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Biology, Ethics,



nd Socialist Values





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EDITORIAL

HEALTH CARE: THE CRUCIAL YEAR AHEAD

BY STEVE TARZYNSKI, M.D.

These days the idea of activist democratic government is about as alien to American mainstream political discourse as the existence of a socialist movement that can contest for power and be capable of governing. Yet without the former, the latter will never come to exist. Democratic socialists must therefore focus on issues that will help relegitimate the activist democratic state and help create a new moral climate based on social solidarity. The principal issue today that meets this requirement is national health care reform. That is why DSA has made it an organizational priority. Our members have been active at all levels of the health reform issue for two decades. We can take a modest but certain amount of credit for helping to give the issue the attention it has today. However, there is still much to be done, with perhaps only a year left in which to

We've met some of the modest goals that the national leadership set when DSA decided to make support for a single-payer Canadian-style

health care system our major issue. DSA members have served on the Clinton Health Care Task Force and in the leadership and rank and file of national and state single-payer coalitions. Perhaps most importantly, in 1991 we organized a twenty-two-city national tour of over forty Canadian health experts (from our sibling party, the New Democrats) that helped to galvanize the single-payer movement into action. No other organization was in a position to carry out such a major tour. We have done a good job as the socialist current within the single-payer movement, but still have significant opportunities to improve DSA locals' level of activism and our recruitment of activists into DSA through this issue. In the coming year, as we close in for the final legislative phase of this fight, the national DSA leadership and the DSA health care task force will focus efforts in these two areas.

The DSA National Convention in November unanimously adopted a resolution (see text on page 23) that clearly reaffirmed our support of the McDermott-Convers-Wellstone single-payer bills (HR1200/S491). It also stipulated DSA's advocacy of a "state option" for single payer in the final legislative package. The resolution also stated that DSA will organize and participate in anti-corporate campaigns targeting private health insurance, pharmaceutical lobbies, and any other corporate or political forces that seek to destroy real reform. If a vote is delayed beyond fall

1994, DSA will also work in congressional campaigns that target anti-reform incumbents and that support single-payer advocates. We will also continue our work in state campaigns to establish single-payer systems.

The most delicate aspect of our work is how we balance our efforts in improving the Clinton proposal and pushing for single-payer. This is not a new dilemma for the left. The tension between reform and revolution has existed within every socialist movement in Western industrialized democracies. It will always be with us. The solution lies in putting into practice Michael Harrington's notion

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DEMOCRATIC LEFT

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Introduction:

Biology, Ethics, and Socialist Values

Being a socialist means not reaching for the quick fix. The three articles we print here look at issues of biology and ethics on which people of good will, humane intentions, and, yes, socialist politics, differ. Some are not even issues that DSA has debated, but all are topics that the authors believe an organization concerned with health care and social justice must face.

Margaret O'Brien Steinfels argues that when progressives support legalized euthanasia they should examine the long-range implications of such a move, especially in light of the prospect of managed health care. For whom would the hemlock be poured? Would more drinks go to the terminally ill but fully conscious and mentally competent adult whose agony we wish to ease, or to the impoverished aged, persons with AIDS, and people of color whose continued health care would drain public coffers?

Dorothee Benz cautions against looking for a simple "genetic" cause for homosexuality and therefore limiting the grounds on which the battle for full social and civil rights must be fought. Whatever we might gain by arguing that homosexuality is a biological given, she points out, would be offset by the same backlash

that affects other groups unable to change their gender, color, or physical condition.

Claire Kaplan warns against easy sympathy and "do-gooderism" toward the disabled community. Don't try to ease the pain, she says, until you know the source of the pain. This means listening to the disabled, making DSA accessible, and finding the common interests (jobs, education, and health care, for starters) that allow for coalition building.

Not all of our readers will agree with every statement in these articles. We may or may not be members of the groups under discussion. However, as we think about these issues and debate their place in our own lives and in the agendas of DSA locals, let us ask, in each case: As a member of one of these groups, what policies would I consider fair?

-- Maxine Phillips

Euthanasia:

Prospects and Perils

BY MARGARET O'BRIEN STEINFELS

he word *euthanasia*, "good death," is the catch-all phrase describing referenda in a number of states that would allow doctors to end the lives of patients who are terminally ill. Oregon will have such an initiative on its November 1994 ballot despite defeats in California (1992) and the state of Washington (1991).

The Oregon initiative is described as physician aid-in-suicide; the others have been described as physician aid-in-dying. Details vary on the bills' provisions. The right-to-die (or death with dignity) movement has generally framed these measures to provide that a competent, terminally ill patient with less than six months to live can ask a physician to end (or help end) his or her life. The bills have usually provided that a patient sign a statement requesting "euthanasia," that the signing be witnessed by individuals not involved in the patient's care, and that the patient's terminal con-

dition be confirmed by a second physician.

It is too early to predict the outcome in Oregon. But if the initiative passes, the state would become the world's first jurisdiction to give full legal approval to the killing of terminally ill people. (Holland's current -- and legally ambiguous -- arrangement comes closest to allowing euthanasia: it remains against the law, but physicians are not prosecuted when they kill a terminally ill patient. The practice has led to charges that some physicians have abused prosecutorial leniency by euthanizing patients who are not terminally ill or who have not requested it.)

Despite their carefully worded use of "physician aid-in-dying," all of these measures cross a line in allowing a physician to kill directly or help kill a patient. This change in the law would reverse a widely held precept in medical ethics against the taking of human life. In fact, the drive to change the law is not led by

physicians or medical care givers, but by the Hemlock Society and the right-to-die movement along with individuals who have watched a loved one suffer through a prolonged terminal illness. The measure was also supported in California by the Northern and Southern California ACLU, the Gray Panthers, the Unitarian Universalists, and the AIDS Council of Los Angeles.

The goal of "death with dignity" proponents is to provide terminally ill people a rational and legal means of dying. The underlying assumption is that if a patient cannot be cured and they are dying anyway, there is little purpose in their continuing to live.

Proponents of euthanasia argue that medical advances and an aging population have outpaced current moral and legal restrictions. The technological sophistication and skilled care provided today by most hospitals, physicians, and nurses can now often prolong life at all ages, but they are not always able to provide a cure. Intensive care units, medical devices, and medications save many people's lives, returning them to normal living, while other people may be left in permanently comatose states, seriously disabled, or chronically ill.

Cases like that of Karen Ann Quinlan and Nancy Cruzan, both young women who lived in permanent comatose states after surviving "fatal" traumas, have dramatized some of the dilemmas posed by modern medicine's "successes." Over the last two decades, society's response has been to provide medical, legal, and ethical protections to the individual patient so as to maximize patient autonomy. Brain waves have replaced heart beats in determining whether a patient is alive or dead, ensuring

greater protection for people on respirators. In many states, people can sign "advance directives" that tell their family and physician whether and when to end treatment if they are unable to make their preferences known. In some places it may be harder to terminate treatment than to refuse it in the first place. Adults who are alert and competent can generally refuse medical treatment, although in life-threatening situations they may be required to seek counseling or psychological assessments.

This turn away from physician-dominated decision-making enhances patient choice in medical care and treatment. Proponents of physician aid-in-dying argue that killing terminally ill patients at their own request is the next step in honoring patient autonomy; it puts medicine at their service by ending life.

Yet there is an important difference. Allowing patients to die, to terminate treatment, or to refuse treatment -- none of which involves direct killing -- operates within the traditional legal and ethical framework of U.S. civil law, the medical establishment, most religious communities, and a broad range of philosophical ethics. Devising means for a family or guardian to make these choices along with a physician when the patient is too young, incompetent, or senile, has generally followed these patterns, although physicians or hospitals might seek a court order before proceeding. Direct killing of patients, even at their own request, lies outside current medical practice and current moral and legal frameworks.

State legislatures have turned back efforts to change the law. Juries confronted by individuals, especially relatives, charges with killing a terminally ill person have convicted some



New technologies in medicine have brought both the promise of miraculous treatments and the fear of dehumanization.

while treating others with leniency. Publicity following the physician-assisted suicides arranged by Dr. Jack Kevorkian in Michigan have raised these issues -along with their potential for abuse -- to national consciousness. (None of Dr. Kevorkian's "patients" was terminally ill.) The states of California, Washington, and Oregon with their "pro-

gressive" traditions and relatively accessible referendum processes have become testing grounds. Yet so far these measures have been defeated. Why?

Opponents of physician aid-in-dying have offered several arguments against the referenda. Perhaps the most powerful one is the most obvious and the most persuasive to voters: direct killing of an innocent person is wrong, even when that person wants to die and even when a physician is willing to help. But other arguments may be equally persuasive. For example, giving physicians legal warrant to kill a patient, even under limited conditions, would irrevocably alter the patient-doctor relationship, changing it from one in which the ultimate goals of cure, care, or comfort subtly shift so that, all else failing, killing a patient becomes a thinkable alternative. Giving this power to physicians would ultimately mean giving it to the medical care system as a whole.

To proponents' argument that some lives are so full of pain and suffering that they cease to be worth living, opponents counter that paincontrolling medications and techniques along with various forms of hospice care can relieve most pain and provide comfort to the patient and respite for the family.

Advocates of physician aid-in-dying have framed their bills to emphasize the autonomy of the in vidual -- this is a choice a dying person will make him or herself. Yet medical care givers point out that many of the most difficult cases are not those of alert and competent adults, but of children, the comatose, or the senile unable to make independent decisions. In other words, the current bills don't fit any of the most troubling cases. Is it not likely, they argue, that once physician aid-in-dying laws are on the



A doctor examines technical equipment.

books, they would gradually extended to include those who could not consent to or request termination? And what of those who are otherwise vulnerable and already marginalized by our society? This argument emphasizes potential abuses when the law permits physicians and the medical-care system to consider "aid-indying" as part of their medical armamentarium.

Perhaps reflecting this concern, post-election polls in California showed that those groups most likely to vote against "Proposition 161" were women, racial minorities, and older voters. Strongest support came from affluent white males aged eighteen to thirty-four. If aidin-dying rests on assumptions of personal autonomy and control, those least likely to have autonomy and control seem most likely to understand the long-term consequences for society's most vulnerable. These may also be the people most able to foresee the pressure that would be brought to bear on patients or physicians to end particularly complex and expensive care under an increasingly standardized and nationalized health care system.

The great potential for abuse by physicians, the medical care system, and state-supported financing ought to raise a fundamental question for supporters of physician aid-in-dying, who often take up the cause in the name of civil liberties, individual rights, or with the hope of ending unnecessary suffering: Are we in the process of creating a mechanism that will violate the most basic right, the right to life, especially of the poorest, weakest, sickest, and most vulnerable people in our society, all in the name of individual autonomy and control?

Margaret O'Brien Steinfels is the editor of Commonweal.

JANUARY/FEBRUARY

It's in the Jeans

Biology, Culture, and the Struggle for Gay Liberation

BY DOROTHEE BENZ

he July 1993 release of a study that links male homosexuality to an area on the X chromosome met with mixed reactions from gay rights advocates. The Human Rights Campaign Fund, the Washington-based gay lobby, welcomed the findings and said, "We believe it will help increase support for gay and lesbian rights" (New York Times, July 16). Others were less enthusiastic. Many gays are suspicious of attempts to find the cause(s) of homosexuality because historically the search for a cause has been part of the search for a "cure." Anti-gay forces, on the other hand, have decried the recent research as "pro-gay" and contend that the "hypothesis of recruitment" and the "traditional psychological model of disturbed families producing more homosexuals" should be given greater attention (Wall Street Journal, August 12). A 1991 study by Simon LeVay that found differences in the size of the hypothalamus of gay and straight men met with a similar reception. Researchers, meanwhile, have found themselves in the spotlight on a politically "hot" issue that has been exploited by the right wing in distinctly nonscientific ways. And women, as usual, have been ignored; both studies have dealt exclusively with men.

For all of the uproar, however, the biologi-

cal research on sexual orientation is still inconclusive, and in any case it is unlikely to affect either the lives of gay people or the opinions of those who hate them.

The most recent study, conducted by Dr. Dean Hamer of the National Cancer Institute and published in the July issue of Science, found that more than 75 percent of a group of pairs of gay brothers had inherited identical DNA markers on a particular region on the X chromosome, suggesting that same-sex attraction may have some hereditary disposition. But even those who consider this finding interesting or significant are quick to acknowledge that sexual orientation is a complex, multi-dimensional phenomenon whose determinants are at best partially genetic. Hamer's study did not isolate a "gay gene," and it is still a matter of total speculation as to how likely carriers of a "gay gene" -- or, more likely, genes -- would be to become gay as a result of such a genetic makeup. Moreover, the study has been criticized for omitting a control experiment checking for the presence of the genetic markers among heterosexual brothers. The results have not yet been replicated, and the small number of cases involved in the study (forty) is further reason for a cautionary reading of the results. Nevertheless, Hamer's study has generally won acclaim

and will certainly encourage similar research.

Gay proponents of biological research on sexual orientation argue that discovering a biological cause of homosexuality would strengthen the case for legal protections against discrimination. A crucial part of equal protection law is built on the concept of an "immutable characteristic." If sexual orientation were considered an immutable characteristic, like race or gender, efforts to decriminalize homosexual sex, outlaw discrimination, and legalize marriage would have improved chances of enactment. That a biological basis for homosexuality could help the legal case for gay rights is indisputable, but it is important to note that such a basis is neither a necessary nor a sufficient argument for legal protections. Religion is constitutionally protected and considered an "immutable" characteristic in this context, and yet there is clearly no biological basis for religion. In addition, legal victories have been won for gays on the basis of immutability despite the lack of conclusive biological evidence.

More instructive than the success of the immutable characteristic argument sans biological determinants, however, is the historical failure of biological differences to inspire toleration and equal treatment. As the experience of African Americans should make abundantly clear, hereditary difference is no guard against

oppression. The argument that skin color was an illegal (and immoral) basis for discrimination gained purchase only after decades of calculated legal struggles and a considerable popular mobilization on its behalf. (The same can be said for gender differen s, of course -- and both are battles that are still far from over.) The lesson is an important one: unless Americans are persuaded that homophobia is wrong, no amount of biological evidence of its immutability will suffice to dismantle legal discrimination against gays and lesbians.

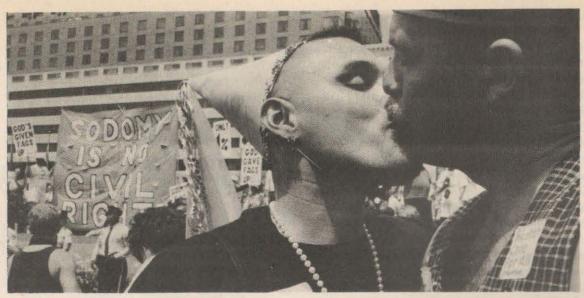
The argument of biological difference can be a tool gay rights activists can use to help their cause, but without a movement that challenges heterosexist norms, it is ultimately useless.

The focus on legal advances is, of course, only part of the broader goal of overcoming ignorance and hatred for gay people. Supporters of biological research hope that demonstrating that sexual orientation is not chosen will compel bigots to see gays in a different light. However, religious intolerance of lesbians and gays -which provides much of the fuel that feeds the current anti-gay hate -- already acknowledges the immutability of sexual orientation (or its possibility, at least). The argument of many anti-gay Christians has long been that one may not be able to help having homosexual feelings, but one definitely has the capacity and obligation to resist acting on them and to learn to adapt to heterosexual habits. In biblical jargon, this is known as "loving the sinner, hating the sin." The religious argument against homosexuality is not based in a distinction of whether the behavior is voluntary or not, and hence biological evidence that it is inborn or hereditary will not lessen the prejudice of those who consider it immoral.

Discovering a biological basis for homosexuality is at best a two-edged sword. Far from helping erode prejudice, grounding difference Marchers at the April 25, 1993 March on Washington for Lesbian and Gay Civil Rights and Liberation.



Dana Schuerholz/Impact Visuals



At the April 1993 March On Washington. in biology has a long and horrible history as the basis of persecution. People of color, Jews, the disabled and the mentally ill have all suffered unspeakable crimes in the name of racial or genetic inferiority. The very premise of Nazi anti-Semitism was the claim that Jews were a biological threat to German racial purity. Indeed, biological difference is typically used not to demonstrate that people are similar despite genetic variations, but rather to argue that people are morally different because they are biologically predisposed to certain behaviors. (Abnormal sexual appetites in particular have frequently been ascribed to biological or genetic predispositions, for instance in the racist image of black men as sexual predators.) There is no reason for gay people to expect a more enlightened interpretation than others have been subjected to throughout history. Lest readers should consider this an unnecessarily dark and pessimistic view, I offer the London Daily Mail headline reporting on the Hamer study as a possible omen of what the future could hold: "Abortion Hope After 'Gay Gene' Findings" (New York Times, August 2).

Enthusiasts of biological research are at heart interested in showing that sexual orientation is not a matter of choice. The importance of demonstrating the involuntary nature of homosexuality lies in its usefulness for the strategy of appealing to a common humanity as a basis for tolerance and acceptance. Gay people are people like everybody else, except they happen to be gay. This approach has unmistakable

echoes of the assimilationism of the homophile movement of the 1950s and 1960s, and risks limiting the gay rights agenda in similar ways. While asserting that our human similarities are more important than our sexual differences—which is certainly true—it runs the risk of undercutting our claim to the *right* to be different.

An overemphasis on the biological determinants of sexual orientation leaves gays and lesbians more vulnerable to cultural intolerances. Someone might argue, for instance, that basic vanilla sex and traditional relationships between same-sex couples is okay (because homosexual inclination is involuntary) but that crossdressing is unacceptable, or that butch women and effeminate men should alter their behavior. Someone might say that S/M or cruising are immoral behaviors. Earrings, pierced nipples, pink triangles, short hair, and black leather would all be open to the argument that since predilections toward them are not biologically determined, they need not be tolerated. But the fact is that if all these things were taken away from gay people, a very large part of what defines us as gay, and what makes being gay fun and expressive, would be gone. And that is because fighting for the right to be gay means fighting for the right to act gay, whatever that means to the individual.

Gay people are not essentially a biological minority but a cultural minority. Moreover, the source of most people's prejudice against gays is not the (mistaken) view that homosexuality is

chosen, and therefore the struggle against homophobia cannot be advanced by demonstrating that it is not chosen. Rather, the source of bias is a complex field of cultural/ideological beliefs (expectations about gender roles, including appropriate sexual object choice for each gender, religious teachings, general hang-ups about sex, and so on) and thus the terrain of struggle for gays and lesbians must also be cultural.

Coming out has been the quintessential gay political act since the Stonewall Riots. It is at once an act of individual liberation from a life of lying and hiding and a challenge to social norms. But the battle against the closet is cultural battle; the closet has no biological meaning. Clearly, there is no biological basis compel-

ling people to come out, and yet the right to be out is at the very core of the struggle for gay rights.

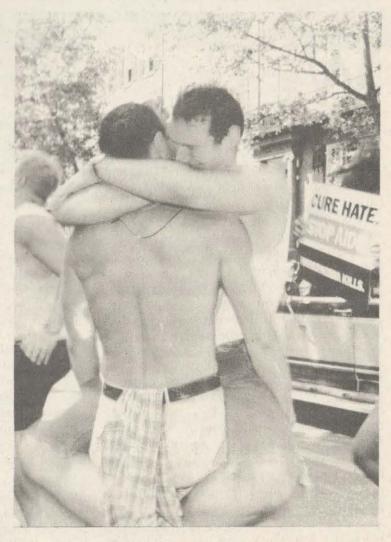
A misdirected emphasis on biological determinants in fact undercuts our claim as a cultural minority. If gayness is focused on biology instead of culture, then people are more likely to question whether we should dress distinctly, socialize together, have gay neighborhoods, and so on. They can say -- and some have -there is no such thing as gay culture. In truth, of course, there not only is gay culture (many gay cultures, some more visible than others) but it is the existence of gay culture and the community/ communities it sustains that has made the daily life of gay people better. We need our community centers, our networks, our newspapers and magazines, our gathering places, our traditions, our trademarks. Our claim to them, however, has nothing to do with our genes.

Gay people are born into a diaspora; in addition to the Deaf and disabled, we are the only minority whose parents do not share our minority status. Our collective identity and survival

depends on the ability to transmit our culture to each new generation. Randy Shilts has said that a biological explanation "would reduce being gay to something like being left-handed, which is in fact all that it is" (New York Times, August 2). Apart from the fact that left-handed people until recently were routinely forced to switch, making this a very unfortunate choice of analogy, Shilts is simply wrong. It's much more in the jeans -- and the bandannas in the back pockets, the matching boots, and the pose -- than in the genes.

Dorothee Benz, a DSA member, is the Director of Communications for Local 23-25 of the International Ladies Garment Workers Union and a freelance writer.

At the 1993 **New York City** Lesbian and **Gay Pride** March.



Toward a Socialist Movement Without Barriers

Engaging with the Disabilities Rights Movement

BY CLAIRE N. KAPLAN

hen President George Bush signed the Americans With Disabilities Act (ADA) into law in 1990, a subtle shift in power occurred. Just as major legislative initiatives, such as the Civil Rights Act, empowered racial minorities to resist institutionalized racism, the ADA made it possible for 43 million Deaf and disabled Americans to fight a myriad of physical and social barriers.

As with those earlier civil rights laws, the work ahead seems daunting. People with disabilities or who are deaf have the highest rates of unemployment, lowest wages, and highest rates of illiteracy of any group in the United States.

Capitalists view the ADA as a major victory of a social movement -- in other words, a major pain in the ass. It's ironic not only that Bush signed it into law, but that the only Reagan/Bush-era domestic legislation that forces a semblance of social responsibility in the corporate and government sectors was pushed through Congress by a movement in which socialists have played at best a peripheral role.

For both ethical and strategic reasons, democratic socialists must take the disabilities rights movement more seriously. There are few social movements in this country whose goals are more like ours. From national health care to workplace democracy, DSA has much to offer

and much to gain by incorporating the agenda of this movement as our own. And yet, we must be prepared to learn first.

The Americans With Disabilities Act

The Americans With Disabilities Act is designed to ensure accessibility in employment, public services, transportation, public accommodations, and telecommunications. The Act mandates that public facilities (such as DSA's national office) must be accessible by wheel-chair and other assistive equipment. Technically, offices are not required to purchase a TTY (teletypewriter; also known as TDD, or telecommunications device for the Deaf), unless they allow Deaf or hard-of-hearing people to make outgoing calls.

The ADA is the successor to the Rehabilitation (or "Rehab") Act, which was passed during the Nixon administration. During the mid-1970s, the government's extreme procrastination in implementing the Rehabilitation Act sparked major protests by disabled activists in California -- most famously a takeover of Senator Alan Cranston's office, in which activists chained themselves and their wheelchairs for days.

The ADA is far broader than the Rehab Act, which applies only to recipients of Federal financial assistance, but it still has real weaknesses. It provides very few employment pro-



tections for disabled and Deaf individuals. "Employment is the primary issue," argues civil-rights attorney Stanley Fleischman. "There are no affirmative action requirements regarding people with disabilities, except that an employer can't say, 'I'm not hiring you because you're disabled.' They can come up with a thousand reasons why they can't hire someone." One of the problems, according to Fleischman, is that there is no specifically measurable pool to use as a yardstick. There are few data available on the number of disabled people who are able to work, as there are for women or racial minorities. Salary and promotions are an additional issue, but "getting in is the hardest part," says Fleischman.

Amitava Kumar/Impact Visuals

Moving Beyond "Accommodation"

DSA has a checkered history in its work with people with disabilities. An underlying reason for this is that we, like most people, continue to view accommodation as simply another chore when we plan events, hold meetings, and so forth. It wasn't long ago that planning for gender and

racial balance on panels was a sometimes seen as a chore, too. But we still did it, because it wasn't only the "right" thing to do, it was the only thing to do. We understand that if we are to become the multicultural organization we wish to be, we must build bridges with leaders in many communities.

Bridge building applies to the Deaf and disabled communities as well. This process must begin with the understanding that the "disabled community" is as diverse as any other group of human beings, with various sets of political priorities, cultural norms and values, and -- in the case of the Deaf and the Blind -- languages.

Increasingly, many Deaf people do not consider themselves disabled, but instead a cultural and linguistic minority (hence the preference for *Deaf* over *deaf*, which is said to refer to a medical condition). Blind activists are staking similar claims to the culture which has developed around the use of Braille.

It may seem paradoxical to hearing, sighted, able-bodied that people

who cannot hear, see, or move about without difficulty may not see themselves as "impaired" -- a term generally disdained by those to whom the word is attached. This is the underlying challenge for socialists: to resist the desire to ease pain and suffering before finding out what the real source of the pain is. All their lives, disabled and deaf people have been medically labeled, experimented upon, controlled, pathologized, and patronized to the point of total help-lessness -- and rage.

This rage was memorably expressed during the historic protest at Gallaudet University, the Washington, D.C. school for the Deaf, in 1988. When students' hopes that a Deaf person would be hired as president of the school were dashed, they shut the school down -- first alone and then with support from faculty and outside Deaf organizations. To describe the ensuing victory as a groundswell in the Deaf rights movement is an understatement. The anniversary of the "DPN" (Deaf President Now) revolt is celebrated annually. Nationally, there are now fourteen Deaf

COMMUNICATION ACCESS TIPS

Sign Language Interpreters

Most sign language interpreters are free-lance workers. There are a variety of ways to find professionals who not only have training and certification, but who come recommended by the consumers who use their services. First, contact Deaf service organizations in your area. They may even serve as a clearinghouse or network for interpreters. If you go through such a group, you may be paying more than if you contact the individual interpreters on your own. It's okay to do that: it may be easier to work through these groups at first, until you find someone suitable, then make separate arrangements if you have an ongoing need for services.

Sign language interpreters aren't cheap, yet you may be able to find an ally who is willing to cut a deal. Don't expect them to work for free; they are professionals who expect a professional wage, depending on experience and level of certification. But it is okay to negotiate a fee. Most interpreters also charge for a two-hour minimum, even if no Deaf people show up and their services are not needed. But you may be able to agree on a "cancellation" fee if this is the case.

Some other rules to keep in mind:

1) If you know that Deaf people are definitely attending the event, have your Deaf community contact help you work out room arrangements for the best viewing of interpreter and speaker(s). If you aren't sure, ask the interpreter for suggestions. Be sure there is plenty of light on the interpreter, and that sight lines are clear. Place the interpreter near the speaker(s), to the side, so that people can see the interpreter and the speakers without too much eye movement. Don't walk in front of the interpreter, blocking the view.

2) Avoid lavish praise on interpreters. It's appropriate to thank them, but they are there to do their job. Leave it to the Deaf people in attendance to provide feedback (especially if you know nothing about sign language)! Too often ignorant hearing people tell the interpreter how wonderful she or he was; meanwhile, the Deaf person, who hardly understood one thing because of the interpreter's incompetence, is standing nearby, fuming.

3) If the program is longer than one hour, you should hire two interpreters, who will switch every twenty to thirty minutes. Unlike spoken language translation, sign language is physically tiring, and it becomes harder to sign clearly when your arms feel like they're falling off.

4) Remember that interpreters can only interpret for one person at a time. Try not to talk over one another, especially during group discussions.

* FM or Loop Systems

There are people who may not use sign language, especially hard of hearing or late-deafened people. These individuals may be able to use FM or Loop systems which provide amplification and screen out ambient sound which interferes with hearing the speaker. Again, contact Deaf agencies or state agencies/commissions for assistance.

- C.K.

superintendents of schools for the Deaf -- up from one in 1988. Upon his confirmation as Gallaudet's first Deaf president, I. King Jordan said to the exhilarated crowd, "All our lives we were told, 'Deaf people can't. Deaf people can't.' Well, Deaf people can."

The Charge to Socialists

DSA's critique of capitalism and market culture, and our concern with single-payer health care, social control of the economy, political self-determination, and the right to education, transportation, communication, and a living wage are all serious concerns among people with disabilities. Yet they can't know about us if we do not make our agenda and our organization accessible on the most basic levels.

DSA locals and the national organization must accomplish three basic tasks in order to make the organization truly accessible:

First, contact local disabled and deaf-rights organizations, preferably groups run by members of those communities. At the very least, there may be some kind of center for independent living or the like nearby. Ask for the names of local activists and contact them. (If you are calling a Deaf person, you don't need a TTY. Use the services of the state or national telephone relay system which provides third-party assistance. Look in the front of your phone book for information.) Invite these people to a meeting to discuss disability/ deaf issues, and then ask specifically how you can ensure this meeting is accessible. Ask for suggestions of meeting spaces, if regular meeting places are not appropriate. names of sign language interpreters from Deaf people (they know who is good and who isn't).

Second, explore issues in common that can be fought together. Disabilities-rights groups are active in health care coalitions. Issues of long-term and home care; provision of mobility assistants (which is not included in the ADA); pre-existing conditions; coverage of assistive devices; and caps on spending are obviously crucial to many disabled people. Bring them into your organizational discussions and forums on health care reform.

Keep in mind the history of oppression; don't take control of an action; don't control the agenda. Yet do this work as a DSA local, and be totally open about who you are. Be prepared to mobilize in support of disabled groups if they are making demands of local government or businesses.

Third, make it a policy of the organization always to ensure accessibility at any major function. In 1991, DSA's national convention passed a resolution requiring that all major national outreach events be sign language interpreted. Prior to that we had a commitment always to hold events in accessible facilities. Locals are "encouraged" to take such steps (considering that cost may be prohibitive for some), not required. Publicize events that are accessible and/or sign language interpreted to disabled and deaf people by mailing to organizations, sending announcements to newsletters, etc. Invite community leaders to participate in major events and get their groups to include flyers in their mailings.

Last, don't expect mobs of deaf and disabled people to suddenly appear at meetings. Hearing/ablebodied organizations like DSA have a history of uneven commitment, at best. Be consistent and be patient. It may take months, even years. Eventually, we'll find that the outreach events pay off.

Claire N. Kaplan is Chair of the Charlottesville local of DSA and a member of the NPC.



Is Our Meeting Place Accessible?

The only way to be sure is to have someone with mobility problems tell you. We all have war stories of making arrangements at "accessible" facilities, only to have a person who uses a wheelchair blocked from entering because the "ramp" was a produce delivery chute, or the bathroom had a one-inch step up. Certain public buildings must be accessible, such as banks, community centers, and libraries. But, to be certain, call the local independent living center and ask if they have a published guide to local accommodations, or their opinions on which buildings are the best.

Other issues to check in advance: Is the lighting bright enough? Are the bathrooms accessible? Where are the potential trouble-spots for blind people or others with visual disabilities? Is the seating such that people with disabilities will be "ghettoized" into one section without being able to sit with their friends and companions?

Resources:

National Association of the Deaf 301/587-1788 301/587-1789 TTY

Self-Help for the Hard of Hearing 301/657-2248 301/657-2249 TTY

Disability Rights Education and Defense Fund 510/644-2555 510/644-2629 TTY

U.S. Department of Justice Civil Rights Division 202/514-0301 202/514-0383 TTY

U.S. Equal Employment Opportunity Commission 800/669-3362 800/800-3302 TTY

DSA Locals and Organizing Committees

Northeast -

ALBANY Local, Mark Schaeffer, 518-463-5611 399 State Street, Albany NY 12210 BALTIMORE Local, Laila Atallah, 301-467-9424 1443 Gorsuch Avenue, Baltimore MD 21218 BOSTON Local, Glenn Kulbako, staff, 617-354-5078 11 Garden Street, Cambridge MA 02138 CENTRAL NJ Local, William Volonte, 201-642-0885 PO Box 2029, Princeton NJ 08543 CENTRAL PA Local, Curt Sanders, 717-328-5124 115 Loudon Road, Mercersburg PA 17236 CONNECTICUT Local, Mike Phelan, 203-397-5412 194 Alden Avenue, New Haven CT 06515 DC/MD/NORTHERN VA Local, Bill Mosley, 202-483-3299 P.O. Box 33345, Washington DC 20033 ITHACA Local, Kevin Heubusch, 607-256-5341 108 Terrace Place #3, Ithaca NY 14850 NASSAU COUNTY NY Local, Mark Finkel, 516-538-8246 662 Howard Avenue, West Hempstead NY 11552 NEW YORK CITY Local, Julia Fitzgerald, 212-962-1079 15 Dutch Street #500, New York NY 10038 PHILADELPHIA Local, Lisa Holgash, 215-248-9013 125 East Mount Airy Ave., Philadelphia, PA 19119 PITTSBURGH Local, Bill Wekselman P.O. Box 5122, Pittsburgh PA 15206 READING-BERKS PA Local, Bob Millar, 215-944-0991 RD4, Box 4482A, Fleetwood PA 19522 ROCHESTER, John Roberts, 716-442-0751 109 Linden Street, Rochester NY 14620 SUFFOLK COUNTY NY Local, Hugh Cleland, 516-751-0340 528 Pond Path, Setauket NY 11733

Midwest -

ANN ARBOR Local, Eric Ebel, 313-662-4497 P.O. Box 7211, Ann Arbor MI 48107 ATHENS OH O.C., Paul Burke, 614 594-7927 4 Pine Place, Athens OH 45701 CARBONDALE IL O.C., E.G. Hughes, 618-549-1409 P.O. Box 2201, Carbondale IL 67902 CENTRAL INDIANA Local, Brad Lorton 317-293-2612 6446 Whitehaven Road #1028, Indianapolis, IN 46254 CENTRAL OHIO Local, George Boas, 614-297-0710 44 Brunson Avenue, Columbus OH 43203 CHICAGO Local, Maggie Shreve, 312-384-0327 1608 N. Milwaukee Ave.,4th floor, Chicago IL 60647 CLEVELAND Local, Terri Burgess, 216-476-8560 11316 Dale Avenue, Cleveland OH 44111 DANE COUNTY WI O.C., Todd Anderson, 608-271-4793 P.O. Box 9038, Madison WI 53715 DANVILLE IL O.C., Brian Mitchell, 217-431-8251 208 Brentwood, Tilton IL 61833 DETROIT Local, Roger Robinson, 313-822-4639 653 Pemberton, Grosse Pointe Park MI 48230 IOWA CITY Local, Jeff Cox, 319-338-4551 112 S. Dodge, Iowa City IA 52242

KENT OH O.C., Eric Hensal, 216-677-9789
134 East Oak Street, Kent OH 44240
MAHONING VALLEY OH O.C., Allan Curry, 216-534-9327
117 Caroline Avenue, Hubbard OH 44425
MILWAUKEE O.C., Tom Sobottke, 414-367-5893
162 Hill Court, Hartland WI 53029
ST. LOUIS Local, Dave Rathke, 314-773-0605
3323 Magnolia, St. Louis MO 63118
TWIN CITIES Local, Dan Frankot, 612-224-8262
695 Ottawa Avenue, Saint Paul MN 55107
WICHITA O.C., Jim Phillips, 316-681-1469
2330 North Oliver Street #219, Wichita KS 67220

South

ARKANSAS O.C., Jason Murphy, 501-661-0984
512 North Oak, Little Rock AR 72205
AUSTIN Local, Dick Fralin, 512-820-0257
2409 West Eighth Street, Austin TX 78703
CENTRAL KENTUCKY Local, Ann Patterson, 606-268-2983
P.O. Box 1190, Lexington KY 40589
CHARLOTTESVILLE Local, Claire Kaplan, 804 295-8884
Route 1 Box 1250, Troy VA 22974
HOUSTON Local, Elroy Sullivan, 713-667-2726
3322 Durhill, Houston TX 77025
RICHMOND O.C., Irene Ries, 804-276-8271
P.O. Box 5011, Richmond VA 23220

West

ALBUQUERQUE Local, Gerry Bradley, 505-881-4687 6008 Ponderosa NE, Albuquerque NM 87110 EAST BAY CA Local, Dean Ferguson, 510-763-8054 150 17th Street #404, Oakland CA 94612 EUGENE OR O.C., Jean Hanna 2316 #3 Patterson Drive, Eugene, OR 97405 FRONT RANGE CO Local, Harris Gruman, 303-444-9049 3075 Broadway #D, Boulder CO 80304 ALASKA Local, John Dunker, 907-465-3400 592 Seatter Street, Juneau AK 99801 LOS ANGELES Local, Steve Tarzynski, 310-451-8934 1102 North Brand Blvd. #20, Glendale CA 91202 MARIN COUNTY CA Local, Mark Wittenberg, 415-388-6396 215 Throckmorton Avenue #2, Mill Valley CA 94941 PALO ALTO Local, Carolyn Curtis, 415-364-6124 69 Lloyden Drive, Atherton CA 94027 SACRAMENTO VALLEY Local, Duane Campbell, 916-361-9072

PO Box 162394, Sacramento CA 95816
SAN DIEGO Local, Virginia Franco, 619-276-6023
5122 Gardena Avenue, San Diego CA 92110
SAN FRANCISCO Local, Michael Pincus, 415-695-0111
1095 Hampshire, San Francisco CA 94110
SEATTLE Local, Craig Salins, 206-784-9695
6221 Greenwood Avenue North, Seattle WA 98103
SONOMA COUNTY CA Local, David Walls, 707-823-7403
943 McFarlane Avenue, Sebastopol CA 95472

DSAction-

Random Notes

- ◆ Staff News: DSA has a new administrative assistant, Margie Burns. Margie is a graduate of the New York University School of Journalism. Her responsibilities at the national office include coordinating our membership data and fulfilling requests for literature and information. Long-time DSA administrative assistant Barbara Farrow McKoy left in early September to pursue another career. Good luck, Barbara!
- ◆ Health Care Survey Update: Many thanks to the thousands of you who responded to our recent membership survey on health care activism. Results of that survey will be published in the next issue of Democratic Left. Also: If you requested copies of the upcoming revised edition of our health care pamphlet, those will be sent out in early February, hot off the press.
- ♦ The 1994 DSA National Activist Conference: This summer conference will feature intensive training for organizers and in-depth discussions about socialist political strategy for the 1990s. Look for details in the next issue of *Democratic Left*.

T hompson Memorial

◆ DSA co-sponsored a memorial tribute to E.P. Thompson, the distinguished British labor historian, teacher, literary critic, and non-aligned socialist peace activist, on December 12 at the New York Society for Ethical Culture.

Over five hundred people attended the event, which was organized by The Nation Institute. Thompson, who died on August 28 at the age of 69, was honored by several friends and colleagues, including his spouse, Dorothy. Many of the presenters read selections from Thompson's diverse writings and broadcasts.

"It is hard to imagine anyone else who added such richness to the intellectual life, the political life, the personal life of so many of us," said DSA member David Montgomery, a professor of labor history at Yale University who was a long-time friend of Thompson's.

Two final books by Thompson were published in 1993 by the New Press in New York.

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Manning Marable ■ Dorothee Benz ■ Jack Clark ■ Shakoor
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DSA Convention 1993: "A Celebration of the Possible"

elegates and observers from twenty-five DSA locals gathered in Los Angeles in early November to evaluate the state of our movement and to lay out strategies and goals for the next two years. The 1993 DSA National Convention, held during the days leading up to Congress's disastrous NAFTA vote, was dominated by conversations about how to construct a visible and effective democratic socialist movement in this age of globalizing capital and social breakdown.

Despite the many obstacles we face, the convention was marked by an extremely constructive and forward-looking tone. The convention delegates developed and approved a broad series of resolutions designed to revitalize DSA's culture of activism and its political effectiveness.

The weekend was highlighted by speeches from DSA Honorary Chairs Barbara Ehrenreich

and Cornel West and from Porfirio Muñoz Ledo, the president of Mexico's Party of the Democratic Revolution (PRD).

Outreach Events Draw Hundreds

The weekend's major outreach event was an evening of dialogue and entertainment entitled "Breaking Bread." Over seven hundred people came to Saint John's Episcopal Church to hear Cornel West, UCLA Chicano Studies Professor Gloria Romero, Joe Hicks of the Southern Christian Leadership Conference, and Bong Hwan Kim of the Los Angeles Korean Youth and Community Center. For almost three hours, these four progressive leaders carried on a riveting conversation about the state of urban politics and the prospects for forging effective multiracial alliances.

This was the first major public event of DSA's ongoing Breaking Bread Project, which is designed to bring activists of color together to work toward creating a new progressive politics in U.S. cities.

On Saturday night the convention held its second major public event — the annual Debs/Sinclair Awards banquet sponsored by Los Angeles DSA. Over two hundred people attended. This year's award recipients included Los Angeles City Council member Jackie Goldberg, Donna Wilkinson of the Southern California Library for Social Studies and Research, and Maria Elena Durazo, the president of Local 11 of the Hotel and Restaurant Employees Union. DSA Honorary Chair Barbara Ehrenreich gave the keynote address.

DSA Vice Chair José LaLuz, who presented the Eugene Debs Award to Durazo, said that the dinner was "a wonderful celebration. We cele-

Porfirlo Muñoz Ledo exhorts the delegates to work on behalf of international worker solidarity.



Steve Oliver

DSA National Convention 1993





Left: José LaLuz presents the Eugene Debs Award to Maria Elena Durazo. Right: Paula Litt (left) presents the Upton Sinclair Award to Jackie Goldberg.

brated the best of the traditions that we are all about."

Looking Toward DSA's Future

The weekend's plenaries, workshops, and resolution sessions were devoted to hard examinations of the current political environment and appropriate strategies for DSA.

In his address to the convention, Profirio Muñoz Ledo stressed the need to develop a higher level of international solidarity among workers and activists throughout the Americas. Only through such solidarity, he said, can we build effective movements to resist NAFTA-style agreements that will "level down" wages, environmental standards, and working conditions across the hemisphere.

The Convention approved a resolution calling for the continuation and expansion of DSA's Americas Project, which seeks to develop links between DSA and emerging progressive forces in the Western Hemisphere. The resolution stresses that DSA's anti-NAFTA work was "not a protectionist battle cry against economic progress, but rather the basis for an alternative approach to hemispheric economic integration. Our vision of democracy and economic justice challenges the neo-lib-

DSA'S MISSION IN THE COMING PERIOD:

EXCERPTS FROM THE POLITICAL STRATEGY DOCUMENT

CIRCULATED AT THE CONVENTION

The supposed "triumph of capitalism" has ushered in a world of unbridled transnational corporate power, growing international inequality, and environmental degradation. . . The political collapse of Thatcher-Reaganism does not, however, guarantee a strong rebirth of the democratic left. In light of the collapse of communism and the crisis of social democratic welfare states. . . . there is a striking absence of faith in the traditional left. The left cannot continue to adhere to an anachronistic model of social progress as purely quantitative economic growth.

Changes in the global economy have resulted in the search for new models of North-South relationships and new models of living. These are often focused around the concept of sustainability -- learning to live within the limits of natural systems, while ensuring a decent quality of life for all people. Thus, the coming period must be one of base-building for a remodeled left, but a left still committed to the core socialist values of equality, justice, solidarity and freedom. Just as those values continue to be relevant, so too is the socialist analysis of how the undemocratic nature of corporate power reinforces structures of economic, racial, and gender domination . .

Our challenge is to engage in concrete political work that demonstrates that reforms which promote our vision of global economic justice are possible.

. . .This coming period will be a crucial test of whether or not DSA can transform its numerical growth into real organizational and activist growth. We need to rebuild vibrant locals, campus chapters, commissions, and issueactivist networks that convince our own members (as well as potential members) that DSA is an effective vehicle for politically intervening in the crucial issues of their communities. . .

If our long-term mission is to build a democratic socialist society, our medium-term mission (a project of the next decade) is to:

- 1) Bring socialism back into the mainstream of American politics;
- Build democratic coalitions for reform that weaken global corporate power and empower workers, women, people of color and a globalized working class;
- Build a strong, local-based, multiracial, national democratic socialist organization capable of effectively intervening in grassroots politics.

DSA National Convention 1993

Jack Clark

Boston, MA

Suzanne Crowell

Washington, DC

Rachel Dewey

Pasadena, CA

eral agenda of privatization and 'free trade' for the benefit of corporate and financial elites."

The convention's other major international affairs resolution calls for the creation of a DSA Women and Politics Program. This program will focus on international issues of economic development, reproductive freedom, and electoral representation. (For more information on this project, see page 21.)

Domestic Resolutions

Topics of domestic resolutions included health care (see page 23), urban politics, labor law reform, the housing crisis, and D.C. statehood.

The convention also passed a resolution on electoral politics that was informed in part by a plenary session entitled "Politics in the Clinton Era." At this session NPC members Jack Clark, Bob Fitrakis, and Lynne Mosley Engelskirchen, along with Sacramento civil rights attorney Eric Vega, discussed the obstacles confronting progressive coalitions in the current climate.

The resolution on electoral politics declares that "the imperative task for the democratic left is to build anticorporate social movements that are capable of winning reforms that empower people. . . The fundamental question for DSA is not what form our electoral intervention takes.

.Rather, the crucial task is building such grassroots, multiracial coalitions; there is no shortcut to doing so. Flying the flag of third parties that lack a mass social base, or placing

DSA Honorary Chair Cornel West addresses the Convention. Opposite page left: Sacramento DSA activist Eric Vega during the plenary on politics in the Clinton era. Opposite page right: Dominic Chan of San Francisco DSA during the plenary on DSA's strategy.

The National Political Committee

Convention delegates elected the following 23 people to serve as the 1994-1995 DSA National Political Committee (NPC). The NPC is charged with leading the implementation of the political projects defined by the delegates to the Convention. The new NPC will set up task forces to carry out each of DSA's major political projects for the next two years, including the campaign for single-payer health care, the global justice and solidarity campaign, the labor law reform project, and the Breaking Bread/New Urban Agenda project.

Shakoor Aljuwani	Lynne Engelskirchen	Christine Riddiough
New York, NY	Santa Monica, CA	Washington, DC
Theresa Alt	Bob Fitrakis	Al Rojas
Ithaca, NY	Columbus, OH	Sacramento, CA
Pat Belcon	Julia Fitzgerald	Joe Schwartz
Rochester, NY	Brooklyn, NY	Ithaca, NY
Duane Campbell	Claire Kaplan	Ruth Spitz
Sacramento, CA	Charlottesville, VA	New York, NY
Dominic Chan San Francisco, CA	Michael Lighty San Francisco, CA	Kurt Stand Washington, DC

Brooklyn, NY Jo-Ann Mort Brooklyn, NY Steve Oliver

Brooklyn, NY

Frank Llewellyn

Steve Tarzynski Santa Monica, CA Juanita Webster New York, NY

- The Youth Section Coordinating Committee elects one of its members to serve as a voting member of the NPC. As of January 1994, that person is Karen Marie Gibson of Rochester DSA.
- * There is one vacancy on the NPC, which the Convention authorized the NPC to fill. This position must be filled by a woman.



DSA National Convention 1993





Excerpts from Cornel West's Address, November 13

or a moment, the fact that we're still here. Many said in March of 1982 that DSA would never make it through the first decade, never make it through the ice age, when those powerful conservative elites organized and solidified and began to shape this society in their image and in light of their own interests. DSA did survive. Brother Michael died in 1989; many people said DSA would not survive. We are still here, growing — to some degree hollowed out, with our locals not as strong — but growing, with new energy, building on the best visions and analyses of the past, and recognizing that we're in a very, very unique and distinctive moment in the history of this country.

. . . None of us have thought that somehow DSA would be the sole or exclusive vehicle for American radicalism, but we know that we can be the socialist leaven that keeps alive an internationalist vision that highlights the rule of capital today, promoting the kind of strategy and tactics that we know must be multiracial and multicultural. Whatever movement we are working in, we still have the democratic socialist vision that accesses internationalist vision and a focus on class, and equality, and white supremacy, and male supremacy, and ecological abuse, and homophobia. With this vision in mind, we must try to create an anti-corporate multiracial alliance.

Where are we, then, in terms of the democratic socialist project? Well, for one thing, we are now moving on an international level, where, very much as brother Alan talked about this morning, it's beyond just support work, and engaging at a much higher level of international solidarity, in North America, Incorporated, as *Business Week* puts it: Canada, U.S.A., Mexico. I just talked with brother Muñoz Ledo this morning, and we're setting up some joint trips together in Mexico, right around the Mexican national elections. We'll be there in July.

. . . The distinctive feature that I find traveling across the country, the two hundred or so times that I speak during the year, is the rage -- the flip side of the sense of impotence, powerlessness. So how do we empower? By channeling rage in constructive ways and then bringing our own democratic socialist vision to bear

. . . It's just so good to know that we're still going, that we're growing, and that the legacy of Michael Harrington and Irving Howe is still very, very much alive.

uncritical faith in isolated progressive Democratic politicians, would be foolish."

Constitutional Amendments

The Convention also passed a series of constitional amendments designed to increase the effectiveness and democratic accountability of DSA's governing bodies.

The first set of amendments eliminates 'DSA's national board. Responsibility for governing the organization now rests straightforwardly with the National Political Committee (NPC), which is elected by delegates from DSA's locals at each convention. The biennial meeting of the national board will be replaced by a "National Activist Conference."

The second set of amendments eliminates the so-called "National Interim Committee," which will be replaced by an elected Steering Committee of the NPC.

For complete copies of the resolutions and amendments passed by the Convention, write to Margie Burns at the national office or call us at 212/962-0390.

For information on ordering a videotape of the Breaking Bread event featuring Cornel West and the Debs/Sinclair Awards Dinner featuring Barbara Ehrenreich, contact Ralph Cole at Justice Vision at 213/747-6345.



by Harry Fleischman

ARKANSAS

Arkansas DSA will be a coalition partner in the "Arkansas Liberty Alliance," which will work to defend Little Rock abortion clinics from Rescue America, the ultramilitant anti-abortion organization. Rescue America has announced plans to come to Little Rock between April 17 and April 23. The local urges any interested DSA members to come to Little Rock that week; free housing will be provided. For more information, call Jason Murphy at 501/661-0984.

CALIFORNIA

San Diego DSA co-sponsored a December 11 bus trip to investigate labor and human rights conditions in Tijuana. Member of the local met with labor organizers and community activists on the trip, which was organized by the Support Committee for Maquiladora Workers. The local also sponsored a forum December 12 on U.S. foreign policy under the Clinton administration.

Members of the Valley branch of Los Angeles DSA have been hard at work on the petition drive to place a referendum that would create a statewide Canadianstyle single-payer health care system on the California ballot.

COLORADO

Front Range DSA recently received a \$2,000 grant from the Chinook Fund of Colorado for its

work on single-payer health care.

DISTRICT OF COLUMBIA

The D.C./Maryland/Northern Virginia local will co-sponsor a forum February 25 entitled "Crime in the Community: Views From the Left." Among the speakers will be Clarence Lusane, the author of *Pipe Dream Blues*.

During November and December, activists from the local walked the picket line with lockedout Hotel and Restaurant Employees workers at the Madison Hotel.

ILLINOIS

The West Suburban branch of Chicago DSA sponsored a meeting on single-payer health care December 8 that attracted 35 activists from a variety of organizations. The branch recently made a donation of toys to the children of locked-out A.E. Staley workers in Decatur.

KENTUCKY

Members of Central Kentucky DSA gathered on January 17 to watch video footage from the 1993 DSA National Convention, including the Breaking Bread event featuring Cornel West.

MASSACHUSETTS

In late November Boston DSA sponsored a forum on the implications of the NAFTA vote. Speakers included Ed Clark, Vice President of the Amalgamated Clothing and Textile Workers Union and Tom Estabrook of the Massachusetts Toxics Campaign.

MINNESOTA

Twin Cities DSA has been active in a number of areas. Members of the local worked in support

of a direct-action campaign in which homeless Twin Cities residents occupied vacant housing units owned by the federal government.

The local has also been active in the movement opposing a Minnesota utility's plans to store nuclear waste at an above-ground facility near a rural Native American community.

NEW YORK

The Housing Task Force of New York City DSA continues to reorganize. On January 19, the task force sponsored a talk on homelessness by Joel Blau, author of *The Visible Poor*. The local's Environmental Task Force will hold a forum on ecological issues in the NAFTA era on February 11 at the City University of New York Graduate Center.

The West Side branch of New York DSA sponsored organizer training with representatives from the Industrial Areas Foundation on January 4.

PENNSYLVANIA

Reading-Berks DSA recently co-sponsored a public event to dedicate a public memorial to ten workers killed by the state militia in Reading in the railroad strike of 1877. Local leaders Bob Millar and John Sellers host a monthly cable-access television program that is now being broadcast in Philadelphia as well as Berks County.

VIRGINIA

The new DSA organizing committee in Richmond has been doing support work for locked-out members of the Communications Workers of America. They are also participants in the Virginia state-wide coalition for single-payer health care, and they are co-sponsoring a series of lectures and events entitled "Women On Women's Issues in Bosnia."

DSA Commission News

* The DSA Feminist Commission

The DSA Feminist Commission sponsored a series of events during the weekend of December 11 and 12 in conjunction with a Washington, D.C. meeting of the executive board of Socialist International Women (SIW). The weekend was devoted to developing feminist approaches to the environment and international development. The SIW hopes to present a comprehensive agenda to the UN conference on Population and Development, which will be held in Cairo later this year.

Birgitta Dahl, a member of the Swedish parliament, told the gathering that women's experiences have traditionally been left out of international development policies — an error that has caused great harm both to women and to the environment. "Women are the carriers of the basic knowledge of survival in most countries," she said. "They are responsible for water, sanitation, fire, food and waste management as well as the social network and cultural traditions."

DSA Vice Chair Christine Riddiough, who is a Vice President of SIW, warned that responses to the global population crisis must not include coercive restrictions on women's reproductive choices. "Coercive policies have

failed in the past and will continue to fail," she said. "Governments must take a new approach to these issues, one that focuses on reproductive rights and health. Such an approach requires support for expansion of social security in its broadest sense. We must have programs that provide health care, health education and sex education and which are based in the concept of freedom of choice."

Another speaker was Brazilian scholar Elisa Larkin Nascimento, who spoke of the effects of Brazil's accelerating integration into the world economy -- especially the effects on women's ability to make health choices. As Brazil has entered the system of international patent law, the cost of pharmeceuticals has skyrocketed. Women have responded by tapping into traditions of African herbal medicine.

The 1993 DSA Convention voted to launch a national project on Women and Politics, which is designed to address many of the environmental and reproductive issues discussed during this SIW meeting. This project will also address issues of electoral representation.

The SIW's meetings were hosted by the office of U.S. Representative Ron Dellums, who is a Vice Chair of DSA.

* The DSA Latino Commission

The DSA Latino Commission has engaged in a number of activities in response to the guerrilla uprising in southern Mexico in early January. On January 6, leaders of the commission in Sacramento, California helped to organize a demonstration at the offices of U.S. Representative Robert Matsui, who was a key congressional supporter of NAFTA.

The demonstration sought to make Representative Matsui accountable for his NAFTA support and for the human rights implications of U.S. supprt for the government of Mexican President Carlos Salinas. The activists demanded that Matsui support a neutral, non-interventionist military position with respect to the uprising of the Zapatista Army of National Liberation in southern Mexico. They also pressured Matsui to support the creation of an international human rights delegation to investigate

conditions in southern Mexico.

The commission also co-sponsored a January 10 demonstration at which the Mexican consulate in Sacramento was taped shut, with activists shouting that they would not allow the building to open until the Mexican government agreed to respect the rights of dissenters.

Leaders of the Commission plan to organize a delegation to observe the Mexican elections in August 1994.

On another front, the Latino Commission has been active in organizing support for the rights of Mexican and Latin American immgrants in the U.S. In the face of increasing anti-immigrant violence, the commission has been petitioning the United Nations to investigate the human rights situation of immigrants in California. Write to the Commission for more information (see address on page 22).



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continued from page two of "visionary gradualism." Democratic socialists should project a vision of a moral society based on freedom, equality, and solidarity. We must also understand that reaching such a goal involves a gradual approach over a long period of years, with each reform becoming the foundation for the next. There is no other way, and history alone will judge the pace.

Keeping this in mind, in the coming months DSA should struggle at the grassroots and in Congress to make the final legislative proposal the best that it can be given the current alignment of class forces in our country. This work must include support for single-payer legislation and for a state option for same in the final package. What you can do, as a DSA member, is commit yourself to increasing your own personal effort a notch or two in the coming months to help bring about fundamental health care reform. Get involved in your DSA local's effort, or help jump-start it if needed. The struggle continues.

Steve Tarzynski is a member of the DSA National Political Committee and chairs the DSA National Health Care Task Force.

♦ The next issue of Democratic Left will contain a special section on health care activism, including articles by Susan Cowell and Jason Kay and reports from leaders of DSA locals.

* Resolution on Health Care Reform

Passed by the DSA National Convention, 14 November 1993.

DSA supports the historic effort to radically reform our nation's health care system. The President's plan is the most significant piece of social legislation since the Social Security Act. It is a first step in the latest phase of the long-standing effort to establish national health insurance. It is a welcome sight to see a U.S. President who believes government can be a positive and effective force for the common good. This alone is a real change which should help set a much needed new moral tone in our country.

DSA agrees that six principles should guide reform efforts: universality, comprehensiveness, affordability, progressive financing, administrative simplicity, and cost containment. We believe these goals can be best achieved through a singlepayer system. As health insurance companies are spending millions of dollars to undercut any government-administered program -- despite the role given to big insurers by the Clinton proposal -- we will focus our efforts both at the grassroots and in Congress to eliminate the health insurance companies and to maximize single-payer elements in the final legislative proposal. These elements are currently embodied in the McDermott-Convers-Wellstone bills (HR1200/S.491), support for which we re-affirm. It is crucial that

any federal health plan allow states to easily establish single-payer systems.

DSA will also organize and participate in the following efforts:

- -- anti-corporate campaigns targeting private health insurance and pharmaceutical lobbies;
- campaigns against any corporate or political forces which seek to stall or destroy efforts at fundamental reform;
- congressional campaigns which target anti-reform incumbents and which support single-payer advocates.
- state campaigns to establish single-payer systems.

The main organizational vehicle for these efforts shall be the the DSA Health Care Task Force. The Task Force will seek to involve every DSA local in the fight for progressive health reform. The 1995 DSA Convention delegates shall receive a written evaluation of DSA's campaign for health reform prepared by the Task Force chair in consultation with Task Force members.

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Janie Higgins Reports



FISCAL MELTDOWN

Left environmentalists have long pointed at pollution as a prime example of the failure of free market mechanisms to protect the welfare of society as a whole. And when pollution becomes serious enough, of course, even the capitalist economy that has nurtured it begins to suffer. A new study underscores

this: William R. Cline, a senior fellow at the Institute for International Economics, has estimated that global warming will cost the United States 2 percent of its Gross Domestic Product -- a vast sum -- by the year 2030, if losses in forestry, coastal properties, and heatrelated health care are tabulated correctly. And Cline's studies rely upon the EPA's most optimistic forecast -that atmospheric carbon dioxide levels will only double during the next fifty years.

IN THE STARS

Is capitalism's final crisis upon us? Several "financial astrologers" have solemnly forecast that a rare alignment of seven planets portends a stock market crash during the first quarter of 1994. One of them told the Wall Street Journal, "We are going to go over the cliff."

A KNIGHT IN INDONESIA

If you happen to have a pair or two of old and smelly Nike sneakers, consider sending them back to Nike CEO Philip Knight (Nike Corporation, 1 Bowerman Drive, Beaverton, OR 97005). The Oregon state AFL-CIO is leading a "shoe return" campaign to press Nike to respect labor rights and common decency at its plants in Indonesia, where workers as young as twelve routinely earn as little as 15 cents an hour in desperately unsafe conditions. Higgins suggests that you stuff your sneakers with pages from The Joy of Running before you

MISSED OPPORTUNITY

As we environmentalists and labor activists lick our wounds following the NAFTA defeat, and as we lay plans for developing public opposition to GATT, we're left to contemplate what might have been. Heidi Fleiss, the so-called "Hollywood madam," boasted in Vanity Fair this month about the number of political leaders who procured prostitutes through her agency. It seems that Fleiss could have -- had she chosen -- used the fruits of her devil's bargain with commodified sexuality toward a progressive end. "If I really came out and talked," she said, "I could have stopped NAFTA."

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