

Providence, Rhode Island: Butler Hospital plans to permanently replace striking workers

Kate Randall**4 June 2025**

As the strike by 800 workers at Butler Hospital in Providence, Rhode Island, ended its third week, management announced Tuesday that it is posting job listings to permanently replace striking workers. Mary Marran, president and chief operating officer of Butler, said this attack on strikers' jobs was a "necessary decision."

"We believe this action is essential to ensure continuity of patient care and maintain the stability of our services," Marran stated. Butler says striking workers who are permanently replaced will not be able to return to their jobs once the strike ends. They will instead be placed on a "preferential hire list" and would only be able to return when and if a position becomes available.

The announcement by Butler to replace the striking workers with scabs is a declaration of war. The move follows the cutoff of strikers' health insurance, including medical, dental and vision coverage, as of June 1. Other benefits, including life, disability and accident insurance, had been cut off earlier in May by the company in retaliation for the strike.

This threat must be answered through the broadening of the struggle, appealing to healthcare workers and others throughout the region to come to the strikers' defense. The entire 450,000-strong membership of 1199SEIU-United Healthcare Workers East (often referred to as simply 1199SEIU) must be mobilized for mass actions to force management to back down.

To prepare such action, workers must begin organizing lines of contact with each other through the building of rank-and-file strike support committees uncontrolled by union officials, who are doing everything they can to isolate the strike.

Butler workers began their strike on May 15 after 91 percent of the union workforce, or 99 percent of workers participating, voted to strike. The strike involves nurses, mental health workers, social workers, clerical, environmental service and dietary staff, members of 1199SEIU New England (NE), a subsidiary of the larger 1199SEIU. It is the first strike in 37 years at the 168-bed

private psychiatric hospital, which provides mental health and substance abuse services to adolescents, adults and seniors.

Butler Hospital, a "non-profit" operated by Care New England, is the flagship facility for Brown University's department of psychiatry. Care New England showed a \$3.4 million operating gain for the first quarter of 2025, according to recent filing reports. As Butler's president and COO, Marran is paid more than \$575,000 annually in salary and compensation.

Strikers are demanding wage increases to lift workers out of poverty, improved staffing, stronger protections against workplace violence, and defense of their defined pension benefits for all workers, including new hires.

"We need to get our wages to an appropriate level," striker Dan told RIFuture.news. "We have members who are struggling to feed their families and living in cars, and those people have to come in and help other people. When people are struggling, it reduces the quality of our service. ...

"We're dealing with record numbers of assaults in the hospital, and we have proposals. We are focused on working with management to solve these issues. We need to ensure that we can be safe in our workplace. People shouldn't be afraid to go to work. Part of what we want out of this is appropriate pay and lower staff turnover, which has been affecting the quality of care. Consistency is an important part of psych care."

Claims that Butler Hospital "has no money" to provide workers decent wages and benefits is a lie. While Butler is chronically understaffed, and workers face violence on a daily basis, the hospital has shelled out more than \$2 million to hire replacement workers.

More than 150 people spoke out on Facebook in response to an article about Butler's plans to permanently replace striking workers.

"These workers do care about their patients!" said one supporter. "That's exactly why they're striking! not because they don't care, but because they're being pushed past the point of physical and emotional exhaustion while being

underpaid and unsafe.

"They face daily assaults, verbal abuse, and impossible staffing ratios, yet they keep showing up, day after day, because they do care."

Negotiators from the Federal Mediation and Conciliation Service (FMCS) arrived in Rhode Island the week of May 26 to oversee talks between Butler Hospital and SEIU1199 NE. After negotiating sessions on May 29 and May 30, management claims the union failed to make adequate concessions on wages and benefits.

Details of the latest offer by management have not been made public, but 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. The hospital claims that "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, far short of keeping up with inflation and raising workers out of poverty.

The union has only asked for wages of \$25 per hour minimum, which would not be enough to lift workers out of poverty. A single adult with one child needs to earn \$39.30 an hour to rise above poverty level, according to MIT's Living Wage Calculator. Some staff are currently earning as little as \$15.53 per hour and others \$21 to \$23 per hour.

Negotiators for Butler and the union reconvened for talks along with the FMCS on Wednesday, June 4. A delay requested by Butler conveniently allowed management to cut off healthcare coverage over the weekend, on June 1. Most workers sought coverage through HealthSource RI, the state's Affordable Care marketplace, where many plans come with higher premiums and out-of-pocket costs than those workers had through Butler.

A key proposal by Butler is that defined pension benefits be replaced for new-hires with a 401(k)-style retirement plan. Such plans leave workers at the mercy of the gyrations of the stock market, which is all the more volatile due to Trump's trade tariff chaos. Capitalist enterprises like Care New England are also aiming to pass on to workers reductions in payments from Medicare and Medicaid contained in any new budget passed by Congress.

Butler workers are in a powerful position to defeat management's threats. But 1199SEIU, which covers healthcare workers in Rhode Island, New York, New Jersey, Massachusetts, Maryland, Washington D.C. and Florida, is working to isolate them from the struggles of other healthcare workers in the region.

Two weeks ago, it called off a statewide nursing home strike in Connecticut, which would have involved over 6,400 caregivers across 51 nursing homes and 193 group homes

for individuals with disabilities, after an agreement was reached with Democratic Governor Ned Lamont.

Union members were forced to vote on that tentative agreement the same morning it was reached, giving them no time to study or consider its details. The agreement fell far short of the \$30 an hour demanded by workers, and wages will rise to only \$26 an hour for certified nursing assistants (CNAs) by January 1, 2028. Group home workers' pay will increase from a poverty level of \$18 an hour to only \$20 an hour during this same period. Any increases are also dependent upon Medicaid payment increases negotiated with the state.

The Connecticut strike, in turn, had been deliberately delayed in order not to coincide with a strike of hundreds of nursing home workers in western New York, also members of 1199SEIU, who went on a 7-day strike beginning May 20 to demand better pay, staffing levels and pensions.

Workers must mobilize from below to override these betrayals. Workers must form a rank-and-file committee to take control of the strike and make an urgent appeal to other healthcare facilities, both union and nonunion, across New England and beyond. Such a committee would establish lines of contact to organize joint actions to force management to back down.

An expansion of the struggle is only possible through a fight against the 1199SEIU apparatus, which is joined at the hip with the pro-capitalist Democratic Party and with management.

A rank-and-file committee at Butler Hospital would fight against the subordination of healthcare to profit, which is incompatible with high quality public health.



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