact regard them with contempt.

As the global coronavirus pandemic continues to spiral out of control, nurses at St. Joseph and other health care workers should take their cue from Fiat Chrysler workers in Michigan who have set up rank-and-file safety committees to protect themselves from deadly working conditions during the pandemic and to unite their struggles against the auto companies. The procorporate unions cannot be relied upon to carry out this fight.

Control over the response to the pandemic must be taken out of the hands of the capitalist class. The struggle of global health care workers, as part of mass action by the working class coordinated on an international scale, is necessary to bring the pandemic under control and save the millions of lives that are now at risk.



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