

Jacobin magazine promotes sellout of Michigan Medicine nurses as “groundbreaking contract”

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On October 8, the pseudo-left magazine *Jacobin* published an article hailing the sellout agreement imposed on 6,200 Michigan Medicine nurses one week earlier by the Michigan Nurses Association (MNA) and its Michigan Medicine affiliate, the University of Michigan Professional Nurse Council (UMPNC).

Jacobin, which is closely linked to the Democratic Socialists of America, called the agreement a “groundbreaking contract.”

The *Jacobin* report is full of lies and distortions aimed at bolstering the position of the MNA-UMPNC after the union betrayed the demands of nurses for an end to intolerable working conditions stemming from years of understaffing by hospital management.

Jacobin writer Eva Rosenfeld begins by making the false claim that the new four-year agreement is “a contract that should inspire nurses everywhere.” In reality, the Michigan Medicine contract is a warning to nurses everywhere that the pro-corporate unions are working against them by collaborating with management and forcing through agreements that are hostile to their interests.

The appearance of the *Jacobin* article is significant, given that health care and hospital employees, teachers, autoworkers, railroad workers and other sections of the working class are entering into bitter struggles across the US and around the world against the labor bureaucracies, which have functioned for decades as instruments of the employers in driving down wages, benefits and working conditions.

Over the course of the six-month Michigan Medicine contract battle, nurses were isolated from other hospital employees and blocked by the MNA-UMPNC from mobilizing their strength in strike action to win their demands.

At first, the union said that it was illegal for the nurses to go on strike and repeatedly put forward Democratic Party politicians and union bureaucrats, who claimed, “We have your back.”

The union did nothing when the old contract expired on June 30. However, when it became clear that the nurses would not accept the rotten deal being prepared behind closed doors in negotiations with management—with Michigan Medicine refusing even to negotiate patient/staff ratios—the union was forced to hold a strike vote at the end of August.

The fact that the union had to hold a work stoppage vote was in large measure due to the campaign of the *World Socialist Web Site* and the *WSWS Health Care Workers Newsletter*, which published

dozens of articles and statements that were distributed to nurses and circulated on social media exposing the refusal of the MNA-UMPNC to organize a strike.

We called for the formation of a rank-and-file committee among the nurses and hospital employees to take the fight against Michigan Medicine out of the hands of the union bureaucracy and unite and coordinate with nurses and health care workers, educators, autoworkers, railroad workers and others who are coming into similar struggles across the US and around the world.

The vote demonstrated the anger and militancy of the rank-and-file nurses, with 96 percent of the 4,000 nurses who voted authorizing a walkout.

The MNA-UMPNC then moved quickly to prevent a strike from taking place by announcing a tentative contract and ramming it through in a completely undemocratic manner. The union gave nurses no time to read the contract before voting on it.

What was clear throughout this entire experience was that the MNA-UMPNC was desperately seeking to prevent a strike from breaking out, and determined to impose a new contract on the nurses before the 2022 midterm elections in early November.

None of these facts are mentioned in the *Jacobin* article.

Writer Rosenfeld covers up the fact that the MNA-UMPNC had facilitated the attacks on nurses’ working conditions by signing off on the previous contract. She writes that hospital management “turned to mandatory overtime—a mechanism written into the union’s 2018 contract as an emergency measure—to staff the hospital,” and also created an “uncompensated on-call system” to fill “patient-care deficits caused by chronic understaffing,” as though the union had nothing to do with it.

Jacobin then turns to the new contract, which was ratified by an undisclosed number of nurses who voted in meetings between September 28 and October 1. She writes that the agreement “restores autonomy to nurses and places the burden on management, not workers, to fix staffing issues.” This she calls a “pathbreaking win for the health care labor movement.”

Jacobin approvingly quotes Renee Curtis, president of the MNA-UMPNC, who said, “Our job is not to worry about who is being hired or how to hire or how to retain staff. That is management’s job... That’s where the union came in. It gave us our voice.”

This is a fraud. First of all, the contract agreed to by the MNA-UMPNC bargaining committee contains no commitment by

Michigan Medicine to resolve the staffing shortage by hiring more nurses. Meanwhile, as we have explained previously, the exceptions written into the agreement to so-called “contractually enforceable staffing ratios” are so numerous and encumbered by layers of bureaucratic red tape as to make these provisions completely meaningless and to facilitate management abuse.

Secondly, what does it mean when *Jacobin* says that the contract places the “staffing burden on management, not the workers”? This is pseudo-left phraseology that has nothing to do with the right of workers to enforce safe working conditions.

Both the union bureaucracy and its partners in the DSA completely accept the dictatorship of capitalist employers over the conditions of nurses on the job. Understaffing, forced overtime and unsafe conditions will worsen as management continues to subordinate all considerations to driving up profit and places the burden squarely on the back of the employees.

This is the exact opposite of the program fought for by the *WSWS Health Care Workers Newsletter* for the formation of rank-and-file committees among nurses and hospital employees that will enforce staffing standards that are safe, healthy and acceptable to the workers themselves, not based on what management is willing to do, says is possible, or is in its financial interests.

Rosenfeld then claims that the overwhelming support for a work stoppage by the nurses, which was betrayed by the MNA-UMPNC’s refusal to call a strike, “brought a swell of community support from patients and their families, university affiliates, faith leaders, regional Democratic Socialists of America chapters, and local unions,” and that the nurses were “supported by unions across the university through the All Campus Labor Council.”

The key truth here, although *Jacobin* declines to mention it, is that the support for the nurses among workers and students was directed by the unions and the DSA to the millionaire and billionaire Democratic Party officials on the University of Michigan Board of Regents, such as Denise Ilitch of the Little Caesar’s Pizza empire and Mark Bernstein of the Bernstein Law Firm.

Multiple protests were organized to appeal to these officials, who themselves are behind the ongoing drive by Michigan Medicine to expand its \$5 billion cash reserves by increasing the exploitation of the hospital staff.

Rosenfeld also quotes two MNA-UMPNC union officials, Mary Gallagher and Ann Jackson, who sing the praises of the sellout contract. *Jacobin* has no problem whatsoever presenting union reps as rank-and file nurses.

In the case of Jackson, who is the past president of the MNA-UMPNC, she wrote an article in May that was published by the Detroit chapter of the DSA about the Michigan Medicine nurses’ contract fight which revealed that “many of the regents have accepted election help from unions to gain their positions.”

In the *Jacobin* article, Jackson even claims that state and national unions played a role “in securing emergency workplace safety protections during the pandemic.” This is a complete fabrication. Throughout the coronavirus pandemic, the unions have worked hand in glove with the employers to force the return of workers to the factory floor and students to the schools so that the ruling elite can get on with making profits while workers get sick and die from

COVID-19.

That Jackson’s assertion about the actions of the unions during the pandemic, quoted in Rosenfeld’s article, is false, is borne out in a passage in Rosenfeld’s own article that reviews the experience of nurses at Michigan Medicine. The *Jacobin* article says that the hospital projected millions of dollars in losses and moved rapidly to lay off 738 support staff. After the hospital restored its financial position and generated \$340 million in cash in 2021, “it did not replace the employees” and forced the additional workload onto the nurses.

Throughout this period, when nurses were forced to work extended overtime and be exposed to COVID-19, the union did not lift a finger to oppose the hospital’s policies. Instead, when the previous contract expired in the middle of the pandemic, the union agreed to extend the terms of the 2018 contract and permitted management to continue imposing horrendous mandatory overtime and on-call hours on the nurses.

Behind the bogus claims that the new Michigan Medicine contract is “groundbreaking” and “pathbreaking” is the ongoing campaign of the unions and the Democratic Party for a bipartisan Safe Patient Care Act in the Michigan legislature, which is vehemently opposed by the employers and the Michigan Hospital Association.

Even if it were passed, such a law would do virtually nothing to address staffing shortages. It is a diversion, aimed at subordinating nurses and health care workers to the Democratic Party and the corporate and government agencies that run the financially driven health care industry. Opposed to the mobilization of nurses in a struggle to win the demand for safe staffing ratios, the Michigan Nurses Association has been campaigning among Democrats and Republicans in Lansing for years to pass this toothless legislation.

The *Jacobin* article on the nurses’ struggle at Michigan Medicine once again demonstrates that such groups have nothing to do with the working class or socialism. The DSA is part of the Democratic Party and the capitalist political system in the US. Its purpose is to prop up the trade union bureaucracy, of which it is a part, and block workers from establishing their own independent organizations of industrial and political struggle.

What is required by nurses and Michigan Medicine employees—as well as all sections of the working class—is the formation of rank-and-file committees to fight the profit-driven staffing decisions of management and their collaborators in the union apparatus. Through the formation of a network of democratically established and led organizations of workers, such as those being established by railroad workers, autoworkers and teachers, the working class can advance its own agenda against the entire capitalist system and lay the basis for socialism.



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