

“It can’t be fixed within capitalism”: USC nurses’ strike reveals growing revolt against profit-driven healthcare

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On October 30, around 1,400 registered nurses staged a one-day strike at Keck Medicine of USC (University of Southern California) facilities, including Keck Hospital of USC, the USC Norris Comprehensive Cancer Center, USC Arcadia Hospital and USC Verdugo Hills Hospital in Glendale.

Workers are being pushed to the breaking point. The strike took place amid massive attacks on social programs by the Trump administration, which is using the shutdown to eliminate or cripple programs on which tens of millions rely. Around 42 million Americans are dealing with delays in the distribution of food stamp benefits this month, which the Trump administration is only distributing at a reduced rate following court orders.

The strike encompassed some of the most advanced medical institutions in Southern California. Keck Hospital of USC, a 401-bed acute care facility affiliated with the University of Southern California, boasts cutting-edge research and clinical trials.

The USC Norris Comprehensive Cancer Center, a 60-bed hospital specializing in 13 areas of cancer treatment, reported approximately \$2 billion in patient revenue and \$121.9 million in net profit in 2023 alone.

Since May 2025, nurses have been locked in contract negotiations with Keck Medicine, following an informational picket in July and a strike authorization vote in August. The central grievance raised by nurses is the severe understaffing that endangers patients and exhausts caregivers.

Resource nurses (non-patient-assigned staff who provide critical support, handle admissions and discharges, and bridge staffing gaps) have been decimated. Their absence forces bedside nurses to shoulder impossible workloads. In 2024 alone, Keck and Norris nurses reported more than 10,000 missed meal breaks and 4,000 missed rest breaks. As of July 2025, another 6,841 breaks had been missed. It is not uncommon for nurses to go ten hours without eating, drinking water, or using the restroom.

USC wants to eliminate workers’ existing health plan options, including Kaiser and Blue Shield, and force employees to use only USC-owned medical facilities. This policy would

not only increase the university’s profits but impose enormous hardship on nurses, many of whom live far from USC campuses. As one nurse explained, if a family member needed to see a doctor, “we’d have to drive for hours just to use a USC facility.”

Nurses are not only up against management, but the bureaucrats of the California Nurses Association/National Nurses United (CNA/NNU).

The CNA/NNU’s negotiating “action items” are deliberately opaque. The union couches its demands in the language of “fairness” and “respect,” avoiding any concrete commitments. Calls for “adequate staffing,” “safer working conditions,” and “competitive pay” are so vague as to be meaningless.

By restricting the strike to a single day and withholding strike pay, the union leadership ensured that nurses’ enormous determination would be contained and defused, preventing any challenge to the Democratic Party establishment.

There is enormous potential for a broad, powerful struggle uniting USC nurses with workers across the united states against for-profit medicine. This, however, requires that workers take control into their own hands independently of the bureaucrats by forming a network of rank-and-file committees, to plan joint actions based on what workers need, not what management claims it can afford.

“We work our butts off”

Leticia, a cardiothoracic nurse, spoke with deep frustration over the erosion of wages and the lack of respect shown to her most experienced colleagues. “We’ve been getting notifications that our percentage rate is not even equivalent to minimum wage increases,” she said. “Younger nurses are getting fairer rates, but the senior nurses—the ones who have been here for years—are being paid less than new hires.”

This wage inversion is part of a deliberate corporate strategy to drive out higher-paid, more experienced staff and replace

them with a cheaper, precarious workforce. “We need the experienced nurses to guide us and to teach us,” Leticia emphasized. “We won’t have that if they continue to cut their rates.”

Her voice trembled when describing the human cost of understaffing: “We’re always below normal staffing ratios. On the cardiothoracic floor, we’re only legally allowed four patients. But nurses have been forced to take five. Even our charge nurse, who’s supposed to help us, has to take on patients. That’s just not okay. Patient safety becomes so sparse at that point.”

Leticia described the nurses’ daily heroism, stepping in for absent doctors and providing the holistic, compassionate care that keeps patients alive. “We work our butts off in order to help with patient care and with families. Both the emotional and physical well-being of patients depend on us.”

Her concluding remarks revealed an unmistakably political consciousness: “I would love a general strike. Nurses could team up with teachers, with CNAs, physical and occupational therapists, with everyone in the working class. I would love that. I would be there.”

“It’s very close to being time for everyone to just unite”

Maria, a nurse with 25 years of experience, spoke with a mixture of pride and anguish about the moral core of nursing. “No one else is in there with the patient,” she said. “We’re there during some of their last breaths. And that’s an honor. Trump’s not going to go in there and sit with a dying patient. They’re not going to clean up someone who’s sick.”

Her comments connected the nurses’ struggle to the broader political degeneration of American society. As the far-right Trump administration slashes food stamp benefits for tens of millions, Maria recognized that the attacks on the working class are systemic.

“I think people are getting fed up,” she said. “It’s very close to being time for everyone to just unite and take meaningful action. People are still afraid, they haven’t reached that moment of power and agency yet, but I think it’s happening.”

Maria described the current moment as “psychological warfare.” She said: “We just have to stand firm and remember who we are...Remember why you became a nurse.”

“I’m all for socialized medicine,” she said. “The 1 percent can’t keep controlling everything. You don’t go backwards, you go forward. The system we have now is just a band-aid on a bullet wound. It can’t be fixed within capitalism.”

Maria compared the capitalist system to the animated film *A Bug’s Life*. “The grasshoppers are the exploiters using the ants for their needs,” she said. “They need us. Whether it’s wealth, health care, or commodities: they can’t have any of it without

us.”

“Take your hands off our health care”

Monica, a float pool nurse of eight years, stressed that the fight was about far more than wages. “We’re fighting for patient safety but also for compensation for the world-class care that we provide,” she said. “It’s a slap in the face that Keck is taking away our free health care and not compensating us for the cost of living.”

Keck Medicine, owned by one of the wealthiest private universities in the country, has unilaterally dismantled nurses’ previous health coverage, forcing them to pay premiums out of their own pockets. “They’re taking away the HMO option,” Monica said. “Take your hands off our health care!”

She described the devastating consequences of understaffing for both nurses and patients. “The patients are the ones missing out when we’re spread so thin. Management keeps throwing more on us but not providing the safe staffing that we need. We do what we can, but we’re limited with the resources we have.

“During COVID it was the same—overworked, understaffed. That just seems to be the trend across healthcare systems,” she said.

Monica concluded: “I think we need a general strike. We need to empower each other and stand up for what’s right. Trump represents himself and the billionaires—it’s all about the money.”

The experiences and voices of nurses like Leticia, Maria, and Monica reveal a growing militancy within the working class and a readiness to fight. This determination must be combined with an independent strategy, mobilizing the strength of the working class against not only Trump but his enablers in the Democratic Party and the trade union bureaucrats.

Their goal must be the socialist reorganization of healthcare and society—placing human life, not private profit, at the center of a united movement against social inequality, dictatorship, war and genocide.



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