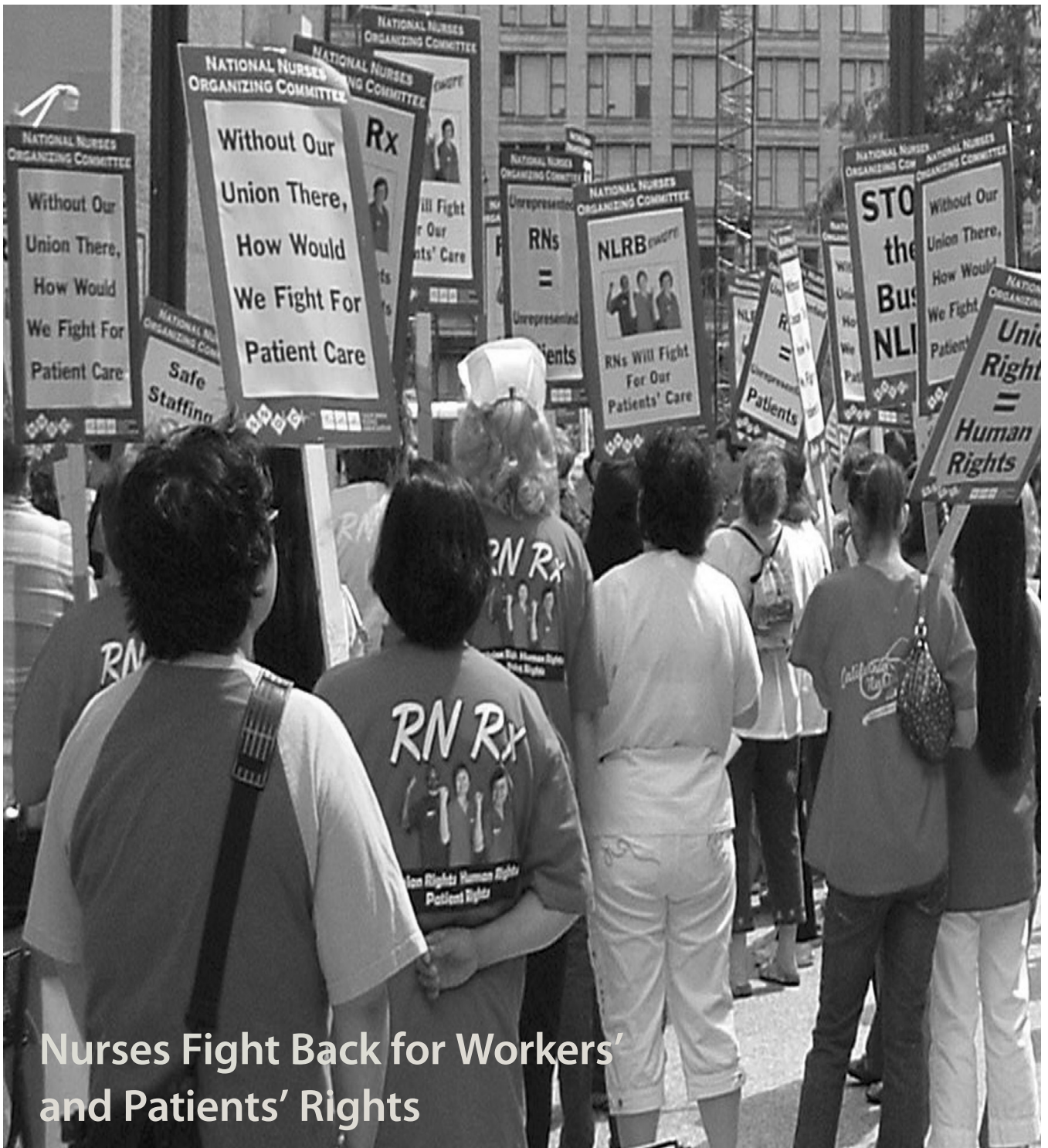


Socialist Women



Publication of the Socialist Party Women's Commission

Fall 2007



Nurses Fight Back for Workers' and Patients' Rights



SOCIALIST WOMEN

Publication of the Socialist Party
Women's Commission

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The views expressed herein are those of the
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Commission, or *Socialist Women Magazine*.

Cover photo: Nurses from across the U.S. rally
in front of the American Hospital Association
(AHA) building in Chicago, August 2006, to
protest the National Labor Relations Board's
Kentucky River Decision to reclassify workers
with limited supervisory duties as "supervisors,"
thus stripping millions of workers of their right
to form a union. The hospital industry was
instrumental in influencing this union-busting
decision. The nurses' plan for the demo was to
enter the AHA building, but upon their arrival,
they found the building locked up. As a result,
the nurses staged a sit-in, stopping traffic for
about an hour. Photo taken by Diane Sheerer,
Western Mass Community Organizer for the
Massachusetts Nurses Association. Used by
permission.

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Susan Dorazio is a child care worker in Western Massachusetts, and the convener of the Women's Commission of the Socialist Party USA.

Jay Goldspinner lives in Greenfield, Massachusetts. She considers herself an anarchist. Emma Goldman is one of her great heras.

Mette Hedegaard is Press Secretary for the Danish political party Enhedslisten (the Red-Green Alliance).

Tom Keough draws cartoons to educate, agitate, and organize to help fight some of the problems confronting working people. Tom has recently been doing art for the IWW, 1199/SEIU and other groups.

Ari Moore is a queer vegan treehugging idealist living, working and learning in Brooklyn with her partner Shira. She serves as the Secretary of the Socialist Party of New York City. You can view her work and find out more about her various projects at shirari.com.

Richard Truluck, a 54 year old military veteran of the Vietnam Era, lives in North Central Florida in a small farming community. He's a volunteer firefighter and a member of the War Resisters League and the Socialist Party USA.

We present this issue of *Socialist Women* with mixed emotions. On one hand, we're proud of the passion, insights, and proposals we're bringing you on the issue of health care. It is an excellent overview.

On the other hand, we're troubled and enraged that free, universal, comprehensive health care needs to be described as a radical concept.

This is not an idea whose time has come. It's a basic human right that should be recognized and honored by every country in the world.

The time is past-due when those of us in the U.S.—the nerve-center of transnational capitalism and the world's foremost military juggernaut—stand

shoulder to shoulder with the global working class to demand socialized health care for all.

In the long-run, this goal (like all the others related to the social, political, economic, and environmental devastation wrecked on the planet and its people by global capitalism) will only be fulfilled when a workers' revolution creates a worldwide democratic socialist, feminist global society.

For now, we offer the following articles, poems, drawings, and photos as the tactical guidance and the emotional sustenance we need to keep our vision clear, our ideas interesting, our programs principled, and our actions full of energy and compassion. •



ServiceNet Rally

Union activists and community supporters demonstrate in solidarity with members of UAW Local 2322 who provide critical mental health services at ServiceNet, Inc. in Northampton, Massachusetts. For

months, management has been engaging in numerous union-busting tactics while refusing to offer the workers the wages, health insurance, and vacation and personal time they so rightly deserve. •

Demand Socialized Health Care

National Office, Socialist Party USA

As we near the 2008 congressional and presidential elections, health care will be on the national agenda.

In order to promote a vision of, and program for, free and comprehensive health care for all, the National Committee of the Socialist Party USA has initiated a national campaign for socialized health care.

The Democrats and Republicans promise to address this issue, but neither will promote a truly universal system and the abolition of the for-profit system.

The Socialist Party stands for a socialized health care system based on universal coverage, salaried doctors and health care work-

ers, and revenue derived from a steeply graduated income tax.

This would be a national health care program with comprehensive standard and alternative medical, dental, vision, and mental health coverage for all, publicly funded through progressive taxation and controlled by democratically elected assemblies of health care workers and patients. The National Health Program would extend, and replace, Medicare and Medicaid.

We call for a health care system that emphasizes preventive care, respects patients' privacy, gives special attention to the needs of people with physical or mental disabilities, and conducts treatment and



Starbucks by Tom Keough

The Industrial Workers of the World has begun organizing workers at Starbucks coffee shops, seeking fair wages and benefits, including health insurance for every employee. Starbucks man-

agement has refused to negotiate with its workers.

With the aid of friendly syndicalist unions in Britain and France, the effort to organize Starbucks has become an international campaign. •

research unimpaired by sexism, racism, or homophobia.

We call for full funding for AIDS research, prevention, and treatment; and for public ownership and worker and community control of the pharmaceutical industry.

We call for educational programs to help prevent drug addiction; for voluntary treatment programs for addicts and alcoholics; and for the availability of free, sterile needles for those still using IV drugs.

We call for the reinstatement of funding to community mental

health services so that low-cost and no-cost treatment is available on a voluntary basis, with clients' rights respected. We oppose involuntary incarceration for treatment without due process.

We also support the right to choose or refuse medical treatment, the right to die, and the right to assisted suicide.

For more information about this campaign, contact Greg Pason, National Secretary of the Socialist Party USA, at socialistparty@sp-usa.org, or check our website: www.sp-usa.org. •

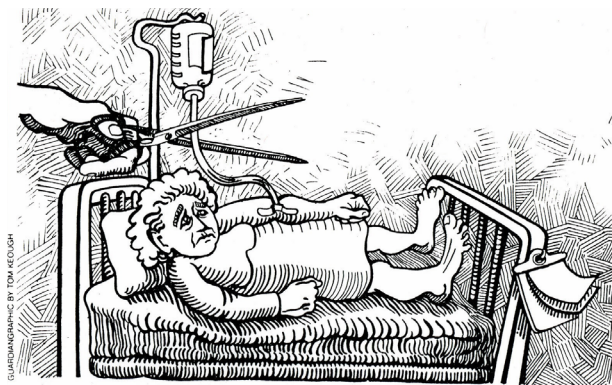
Join Us!

by Richard Truluck

Currently, there are 28 industrialized countries that have a universal health care system. Germany and India have a partial-pay system. In the United States, which has a for-profit system, there are 43.6 million uninsured people, according to U.S. Census information. Many companies and employers do offer their employees a partial-pay insurance plan, but this just isn't enough. Many workers find these plans very

been fought off by for-profit companies and corporations. We have the most expensive health care system in the world! What would it take to change this situation?

Change requires progressive measures, such as more tax dollars being spent on establishing a new system that would cover everyone in the U.S. regardless of their employment or income; and a body of health care workers and patients, democrati-



Budget Cuts by Tom Keough

expensive, or simply go without.

It has been argued that a universal health care system would cost too much money and would not be feasible. The Democrats and Republicans in Congress fight any attempt to regulate the system, and even say this is unrealistic. Managed health care has not lived up to its billing. HMO's ability to improve and manage costs has become more difficult with each passing year. Efforts to improve health care have

cally elected, to oversee the universal health care system. A high-quality system would emphasize preventive care and give serious attention to special needs, AIDs, and reproductive services, among other health issues. Offering comprehensive care would be the key.

So, support the SP-USA campaign for socialized health care. Get out and spread the word. Join us today! Help bring about the progressive change that is so desperately needed. •

WHAT WE STAND FOR...

Feminism is a social movement to confront, counteract, and eradicate eons of oppression directed towards women. This oppression is rooted in societies dominated by men, money, and competitive values and takes many forms, including discrimination in many areas of economic, social, and political life, leading to the loss of educational, employment, and leadership opportunities; stereotyping, leading to severe restrictions on personal freedom; and pervasive violence, from belittling to battering to murder. The low-status and oppression of women we experience today is an outgrowth of the twin evils of patriarchy and capitalism. This situation can only be overcome through the awareness, actions, and solidarity of women and men with the consciousness, ideology, and programs necessary to build an international mass movement for fundamental social change. Socialist Women is a socialist feminist publication dedicated to the realization that women's personal and political lives are inextricably connected. During the Second Wave of feminism in the 1970's and 1980's, millions of us came to understand the nature of our oppression and the horrendous impact of patriarchy on our existence as individuals. The wakening of women through the famous consciousness-raising groups was the touchstone of the women's movement. The personal did in fact become the content and vehicle for the emergence of a significant political movement. The process is far from over. Smothering domesticity is still the woman's burden. Out of our plight comes the personal and political awareness, will, and means to fight for social change. Socialists cannot ignore this or turn their backs on what we now know about our struggles as women and as workers. Those who would dare to push the clock back on the discoveries women have made regarding their personal and political selves do the entire democratic socialist movement a monumental disservice.

Health Care in My Life

by Jay Goldspinner

I grew up in a small Maryland town in the 1930s and '40s. My mother cared about good food and other ways to keep us healthy. She used passed-down home remedies (like mustard plaster for a cough). Our doctor came to our house when we were sick. I could walk to the dentist's office. Occasionally one or another of us went to the hospital. We weren't poor or rich. We took health care for granted.

My husband was an idealist, like me. We wanted to live simply and "help people." We lived in Philadelphia, first in a settlement house in the "slums" and then in an integrated neighborhood where people valued

cooperation and community. I went to hospital clinics for my pregnancies, had my first child at home (accidentally?), breast-fed my four babies though it wasn't the norm then. I walked many blocks to a public health clinic for my children's checkups and shots.

We found two doctors (married to each other) who took care of our whole family. My youngest son, at six months old, was critically ill in intensive care in the hospital, but he came through. I had a mastectomy - and swore I'd never have another operation. It was Reuben and Gertrude, our family doctors, who supported me through the breast cancer, not the business-like surgeon who did the operation.

During our children's growing up years, we moved several times, had a series of doctors and dentists, used hospitals and their emergency rooms on occasion. Most of the time we had Blue Cross insurance through my husband's work; it covered the majority of our medical expenses.

Although we were protesters in other ways, we

didn't question the health care system. In 1974 our family with another woman moved to Worcester Mass. We lived in a house-size community of men, women and children. My own children, then in their teens, left one by one. My husband left. After that I lived with two or three women. I was a lesbian feminist. I went to the low cost community health center in Worcester, and had a woman doctor.



Illustration by Ari Moore

I had dental problems and went to a private dentist. I had no health insurance.

I became a storyteller and moved to Western Mass in 1988. I went to a doctor and a dentist recommended by a friend. But I was seeing the limits of western medicine and began to turn to alternative healing modes: first, acupuncture and naturopathy; in the last few years, body work, herbs, good food (harking back to my mother's cooking and vegetable growing), and homeopathy. Also, counseling and sound healing. All these have helped me be healthy.

I was getting older, dealing with health problems that led me-reluctantly- to

surgery. A hernia operation (after age 65, so I could get Medicare). A cataract operation. A broken elbow, with operations to put pins in and take them out. These were mostly paid for by Free Care at Franklin Medical Center and Medicare.

But I couldn't afford the rising bills of my dentist in Greenfield. I found a subsidized program, Dentistry for All; I had to go to Amherst to get a dentist who accepted it. So I am in the Catch 22 of having to drive 40 miles for low cost dentistry (which only cov-

erage monolithic systems in this country and the world, is not prepared to cope with the consequences of the way we humans are treating our planet.

So, given my experiences, what do I think about the health care system?

1. From childhood on, in clinics or with specialists, the most important thing for me has been my relationship with my doctor/healer. I want her (or him) to listen to me, give me information, include me in decisions, care about me.

2. The best health care, in my opinion, would include western medicine and alternative healing methods, under the same roof or at least connecting/respecting one another. In *The Salt Eaters*, written in the '70s by Toni Cade Bambara, there is a free clinic with all kinds of healing going on; it seemed to me like a dream come true.

3. I think health care should focus on keeping people healthy in body, mind and spirit. It should deal primarily with ordinary people and common illnesses, like medical care in Cuba today or the bare-foot doctors of the Chinese communist revolution. It should not be mainly for the benefit of rich people and big industries like pharmaceuticals, hospital complexes or insurance companies.

4. Over my lifetime, I have been able to get low cost medical care - except for dental care. Medicare has worked well for me, but keeping track of Medicare payments and doctors' bills can be complicated and time-consuming.

I think low cost or free health care of all kinds should be available to everyone who needs it (or perhaps to everyone).

The socialized health care plan being proposed by the Socialist Party USA covers many of these considerations. I like it. •

ers the basics, not crowns etc.)!

Three years ago, I found I had bladder cancer. With incredible support from friends and community (also my nurse practitioner, body worker, herbalist and other healers), I had to make decisions involving doctors, hospitals, procedures, alternative treatments. I got through it without chemo or radiation, and seem to be cancer-free today. The costs to me have not been overwhelming.

Last summer I got Lyme disease, which was excruciating in the short term and terrifying in the long term. It made me realize that the medical system, like other

Report From Denmark

by Mette Hedegaard

Imagine what the world would be like if you could always take your daughter to the doctor when her ears hurt, or bring your grandmother to the hospital with a broken arm, and never have to worry about the costs. Homeless, millionaire or single mom... anyone can come to the hospital, get a world class treatment, and never see a bill. Welcome to my world; welcome to Denmark.

Taxes

It is necessary to understand a little bit about our tax-system if you want to understand how we can afford to send everybody to the doctor and hospital free of charge. In Denmark the taxes we pay equal about 50% of our income. Some pay more, a few pay less depending on the income. Wages are relatively high. We have strong unions to secure good wages and a safe work environment.

With the high tax-rate we have built a security net that only a few can fall through. We have free and equal education, universities, healthcare, library, doctors, and welfare. Our system is based on the universal welfare model, where social services are for everybody not just the poor and needy.

Under pressure

The Scandinavian welfare model is known throughout the world. Here in Denmark we often characterize it as "the glue that keeps us together". It means that the fact that everybody benefits from this system makes the citizens feel a strong togetherness in this common project, and, most importantly, accept the high tax level. But there are of course no roses without thorns, and there are people who find this system unfair: mostly those people who stand to benefit the most

from lowering taxes—the rich!

The truth is that our welfare system, including health care, is under a lot of pressure these days, not least from the government of competitive-market liberalism that has ruled the country since 2001, but also from the fact that a majority of countries affiliated with the European Union have very different health-care systems based on private insurance models. The Danish government knows that even talking about changing this system will cost them their majority in parliament, so they are not very explicit about what they are actually doing. Their strategy is to starve out the system in order to make way for private solutions, such as private hospitals, private health insurances, private kindergartens, private home care for senior citizens, and so on. To be specific, they have put a stop to any increase in taxes, reduced the amount of money that the municipalities can use on welfare, and required municipalities to allow private companies to deliver the welfare services.

Velvet revolution

Once in a while, the government actually admits to what their project really is. Recently a member of the government's ruling party stated that they are in the process of a "velvet revolution". But in Enhedslisten—the Red Green Alliance—we see nothing soft and velvet-like about this project. Of course, blood is not flowing in the streets, but there is a huge lack of democracy when they try to undermine the welfare system and let private companies in through the back door. They are misleading the public into believing that there is

no other way to go but the market-liberal, privatization way. They are afraid to discuss the situation in the open. It is understandable that they fear public opinion on the welfare issue. A vast majority of the Danes actually want to keep the good public welfare system, but for some reason they don't understand that the result of the so called velvet revolution, will be a welfare system more and more like the American. And it is happening right now. By not putting enough money into the public system, problems such as waiting-lists for vital operations make people look around for alternatives. And the government has already made sure that those alternatives are available: more and more private hospitals are popping up in the landscape. After a while people begin to question the quality of the public healthcare system, and a vicious spiral has begun.

What we want

One of the core issues for Enhedslisten is that welfare is a universal issue. Everybody has the right to healthcare, with the responsibility shared by us all. These days, we are fighting bitterly to maintain—and if possible expand—the public healthcare system. To us, health is not just the absence of disease but very much also a matter of preventing disease from occurring.

The statistics on early death and high disease-rates show that death and disease are more common amongst the poorest and those who live a stressed lifestyle either due to too much work or unemployment or other forms of marginalizing social problems. It is our perspective that in order to secure better health for everybody we have to focus on the whole range of social, environmental, infrastructural, and labour-market policies.

For example, it goes without saying that the food we eat is very important to our health, and we want ecological production and additive-free food on all shelves.

Therefore, Enhedslisten has issued the following demands for a better health system:

- The health-sector must be non-profit. In the health-sector the main focus must be on helping people, not making money off their problems.

- The pharmaceutical industry must be taken over by the state and be made democratic

- We want free and equal healthcare, including dental care, for everybody. Currently, dental care is private, and quite expensive.

- We want all treatment that is authorized by the health department, such as that provided by chiropractors and physiotherapists, to be free and equal.

- More rights for the patients.

- Nobody should have to wait for necessary operations

- More and better education, wages, and working conditions for all personnel in the healthcare sector.

Right now, these workers must run much faster and work harder than before. At the same time, their work has low status, and wages are low considering the responsibility they take and their work conditions (with long hours and night shifts).

Background:

Denmark has 5 million inhabitants. Enhedslisten (the Red-Green Alliance) has around 4600 members. The Danish parliament has seven parties and 178 representatives. Since the Danish parliament is elected on the basis of proportional representation, Enhedslisten, with about 3.4% of the popular vote, has 6 representatives in parliament. •

U.S. Health Care: "Sicko" Today, Socialized Tomorrow?

by Susan Dorazio

As Michael Moore's latest film "Sicko" came to an end, I found myself imagining a door flung wide open, welcoming us socialists to walk right through it, and practically begging us to proudly proclaim our demand for a national program of socialized medicine. What other conclusion could anyone come to after two hours of Moore's expose of the mean, bloated, discriminatory, inefficient for-profit, insurance-driven medical industry currently passing for a health care system in this country?

A few minutes later, over a big plate of spaghetti, some other thoughts about the film came to mind. For example, regarding Moore's examples of health care in Canada and the United Kingdom: what about the fact that in both cases serious erosion has taken place over the past few decades? Moore didn't get into this, which would have had to lead to a discussion of the impact of globalization on the willingness and ability of developed countries to maintain their infrastructure (including free, universal health care), given the national "belt-tightening" parameters of global capitalism.

Also, as Tony Benn (representing Old Labour in Britain) could and should have gone on to say: the current status of the British National Health Service speaks eloquently to the difference between social democracy and socialism.

Indeed, as socialists calling for socialized medicine, we will not settle for a social "safety net", maintained at the discretion of a hierarchical, patriarchal, competitively-oriented, centralized administrative apparatus, currying the favor of rich people. We are calling for a totally different system of health care: a fundamentally different way of viewing society in relation to the rights and needs of the working class.

Finally, my mind wandered from health care to child care, the system I know best. Over the years, child care workers, advocates, and theorists have struggled to develop and implement new models for the care and education of young children. Multicultural awareness; developmentally appropriate practice; the "emergent curriculum"; attention to the integration of the whole family in the functioning of our child care centers; and "worthy wages", and good benefits and working conditions, for child care providers have become guiding principles in the field of child care.

We urgently need new models of this kind for health care. As we've seen in center-based child care, increasing enrollment without regard for those factors that define quality care for kids and families (such as quality wages and working conditions for child care workers, a socially-conscious curriculum, and militant advo-

cacy on behalf of children, families, and workers) only makes matters worse. So, too, in health care: accessibility isn't enough. Health care workers need to put forward a vision of, and a program for, quality health care that the rest of us can include in our activist agenda as we agitate for a

redirection of funds from war and the military, and as we help build a global, democratic socialist feminist movement.

Thanks, Michael, for what "Sicko" says, implies, and enables. Onward to socialized medicine for the U.S. and all countries in the world! •

a hay penny in the morning

by Courtney Campbell

*Big big land of borrowed sugar and fruit cake
bells and freckles*

big breakfasts

welcome mats and real estate signs

Big big land of double yolks and dinner bells

of deep deep pockets and hay pennies

wallet-size photos and business cards

Big big land of open arms and hamburgers

of soup kitchens and boot straps

Big big land of homestead and opportunity!

When in the morning you shave your plains,

shed green specks into your basin,

Big big land, what is the tremble

in your hands?

Life, Liberty, and the Pursuit of Health

by Dan Conn

Health care, health care

Just who deserves health care?

Women?

Children?

The future of our country?

Workers?

Unions?

The backbone of our economy?

Health care, health care

Tell me who deserves health care?

The fascist say the elite

All those who can afford it

Life, Liberty, and the pursuit of wealth

Health care, health care

We the people deserve health care

Women, children, even the poor

How can we the people have life and liberty

When justice does not include us all?



Speaking Out on Health Care for All

by Stephanie Cholensky

Everybody deserves a resolution to the current health care crisis, not a palliative. Doctors should be able to treat the sick, not just the sick who can afford it. Young people who want to go to school to become doctors and nurses should have the ability to do so, whether or not they can pay the tuition. This is the basis of a decent society that regards people as equal, having the right to health and well being. This is the basis of a functional society where health care is guaranteed to all, where there are enough doctors to provide this health care, where preventive medicine is a priority, and where those who are the most ill receive the best care.

It's time for the United States to quit compromising when it comes to the health and welfare of its people. The broken promises of the Democrats and the lies of the Republicans have done nothing but maintain the status quo. Free, comprehensive, publicly funded, universal healthcare is something we will NOT achieve through compromise, and something that neither of the two major parties will ever call for, let alone bring into being.

Analysts from every viewpoint on this issue agree that unless there is a drastic change in the way

we approach health care, costs will continue to rise and quality of care will continue to decline. As it is, the price of medical care takes it out of reach of the poor and much of the working class, and of many white collar work-

Public programs that only cover some health care for certain groups of people are helpful, but they are only stop-gap measures that fail to provide the full range of medical services that everyone deserves. As long as health care is based

and should not be put on human life. All women, regardless of class, country of origin, employment status, or any other category they can be written off as, should have access to the best care available to them, especially when they are pregnant.

The long-term benefits of high quality prenatal and post-natal care have been demonstrated for decades, while at the same time, the availability of this critical support to all women is lacking. There is no excuse for this. It is no surprise that infant mortality rates and childhood illness statistics are tragically and embarrassingly high in the United States as compared to other industrial nations. Women need to unite, demand full health coverage for all people, the right for the patient and doctor (not the insurance companies) to make ALL health care decisions, and raise their

voices to let everyone know of the injustices of the current system.

Throughout the ages, women have been essential to making drastic changes in society, and this is what our health care system, and our very way of looking at health care, is in need of. It is up to women to unite, speak up, and not compromise! If we don't do it, no one will! •



Illustration by Tom Keough

ers as well. Employers are putting less and less into insurance premiums or failing to offer health insurance all together. Seniors are learning that pensions cannot be counted on, and the exhausted and underfunded Medicare programs not only come up short, but are in danger of being eliminated altogether.

on the financial "health" of corporations and stockholders, profit will remain the focus of the U.S. health care system, and people's health and well-being will remain sorely underserved.

Women everywhere, as well as young people, suffer most from capitalism's inability and unwillingness to provide health care for all. A price cannot