

Nurses union in New York state ends strikes as COVID-19 hospitalizations surpass 100,000 for first time

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Strikes by thousands of nurses in Upstate New York against inadequate safety measures and low wages were ended yesterday by the New York State Nurses Association (NYSNA). Also on Wednesday, US hospitalizations surpassed 100,000 for the first time, and health officials expect the winter months to bring even higher numbers.

Nearly 2,000 nurses at the Albany Medical Center in the state capital launched a 24-hour strike and are now being locked out by hospital management. Another 200 nurses at the Montefiore New Rochelle Hospital in Westchester County, an early hotspot of the virus just north of New York City, conducted a two-day strike.

In both cases, nurses demanded adequate staffing levels, more supplies of reliable personal protective equipment and improved wages, benefits and working conditions. The union, however, ended both strikes without achieving any of the nurses' demands.

This is not due to any lack of militancy or popular support. On the contrary, the strikes generated widespread sympathy. The nurses who went on strike at two New York state hospitals Tuesday gave voice to the anger of millions of health care workers across the country and internationally who are battling unsafe working conditions in hospitals that are once again being overwhelmed with COVID-19 patients.

Strikes by US health care workers are part of a wave of struggles spanning almost every continent. Hundreds of health care workers in Chile took to the streets last Saturday to demand an improvement in working conditions and salaries as COVID-19 cases continued to surge across the Latin American country.

Messages on social media expressed solidarity and the striving of health care workers to unify in a joint struggle. "Nurses have to fight for the patients and themselves, because at the end of the day the hospital or institution does not care for the patients or the nurses," one nurse commented.

Another said, "Keep up the great work and stay united.

This is key not only for us as nurses, but more importantly for our patients. We are the eyes and ears for every single patient. ... the world is watching and you're standing up for every nurse, patient across this world. Let's go."

"Nurses in every state should have gone on strike at the beginning when it was obvious the toll this would have taken on the entire health care spectrum," another nurse said.

The New York state strikes are part of the growing resistance of health care workers worldwide. On Wednesday, nurses at Keck Hospital of USC (University of Southern California) held a protest to denounce management's efforts to prevent healthcare workers with symptoms of COVID-19 from staying home. Seven hundred workers in the Chicago area are in the second week of their strike to demand improved wages and PPE at 11 nursing homes owned by Infinity Healthcare Management. Other potential nurses strikes are brewing in California, Illinois, Massachusetts, Pennsylvania and West Virginia, according to alerts on the website of the strikebreaking firm US Nursing Corporation.

After joining NYSNA in 2018, nurses at Albany Medical Center have not been able to get a contract after 18 months of negotiations. Management's last offer, rejected by nurses, would do nothing to address chronic staffing shortages and only provide a 1.25 percent annual pay increase, plus a system of merit pay.

Albany Med President and CEO Dennis McKenna has arrogantly claimed that only a "vocal minority" of nurses wanted to strike and has hypocritically declared that "a strike in the middle of a pandemic for baseless reasons is totally irresponsible."

Management at Montefiore New Rochelle has been just as intransigent. Although the Montefiore Health System (MHS), one of the nation's largest, has received at least \$38 million in government bailout money, it has rejected nurses' demands, and like Albany Med, hired strikebreakers to replace striking nurses.

The NYSNA, which was given seats on the COVID-19 task forces set up by Governor Andrew Cuomo and New York City Mayor Bill de Blasio, has isolated these struggles, forcing nurses to take on powerful corporate interests and the state's Democratic Party political establishment on their own.

Before the pandemic, in April 2019, the union called off an impending strike by 10,000 nurses of three health systems in New York City—Mount Sinai, Montefiore and New York-Presbyterian—and agreed to a deal with three percent wage increases and the same vague promises to hire more nurses, which are routinely ignored by management.

Rather than conducting a real fight to mobilize health care workers, including the 42,000 members of NYSNA and far broader sections of the working class to win the nurses' demands, NYNSA President Judy Sheridan-Gonzalez, who works closely with the Democratic Socialists of America (DSA), has claimed that safe staffing levels can be won through appealing to Governor Andrew Cuomo and other Democrats in the state legislature, as well as the courts.

But Biden, Cuomo and the Democrats, no less than Trump and the Republicans, are beholden to the giant health care monopolies. In late March, both parties handed over \$175 billion to the largest health care systems, as part of the bipartisan CARES Act.

The state's Health Department recently released its "safe staffing" study, which found that hiring enough nurses to significantly lower nurse-to-patient ratios at hospitals and nursing homes was not economically feasible. As *Politico* reported, "The Cuomo administration report, which was released Aug. 14, determined the state would need to hire 70,000 more nurses and other caregivers at an annual cost of \$3.7 to \$4.7 billion to reach the ratios nurses were looking for—a cost the state deemed prohibitive in a defeat for the nurses." A series of lawsuits by NYNSA against two hospitals and the state over staffing levels were also thrown out of court.

New York State is home to 118 billionaires, according to Americans for Tax Fairness, with a combined net worth of more than \$600 billion. The higher end of the state's cost estimate is only six percent of the \$77.3 billion increase in New York billionaires' combined wealth during the first three months of the pandemic. Nationwide, while 280,000 people have died, including nearly 1,700 frontline health care workers, the billionaire investors who control the health care industry have made out like bandits during the pandemic, getting \$150 billion richer.

A recent report in *Newsweek* noted, "Healthcare billionaires have seen their wealth soar since the coronavirus swept the globe. Billionaires in the healthcare space bumped up their wealth by 36.3 percent between April 7 and July 31,

from a total of \$402.3 billion to \$548 billion, according to a new report by wealth managers UBS and professional services firm PricewaterhouseCoopers.

"The near-\$150 billion premium came as demands for key vaccines, medical equipment and treatments increased, with health services across the world left reeling due to ballooning case numbers."

The fight to protect health care workers and to attain the resources necessary to battle the pandemic requires building new organizations of struggle, which are independent of the unions, which are tied to the corporate-controlled parties and accept without question the whole system of for-profit medicine. In every hospital, nursing home and health care facility, workers need to form rank-and-file committees to enforce health and safety and mobilize broader sections of the working class in a common fight for the reallocation of resources to fight the pandemic, train and hire hundreds of thousands of nurses and to provide free and high quality health care for all.

At the same time, nonessential production must be shut down, with full compensation to all affected workers and small business owners, in order to prevent any unnecessary infections and deaths before vaccines are available to everybody and the virus can be contained and finally eradicated. To fight for this, the working class has to wage a political struggle against both corporate-controlled parties based on a socialist program, including the transformation of the giant hospital and health care chains and the pharmaceutical and medical device corporations into public utilities as part of a system of socialized medicine.



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