

Kaiser mental health therapists in Northern California to begin strike August 15

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Are you a Kaiser therapist? Tell the World Socialist Web Site what you are fighting for in next week's strike by filling out the form at the bottom of this article. All submissions will be kept anonymous.

As many as 2,000 mental health care workers at Kaiser Permanente, the largest health care provider in California, are set to strike Monday, August 15th. The strike action follows a 91 percent strike authorization vote in May after contract negotiations between the workers' union, the National Union of Healthcare Workers (NUHW) and the health care giant continued to stall.

The workers' key demands include higher wages, addressing the chronic understaffing plaguing Kaiser's mental health care division and compliance with state law guaranteeing patients timely access to mental health care. Kaiser mental health workers struck over the same basic issues in 2019 before the pandemic and in 2015. However, each time the NUHW called off the strikes without resolution to the fundamental issues. The growing anger of health care workers over deteriorating conditions has pushed the NUHW to call the first indefinite strike in its history.

To prepare to fight against any attempt by the NUHW to prematurely shut down their strike and force through a contract which falls well short of their demands, Kaiser therapists should form an independent rank-and-file strike committee, following the example of nurses at Kaiser and Stanford Health over the past nine months.

As workers across the US experience crushing inflation rates of more than 9 percent, the health care giant has not budged from its proposed pitiful 2 percent annual increase. This would represent an effective wage reduction given the historical inflation rates not seen in more than 40 years.

Chronic understaffing, another major concern of the workers, has led to conditions of severe overwork and left clinicians unable to provide appropriate care to patients. This has led to shocking turnover rates. Over the 12-month period ending in May, 377 mental health care professionals left Kaiser, more than double the amount the year prior. In a poll conducted by the NUHW, 85 percent of the workers listed an unsustainable workload as a reason for leaving, and 76 percent said another reason was the inability to provide timely care to patients. With a ratio of one clinician per 2,600 members, they are unable to reschedule patients according to the patient's needs, often having to wait six to eight weeks between appointments.

Kaiser, which made \$8.1 billion in profits last year and is sitting on \$56.7 billion in cash and investments, blames this understaffing on a shortage of health care professionals. But the real culprit is their unyielding pursuit of profit. Despite technically being a "non-profit" and therefore not paying income taxes, Kaiser gives enormous amounts in executive compensation. By 2019, the last year full records are available, Kaiser's CEO was paid over \$16 million a year in compensation, and there were 42 executives making over \$1 million each year.

It is not surprising that an institution that places profit above all—it is listed by the Fitch credit ratings agency as AA- thanks to its "track record of sound and consistent profitability"—was rated by the American Psychological Association (APA), the nation's leading association of professional psychologists, as the worst mental health care provider in the country.

Another longstanding issue in mental health care is the lack of attention it receives by the health care conglomerates. Therapists at Kaiser have diligently documented violations to a new regulation requiring

health care providers to provide followup appointments within two weeks if the patient's therapist determines it necessary. They filed a complaint letter to the Department of Managed Health Care (DHMC), the body that regulates health care and medical insurance in California. Workers provided evidence of the administrative hoops Kaiser makes them go through if they want to document their inability to reschedule a patient due to overloaded schedules. This includes having to meet with a manager for up to an hour to justify the need for a followup appointment.

The situation at Kaiser is yet another damning example of how the capitalist system's pursuit of profits is incompatible with the well-being of the population. Both patients and clinicians end up paying for the never-ending accumulation by the capitalist owners of the lucrative enterprise that is Kaiser Permanente.

The dreadful conditions experienced by the workers at Kaiser are shared by health care workers across the country as well as globally. Just this week 400 nurses at the Buffalo Veterans Affairs Medical Center in Buffalo, New York, and 150 health care workers at the Launceston General Hospital in Tasmania, Australia, walked out.

Protracted contract negotiations continue at other health care facilities. In Northern California, 8,000 nurses at Sutter Health, another major health care conglomerate, continue to work without a contract more than a year after its expiration. Despite the mounting anger of the working class, the unions working closely with the Democratic Party continue to sabotage the workers' struggles by calling ineffective one-day strikes, negotiating behind closed doors and pushing through sellout contracts offering wage increases well below inflation.

Health care workers at Kaiser and across the country face the same disastrous conditions exacerbated by the ongoing COVID-19 pandemic. But they also face not only management but pro-corporate union bureaucracies which have fought to isolate or prevent their strikes from taking place, including at Michigan Medicine, Stanford Health and Cedars-Sinai.

Last year the Alliance of Health Care Unions called off a strike of 30,000 Kaiser workers at the last moment, isolating building trades engineers already on strike. The unions forced through a sellout deal with

wages well below inflation and no commitments to safe staffing ratios, but earmarked \$50 million in funding for the Labor-Management Partnership and other lucrative sources of corporate funding for the union bureaucracy.

Kaiser therapists must draw the lessons from this experience. They are in a powerful position, and their strike will generate widespread support from health care workers and workers everywhere. But they cannot allow their strike to be isolated and betrayed by the NUHW. This requires the formation of an independent rank-and-file strike committee to assert democratic control over the course of the struggle and appeal for the broadest possible unity and support from across the state and around the country.



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