

15,000 Minnesota nurses begin statewide strike: Build rank-and-file committees to unite with health care workers in Wisconsin, Michigan, New York and California!

Health Care Workers Newsletter
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Are you a Minnesota nurse? Tell us about the conditions you face and what you think about uniting with health care workers across the country to fight for safe staffing and other improvements. Fill out the form at the end of the article. All information will be kept anonymous.

Today 15,000 nurses across Minnesota are beginning a three-day strike. The walkout, one of the largest health care strikes in recent years, is a powerful expression of the determination and fighting capacity of nurses and other health care workers in the United States and internationally. Health care workers everywhere want to end intolerable working conditions, the eating up of their meager paychecks by inflation, and the subordination of health care to corporate profit.

Of the 17 major strikes involving 1,000 or more workers this year, at least seven have involved health care workers. Some of the ongoing struggles include:

- In **California, 2,000 Kaiser Permanente mental health care workers** are entering their fifth week of an open-ended strike for safe staffing levels and access to health care by their patients. Another 22,000 Kaiser nurses are also facing a contract battle with the health care giant.

- On **Tuesday, 2,600 nurses at the University of Wisconsin (UW) Health in Madison** are beginning a three-day strike over understaffing, poor working conditions and union recognition.

- **Seven hundred nurses and other staff just ended a week-long strike at 14 nursing homes in Pennsylvania** to fight for substantial improvements in wages, staffing levels and working conditions.

- **6,300 nurses and medical staff at Kaleida Health in**

western New York are voting for strike authorization this week after working months without a new contract.

- **Over 6,200 nurses at Michigan Medicine at the University of Michigan, Ann Arbor** have already voted overwhelmingly to strike.

- **Over 50,000 nurses in New South Wales, Australia** carried out their fourth statewide strike to demand shift-by-shift nurse-to-patient ratios, staffing increases and a 7 percent pay increase.

What lies behind this upsurge of health care struggles?

The COVID-19 pandemic has killed and debilitated thousands of health care workers, leaving a deep psychological scar on those who remain. The health care executives who yesterday hypocritically hailed nurses as “heroes” refuse to allocate the necessary resources to pay nurses enough, hire new workers and reduce patient loads. That is because Allina, Essentia and the other hospital chains, which received millions in federal COVID relief money, directly profit from short staffing and gutting services.

Suffering from PTSD, nurses and hospital workers are not interested in paltry pay raises or promises of more “committees on safe staffing” that do nothing. Instead, they want real changes that are needed to transform the profession, which is currently bleeding nurses who are leaving the bedside in droves.

This is only possible by uniting all health care workers, and broader sections of the working class in a common fight. Minnesota nurses should organize a rank-and-file strike committee to establish direct lines of communication with health care workers in Wisconsin, Michigan, New York, California and other states. These committees should prepare coordinated action, including a

national strike to fight for what health care workers need, not what the hospital executives and their wealthy investors say they can afford.

Among these demands should be an immediate 50 percent wage increase, Cost of Living Adjustments (COLA), the hiring of thousands of new nurses, a sharp and enforceable reduction in patient-to-nurse ratios, and the abolition of exhausting work schedules.

But a blunt warning must be made: the Minnesota Nurses Association has a strategy not to win this fight, but to lose it. Even though nurses voted overwhelmingly for an open-ended strike, the MNA has limited the walkout to three days and given the hospital chains ample time to hire strikebreakers and undermine the effectiveness of this struggle. The MNA never wanted to call the strike and was only forced to because of the anger of nurses who have been kept on the job without a new contract for up to two months.

Instead of waging a real fight, the MNA has squandered resources on publicity stunts appealing to hospital executives to “do the right thing.” But appeals to the consciences of such people is worse than worthless and self-defeating. Allina CEO Penny Wheeler (\$2.7 million) Essentia CEO David Herman (\$2.8 million) and North Memorial CEO J. Kevin Croston (\$1.5 million) know how capitalism works. They know the more they can squeeze out of understaffed and exhausted nurses, the more profits they make.

When the inevitable medical errors occur, the hospitals cover them up and scapegoat health care workers, like they did to Vanderbilt University Medical Center nurse RaDonna Vaught.

At the same time, the MNA has paraded one Democratic politician after another before nurses, claiming they are “friends of labor.” But they will do nothing to challenge the health care giants, which buy Democratic politicians at the same rate as Republicans.

Obama’s health care reform did nothing to end the domination of the health care system by the hospital, insurance, pharmaceutical and medical equipment monopolies. On the contrary, its cost-saving proposals were entirely predicated on cutting jobs and increasing the workloads and exploitation of health care workers.

When the pandemic hit, both parties rejected the necessary public health measures needed to eliminate COVID-19, which was carried out in China and initially in New Zealand, Australia and other Asia-Pacific countries. Now the Biden administration, carrying forward Trump’s “herd immunity” policy, has

proclaimed the pandemic over, even as the virus continues to spread and new deadly and disfiguring viruses, from monkeypox to polio, are circulating in the population.

While the White House and Congress refuse to allocate the necessary resources to save lives, they have no problem finding billions for death. This includes the unlimited funds to arm Ukraine in a war against Russia that most workers don’t understand, and if they did, would not support.

Minnesota nurses are taking a stand for all health care workers, and for all workers. They insist that high-quality health care is a human right and must take precedence over corporate profit. To fight for this, the strike must be expanded and transformed into the spearhead of a powerful counter-offensive of the working class.

As nurses in Minnesota and Wisconsin strike this week, 6,000 teachers are striking for improved wages and smaller class sizes in Seattle, Washington, and more than 100,000 railroad workers want to strike when their 30-day “cooling off” period imposed by the Biden administration expires on Friday. In industry after industry, workers are tired of falling real wages, exhausting conditions and stonewalling from unions that do more for management than they do for workers. They are forming rank-and-file committees to take the conduct of their struggles into their own hands and develop a strategy to win their fights.

The working class produces all of society’s wealth and has enormous power. To realize this power, workers have to unite and coordinate their struggles across companies, industries and countries. The International Workers Alliance of Rank-and File Committees (IWA-RFC) was founded last year for this purpose.

This week’s strike is only the beginning. The struggle must be expanded and common action by all health care workers prepared. Strike action must be combined with the development of a powerful political counter-offensive against both big business parties and the capitalist system they defend.

Every nurse knows that profit considerations are the greatest obstacle to providing quality health care. That is why profit must be taken out of medicine through the development of a socialist health care system, which is based on human needs, not private profit.



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