

Joliet, Illinois nurses reject sellout contract, continue strike

By Benjamin Mateus
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Striking nurses at St. Joseph Medical Center in Joliet, Illinois have overwhelmingly rejected the contract proposal from AMITA Healthcare and are continuing their walkout to demand adequate staffing and better working conditions and pay. The nurses voted 393 to 154 to defeat the contract brought back by the Illinois Nurses Association (INA), which did nothing to address the nurses' central demand to reduce the dangerously high patient-to-nurse ratios, which have made fighting the pandemic even more life threatening.

"We're so disconnected from management and the higher-uppers that they have no idea what's going on on the floors and how we're suffering, and the patients are suffering," staff nurse Cindy Cozzi told the *NBC 5 Chicago* news outlet.

Though many nurses have said they would like to see the strike over so they can return to caring for their patients, there is a growing recognition that they are not just fighting for themselves but for all healthcare workers. At least 700 frontline healthcare workers have died in the US since the beginning of the pandemic. Once again, hospitals in Florida, Texas and other states are being overwhelmed by COVID-19 patients while doctors, nurses and other staff are working exhausting hours and risking their lives without adequate staffing levels, protective gear, ventilators and other equipment.

Prior to the vote, INA negotiators acknowledged that AMITA had not budged from its position and that the union essentially dropped any demands about increased staffing. Immediately after the contract proposal was defeated, union negotiator Pat Meade told the *Herald News* that the union submitted a new proposal to management on Sunday. "It's something that we can support. If AMITA is on board, we feel we can get this done."

The INA has not released any information to

rank-and-file nurses, according to strikers who spoke with the *World Socialist Web Site*. One thing is absolutely clear, however. The new proposal will only be a rehash of the contract that the nurses voted down by 70 percent. No serious gains can be won based on the way the union has conducted the strike, isolating the 720 striking nurses and appealing to Democratic Party politicians, who are no less committed to defending the profit interests of the giant health and hospital chains as Trump and the Republicans.

That is why nurses should elect a rank-and-file strike committee to take the conduct of the negotiations and the strike into their own hands. The first action must be to call on healthcare workers across Illinois, the US and internationally to support the strike and prepare a common struggle. At the same time, St. Joseph nurses should reach out to teachers who oppose the insane efforts to reopen the schools, along with autoworkers, Amazon and other workers fighting unsafe conditions.

At the same time, the union is using the prospect of management reprisals to intimidate nurses. The INA said it wanted "guarantees" from management that striking nurses will not be victimized. "We know their history of reprisals. We don't want our nurses turned back at the door for picket line activity." There is no doubt such a danger exists. Healthcare workers in Michigan, New York and Washington state have been terminated for exposing unsafe conditions in their hospitals. However, management's promises not to carry out punitive reprisals would not be worth the paper they were written on. Only the mass mobilization of the working class in support of the striking nurses can defeat AMITA's efforts to break the strike and punish militant workers.

The last strike by Joliet nurses ended in March 1993 after 62 days on the picket line. It was the most

prolonged nurses strike in Illinois history and the second-longest in the United States. Both sides declared victory after the ratification of the contract that included some guidelines on the hospital's ability to assign nurses from one expertise to another temporarily, small pay increases and protections against retaliation.

Two years earlier, in April 1991, the US Supreme Court unanimously upheld a National Labor Relations Board regulation that made unionizing healthcare workers across thousands of community hospitals much easier. According to a *New York Times* report, "Justice John Paul Stevens wrote the opinion, which had the additional effect of strongly affirming the authority of the labor board to take an industrywide, rather than a case-by-case approach to issues within its jurisdiction."

In 1992, the St. Joseph nurses became the first nurses at a private hospital to unionize. This was no doubt related to the history of militant struggles in the city, located 48 miles southwest of Chicago. Joliet was a major center of the Great Steel Strike in 1919, as well as several strikes at the Caterpillar plant, which closed in 2019, after being wound down for several years following the betrayal of the three-month strike by 780 workers by the International Association of Machinists in 2012.

Colleen, who had participated in the 1993 strike, said, "I was here for the last strike, but people crossed. We must stand united. If you do not stand united, corporations are going to win." To accomplish this, however, nurses must take the conduct of the struggle into their own hands and reach out to healthcare workers across the US and internationally.

One Arizona nurse wrote on hearing of the Illinois strike, "They deserve to have safe patient ratios. Administrators allow us to work with unsafe ratios so they can save money and fill their pockets with big fat bonuses. It is ridiculous what they do to nurses."

A Cleveland, Ohio nurse posted, "All they care about is charting, and it's redundant and irrelevant so many times, but it's all about reimbursement, and that's why it changes on a dime. ... I'm so sick of leaving at the end of a shift and feeling like I didn't do enough ... we are caring and want to do the best for our patients and to advocate for them. ...

"Our values and morals are not in alignment with

corporate, and even management's hands are tied. I would never want to be back in management because they force you to do their bidding, and you feel terrible if you stop and think about it. I'm just tired of this merry-go-round and the moral injury we have to suffer and still have to scrape by week to week."

Commenting on the Joliet strike, another Cleveland nurse added, "This is so sickening, and it's nothing new to nursing ... it's just that nurses will not band together nationwide because of their financial responsibilities and fear that is initiated from the beginning of their career. We have a broken system, period!!!! How many nurses work without breaks, with inadequate staffing or ancillary support, lack of equipment or broken down equipment? ... the list is too long to continue ... you all know this and this pandemic has brought out the worst in the healthcare system ... greed is rampant, and nurses and all healthcare workers are just another cog in the wheel that is tossed aside! I've seen this since the beginning, and it's worse every year. It's sick how they entice agency nurses to fill the spots, and when they aren't needed, they toss them aside. ... We are disposable to them, and they have shown us that time after time."

A San Antonio, Texas nurse responded to the vote by Illinois nurses against the sellout deal, "We all need to strike! We need change!"

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