

# THE KEYSTONE

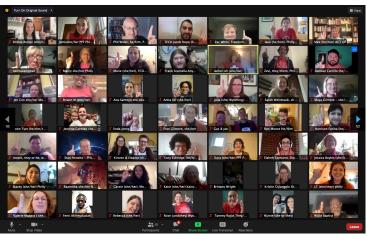
A BIANNUAL NEWSLETTER
PUT PEOPLE FIRST! PENNSYLVANIA

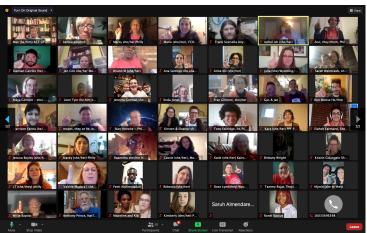


# ORGANIZED, THIS SYSTEM WON'T LAST!

Fall/Winter 2021-2022











<u>Clockwise, from top left</u>: PPF-PA member **Jamie Blair** participates in July's **Healthcare Reality March** (July 17th, 2021), organized by the Philly HRC; screenshots from the closing at this year's statewide **Membership Assembly**, with PPF-PA members and members of our partner organizations; members of the **Montgomery County Healthcare Rights Committee** (HRC) hold a **Project of Survival** (PROS) in Norristown, PA; a little bit of encouragement for us found on the streets!

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### WHO ARE WE?

Put People First! PA gives voice to everyday people who are struggling to meet our basic needs. We define our basic needs as things we need to live healthy and fulfilling lives — things like education, housing, health care, jobs with living wages, food, and a healthy environment.

We're a membership organization made up mostly of people who know from our life experience that poor and working people need to unite and have a voice.

We're building, county by county, all across Pennsylvania. We're urban and rural. We're multiracial. We're politically independent. Until we unite, we don't have the power to change things.

# WITH HEALTHCARE AT STAKE, OUR VOICES SHOULD COUNT

My life has been hard, but I've always worked even harder. I want to share a bit about where it's gotten me — and what it might mean for you if you struggle like I have.

I grew up in a family without much money. When I dropped out of high school, my options were limited to minimum wage jobs. That wasn't enough to pay the bills to begin with, but things got worse when a dishonest employer shorted me on hours and wages. When I took \$9 that was owed to me — just so I could eat — I ended up with a criminal record. That killed my dream of going to nursing school. These things happen all the time when you're poor. But growing up struggling can also instill a fighting spirit.

I became a home health aide, the closest thing to nursing I could get. I liked the work, but the wages were very low. I worked 60 hour weeks just to scrape by, which took a toll on my body. Eventually my mobility was compromised and I needed surgery that I couldn't afford. As more health challenges piled on, I was forced to quit my health care job and try to get by on odd jobs.

Fortunately, in 2015, Pennsylvania finally expanded Medicaid under the Affordable Care Act. The promise of much-needed foot surgery was so close. But Pennsylvania's complex, partially privatized system created more barriers. Complicating matters, I was married to an undocumented person, so I was scared to access services.

Eventually I realized that the system wasn't just failing me and my family — it was rigged against everyone like us: poor people working low-wage jobs, regardless of where we came from. That's when I got involved in Put People First PA, which organizes struggling people across the state. Through my work there, I got to be involved in health care again, this time as a community organizer and advocate.

# **Tammy Rojas** | Lancaster



Around the same time, I got involved with the Poor People's Campaign, a national moral movement that links the issues I was living with to many others. I learned more about the disenfranchisement of poor people like me, of people of Mexican origin like my family members, of people in rural Pennsylvania, and beyond.

Getting involved with other people was so empowering. It also opened my eyes to all the ways our education, health, legal, and voting systems functioned to favor those with money and political clout — and leave the rest of us out. For example, we had two hospitals serving us in our city. Lancaster. One of them. St. Joseph's, closed, leaving residents reliant on the other hospital — which was badly over capacity, especially during the pandemic. In St. Joseph's place, developers want to build townhouses and boutiques. County officials say we have to choose between health care and housing, but what kind of choice is that? My partner and I were among the many affected by the resulting lack of access to testing and COVID-19 care. We survived, but many others didn't.

There are more than 800 hospitals that are set to close this year because they aren't making enough money, even though the people in those communities need them. It's not right. It's not what this country is supposed to be.

Poor people work hard. We have ideas for quality health care, housing, and justice. But our voices are often silenced by the corporate interests that have undue influence over lawmakers.

If you're as fed up as I was, you can join your state chapter of the Poor People's Campaign. Get involved in fights over health care and voting rights. Show up at planning board meetings, city council meetings, and school boards. Be active with us.

Let's raise our voices together and transform the systems that don't serve us into those that will.

First published in OtherWords, 9/29/2021

# MEMBER REFLECTION: ERICA CALDWELL

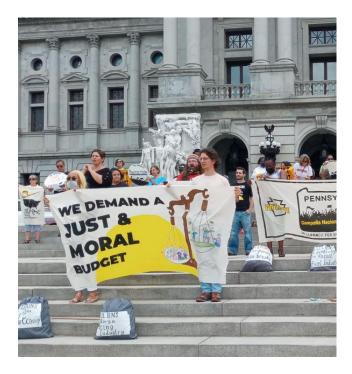
### Erica Caldwell | York

At a Pennsylvania Poor People's Campaign: National Call for Moral Revival action this past summer, PPF-PA member, **Erica Caldwell** spoke about her experience as a US military veteran. The action was part of the kickoff in states across the country of a yearlong campaign, called the Third Reconstruction to End Poverty, which will culminate with a massive march and assembly in Washington DC on June 18th, 2022. Below is an excerpt from her powerful speech.

My story for why I joined the military really isn't all that different from others who've enlisted. I graduated high school in 2001, and I *really* wanted to go to college, but the truth was I had no idea how to afford it other than going into the military. I come from a military family and hoped to one day be the first in my family to earn a degree. So when the Navy recruiter called, I figured that might be a good way to afford 4 years of college without sinking my parents deeply into debt.

...We spent much of our deployment looking at satellite images of Iraqi townhouses, not compounds, not isolated mansions, but townhouses, and then we diligently calculated the distances, altitudes, coordinates so that the so-called smart bombs could hit the supposedly intended target, and hopefully not its neighbors. I kept my doubts and concerns quiet until one

evening when my Targeting Officer stood over my shoulder urging me to hurry. The F18 was loaded and waiting for the calculations. But this memory from my time with the drones kept nagging at me. It was this memory of a young Iraqi girl, in a frilly white dress, all alone, searching through the rubble of a townhome similar to the one I was staring at. Back at the drone command that day, my air force comrades and I watched her in silence for what felt like ages, in our air-conditioned building 6000 miles away, while she struggled alone through the tragedy of her homeland.



The only words I managed to say to my Targeting officer on the ship formed just one simple question. "Will we ever get any military targets to drop on?" He spent the next two minutes in silence staring at the image of townhouses in front of me, then quietly said "We just drop on what we're given." and walked out the door.

By the time my 6 year contract was up, I wanted no part of military service anymore. I got out. I moved to Coatesville, a small impoverished, and cheap to live in old steel town over in Chester County. I started bartending in the tavern a few blocks from where I rented, a tavern where I was pretty frequently the only white person in the place.

Things were hard in Coatesville. A few of my patrons would pop in for a drink after getting spiffed up for job interviews. One of my patrons came in frequently after interviews, but he always looked defeated. He knew as soon as he left he didn't get the job. But one day he came in excited, and I was happy for him...He'd been talking with the recruiter and was going to join the Army. I spent the next hour trying everything I could to talk him out of it...But he told me very calmly and clearly, that he didn't doubt anything I said, but what choice did he have? It was the only option if he was going to build a life. If he was going to have dignity.

In that moment, It became crystal clear that we will never be able to address the harms of militarism without addressing the harms of poverty and racism.

The truth is that we use poor people here to fight poor people there. That the power holders work together so that the few can make more and more and more money. The costs to poor and working class people don't factor in their balance sheets.

If there were no more poverty, if education and healthcare and the basics that we need to live lives of dignity were available to each and every one of us, How many people do you think would still join a standing military? How many men and women would come home scarred and broken at the age of 22 or 23 years old?

There is too much wealth in this country, there are too many resources in this world for there to be children going hungry at night, for folks to be kicked out of their homes, for our elders and children to be denied the healthcare they need because they are too poor to afford it.

That's exactly why I've joined the Poor People's Campaign and Put People First Pennsylvania. This fight is a moral one. And we need all of you standing next to us.

To the power-holders in Pennsylvania and across this country—I have a message for you: We're watching, we're organized and we demand it's time to Put People First! ▼

# MEMBER REFLECTION: VALERIE MADARA

Valerie Madara | MontCo

I am a mother, a wife, a sister, a daughter, a friend, a teacher, a co-worker, a survivor, and an advocate, and I have first-hand experience with the shortcomings of our healthcare system. I grew up in the poor city of Chester, PA. I was able to put myself through college and graduate with a BA in Art, and I have since lived in the counties of Delaware, Bucks, and Montgomery. Through this time, I have watched family and friends not get adequate healthcare and even die because of the broken healthcare system in our state and great country.

There is nothing worse than having to struggle with getting proper care for your own child. In 2018, my youngest son had to be rushed to Children's Hospital of Philadelphia in the middle of the night. At only eleven years old he was diagnosed with Type 1 Juvenile Diabetes. At the time I was thanking God that he was already on Medicaid. If not the medical bills and supply expenses would have been astronomical.

There's no way we could have paid out of pocket or even with private insurance copays let alone no insurance at all. Luckily the social worker at the hospital told us what to do. After three days he was released and sent home with diabetic supplies, a year of follow-up appointments, and a list of items not covered by insurance.

After almost a year, my son was able to get an insulin pump and Continuous Glucose Monitoring equipment, all paid for through the insurance company. After going through statements for the medical supplies I noticed that there was a discrepancy—we were being shorted items from the supply company. I had to make several calls to customer service and finally had to report everything to the insurance company before getting results.

# "HOW MANY MORE PEOPLE WILL HAVE TO SUFFER—OR EVEN WORSE, DIE BEFORE THE SYSTEM IS FIXED?"

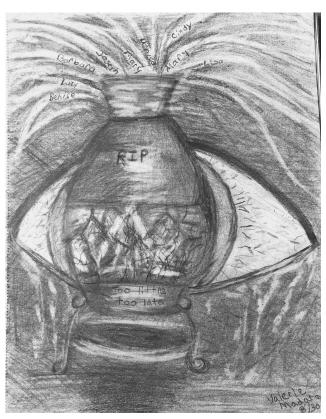
Valerie Madara

Then, only two years later, my son was also diagnosed with severe migraines. Migraines, along with other factors, can cause insulin levels to increase or decrease in a person. My son would often have to increase his insulin dosage, and without insulin a Type 1 Juvenile Diabetic person will die! There has been more than one instance in which my son has been denied getting his insulin because the insurance company who has helped in so many ways failed to approve the care he needed.

It was already decided how much insulin he would get and when he would be able to get it at the pharmacy. I was told by the pharmacist that additional insulin could be purchased but would be really, really expensive.

After once again making phone calls to doctors, who were also very frustrated with the insurance company, new prescriptions were sent. I wish this was the only time of having to go through this, but it was not. The last time this happened my son was once again getting over being sick and needed more insulin, only a day before his prescription was eligible for an automatic refill.

He and I drove to the pharmacy two nights before he could get it to make sure he would have it in time. The doctor already called in a new script in order to make sure it would be covered, but it wasn't. It was all only because of the wording of the prescription. If it weren't for the kindness of the pharmacist, my son would



Artwork by Valerie Madara

have been back in the emergency room. The pharmacist read over the prescription from the doctor and told us what was different from the last prescription, and we then had to then drive back home and call the doctor again that night. In the end, he still didn't get the insulin until the following day—right before running out!—because the pharmacy was closed.

Why is it that we have to constantly go through these battles before getting the healthcare we need? How many more people will have to suffer—or even worse, die before the system is fixed? We need to act now and demand better healthcare as an equal right for all people. Healthcare decisions should be made by individuals and their doctor, not the strangers behind desks at the insurance companies who only see numbers and not people. This is why I have been looking for an organization to help people get help. This is why I joined PPF-PA! This organization is here to help ordinary people like us get the help we all need & deserve as humans who need healthcare.

# WHY OUR CAMPAIGN FOR A PUBLIC HEALTHCARE ADVOCATE IS CENTRAL TO ORGANIZING AROUND HEALTHCARE AS A HUMAN RIGHT

In this three-part segment, we look at **how** we got to where we are today, **why** a Public Healthcare Advocate is needed, and **what** such an advocate will do.

**Campaign Team** 

#### PART I.

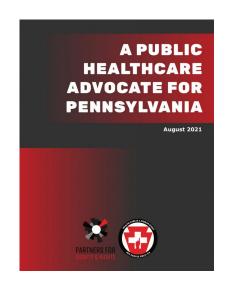
# HOW WE GOT OUR PUBLIC HEALTHCARE ADVOCATE BILL INTRODUCED TO THE LEGISLATURE AND WHAT COMES NEXT

We're proud to announce that on September 1st, thirteen State Representatives introduced a version of our Public Healthcare Advocate bill in the House Health Committee! This is a major milestone in our campaign and a huge cause for celebration, though we know we still have a lot of work to do.

We launched our campaign for a Public Healthcare Advocate (PHA) back in 2018 after two-year campaign targeting the Pennsylvania Insurance Department (PID). In 2016 and 2017, we fought for and won the first ever public hearings and statewide town halls on insurance rate hikes. These were significant victories, and over the course of those two years we engaged hundreds of people in a series of escalating tactics that resulted in bringing in and developing dozens of new members and even starting new Healthcare Rights Committees (HRCs), like Altoona!

Despite winning the hearings and mobilizing members and contacts across the state to participate in them, the PID approved insurance rate increases of over 30%, sometimes even more than insurance companies had asked for.

The whole experience helped teach us how the



state facilitates private profiteering. It also made clear that we—the poor and dispossessed across Pennsylvania—need an official advocate in government, a PHA, to use state power to actually fight for the healthcare rights of the people, not for the "right" of healthcare profiteers to increase their bottom line. As with all of our campaign demands, our fight for the PHA is a vehicle for us to advance the building of the working class movement in Pennsylvania through our Healthcare is a Human Right Campaign and the base building and leadership development within it.

Over the last three years we've done a ton of work to get to this point, and every single active Put People First! PA (PPF-PA) member has helped build our vision, our base, our organicity and our power to get us to this moment. In our HRCs, we've been organizing new people through Projects of Survival, sharing our healthcare stories in organizing conversations and using all our tactics and actions as opportunities to speak out about why we need a public advocate. We've worked alongside groups in the Poor People's Campaign: A National Call for Moral Revival (PPC:NCMR) to illustrate the value of a PHA for all kinds of situations facing the working class in PA-from denial of healthcare in prisons to lack of access for immigrant communities, to public disasters caused by environmental devastation. We've been meeting with our legislators, staff from the governor's and Attorney General's office, and strategic and tactical partners to build support for our vision. Campaign Team has researched Pennsylvania law and public advocate models in PA and other states to envision what a strong, effective, and politically

independent model looks like. We turned that vision into a bill written by us that formed the basis of the law that was introduced. We also created a report demonstrating in detail why a PHA is needed and worked with the Media and Communications Team to make an info-graphic in English and Spanish.

On September 1st, 13 co-sponsors introduced a version of our bill into the House Health Committee. Representatives Dan Frankel, Austin Davis, Sara Innamorato and Matthew Bradford are four of the first 13 co-sponsors of this bill, and Rick Krajewski has signed on. Congratulations to the Pittsburgh, MontCo and Philly HRCs and the Legislative Team for getting them on board!

Introducing our bill was a major step, but we still have a lot of work to do in the coming months to build political support behind it and make sure our bill is as strong as it can be.

The biggest thing we need to do is line up more legislators behind our bill, especially Republican co-sponsors. A PHA should not be a partisan issue. All legislators, whatever their party, need to stand on the side of everyday people and support this bill, and we need to make sure that happens from the start.

Second, the version of the bill that has been introduced in the House (HR 1828, viewable here) is really strong—most of the language on the purpose and powers of the PHA was written by the PPF-PA Campaign Team—but the legislators who introduced the bill changed some things, including adding in language referring to human beings as "consumers" and removing the Community Advisory Board from our bill. To fix those problems, we need to work with legislators to introduce amendments to the bill.

The single most important part of our campaign over the next couple months is our meetings with legislators. Legislative visits can feel intimidating, but are an essential way for us to grow our leadership, build our political power and win the PHA, so we need every HRC to make legislative meetings a top priority. Stay tuned too for more information from Campaign Team, Legislative Team and your HRC coordinators about statewide actions to advance our bill including an Advocacy Day at the State House, a statewide town hall and other tactics in

the fall/winter 2021 and winter/spring 2022 to organize support for our bill.

#### **Media & Communications Team**

#### PART II.

# WHY WE NEED A PUBLIC HEALTHCARE ADVOCATE: HIGHLIGHTS FROM THE PHA POSITION PAPER

Part I explains the need for a PHA "to actually fight for the healthcare rights of the people, not for the "right" of healthcare profiteers to increase their bottom line." You can read the full position paper on our struggle for the Public Healthcare Advocate on our website, <u>putpeoplefirstpa.org</u>. Here are highlights of the crisis in PA:

## Care forgone or delayed because of cost

Four out of five of the people had insurance yet were still forced to skip care. In a 2018 survey, this was true even though 97% of those surveyed had insurance.

# Wrongful Denials of Coverage and Claims Studies have shown denial rates are often

Studies have shown denial rates are often between 11% and 26% of claims submitted.

# **Unaffordable Bills and Medical Debt**

Our 2016 survey revealed that medical bills had forced more than one in three respondents to skip paying for basic needs like groceries or utility bills. Four out of five of these people had insurance.

#### **Abusive Market Power and Hospital Closures**

Corporate consolidation of hospitals, nursing homes and other providers gives a few giant health care companies enormous market power, enabling them to drive up healthcare prices, take advantage of patients, force doctors to affiliate with them, and lobby for favorable rules and regulations.

#### **Economic Toll on Communities and the State**

A survey found that 29% of people who are struggling to pay medical bills end up losing a job or having to take a cut in hours or pay.

# PART III. WHAT IS A PHA AND WHAT WOULD A PHA DO?

Below is the graphic that first appeared in the Keystone spring/summer 2021. ■

# PUBLIC HEALTHCARE ADVOCATE

# WHAT IS A PUBLIC HEALTHCARE ADVOCATE?



A PUBLIC OFFICIAL (BACKED BY A STAFFED OFFICE) WHO FIGHTS FOR THE HEALTH CARE RIGHTS OF ALL PEOPLE AT THE STATE LEVEL



# **PUBLIC MEANS.**

Protecting the health care needs & rights of all residents of the Commonwealth

Serving the public interest, not the interest of profiteers Holding both private profiteers and public agencies accountable

## HEAI THCARE MEANS

Responding to the needs of residents on all kinds of healthcare plans/programs, as well as everyone excluded from care Responding to public health crises like environmental devastation, prison healthcare, and pandemics

## ADVOCATE MEANS..

Fighting for all residents to get the healthcare that they need and deserve as their human right



4

fight for our healthcare rights, as individuals and as a class

2

act as a mouthpiece for our struggles by creating spaces for people to have a direct say in the healthcare decisions that affect our lives

3 |||||

help lawmakers to make our healthcare system work for patients and healthcare workers

4

work to hold healthcare agencies and industries accountable

We are drafting legislation to create the Public Healthcare Advocate and need the state legislature to pass our bill. That means we need to organize in our communities to pressure state legislators to take action. And that's what we are doing across the state in 2021!

THE PUBLIC HEALTHCARE ADVOCATE IS WHAT WE MAKE IT!

WE ONLY GET WHAT WE'RE ORGANIZED TO TAKE!

Fran Gilmore | MontCo

# OUR LANGUAGE ON HEALTHCARE PROFITEERS AND WALL STREET: WHAT DOES IT MEAN EXACTLY?

In PPF-PA we often speak of healthcare profiteers, and making the invisible visible, such as showing that those profiteers have ties to Wall Street and to politicians and media. To be clear on exactly what our slogans mean, it may be useful to explore two questions:

What is a **profiteer**—don't all businesses make profits, and is that bad?
What does it mean to be tied to **Wall Street**? To **politicians** and **the media**?

#### "Profiteers"

The dictionary says profiteers are people or companies that make excessive or unfair profits.

In a capitalist economy, a business must make a profit to survive. But you probably wouldn't call your neighborhood hardware store or other local businesses profiteers.

At the other end of retail, at the giant chain, consider Walmart. They operate on such a big they can undersell the competition with low prices. But, not wishing to let that cut into their enormous profits, they pay so little that their employees often must receive welfare or food stamps. So they squeeze their workers, drive some of their smaller competition out of business, and force us, the taxpayers, to supplement their employees' wages with benefits. Β̈́ν the government dictionary definition, Walmart is certainly a profiteer!

Put People First! PA defines profiteers in healthcare as: "corporate entities, including insurance companies, Managed Care Organizations (MCOs), the pharmaceutical industry, hospital systems, privately owned elder care facilities, hedge funds, real estate

companies, private equity firms, medical device firms, privatized prison healthcare corporations, and others who turn our pain and sickness into a multi-trillion dollar global industry. We are not talking about healthcare workers. We believe that everyone who works to provide care should be well compensated and have the right to unionize."

We'll soon look at the scope and enormous consequences of profiteering in the healthcare industry.

#### "Wall Street"

Most people have a general idea what Wall Street is—banks! Wall Street is in fact the location of many of the largest banks and other financial institutions, as well as the New York Stock Exchange and the Federal Reserve Bank. Not all banks and other financial institutions are physically located on Wall Street, even those in New York City. But we can use "Wall Street" to refer to the financial industry in general, whether based in New York, Chicago or California (the three major banking centers) or elsewhere.



# Corporate and Financial Power: Policy and "Media"

Together, the financial and corporate sectors hold so much money, they have enormous influence on policy, on how much money is



spent where and on what, and on laws passed by state and federal legislatures. Thus they have an enormous influence on all of our lives. They exercise their power in many ways, including by: (1) donating enormous amounts of money to politicians, who they can then expect to vote for what they want; (2) funding parts of justice movement the social through foundations. Some, including the Bill and Melinda Gates, Ford and Robert Wood Johnson Foundations gave upwards of a billion dollars each in the period 2003-2013; (3) creating the American Legislative Exchange Council (ALEC), made up of corporate leaders and politicians who actually write legislation corporations behind closed doors for state legislatures that is often adopted by numerous states; (4) influencing mainstream media, which together are owned by only five corporations; and (5) creating think tanks that generate neutral-seeming policy documents that wield much influence in Washington: one of the most influential think tanks is the Council on Foreign Relations, with members representing the biggest banks, private equity firms, corporations, universities, and foundations, and which has prepared policy recommendations for the federal government since 1921.

# Corporations, Wall Street, and the healthcare sector

The primary problem is that healthcare is a commodity used for profit-making, not a human right. No other large capitalist country allows healthcare to be primarily about profit. They all have some form of universal healthcare backed by their governments. But here, hospitals and related healthcare sectors (insurance, ambulances, dentists, etc) function like any other business, looking at short-term gain and not

long-term planning to provide healthcare to the population. Financial institutions, or the financial sector, includes banks, investment houses, insurance companies, real estate brokers, consumer finance companies, mortgage lenders, and real estate investment trusts. The financial sector accounts for a very large portion of the biggest corporations in the country.

And insurance companies put prices out of reach for the millions who don't have insurance through their jobs, or are ineligible for Medicaid or Medicare. Sometimes hospitals and insurance companies are part of one giant corporation controlling healthcare costs and access over wide areas.

"Over the last several years, both the hospital and insurance industries have made headlines for a historic wave of mergers and acquisitions that have consolidated ownership—and thus market power—among a handful of industry giants," explains a recent report from Put People First! PA. The report describes how that process has played out in Pennsylvania:

"The University of Pittsburgh Medical Center (UPMC), for example, controls 40 hospitals. 800 clinics, 30 senior communities and 92,000 employees, making it the largest private employer in the state. In Western Pennsylvania it not only dominates the hospital sector, but also insurance: it is the single-largest private insurance, Medicare Advantage, and Medicaid HealthChoices insurance company across Western Pennsylvania, and is now the third-largest health insurance company in the state. Through hospital buyouts and other moves, UPMC is extending its control across Central Pennsylvania too, and it is hardly the only hospital or insurance company extending its reach."

In addition to hospital corporations, Private Equity firms, one type of investment corporation, have played a big role in buying healthcare institutions in the last 20 years, and in some cases, destroying them. They work by borrowing huge sums of money to buy up hospitals, medical and dental practices, and ambulance operators and often join them together into regional or national giants. To pay off the big debt, they then try to cut salaries and lay off staff.

Even a single investment banker can play the buy-up game and wreak destruction on healthcare. Hahnemann Hospital had been the go-to hospital for the poor and working class in central Philadelphia since 1848. It was losing money in recent decades, largely because, in serving the poor, it was funded in large part by government insurance—Medicaid and Medicare—which pay very low fees. Joel Freedman, a California investment banker, thought he could make a profit by buying the hospital and making it lean and mean, laying off workers and making other cuts.

He borrowed \$170 million to buy Hahnemann and another local hospital. The profit-making scheme didn't work, so Freedman declared bankruptcy—with a twist. He managed to separate the hospital building from the land under it, a very unusual separation, and hang onto the valuable, center city property, where he hopes to make a bundle selling it to a developer to build condos or businesses.

So one of the key ways that healthcare profiteers are connected to Wall Street is by banks and investment companies buying and owning them, or financing their mergers. At the same time, the big profiteers/investors are influencing policy in Washington that will serve their interest: allowing corporate mergers, preventing increase in the minimum wage, creating corporate tax loopholes, etc. and controlling the messages delivered mainstream media. The bigger and more powerful the corporation and the financial institutions it is connected to, the more extreme its profiteering can be, and the more influence it can have on laws, media and our lives!

# **Terrell Turner** | York

# MEMBER REFLECTIONS: WHAT BROUGHT US TO PPF-PA

Presented at the "Soft Opening" of the **Membership Assembly**, as Terrell and Jessica cofacilitated a workshop.

#### TERRELL'S STORY

I grew up in Baltimore city which was democratically run and I wasn't interested in politics although all of the problems I identified were in need of a political fix. 2016 happened and I was inspired by the Bernie Sanders Campaign because there really seemed to be a politician who cared for us as people over



Jessica Boyles | Northeast PA

corporate interests. Well, he lost, and then I became politically active. After getting married, I moved up here to PA and started looking for groups to be involved in. I found PPF-PA and simultaneously ran for office. I had to deal with the democratic party who did not particularly seem interested in rural PA. They talked a good game, but it all came down to what I could do for them and not what I could offer my community; and after losing, there was a hard reset, a loss of progress and an expected allegiance to corporate candidates of higher office that I wasn't willing to give.

I then looked back to PPF-PA, which I had neglected in pursuit of public office and found progress in the way of an organization that stayed in motion. I remembered that we forced a public hearing with the PA health department that I participated in and upon returning we were set to call out Governor Wolf at his residence for not covering all Pennsylvanians with Medicaid—something well within his executive powers amid a pandemic. Not only that, we were planning for future actions. And we always challenge power directly.

PPF-PA is a place where we understand punching left and right or down is the division that the ruling class exploits to keep us from assuming the power needed to hold them to account. We aim up and we want them to know that very clearly. All of our meetings, actions, and even this, our Membership Assembly, is to build strong bonds and build leaders in each other to unite everyone with the clear goal of securing our inherent human rights. Because of that, I call PPF-PA home.

### **JESSICA'S STORY**

I'm currently coordinating the Northeastern PA Healthcare Rights Committee and I'm a member of the Legislative Team. As Terrell said, I did have a bit of a unique journey to finding myself an active voice in this movement. I grew up in a very conservative Evangelical



family and was passionate about all the typical socially conservative causes you can think of; I have no doubt you're all familiar with the type! The real beginning of my journey to this place has been my own suffering and, through that, a deep connection to and concern for the suffering of others. So over a period of more than two decades I kept aggressively pursuing my own growth, making many major internal shifts, and learning how to best be part of creating change in the world around me. That journey led me to the revolutionary work of the Poor People's Campaign and Put People First! PA. As soon as I found these organizations, I knew I was home. The key hallmarks of PPF-PA that stand out to me as revolutionary and essential include our focus on uniting our class, building permanently organized communities, intentional leadership development of the working class, and collectivity.

**Media & Communications Team** 

Highlights from the

**Campaign Team** 

MEMBERSHIP ASSEMBLY

2021



The **Put People First! PA** (**PPF-PA**) **Membership Assembly** (**MA**) is the only time in the year when the whole organization comes together, along with guests from our many sister organizations around the country. Hopefully it will be back in person, complete with hugs, in a year or two. But even coming together virtually affords us the opportunity to connect with other people in the struggle, some new to us, some known from before, learn from each other's achievements and mistakes, reflect, strategize and celebrate together.

In the planning process for the MA, we recruited our largest planning team to date with 14 leaders across the organization, nine of whom had never been to an MA before! We began meeting once a week back in August, which also made this one of our shortest planning periods for an MA. Collectively, we identified and divided folks into pairs to tackle key areas of work in the planning process, and used our weekly meetings to troubleshoot, check in and talk through challenges around what we had taken on. In total, the MA was co-constructed by over 300 hours of member volunteer labor. In this way, the planning was a powerful exercise in leadership development, a central aspect of PPF-PA organizing. In addition, over 50 members of partner organizations registered for the MA, evidence of our growing movement all over the country.

Below are a few highlights from the 9th annual Membership Assembly of PPF-PA.

#### **OPENING**

At the Friday evening Meet and Greet, we had a small group exercise to bring our energy and imaginations into Membership Assembly. We were instructed to create news headlines we'd like to see in 2031, results of PPF-PA's organizing. Here are just *a few* ideas that came up:



Putting our heads together we can imagine a new world!

#### **YEAR IN REVIEW**

We had so much to celebrate during our year in review. Briann and Jacob took us through the achievements of our whole organization as well as those of the different Healthcare Rights Committees (HRCs) and Teams.

We've come a long way in building the Nonviolent Medicaid Army (NVMA). The Basebuilding Team (BBT) in partnership with the Media and Communications Team gave us a training on online base building. Later, the BBT made sure our members were trained up and equipped with all of the resources needed for successful base building during the NVMA Week of Actions.

We developed Projects of Survival (PROS) as a means for base building and leadership development. PROS took different forms in different HRCs: some HRCs signed people up for Medicaid, Food Stamps and other benefits; others offered health screenings and advice, and

most offered free food, clothing and other items.

We launched a Project of Survival Team to support these efforts. Our HRCs held over 30 Projects of Survival throughout the year that helped over 80 people apply for Medicaid, food stamps and heating assistance.

We also launched a Legislative team to help the HRCs make legislative visits to build support for our Public Healthcare Advocate (PHA) Campaign. Also to build support for the PHA, our Campaign Team released a report demonstrating the need for a PHA, centering people's personal stories and experiences within this criminal system. The Public Healthcare Advocate legislation has now been introduced—HB 1828!

The Political Education and Leadership Development Team helped us develop our 4c's: clarity, commitment, competence and connectedness through monthly educationals, winter & summer studies, and "Struggle Is A School" check-ins to ensure we are learning and growing through the work and activities we do.

The Media and Communications team created 24 E-news, celebrated our members through member spotlights on social media and published the Spring/Summer Keystone! The Community Care team has responded to over half a dozen care fund requests—giving over \$3000 in critical funds. They also have orchestrated three Arts & Culture nights for members this year and created a winter letter exchange to keep everyone connected!

We have targeted healthcare profiteers through multiple actions such as Healthcare Workers Vigils and the Philly Healthcare Reality March. We have worked to hold power holders accountable through Call-In Days to the Department of Human Services, Budget Hearings, and coordinating 17 legislative visits to discuss the Public Healthcare Advocate. Facilitators, Briann and Jacob, left our collective feeling energized, ready for the next year, as well as feeling supported and celebrated for the work that has been put into this year.

# Here's how a few folks described their own leadership development this year:

"I organized with one foot in the non-profit industrial complex, but joining the basebuilding team has helped to ground me, making clear the difference between the organizing models of nonprofits and PPF-PA. Nonprofits' organizing is about mobilizing people and meeting grant deliverables, but PPF-PA is about leadership development and permanent organization. In this space, I've been intentionally developed and given the tools I need to develop others. My work in this organization has cultivated jou, love and faith in our class and our movement!" -Briann Moue, Pittsburgh

"I realized I could be a leader. Once you do it you realize you're one of the people who can do it! I've become much clearer; 2020 showed that the system kills people; 2021 made it look like nothing will change. I see others drowning in a sea of confusion, while PPF-PA gives clarity."

# -Zevi Koretz, Philadelphia

"My past view of leaders from school and other groups is of one figurehead that struggle depends on. In PPF-PA everyone helps everyone rise."

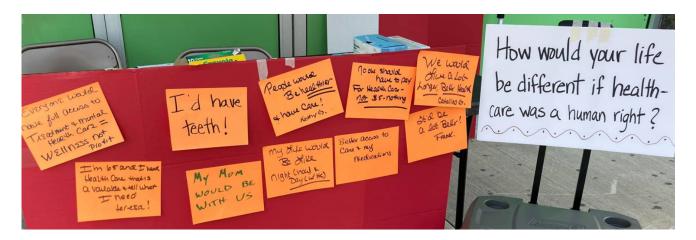
## -Cesar Centeno, MontCo

"I've embraced the community and been on a learning path. It's the first time I've cared about anything other than the basic necessities of life; now I'm thinking about how to help other leaders. It's so important knowing I have comrades and friends who help people and help people help people."

- Ron Moose, Johnstown

# **PUT PEOPLE FIRST! PA 101**

The Membership Assembly weekend kicked off with Put People First! PA 101 for new members in both English and Spanish language sessions. The workshop provided new members with a basic understanding of PPF-PA, including the Healthcare is a Human Right campaign, the Public Healthcare Advocate campaign, why healthcare is strategic for uniting our class across lines of division and how they can get



involved and take on leadership within PPF-PA. The workshop explained our Theory of Change and the basic elements of our organizing model. It also looked at the roles of Healthcare Rights Committees and the teams that coordinate and push forward specific areas of work that enable PPF-PA to carry out the campaign plan each year and continue to grow.

# THE CURRENT ECONOMIC CRISIS, PRESENTED BY CHRIS CARUSO

While most sessions of the Membership Assembly are facilitated by PPF-PA members, we often have one or two leaders from our broader network who join us to share from their area of work. Co-founder, Nijmie Dzurinko, made introductory comments about political organizing, which is organizing that seeks to build a permanent organization of our class as opposed to mobilizing to win a particular struggle. Political organizing, they said, centers education, because what makes people stay is understanding what is going on in the world and what it will take to change it. Central to that understanding is political economy, the inseparable relationship between the political structure and the economy. Economist Chris Caruso then explained the current interlocking crises facing our society, and some of the responses of the ruling class and of the poor and dispossessed. Below is a summary of some of his key points:

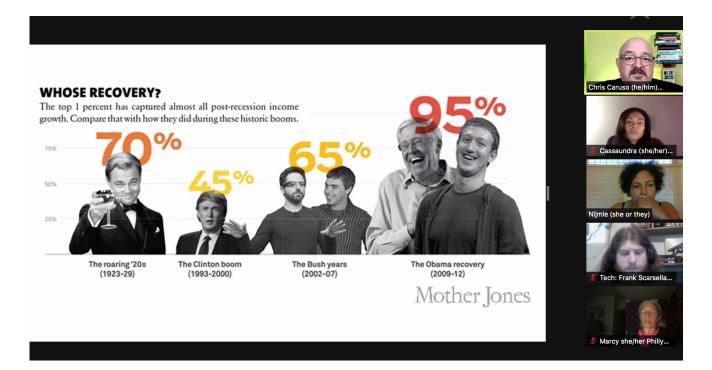
We live in one of the most hyper individualized economies in the world, one in which Americans have accepted that each person is responsible for their economic success or failure, regardless of the social and economic policies of the powers-that-be. As such, our society is full of self- and victim-blaming tendencies. Understanding political economy can help to change that.

Our society is experiencing interlocking crises: economic, environmental, and the COVID-19 pandemic. Yet, the responses of the powerful are totally inadequate. As to the pandemic, there has been no expansion of public health or access to care, and in fact some states, including Wyoming and New York, have made cuts in public health. At the same time, the wealth of billionaires has skyrocketed. On a world scale, vaccine apartheid policies of the capitalist powers has made it clear that the ruling class will not protect us.

All these political economic policies have to do with property relations—i.e., who owns what. For example, intellectual property rights allowed Bill Gates to disallow vaccines from being available without huge profits; Astrazeneca was planning to make its vaccines publicly available, but Gates stepped in to prevent that. And entire nations have refused to make exceptions to property rights to allow licensing of vaccines to provide protection to the global south.

Regarding the environmental crisis, even as the world is ravaged by fire, drought and storms, there has been no organized response from those in power.

Caruso then gave some background on the economic crisis: he noted that in the 1970s, the



economy changed radically, beginning a decades-long process of wage stagnation that continues today. The result has been a huge drop of purchasing power, and a resulting decline in the standard of living for the working class. The powers-that-be can no longer ensure a rising standard of living as they could in the post-war years up until the 70s.

The change was characterized by a disconnect between productivity and wages, resulting from four factors:

(1) The digital revolution which wiped out millions of jobs. The media generally blames globalization—export of jobs to other countries—but over 80% of the jobs lost in the past five decades have been to digitalization. And this change has affected all sectors of the economy. Globalization of production did play an important part: a commodity that used to be produced in the US might now be made from parts outsourced to numerous countries—wherever wages and worker/environmental protections are the lowest. One factor that made this massive worldwide traffic possible was that shipping containers greatly reduced shipping costs.

(2) Financial deregulation, mostly under Democrats, successfully dismantled the many laws passed in the wake of the Depression, laws that mitigated Wall Street behaving as a casino—speculating with other people's money. The casino is back. The amount of money that Wall Street is betting on what is going on in the economy is ten times bigger than the actual value of the underlying economy! The significance of so much speculation is that it just increases the wealth of the Wall Street speculators while adding no jobs or production to the economy. It reflects the crisis of chronic overproduction and inability of impoverished workers to make purchases. Thus, wealthy capitalists will not invest in factories, they'll use their money, including government bailout money, to buy back their own stocks (increasing the stocks' value, and hence their own wealth).

When speculators win, they make huge profits; but if they lose, they get bailed out.

- (3) **Attacks on unions**, starting with Reagan in the 1980s, resulting in wage repression.
- (4) **Incarceration** vastly increased in the 1970s, acting as a form of racist social control and,

essentially, as punishment for impoverishment or joblessness.

All of these changes have had a disastrous effect on the working class:

- Americans workers work on average six more weeks per year than in other industrial countries:
- Multitudes of workers have spent down their savings, and low wages mean it is impossible for most to save anything now;
- Outsourced production has led to a saturation of cheap goods;
- Enormous household debt, mostly for housing, borrowing and credit card spending, acts as a "wet blanket" on the economy, as when we get a few dollars we have to use it to pay down our debts, which makes Wall Street richer, but provides no stimulus to the economy;
- Comparing recoveries from recessions over the past two decades, we see that in each recession, a bigger percent goes to the ruling class!

All these changes in the economy have not only deeply harmed our class, but they have created a crisis of legitimacy for the ruling class. Many people now see that our political system cannot meet the challenges we face. The changes also highlight the built-in recipe for self-destruction in capitalism itself: capitalism can't function as it destroys the consumer base.

Finally, many more interesting points came out in the question/answer session. Perhaps most important for the future of PPF-PA, our class and our country is this: The 140 million identified by the Poor People's Campaign as the poor and dispossessed are not the poor of earlier generations. The technological revolution has resulted in huge downward mobility among all kinds of unemployed tech workers. Some tent cities in California are occupied by PhDs, many of whom are removing their degree from their resumes so they won't be seen as overqualified for the jobs available. The 140 million are a sleeping giant of great collective brilliance. They could be the new and unsettling force that Martin Luther King, Jr. spoke of in founding the original Poor People's Campaign.

#### LEADERSHIP ACROSS DIFFERENCE

Our theory of change in PPF-PA is based on building the unity of our whole class. We build this unity through Leadership Across Difference (LAD), which we define as the practice of uniting poor and dispossessed people and communities across Pennsylvania by investing resources, time, and energy into developing each other as leaders. In order to do this we have to understand the lines of difference that have been used by the ruling class to divide us and the strategy and tactics that have been used by our class to unite us. Documents that we have developed through learning from our activity—like "Everyday Practices of Leadership Across Difference" and "Key Pivots for Building Across Race and Other Lines of Division"—are tools that we use to sharpen our skills of Leading Across Difference.

By exploiting and oppressing different sections of our class unequally on the basis of race, immigration status, gender and so many other lines of difference—the ruling class aims to divide and conquer our entire class. This divide and conquer strategy comes from both the liberal and conservative sides of the powersthat-be, they just have different tactics to reach the same goal of preventing the unity of the poor and dispossessed. Rightwing/conservative forces fan the flames of racist, xenophobic, and other prejudiced attitudes to keep our class divided. But liberal "anti-racism" doesn't aim to unite the poor & dispossessed either. It claims that white people and people of color have fundamentally different interests—and whites can only relate to people of color as "allies."

It asserts that individual behaviors are the fundamental problem, not our economic and social structures.

To dig deeper into this, let's look at who is poor in Pennsylvania based on a racial breakdown:

- **63**% of Black people (**865,000**)
- **73**% of Latinx people (**728,000**)
- 32% of white people (3 million)
- **36**% of Asian and Pacific Islanders (**162.000**)
- **90**% of Indigenous people (**15,000**)

Liberals (either among the powers-that-be or instrumentalized by them) often focus on the proportions of poverty in each group. We think it is important to also look at the raw numbers. While the percentages show that people of color are disproportionately impoverished, the raw numbers show that all sections of our class suffer significant rates of poverty. We don't want to equalize poverty rates across our different communities, we want to end this system that produces poverty for millions of us in the first place!

LAD recognizes that these disproportionalities are part of the ruling class' strategy to keep us divided. We fight back with our strategy of uniting the poor and dispossessed across all lines of division, and we see our differences as part of our strength! We build our unity by putting to the front what we have in common, like our shared need for healthcare as a human right, because that's the only way to change what's politically possible in Pennsylvania.

# NONVIOLENT MEDICAID ARMY PARTNERS PANEL

The Nonviolent Medicaid Army (NVMA) recalls Rev. Dr. Martin Luther King's vision of the original 1968 Poor People's Campaign as a step towards building what he called a multiracial "Nonviolent Army of the Poor." The NVMA has evolved over the past few years into a vehicle to bring together the 140 million poor and dispossessed in our country, to take the unity of pain, abandonment and poverty and forge it into unity of action.

The NVMA evolved from the PPF-PA and the Vermont Workers Center (VWC)'s struggles around healthcare. Both groups came to understand that Medicaid was central to the fight, because most of our base was either on Medicaid or was excluded from it under one or another regulation. After a two year campaign targeting the PA Insurance Department over insurance rate hikes, PPF-PA began in 2018 to use the framework and language of the NVMA to help us focus on and build our base. At the 2018 Membership Assembly, PPF-PA leaders talked about building the NVMA across the

state, though the intention was always to eventually expand it beyond the state. That same year, the VWC held the first Medicaid marches. In the following year, PPF-PA organized its annual September march under the Medicaid march banner as well, and the VWC started organizing around the idea of a Medicaid army. In 2020, the Pandemic revealed more clearly than ever that those in power have no regard for human life. During that year, PPF-PA sent out a call to organizations and leaders around the country to see who was already organizing the poor and would be interested in coming together around the NVMA concept. Many organizations responded, and in 2020, 17 NVMA actions took place in 10 states. This response demonstrated that healthcare can unite the bottom, and overcome divides such as urban/rural, north/south and race. This year there were over 24 NVMA actions in 10 states. which met Week of Action goals including connecting the poor, expanding the NVMA into new places, and developing organizations and leaders of the poor for the long haul.

The Nonviolent Medicaid Army partners Panel consisted of leaders from PPF-PA, the Vermont Workers' Center, the Wisconsin NVMA, and the Poor People's Campaign from Wisconsin, New York and Texas. Panelists were asked to respond to a number of questions that were drawn from PPF-PA and the NVMA's Struggle Is a School political debrief process. Rather than try to reconstruct the questions and all the panelists' answers, we present below a few themes that came from the panelists' responses.

Theme 1: <u>Basebuilding went on before, during and after the actions.</u> "Before the week of action" involved doorknocking and projects of survival with follow-up outreach and organizing conversations to turn people out to the week of action events. One lesson from "during the week of action" was the need to be flexible about the location of an action, and go where the base is, not necessarily where the target of your action is. Similarly, it's important to target actions to the specific issues and locations of the communities where your actions are.

Theme 2: People are often reluctant to tell their healthcare stories for different reasons. In some places it's not in the culture to speak of your troubles; some people feel their own stories

aren't bad enough or they're not poor enough, and others have much worse stories. One group found that some people telling stories in public helped others feel unity and that we're all part of the 140 million. Another group found creating and displaying a storytelling quilt that visually showed people's stories helped others to tell their stories.

Theme 3: We learned many things about leadership development. (1) The intense planning, involving weekly meetings, helped develop a consistent core of leaders; (2) working with other groups that were not led by poor folks, but included elected officials and non-profit staff, helped new leaders see the difference between them and our organizing approach of the poor organizing the poor; (3) training people to speak and tell their stories is a form of leadership development; (4) political education is key to leadership development, helping people see that all issues connected; (5) leadership development happens through basebuilding, as people learn to have good organizing conversations and develop relationships with new contacts!

**Theme 4:** <u>Some pointers on getting your</u> message out.

- Make sure your speakers' content is aimed at our base
- Make a video of your action, clarifying your message for social media
- Even if you don't get press, you can spread your message on social media!

## A NOTE ABOUT OUR PARTNERS

At this year's Membership Assembly we were fortunate to have over 50 participants join us from around 18 partner organizations in over 13 states across the country. These partner organizations work on the national, state and local scale, amongst various sections of our class and on different fronts of struggle. Many of the delegations to the Assembly were fresh off organizing Nonviolent Medicaid Army 2021 Week of Action events in their respective states. Members of these delegations ranged in experience level from relatively new leaders to veteran organizers. In addition to our now

# EXCERPTS FROM WYOMING DELEGATION'S DEBRIEF OF THE MA

# What are the main lessons/new things you learned from the PPF-PA Membership Assembly?

**Maya**: Change/winning is possible because real people are suffering and dying.

**Linda**: How to grow this in Wyoming where the word "movement" scares people off. People are okay with small changes to the system, but not a movement that really pushes the status quo.

**Julia**: [The] campaign is healthcare is a human right, everyone has a body, so it's the most uniting issue. It impacts everyone, and that's the strategy. We can build something here.

# What ways did you see your own leadership grow in the MA?

Maya: Grounding, more political education, why leadership development and basebuilding are important, and what they are, and how and why to do that work—a greater understanding of what we're doing.

# How do you think Put People First! PA (PPF-PA) is different from other organizations you have experience with?

**Rose**: PPF-PA's structure is non hierarchical, volunteer, disciplined and functional.

Maya/Julia: Everyone is welcomed, respected and valued.

Julia: PPF-PA is about organizing our whole class!

Are you interested in learning and doing more with PPF-PA and other sister organizations?

Yes, Yes, Yes, and Yes!

# What is something you heard or experienced at the MA that you want to bring into WY? What do you see as the next step?

**Julia:** 1:1s and our own political education/leadership development; basebuilding & PELD [Political Education and Leadership Development] in WY.

Maya: These feel like the next steps: 1- Go to where our base is; be strategic about who we bring in, how we use our time & energy! 2-Figure out what we need to do to develop them. Use resources and political education other groups are providing, e.g., the winter study.

routine partners' lunch on Saturday, we held a pre-Assembly partners' orientation and a post-Assembly partners' debrief. Our partners brought their experience, perspective and questions which helpedPPF-PA members appreciate the significance of the work we are doing in Pennsylvania. In return we offered our partners not only a chance to participate in our Annual Assembly, but also an organizing exchange and school to learn with one another about PPF-PA's approach to building a politically independent mass organization of the poor and dispossessed.

# A MEMBER REFLECTION ON THE 2021 MEMBERSHIP ASSEMBLY

Attending any PPF-PA event (actual or virtual) is like both watching and being in a movie. The Membership Assembly of October 2021 was no exception. The presenters and attendees of all sessions were clear, competent, connected. committed. and struggled, learned, and grew together. It was a respite from our broken world, vet PPF-PA events always challenge us to listen, participate, appreciate, act, and to bring what we struggle together for to others in our lives when opportunity presents Everybody needs PPF-PA. They just don't know it. Figuring out ways to bring them in, planting seeds here and there—those are our gifts to others.

Besos y abrazos y amor a todos,

Benita Campbell Southwest PA

# A LETTER FROM ONE OF OUR PARTNER ORGANIZATIONS

For the WI PPC, the invitation to participate in the PPF-PA Membership Assembly could not have come at a more fortunate time. With many new leaders stepping in and up within our State Campaign, new roles and teams forming, and sometimes struggling to figure out how to adapt and keep pushing forward while still in the midst of a global pandemic, the MA provided us with fresh perspectives, newfound enthusiasm, a sense of rejuvenation, and renewed hope. The enriching sessions, powerful speakers and leaders, enlightening discussion, and genuine camaraderie not only lifted our spirits, but filled our heads and hearts with plenty to bring back to our fellow PPC members.

As a team, we have been able to utilize many of the base-building lessons to brainstorm new methods—including outreach incorporating more Projects of Survival, discuss how to successfully employ the concept of "agitation", and explore ways to engage in stimulating conversation that will increase the potential of commitment. We have great respect and admiration for PPF-PA's overall approach to focusing on the collective, class struggle and building leadership across difference, and in fact, this provided the basis of some of our most valuable takeaways. Our team has now begun to plan and coordinate an effective year-round schedule that includes taking part in regular group study, integration of more political education, and truly making our struggle a school.

Finally, we couldn't be more thankful to have experienced this MA with such an incredible group of people. The opportunity to meet members of other organizations, learn more about one another, hear stories of struggle and success, and engage in deep conversation was nothing short of life-changing. It was an absolute pleasure to be able to be a part of this amazing gathering, and we are honored to be alongside each and every one of you in this fight – forward together, not one step back!

Britnie Remer and Sarah Weintraub, WI Poor People's Campaign

# REFLECTIONS ON THE NONVIOLENT MEDICAID ARMY NATIONAL WEEK OF ACTION 2021



Just as important as building our actions, is reflecting on them, thinking about how Struggle is a School. Now that the Week of Action has passed, members have reflected on what we accomplished and what we learned.

## **Brittany Wright**

## **ALTOONA HRC**

The Altoona HRC held a Community Care Health Fair during the week of action. Our HRC offered wellness checks, free haircuts, harm reduction training and supplies, mental health assessments and resources as well as wound kits, sanitary packs, diapers and free clothing. We wanted to be able to help our base meet their needs in any way we could and be able to basebuild with them on who we are and why it's so important to organize. We had some great connections throughout the day-even met a few people new to the area! We look forward to being able to connect like this more often in the Altoona area and the HRC members enjoyed the opportunity to create such an event. It's amazing what we can do when we work together.

### **Iaan Reynolds**

### **PHILLY HRC**

During the Nonviolent Medicaid Army Week of Action the Philly HRC sent three brigades of 3-5 members to actions hosted by other HRCs across the state. Attending the actions in South Central PA, Northeast PA, and Altoona, these brigades played supporting roles, helping out with set up, logistics, and base building. Philly members were excited by the opportunity to deepen their relationships with other PPF-PA members across the state and learn how our struggle connects to those across the state. HRC members also attended an action in Philadelphia hosted by our strategic partner ACT UP, another Nonviolent Medicaid Army member.

#### **Ronel Baccus**

#### **PITTSBURGH HRC**

The Pittsburgh HRC held a day of action in Homewood at the corner of Homewood St. and Frankstown Ave. It was a wonderful event. We sang and we heard people's stories about their struggles with healthcare, the many health issues they have and how hard it is to get the help they need. The stories really touched my heart. We had great conversations, and we got people's information so we can follow up with them.

### Cassaundra Hill

#### **MONTCO HRC**

MontCo HRC held a speakout on Healthcare as a Human Right in Norristown. We provided free food and drinks and opportunities for our base to share their healthcare stories through different means, including a large canvas for painting, sidewalk chalk, and other means of creating art. Despite the fact that our efforts to bring in our contacts proved unsuccessful, we did bring in a few people from outside the organization, and we learned a lot while developing our members internally through sharing our own stories and holding down important roles such as childcare, food distribution, and basebuilding.



# HIGHLIGHTS FROM A RECENT

# STRUGGLE IS A SCHOOL DEBRIEF ON PPF-PA'S PROJECTS OF SURVIVAL

This summer, Put People First! PA (PPF-PA) carried out a "Struggle Is a School" process about our recent experiences with Projects of Survival (PROS). "Struggle Is a School" (SIAS) is a process of reflecting on our activities and actions, of identifying and studying the political lessons of our work. We make our struggle a school when we combine these lessons from our work with the lessons we have learned from studying history, politics, the economy and lessons from other efforts to organize the poor.

# The goals of this PROS SIAS process were:

- 1) to assess PPF-PA's PROS work and people's understanding of that work, and
- 2) to advance PPF-PA's PROS work and people's understanding of that work. We conducted interviews with seven of our Healthcare Rights Committees (HRCs).

These interviews involved meeting with the HRC coordinators and members who have been leading PROS organizing in their area. The interviews focused on how well our PROS activities are accomplishing our PROS goals, the challenges we're running up against and lessons we are learning.

### The goals of PPF-PA's PROS are:

- 1) meeting our communities' needs, 2) protest and political education, 3) base building,
- **4)** leadership development, and **5)** advancing our Healthcare Is a Human Right Campaign

There is a lot of diversity in how PPF-PA's PROS activities across the state meet these goals.

HRCs set up PROS activities once or twice a month in front of supermarkets, drug stores, laundromats, transportation hubs, sometimes in collaboration with different kinds of partners. Our PROS activities include giving out food, diapers, feminine hygiene products, water, masks and other items that people in our communities need. We also inform people of what benefits they are eligible for and sign people up for these benefits (medicaid, food stamps, LIHEAP, etc.). Since the primary goal of PROS is organizing and building our base, we also have "organizing conversations" with the people we meet, give out materials about PPF-PA, invite people to attend PPF-PA events and ask people to sign petitions. In our follow up with the people we meet, we seek to have deeper conversations (1:1's and 2:1's) to get to know them better and to invite them to join our fight for the human right to health care and all of our needs.

# POLITICAL LESSONS FROM OUR PROJECTS OF SURVIVAL WORK



As a form of struggle in our overall organizing approach, our PROS activities directly challenge the conditions of poverty and the ruling class's narratives about these conditions. Through leading and participating in PROS activities we learn more about the ruling class and our class.

In reflecting on our PROS activities, over and over again PPF-PA leaders noted that a major weakness of the ruling class is their inability to meet our fundamental human needs under the current economic system. On the flip side, many of the strengths of the ruling class flow from their control of how our base tries to get their needs met. The system of provision pushes out a charity narrative which promotes a paternalistic and individualistic

"pity the poor" kind of frame that obscures that the wealth of society is created by the working class and that rather than scarcity, there is an abundance. The system of provision also divides our class, excludes sections of our class and promotes a section of our class as deserving and another section as not deserving.

With regards to our base, the poor and dispossessed. we noted that amongst our weaknesses are that we are often individualized, leading isolated existences. That we are not thinking collectively, but more often in an individualized way. And that a lot of people don't know what benefits (however meager) they are eligible for. On the flip side, the strength of our class is in our growing numbers and that we can be united on the issues we have in common.

It's extremely useful for us as an organization to be deeply aware of our base's strengths and weaknesses, needs and struggles. As part of this base we know what it is like to be poor and are connected to those struggles. This awareness and connection allows us to relate to our base in ways that are unavailable to the ruling class. Through our organizing we are able to project a vision and narrative by and for the poor and dispossessed that is truly in its interests.

# SEVEN ORGANIZING LESSONS FROM OUR PROJECTS OF SURVIVAL WORK

- (1) When organizing a Project of Survival, we must take care to identify a good location which puts us in touch with key sections of our base, with sufficient foot traffic/volume of interactions and where we can have real organizing conversations.
- (2) While partnerships with social service agencies that provide us food or other resources for distribution can be very useful, we need to ensure that these partnerships do not disorient our members and leaders, taking them away from our movement building orientation and towards a charitable orientation (from a Nonviolent Medicaid Army to a Salvation Army).

- (3) By raising our Healthcare Is a Human Right Campaign in our organizing conversations (at PROS), securing signatures on petitions and recruiting people to share their stories at our campaign activities (rallies, legislative visits, town halls, etc.) we are better able to ensure that our PROS are oriented to movement building, and not charity or mutual aid.
- (4) PROS teams must be diverse (represent different sections of our class, particularly those sections we'll be engaging via a particular PROS) and oriented/trained to the PROS goals and organizing approach so that they can successfully engage in organizing conversations with different sections of our base, for example in rural "Trump Country," in urban Democratic Party/Nonprofit country, or in communities with various languages spoken.
- (5) Through initial training combined with actual experience with PROS, members must be helped to understand our PROS goals and how our PROS fit within our overall organizing approach. This means ensuring that our leaders a) learn to wield PROS as a tool for base building and leadership development and not as a service project, and b) that our members learn to combine our PROS with other ingredients of our organizing approach (the Campaign, etc.). These learnings will help our HRCs develop a consistent presence in the community and become a political center of gravity in their region.
- (6) HRCs must immediately follow up with new contacts after a PROS getting them to a HRC meeting or other event. Then, as these new members start coming to meetings or events, "old" members must subsequently follow up to ensure that they continue getting involved and taking steps along PPF-PA's leadership development path.
- (7) PROS enable HRCs to assess, test and grow their organizational capacities coordination, planning. delegation, communication, accountability, follow through and evaluation. PROS also enable HRCs to members' ramp up their leadership development. their clarity. competency, commitment and connection.

## Iaan Reynolds | Philadelphia

# BASEBUILDING AT THE PHILLY PROJECT OF SURVIVAL

Beginning in December of 2020, members of the Philadelphia Healthcare Rights Committee (HRC) set up a Project of Survival (PROS) at 52nd and Market in West Philadelphia. We decided that this would be a good place for us to meet members of our base, since it is a high traffic area (with a train line and several buses) in a part of the city where many of our existing members live. After HRC member Rachel Fox brought the idea forward to partner with Drexel University's Mobile Health Clinic, Philly HRC members began planning the project, which included food and coffee, as well as Medicaid and other government benefit signups working alongside the mobile health clinic's regular services. HRC members would greet people passing by and tell them about the food and other services on offer, with an overarching goal of talking to them about their experience with the healthcare system and giving them the opportunity to be a part of PPF-PA. In our first outings, HRC members got more experienced setting up the project, signing people up for benefits, and conducting organizing conversations.

By the time spring rolled around, the Philly HRC had built up the practice of base building at the PROS to such an extent that we were able to expand to going out two times per month. People who we came into contact with began to recognize us and remember the work we were doing, even referring friends to us for Medicaid signups. When we began to plan outreach for our Healthcare Reality March in July, we had gathered nearly 100 contacts through these organizing conversations. After calling each of these contacts through a couple of calling parties, we were able to get several people out to the march, including a few who played major roles-speaking and carrying a clipboard to sign up new members. Through the PROS work we carried out in this six month period, we expanded our reach and pulled people in from among the mass of the poor and dispossessed in Philadelphia.







# WHY IS THE WORKING CLASS ASHAMED OF ITS POWER?

Frank Scarsella | Johnstown

Since I've been in Put People First! PA I've found myself thinking constantly about the challenges of reaching people that are working alongside us in places where our class consciousness has been purposefully suppressed. One myth in particular, tied to the history of Bethlehem Steel, weighs heavily in Johnstown, continuing to influence how people think of themselves and their neighbors.

There are two contradictory results of this myth: the first is in the success and power of organizing and the second is in the shaming and retribution for claiming our power.

The myth begins by describing the excesses and decadence of union workers, purposefully ignoring the grueling danger of the work within the steel mills, and in implying that all organization of the lower classes are an affront to the American Work Ethic. The union busting myth continues: the union protected lazy workers, the union demanded too good of wages reducing profit too much, the union reduced the efficiency of the workplace. The difference from the typical myths is that this one does not claim unions are bad for workers. The implied truth is that our organizing was bad for the bosses, claimed us power and we could not be stopped!

And when we had the power, the end of industry was our fault. This myth states that it was our power that drove out the jobs. We lost our sense of self as workers because we wanted more than was our "right" as workers to have. We are told that we took too much, that we were greedy, that we drove off the work itself. The implication of this part of the myth is that we were successful at claiming power as the Working Class, and that in itself was the problem.

We have always been told that the interests of the owning class are truly our own interests, that profit made by the owning class spreads to the working class.



We are told that poverty, rather than being a traceable and necessary part of the current system, is the fault of the impoverished.

We are told that scarcity is a fact of life and that our needs being met will once again create our laziness. Housing, nutrition, clean water, clean air, and proper healthcare cannot be provided to us lest we lose that work ethic. Medicaid for All is too expensive!

And that's when the old fear creeps in. Didn't organizing get us in trouble before? Didn't it ruin our communities before? Haven't we been warned about this - how our Organizing killed our economy and sent away the mills? How our Organizing claimed us power?

Our suffering is not our own doing! The truth is that power and profit trump effectiveness and quality of life under our current system and if there was no way to break the power of the workers here, the owning class would rather abandon our cities and people and find labor that could be targeted with more violence and less concern for well-being abroad.

Our great internalized shame is that we would not bow to the power of our oppressors.

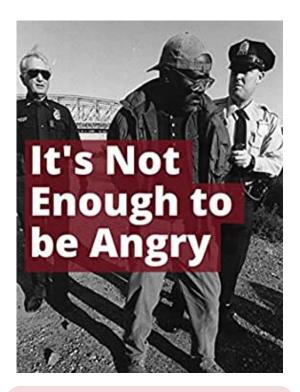
But they have already acknowledged the deeper truth: Organizing claimed us power. We must grasp this truth and take it forward to our people to unite us and claim our strength!



# SUMMER STUDY '21: "IT'S NOT ENOUGH TO BE ANGRY" BY WILLIE BAPTIST

For six weeks this past June and July, about 50 leaders of the Nonviolent Medicaid Army from Put People First! PA (PPF-PA) and across the country gathered to study a key text in order to understand the foundations of our organizing strategy—Willie Baptist's book, *It's Not Enough to Be Angry*. The Political Education and Leadership Development (PELD) Team ran a previous study of Willie's book back in the winter of 2018—but many of our leaders have joined PPF-PA since then, so we wanted to return to it!

The PELD Team organizes studies like this twice a year, in the winter and summer, to support the leadership development of PPF-PA's active members as well as members from other strategic partner organizations across the country. These seasonal studies enable us to develop leaders through combining "classroom" experience like this with their participation in the class struggle and class organization. These studies also enable us to develop the 4Cs of Leadership. Our studies aim to equip our leaders with the clarity and knowledge needed to build a mass movement to end this poverty-producing system, and to win our human rights! Through these studies we also build up our leaders' competence (for example with discussion facilitation and self and collective study skills) and connection to each other and leaders from other places who are all part of the same struggle. Studies like this also have a deep impact on leaders' commitment understanding what we are truly up against and how we can defeat this system really fuels us in the struggle! And as we say, "the more you know, the more you owe!"



### THE 4 C'S OF LEADERSHIP

Clarity

# Competence

Connection

# Commitment

In this study, leaders of the poor and dispossessed came together to discuss the key lessons of Willie's book and supplemental articles/materials, and to understand the significance of his analysis for our organizing work.

For each session of the Summer Study we had time for Mistica, presentation on the main

# "IN A NEW DAY YOU GOT TO DO THINGS IN A NEW WAY."

Willie Baptist, It's Not Enough to Be Angry

themes of the week's chapters of *It's Not Enough to Be Angry*, and small and full group discussion. For the final session of the study, each of the regularly meeting regional discussion groups reflected on the overall lessons of the study and then prepared a Mistica (a presentation that embodies and represents the spirit of our struggle and the unity of our class) to share with the whole group.

A couple of the key takeaways that people shared were:

- The micro-electronic technological revolution and its impact on the economy is creating a new class of the poor & dispossessed—those who are permanently thrown out of the workforce. Their/our labor become superfluous under has this prevailing and obscene profit making system. A resounding cry during the last session of our study was "We are not superfluous! The current economic system in which we live is superfluous!"
- This technological revolution means that we're in a new day—and we've got to do things in a new way! Old forms of organizing (like narrow trade unionism and community organizing) aren't going to serve us in building our movement today under these current conditions. New forms of struggle and organization will be required.

Studying this powerful text deepened our understanding of why the poor & dispossessed, "if they can be helped to take action together," have the potential to become what the Rev Dr. Martin Luther King called "a new and unsettling force in our complacent national life." As

leaders, we are called upon to ensure that the poor do in fact become this new and unsettling force, killing this system before it kills us.

Stay tuned for our upcoming Winter Study, and reach out to your HRC coordinator if you are interested in joining in! ■

# MEMBER REFLECTION: RAPHAELA HUFF

Raphaela Huff | MontCo

My mental health struggles (anxiety/depression, etc.) have made it difficult for me to organize because I often feel like I can't manage very many tasks each day. In my life I have had the strong tendency to beat myself up because I felt like I wasn't being "productive" enough. I have been so grateful for members of PPF-PA who have continually reminded me that it's okay to only do as much as I feel capable of.

At times it can be necessary for me to push myself to get out of a state of total inactivity and complete a task, which can feel very uncomfortable and difficult no matter what the task is. I've realized that I need to do this at times for the boost to my mental health that the completion of something rewarding provides.

In a recent one on one with fellow PPF-PA member, Jacob, they reminded me that a lot of mental health struggles are directly rooted in the toxic capitalist society we live in. It feels all the more fulfilling to be productive for a cause that will serve to make my life and the lives of others around me better, rather than falling into the seductive but deceptive web of capitalist "productivity." Instead of being trapped as a victim for the rich to continue sucking dry, I'd rather continue doing my part to help weave the threads of a safety net for our community.

At the same time, I also have to continually remind myself that it's okay to go for periods of time without being "productive" at all, that relaxing and allowing myself freedom to only do what I feel like doing is revolutionary as well.

# A POEM FOR THE INAUGURATION OF MY CLASS INTO A NEW PHASE OF STRUGGLE

Because my heart aches that we are still teaching our children

To revere "personal achievement" at the expense of the collective and to aspire to see themselves as the face of the empire

To emulate those who stepped on our people's backs on their way to the commanding heights

Because American exceptionalism has taught us all:

It doesn't matter how you get there—only the results

"Just do it"

and

"Might makes right!"

My poem is for the inauguration of a new world

In which we are not subjected to the spectacle

Of multi-millionaires carrying out ceremonies at the behest of multi-billionaires

That will never be your celebration, child

We will never teach you a false definition of achievement

The wrong meaning of excellence

We will never teach you to see yourself in anyone who hastens our path toward apocalypse

No matter what they look like

# Nijmie Dzurinko | Clearfield









You'll never aspire to seek personal gain at the expense of all of our relations

That will never be your legacy

When we inspire hope in the hearts of our children we'll say:

It's not about being "the first"

That's the U.S. virus

It's about taking care that we not be the last human beings

Ever to live on the earth

It's not about being the first

It's about having the courage to be a midwife of the new earth

You have something to aspire to because Toussaint did it and Fannie paved the way

Because Mazzochi saw the light of day

Because Mother Jones lost her whole family and went on a crusade

Because General Baker told us what still resonates today

They were the firsts of their time

The firsts of our kind

Our class

Fighting for all of us and none of us would be here without them today

And so many more who we'll never know

Who you owe more, child, than anyone on screen

We'll never teach you to see yourself as separate and apart

To see yourself as better than the rest

To revere private gain and so-called "success"

Because that isn't progress

That won't be your future, child!

That won't be the horizon of your imagination

That won't be the goal of your representation

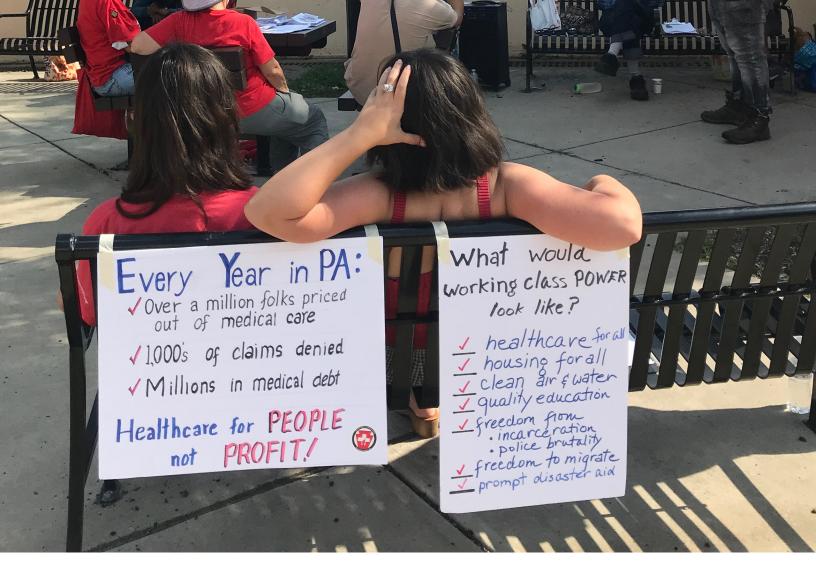
For you are not a servant of the rulers

You are a servant of the people









# **STAY IN TOUCH!**

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