

Oregon Nurses Association agrees to separate deal at 6 Providence Women's clinics, but strike at 8 hospitals continues

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We invite medical workers at Providence and across the country to write to us about the conditions they face as a result of the ongoing social crisis, the COVID-19 pandemic and the emerging threats on public health by the Trump administration.

On Sunday, the Providence Medical Group announced it had reached a separate tentative agreement with the Oregon Nurses Association (ONA) to shut down the strike at the six Providence Women's Clinic locations across the state.

The aim of the deal is to isolate the nearly 5,000 nurses, physicians and midwives who remain on strike at eight hospitals and to pressure them to accept a similar sellout. In agreeing to the separate deal, the ONA bureaucracy is aiding and abetting Providence management and undermining the position of the striking workers, who are fighting for higher pay, better health benefits, retroactive pay and safe staffing.

In confirming a deal had been reached, the ONA asserted that the agreement is a "fair deal" and that the ratification vote will take place on Monday and Tuesday.

In fact, the pay increase of 20 percent is only for those nurses at the top of the pay scale and barely matches the record level of inflation over the past four years. At the low end, the 4 percent raise does nothing to address the crushing cost of housing and other basic necessities. Nor will they incentivize new nurses to join the staff and alleviate the staffing issues that are at the forefront of the rank-and-file demands to be resolved.

Just how precarious workers' living standards are is underscored by the future price hikes that will result from Trump's trade war measures against Canada, Mexico, China and other countries, notwithstanding the 30-day "pause" on implementing tariffs against the first two countries.

The contract also does not give retroactive pay, one of the main demands of the rank and file. They have been fighting for a contract since November 2023, for 15 months, against the intransigence by Providence which has consistently been opposed to providing a decent standard of living for the healthcare workers who play a critical role in helping new babies and their parents.

The nearly four-week walkout in Oregon is the largest ongoing strike in the United States. It takes place as protests spread across the country against Trump's attack on immigrants and opposition grows to Elon Musk's threats to fire thousands of federal workers and gut essential social programs. It also takes place as Trump's pick for director of Health and Human Services, the anti-vaccine quack Robert F. Kennedy Jr., nears confirmation.

Trump's attacks on democratic rights, public health and any restrictions on the corporate exploitation of the working class are quickly transforming the Oregon strike and upcoming struggles by other sections of healthcare workers into a political confrontation with Trump and the oligarchy he speaks for.

The conditions exist to broaden the scope of the strike and win workers' demands. In the coming weeks, contracts will expire for tens of thousands of nurses and other healthcare workers, which create the conditions for a united counter-offensive against the corporate domination of medicine and to assert the rights and demands of healthcare workers.

Some of the largest struggles include:

- 600 nurses at the University Medical Center (UMC) in New Orleans are set to begin a two-day strike on February 5.
- 2,500 attending physicians at three New York City public hospitals may strike soon after rejecting sellout agreements with barely above-inflation salaries and no

retroactive pay.

- 25,000 Connecticut healthcare workers, whose contract expires on March 15, and another 4,000 in Rhode Island on March 31.

- 6,200 nurses, who struck the Stanford hospitals in 2022, face a contract expiration on March 31.

- 57,000 Kaiser Permanente workers in California will see their contract expire on September 30.

- 16,000 members of the New York State Nurses Association at 17 hospitals face a contract expiration on the last day of 2025.

To unite these struggles, Providence nurses and other medical workers must form rank-and-file committees, democratically elected and run to enforce the will of the workers, not those of the bureaucrats, corporate executives or capitalist politicians.

The only way for nurses to achieve their demands is to transfer power and decision-making from the union apparatus to the workers on the hospital and clinic floors. This means linking up with other committees in the US and around the world under the umbrella of the International Workers Alliance of Rank-and-File Committees (IWA-RFC).

Healthcare workers must be mobilized at PeaceHealth, Kaiser Permanente and other networks in the region, across the US and internationally and connected with the broader struggles of workers against attacks on living standards and democratic rights as part of the fight against capitalism.

Workers will not achieve their demands otherwise, as the few details about the most recent Women's Clinic contract shows. The deal does not meet the demands of workers for safe-staffing levels and simply reiterates the requirements included in the Oregon safe staffing law. As the WSWS has previously written, the law has not stopped hospitals from violating nurse-to-patient ratios and even includes a mechanism for hospital executives to impose higher ratios by fiat in the case of a dispute between management and caregivers.

Thousands of other nurses at Providence have also been working without a contract for more than a year, along with those at Providence St. Vincent, Willamette Falls and Providence Newburg medical centers whose contracts expired on December 31, 2023. Retroactive pay is a necessary windfall for many to finally pay for mounting expenses that have been piling up as their wages have stagnated.

The ONA bureaucracy is allied with the Democratic Party which, despite its periodic "left-sounding" rhetoric,

is a party of Wall Street and the Pentagon. It did nothing to stop Trump from returning to power and is now giving him a green light to establish a presidential dictatorship.

Just as they were in the forefront of the fight against the spread of COVID-19 and the attacks on science and public health, workers in the healthcare industry must play a leading role in the defense of immigrant workers, including their own colleagues. The attack on immigrants is aimed at dividing the working class and creating a climate of fear and intimidation so that the corporations can escalate their exploitation of all workers.

The Department of Homeland Security under Trump has already stated that schools, churches and hospitals, historically considered inviolate from immigration raids, are now legitimate targets for police state operations.

According to social media accounts, police are already being used to ask "about any staff being foreign workers and their immigration status." And others noted that their coworkers are already discussing "about whether or not they'd be deported all weekend."

Another worker in Phoenix, Arizona, wrote, "Yesterday there were cops (local PD) randomly in the parking lot of the clinic I work in. ... Man it felt like a matter of time until they came in and started asking around. Who knows how many patients they scared off." More than one-sixth of the workers in the Phoenix area are immigrants, many of whom are undocumented.

The Pacific Northwest is home to millions of immigrant workers, including an estimated 140,000 who were employed in the healthcare and social assistance industries in Washington and Oregon in 2020. In the recent Boeing strike, native-born and workers from Latin America, Asia and Europe all joined together in a common class struggle.

We urge striking Providence Health and Services workers to join the International Workers Alliance of Rank-and-File Committees (IWA-RFC) to transform their battle into a fight by the whole working class to defend democratic and social rights, including the right to free, high quality healthcare for all.



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