

Nurses in North Dakota pressured to work despite being infected with COVID-19

Benjamin Mateus
13 November 2020

On Wednesday, the North Dakota Nurses Association (NDNA) released a statement objecting to a recent order amended by the interim state health officer Dirk Wilke, with support from Republican Governor Doug Burgum, that allows asymptomatic health care workers infected with COVID-19 to continue to work in the COVID-19 units of their hospitals.

Presently, the state's hospital capacity has reached over 100 percent and the order, according to the governor's office, aligns with crisis guidelines set by the Centers for Disease Control and Prevention.

The union statement reads, "The North Dakota Nurses Association does not support the practice of allowing nurses who are asymptomatic, COVID-19 positive to care for patients as a long-term solution to mitigate staffing shortages. We recognize that this action was recently taken as a crisis standard of care in order to continue providing patient care."

The toothless announcement merely suggests that the state should attempt to return to a non-crisis standard of care as soon as possible, while COVID-19 positive nurses who are well enough can decide for themselves if they will provide care to their patients. The union also asks that the employers not retaliate if the nurses choose not to work—an admission that such coercion is very likely. And NDNA recommends the state adopt other public health measures, such as a mask mandate, physical distancing, and better hygiene, to help reduce the demand on the health care system.

It is reprehensible that nurses and health care workers should even be placed in such a predicament by the health care systems a second time around after ample warnings were made of the fall surge and for time for public health measures to be in effect such that when sentinel trigger events were reached, measures could be enforced to control community transmission.

By not immediately ordering a stay-at-home mandate and shutting businesses down to give the health care system the necessary breathing room, the state's lack of action is tantamount to reckless endangerment. Encouraging nurses to continue to work despite being infected is a further aggravation of this neglect. The claim that these infected nurses working on COVID units would not pose a threat to their own colleagues is astounding and a pernicious lie.

Perhaps even more egregious is the tepid plea by the NDNA for better public health measures from a state government so backward that it has not even issued a mask mandate. What is necessary is to demand a stay-at-home order across the state while politically arming nurses and health care workers by preparing for a general strike if these demands are not met. The NDNA is abdicating its responsibility to protect its members from the dangers they face and turning a blind eye to the criminal response to the pandemic.

In response to these developments, the rank-and-file nurses have provided their perspective on social media to events in North Dakota:

A nurse from Frederick, Maryland, wrote, "It's another way to say, 'Your lives and your families' lives don't matter.' Your governor won't issue a mask mandate. He doesn't see COVID as a problem. The man you folks elected to protect and serve believes that he has the right to require you to work until you drop. Think about the incredible disregard he has for you. He does not care if the citizens of North Dakota die. When I read his announcement yesterday [November 11, 2020], I was appalled."

A Three Rivers, Michigan nurse added, "I have heard that this is happening in other areas of the country as well, like Indiana and Georgia. They are not 'being asked.' They are being told that they will come back

and work the COVID units ... not a request, but a demand with a risk of losing their job if they don't comply.”

Another outraged nurse emphatically stated, “I don't know when nurses got it in their head the idea that they are supposed to be martyrs for the hospital organization. These facilities are businesses, and just like any other business, you are replaceable. If you work yourself to death for them, they will pass a card around for everyone to sign and have your position filled by the morning. We have to stop sacrificing ours for an entity that would NOT do the same for you. This goes for now and when there is not a pandemic.”

Providing context to the present health crisis across the nation, Dr. Leana Wen, an emergency medicine physician and contributing health expert on the coronavirus, explained, “The difference between what's happening now versus what happened before is that the virus is everywhere now. Before, there were just a few hot spots across the country. There were health care workers who could volunteer and go between different states. But when the virus is so widespread, we could very well ... run out of healthcare workers, which means that patient care will suffer. And we will be at breaking point in our hospitals.”

According to the COVID-tracking Project, North Dakota, a state with only 760,000 citizens, has 411 patients currently admitted to hospitals, up from 352 just a week prior. There were over 1,800 new cases yesterday, an increase of 18.8 percent over seven days. The state positivity rate stands at 15.3 percent. Close to 700 people have lost their lives, a more than 100 percent increase from just a month prior.

Behind these statistics lie hardships, heartaches, and the inevitable growth of working class resistance to this public health catastrophe.



To contact the WSWWS and the
Socialist Equality Party visit:

[wsws.org/contact](https://www.wsws.org/contact)