

# Providence, Rhode Island: Butler Hospital workers strike over wages, safe staffing and pensions

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18 May 2025

*Are you a worker at Butler Hospital or another healthcare facility in New England? Contact us to tell your story. All submissions will be kept anonymous.*

Eight hundred workers at Butler Hospital in Providence, Rhode Island began an open-ended strike on May 15, demanding improved workplace safety and higher wages after the hospital's operator, Care New England Health System, refused to consider the latest contract proposal from the union, SEIU1199 New England (NE).

The strike, the first at the facility in 37 years, involves nurses, mental health workers, social workers, clerical, environmental service and dietary staff.

Butler is a private, 168-bed, teaching and research psychiatric and substance abuse hospital for adolescents, adults, and seniors. It is affiliated with the Warren Alpert Medical School of Brown University and is the flagship facility for Brown University's department of psychiatry. As of June 2024, the university's endowment stood at \$7.2 billion.

Butler Hospital, as part of Care New England, is a "non-profit," but recent financial reports for Care New England show a \$3.4 million operating gain for the first quarter of 2025. Dr. Michael Wanger, Care New England's current CEO, is estimated to earn between \$1 million and \$2 million annually. The previous president and CEO of the health system, James E. Fanale, MD, received total compensation of approximately \$1,912,336 in 2022.

In late April, 91 percent of Butler workers voting authorized a strike, reflecting the determination of workers against the deplorable conditions at the hospital. SEIU 1199 reports that 60 percent of its members have had to choose between food and housing costs, with some living in their cars to make ends meet.

However, the union is only asking for wages of at least \$25 per hour, which would do little to lift workers out of poverty. According to MIT's Living Wage Calculator, a single adult with one child would need to make \$39.30 an hour in the area. Some staff are earning as low as \$15.53 per hour and others around \$21 to \$23 per hour.

Care New England says they have offered wage increases

averaging 3.4 to 8.5 percent annually, totaling between 15.6 and 32 percent over a proposed four-year contract, far short of keeping up with inflation and raising workers out of poverty. The hospital says "only" about 20 percent of employees earn below \$20 per hour. Their latest offer would raise the wage floor to \$19.32 per hour, with 99 percent of workers earning a paltry \$20 or more by the end of the contract.

Mary Marran, Butler CEO, president and chief operating officer, is paid more than \$575,000 in salary and compensation, according to the most recent publicly available filings. While refusing to provide livable wages for workers, Butler Hospital has spent over \$3.2 million on scabs from temporary agencies in an effort to break the strike.

## "They see us as replaceable"

"We're fighting for safer staffing, fair wages. Those are the two main things, and benefits," Mental health worker Andrew told the *World Socialist Web Site*. "They're trying to attack our HSA, health savings account. They're trying to attack our pension fund. These are two of the major things that attract someone to work here. It's not the wages; the wages are deplorable. The only reason people work here is out of the kindness of their heart and the benefits that are provided."

Another issue is the attempt to abolish the pension benefits for new hires, shifting away from the traditional pension to 401(k)-style retirement plans. Striker Nyenpu said Butler is "trying to cut down benefits, insurance. And as a working mom, as a working father, you should be able to retire when it's time for you to retire. But taking those pensions away, it's like, what is our future?"

She added, "At least if you have pensions in place, you are able to put money into that. When you're retired, you can have something, you know what I mean? Messing with all of that, it's not healthy. Definitely it's not healthy for anybody. Because you got to be able to look [forward] to something

when you retire.”

Striker Linna said, “It hurts, because, you know, we come here every day, and we put our life on the line every single day, and we’re with the patients, 24/7, day in and day out. Why are we just not getting what we’re asking for? It’s not [like] we’re asking for a lot. We’re asking you to support us in ways that, you know, you’re willing to support the scabs. That’s not fair.”

One of the central issues in the strike is a severe workplace violence crisis. Between 2021 and 2024, patient assaults on staff have increased fourfold, with a 79 percent rise in overall workplace injuries during the same period.

Along with stronger measures to protect them from violence, including better training, safety protocols and support systems, workers are demanding adequate staffing to counter chronic understaffing, which is contributing to overwork, burnout and unsafe working conditions.

Hawah described how the violence workers face is directly related to short staffing. “When I was pregnant, I was in a one to one with one of the patients, and I was, like, assaulted. The patient punched me in my belly when I was pregnant. Luckily, nothing happened to me or my baby.”

She added, “Sometimes we work short, like we should have those staff just to prevent those things. I was never supposed to be on a one to one knowing I was pregnant, but I had to do it because there was no other person there to do it. So it’s just a lot, and management know these things, but they’re just not listening to us. So they’d rather we come out here and be striking when we can be in there taking care of the people, because the people know us.”

Andrew said, “I was here for less than two months. I was physically assaulted. I was punched in the face multiple times; I had my nose broken. I was out on worker’s comp. I decided to come back to work because I care about people. I care about patients, I’m compassionate. I want to see people heal.

“The same thing happened to a manager about nine months later, about 10 feet away. So it was the same unit, same type of situation. That patient was taken away in cuffs. The patient after they hit me, they got admitted. I’m a mental health worker. They see us as replaceable. Managers, they don’t see as replaceable. They’re put on a higher pedestal. We’re all human. Why are we treated different?”

## The union bureaucracy

1199SEIU NE is a regional division of 1199SEIU United Healthcare Workers East (often referred to as simply 1199SEIU), which has a membership of nearly 450,000 healthcare workers across the eastern United States, making it the largest local in the Service Employees International Union. Members of United Healthcare Workers East are organized in a

wide range of healthcare and social service settings in nursing homes, care agencies and mental health agencies, with over 100,000 workers organized in hospitals.

Despite this strength in numbers, 1199SEIU has collaborated in pushing through hospital layoffs and closures. NewYork-Presbyterian Hospital announced earlier this month that it plans to lay off 1,000 workers. 1199SEIU, along with the other union at the hospital, the New York State Nurses Association, has made no public statement opposing the announced layoffs.

1199SEIU also mounted no struggle against the closure of Mount Sinai Beth Israel Hospital in New York, which closed in April. Leading up to the closure, the main Mount Sinai Hospital carried out a succession of firings without any opposition from 1199SEIU.

A major strike was planned to begin May 19 at 51 nursing and group homes in Connecticut, by about 6,000 nursing home workers and 1,700 group home workers, all members of 1199SEIU NE. But after discussions with Democratic Governor Ned Lamont and state officials, the union agreed to delay the strike until May 27.

A strike at these nursing and group homes would be the largest healthcare strike in Connecticut state history and would impact more than a quarter of the state’s nursing homes. The union is asking to raise the wages of these workers, who are among the most exploited sections of healthcare workers, to only \$25 per hour, with a pathway to only \$30 per hour for most workers.

Workers at Butler Hospital, at Connecticut nursing homes, and other healthcare workers in New England should organize rank-and-file committees to take the control of their struggles out of the hands of the union bureaucracy.

Such committees should demand that negotiations be led by trusted rank-and-file workers and that all proceedings be public. Only through a struggle independent of the union apparatus and the Democratic Party can workers win real gains in wages, staffing, and worker safety.



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