

New York nurses raise demands as contract expirations loom at year's end

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The contracts for more than 20,000 nurses at 12 private hospitals in New York City will expire on December 31. Strike authorization votes among the nurses is underway.

The contract expirations create the potential for a major, coordinated fight for safe staffing, raises that surpass inflation and the best possible healthcare benefits. They also create an opening for nurses to oppose management retaliation, such as the disciplinary measures taken against three nurses at Mount Sinai Hospital who raised safety demands after an attempted shooting at their workplace.

New York nurses are also facing attacks by the administration of President Donald Trump on their profession and on public health itself. The US Department of Education's declaration that nursing is no longer a professional degree will slash much-needed financial resources for students and worsen the problem of understaffing.

The Centers for Disease Control and Prevention have withdrawn their recommendation that the hepatitis vaccine be administered at birth, without providing any evidence that the long-standing recommendation was incorrect.

But the New York State Nurses Association (NYSNA), the union to which these 20,000 nurses belong, is opposed to organizing a united struggle. When these contracts expired in 2022, NYSNA expended every effort to keep its members divided, prevent strikes and negotiate pro-management agreements hospital by hospital.

Though NYSNA was unable to prevent strikes at Mount Sinai Hospital and Montefiore Medical Center, it shut them down after three days. NYSNA hailed the contracts as a "historic victory" for safe staffing. In fact, they have institutionalized understaffing, and

nurses continue to struggle with unmanageable workloads and high levels of stress.

A real struggle requires that nurses begin preparing to take the initiative into their own hands. This means forming a rank-and-file committee to formulate nurses' demands, assert democratic control over bargaining to prevent a sellout, and to prepare for a strike, appealing for support from other healthcare workers and the working class across the city.

Reporters for the *World Socialist Web Site* spoke to nurses at NewYork-Presbyterian Hospital about their contract struggle and the broader political situation in which it is unfolding. Conditions at the hospital have changed greatly over time, according to an experienced catheterization lab nurse who spoke on condition of anonymity. "Our unit used to be very pro-patient," he said. "And now, it's all about business."

At the beginning of the pandemic, "we sacrificed a lot of things, and we were heroes at that time," he said. "And now, they're cutting us out. ... A lot of our people are getting laid off, sacrificed just for money, while these executives are making millions of dollars. It's horrible."

"[The hospital is] not going in the right direction. It's a microcosm of what America is right now with capitalism and how the administration is making everything work. It's a shame because hospitals take care of people. People are getting sick. It's not something you can sacrifice."

On demands for the new contract, he said: "We want raises, obviously, with inflation and everything going up in the city."

A medical-surgical nurse said the hospital needs more technicians and aides. "We can't do everything on our own. Being unable to take care of our patients and make sure that everything is done right and safe is the

main concern for me.”

NYSNA and management have not reached an agreement, the nurse said, and there are no additional details about the contract negotiations. NYSNA provides as little information to nurses as possible, as a way of suppressing their independent initiative and keeping their frustration under control.

Many nurses are ready to strike, but the danger of a rotten last-minute agreement between management and NYSNA looms. When the union announced a sellout contract in 2023, many nurses objected to it. “But NYSNA went through with it anyway because they said the majority of people agreed to it,” said the the catherization lab nurse, adding that the vote count was never made public. Nurses continued to voice their complaints to the union. “They gave us the runaround, saying this and that. But we felt slighted.”

The medical-surgical nurse expressed her opposition to the disciplining of three nurses at Mount Sinai Hospital for discussing safety demands after an attempted shooting in the emergency room. “That’s definitely unfair because they’re trying to keep not only themselves safe, but also their patients safe,” she said. “God forbid something had happened and they didn’t take the necessary actions right away. It would have gotten worse, and then they would’ve been blamed for it.”

The nurse also objected to the Department of Education’s new classification of nursing as a nonprofessional degree. “It’s kind of ridiculous because we work so hard to get our ‘nonprofessional’ degree,” she said. She described the study, examination and licensure that nurses must complete before they can pursue their chosen career. “Every single year or so, we have to keep taking courses to make sure that we’re up to date with the newer standards of medicine. That’s kind of ridiculous that they’re saying that our job is not professional.”

The Department of Education’s decision also limits students’ access to federal student loans for nursing programs. “A lot of people already can’t afford things, so how are they going to afford going to school?” she asked. “If they decide that, then the number of nurses that they have in the future is definitely going to decline. And even nurse practitioners, whom they depend on nowadays. The number of doctors is not going up as much, and they depend on the nurse

practitioners to do a lot of their cases.”

To wage their contract struggle, which at bottom is a struggle against the system of for-profit healthcare, the nurses must form rank-and-file committees that are independent of the union and of both capitalist parties. Only by taking initiative from below the nurses can break out of the isolation that NYSNA is attempting to impose and reach out to other healthcare workers, as well as workers in other industries, for support.



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