

# 4,500 professional workers authorize strike action against Michigan Medicine

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More than 4,500 professional hospital workers have voted to authorize strike action against Michigan Medicine in Ann Arbor, Michigan to achieve their first-ever contract and to win increases in wages and benefits, an end to overwork and other improvements in working conditions.

The rehab and behavioral health workers; lab and medical assistants; and hospital services and advanced diagnostic and procedures technologists are members of United Michigan Medicine Allied Professionals (UMMAP), which is local 6739 of the American Federation of Teachers (AFT).

The union announced the strike authorization vote on Instagram with a post that said 86 percent of the membership voted by 97 percent in favor of the action against the hospital system, which is operated by the University of Michigan. The union has not announced a strike date.

UMMAP has been negotiating with the hospital since February and the union said it had set a target date of October 16 for a contract to be established. Union representatives told local news media that Michigan Medicine has refused to respond to a counter-offer that was submitted to hospital management in July.

Michigan Medicine released a self-serving statement to local news media calling the strike vote by the workers “disappointing,” but adding, “We remain confident that we can reach agreement without a work stoppage,” and “no work stoppages have been scheduled.”

Meanwhile, hospital management made clear its intransigence and hostility to the workers’ struggle by saying, “We are currently planning to ensure safe staffing levels if a work stoppage occurs.”

UMMAP has not published an update on the negotiations with the hospital on its website since

August 31. At that time, the union reported “significant moves” had been made in talks with Michigan Medicine. UMMAP also said that the negotiating team “proposed a package of 14 contract items, including attendance, bereavement, management rights and more.”

Indicating that the AFT-led UMMAP has no plan to carry through the kind of struggle required to win the workers’ demands, the union stated: “It’s typical in package proposals to include some wins for the union, some items that management wants, and compromises in other areas, in an attempt to settle multiple items at once.”

These facts, along with the fact that UMMAP officials have not set a strike deadline or spelled out precisely what workers are demanding, must be taken as a warning by members of the union.

The announcement of the UMMAP strike authorization vote comes less than a week after the Service Employees International Union (SEIU) at Michigan Medicine announced a tentative contract agreement on the eve of a scheduled one-day strike by 2,700 workers who are also fighting for their first contract.

The SEIU did not tell workers what was in the settlement, which is a clear signal that workers’ demands are being completely betrayed by the union in a sellout agreement that gives the hospital virtually everything it wants. The about-face by the union was carried out after the other hospital unions told their members to go to work and cross the SEIU picket lines.

There can be no doubt that the same kind of betrayal is now underway by UMMAP-AFT officials.

The expanding movement of workers at Michigan Medicine is part of the growing rebellion of the working class against decades of attacks on jobs, living

standards and basic rights by corporations and governments around the world.

This movement is also in direct conflict with the union apparatus of highly paid bureaucrats who are tied to the employers and the political parties of the ruling class. In the US, this takes the form of the integration of unions such as the SEIU and UMMAP—as well as the American Federation of State, County and Municipal Employees (AFSCME), University of Michigan Professional Nurse Council (UMPNC), United Physician Assistants of Michigan Medicine (UPAMM) and House Officers Association (HOA)—with the Democratic Party.

With election day less than two weeks away, the unions are involved in the campaign of Kamala Harris for US president and are doing everything they can to prevent strike action from breaking out among the workers. The union bureaucrats are busy promoting the phony claim that Harris is a friend to workers when she is in fact a representative of the billionaire ruling elite.

Meanwhile, the union apparatus is worried that an outbreak of strikes and mass actions by workers will merge with the deeply felt opposition within the working class to the wars in the Middle East and Ukraine being carried out by both the Democrats and Republicans.

Michigan Medicine hospital employees should take note of the six-week strike by 33,000 Boeing manufacturing workers. The workers, who are members of the International Association of Machinists (IAM), have now voted down two contract deals agreed to by the union that do not represent their interests.

UMMAP workers must begin now to reverse the isolation of different sections of hospital employees by the multiple unions at Michigan Medicine. Rank-and-file committees of technical and professional staff, other hospital workers, nurses and doctors need to be established. They must begin by taking the conduct of the fight for hospital employee demands out of the hands of the union bureaucracies and unify the entire workforce in struggle, beginning with a system-wide, indefinite strike.

All contract talks must be live-screened to the workers. No back room deals!

The rank-and-file committees will draw up a list of firm demands for all sections of the staff, set a strike deadline and proceed to carry out the type of mass

action against the hospital management and University of Michigan Board of Regents required to win.

The Michigan Medicine rank-and-file committees must also unite health care workers across the industry against all of the employers, whether they are nominally non-profit or privately run, in a fight to remove profit from the health care industry in the fight for socialist policies.



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