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The Health Care Crisis: A Progressive Response Barbara Ehrenreich • Vicente Navarro • Eric Frumin • Janet Wilder Plus: Manning Marable reviews Parting the Waters: America in the King Years.

# **EDITORIAL**

## Health Care: A Socialist Issue

A couple of years ago -- before glasnost anyway -- I fell into a lengthy political discussion with a couple of truck drivers, members of my husband's union. With some trepidation, I admitted to being a socialist, and hastily covered myself with distinctions between democratic socialism and "socialism" of the Soviet Union. My companions looked confused and uncomfortable, and I was afraid I had permanently alienated them. Finally one of them said, "Why are you so down on Russia? At least they've got health insurance."

Health care is American capitalism's greatest long-run embarrassment. According to the intellectual thugs of the right, the public sector can never do anything right, socialism everywhere is a shambles, and, whatever the problem, "free enterprise" is the solution. America's hugely bloated, supremely uncaring health system stands as the perfect refutation. It is thoroughly capitalist, privately controlled, increasingly committed to the direct appropriation of profit — and it doesn't work.

Consider the fact that America spent around \$550 billion on health care in 1988. Per capita, we spend 50 percent more per year than Canada (which has a publicly financed and managed national health insurance system) and almost three times more than Great Britain (which has socialized medicine.) Remember these numbers the next time someone tells you America "couldn't afford" a decent health system.

Despite our massive expenditures on health -- the highest per capita in the world -- 37 million Americans have no health insurance whatever and are dependent on the charitable impulses of their local doctors and hospitals. In recent years, this has meant a tragic increase in patient "dumping": the practice of shipping indigent patients from one hospital to another until the patient is accepted -- or expires along the way.

Even those of us who have what is considered "adequate" insurance coverage must make significant out-of-pocket payments (deductibles, or for uncovered procedures and services.) And all of us live in fear of the financial consequences of a

major disease, such as cancer or AIDS, which are not called "catastrophic" because of their medical effects.

An estimated 25 percent of what we spend on health care is wasted on unnecessary surgery (Caesarean sections, hysterectomies, and coronary bypass operations are notoriously abused) and unnecessary diagnostic procedures (designed to protect the provider from malpractice suits, not to help the patient.) And this estimate of waste does not even include the billions spent on administrative costs, such as the costs of billing and collection, which would vanish in a rational system.

For all that we spend, we don't even get "freedom of choice." One of the most over-used arguments against a national health care program is that Americans are used to choosing their own physicians. But only 28 percent of current employee health coverage plans offer a free choice of provider. Besides there is no reason a national program couldn't include freedom of choice.

That, in summary, is capitalist medicine: ineffective, inefficient, greedy, corrupt, and fragmented. If the post office is supposed to symbolize the failure of the public sector, the hospital -- or clinic, or health insurance company -- should be our symbol for the failure of private enterprise. And, in most people's actual experience, the post office is infinitely cheaper, more efficient, and more caring than the average American health care institution.

An important thing, from an activist's point of view, is that most people, like the truck drivers quoted above, know that something is deeply wrong. Despite a tenyear Republican campaign against "entitlements," most Americans persist in believing that health care is a right. Almost 90 percent believe that America's health system needs "fundamental change," and, in my own experience of talking about health issues, people who would reject the idea of socialism often have no trouble with the concept of socialized medicine.

In the area of health, the left has a clear alternative to the capitalist status quo. Details vary, and we may well debate whether America should have a national health service (socialized medicine) or national health insurance (like Canada); how it should be financed (taxes, employer contributions, etc.); and so forth. But the starting principle is that health care is an area in which profit should have no place. A profit-driven health system is a moral offense. Besides, we already know it doesn't work

Health care gives us an opportunity to talk about the fundamental morality of the market. Should basic needs -- for food, shelter, or health care -- be conditional on one's ability to pay? Should human caring and mercy be conditional on someone else's ability to make a quick buck? We know the answers. What we need is a movement to drive them home.

- by BARBARA EHRENREICH

This issue of Democratic Left was produced "in-house" using desktop publishing, as will be the case for all subsequent issues of the magazine. The transition to producing Democratic Left "in-house" caused a delay in the completion of this issue. There are also still bugs in the program, so please be patient. Producing Democratic Left in this manner will reduce production costs for all future issues.

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# Health Care and Job Safety: Separate and Inseparable

by Eric Frumin

worker is injured on the job. Over ten thousand workers are killed in accidents each year. Recent studies estimate that as many as seventy thousand die annually from occupational diseases—ten thousand alone from working with asbestos. In all, this amounts to a Vietnam War's worth of American casualties every six months. The true picture of workplace injuries and illness is every bit as scandalous as the growing poverty among workers and their families and the sorry medical care they get.

With the drop in strike activity, it is difficult to compare the levels of worker frustration with workplace safety in various industries, but many progressive trade unionists have observed that it is growing. At the same time, health is an issue of increasing concern to both organized and unorganized workers. They worry about the cost of uninsured medical care as well as known and suspected health risks on the job.

## **Economic Implications**

The movement to protect workers' safety and health addresses the major obstacle now thrown in the way of many proposals for progressive change — the federal budget deficit. According to the National Safety Council, employers, workers, and governments spend more than forty-two billion dollars each year in health insurance and income maintenance costs for compensable injuries and fatalities. In some labor intensive industries, the epidemic of "repetitive strain injuries," such as carpal tunnel syndrome, has led to worker compensation costs as high or higher than the already staggering costs of health insurance itself.

Though reliable estimates are difficult to make, the costs of occupational illnesses are even greater than those for injuries. The federal black lung benefits program alone costs one billion dollars annually. A 1980 Labor Department report concluded that only 5 percent of all occupational illnesses were covered by worker compensation benefits. The rest of the costs were paid by workers and taxpayers through Medicare, Medicaid, and Social Security disability benefits. Only in the rare case, such as the recent bankruptcies in the asbestos manufacturing industry, do stockholders or corporate lenders face significant financial losses. Although these losses can never compare to the personal losses suffered by workers and their families, they are nonetheless the economic and political yardsticks of our society.

Even among the best trade union lead-

ers, the awareness of health and safety hazards often diminishes rapidly with time spent away from the shop floor or job site. And yet, these issues are often central to the potential strength of the unions. For many workers, the mere voicing of their fears and demands about job hazards is often a test of a union's responsiveness. The ability of the leadership to promote these demands is sometimes a key step in the resurgence of the organization's vitality. A union's awareness of safety issues has also become a test of its responsiveness to unorganized workers and even to the community at large, which has now come to expect such leadership.

No discussion of health care in the United States is complete without consideration of the related issues of safety and health on the job. As the debate on a national health program looms larger on the political landscape, worker demands for decent health care and job safety will add to the strength of the movement for a national health program.

Furthermore as public sentiment for strict environmental protection grows, the trade union campaign for job safety is becoming a significant factor in environmental politics. When the cloud of methyl isocyanate burst over the unsuspecting population of Bhopal, India, following months of warnings from the union of the Union Carbide workers, the two struggles were clearly linked. Indeed, a 1988 Roper poll for the Environmental Protection Agency ranked people's views on the existence of "very serious environmental" hazards in the following order:

hazardous waste dumps	62 %
worker exposure to toxic	
chemicals on the job	60 %
nuclear power accidents	58 %
pesticides in food	52 %
"greenhouse effect"	33 %

When this widespread support for worker safety and environmental protection is added to the movement for health care reform, the potential exists for a broad coalition on working-class concerns. The challenge facing socialists and other supporters of worker interests is to help weld together this coa-



lition.

After six years of aggressive attacks on both trade unions and government job safety enforcement, industrial management suffered the consequences of its actions. In 1986 Labor Secretary (and former Republican National Chairman) Bill Brock lowered the boom on Union Carbide's U.S. plant in Institute, West Virginia by imposing the highest penalties in OSHA's history -- 1.4 million dollars.

Continued on page 13.

## Electronic Monitoring is Hazardous to your Health

by Janet Wilder

The office factory has arrived and the head supervisor is an electronic "Big Brother," who doesn't care about workers' health or human dignity. Computer technology is automating white collar work just as the assembly line subdivided production work and deskilled the production workforce. Clerical workers organizing around health issues have shifted their focus from VDT (video display terminal) health and safety legislation to another threat to the health of clerical workers: the office factory, with a computerized supervisor in the form of electronic monitoring.

## What is Monitoring?

Electronic monitoring refers to the use of computerized or electronic systems to keep track of an employee's work performance and activities. It is a new generation of high technology supervision tools, made possible by the automation of office work. The U.S. Department of Labor estimates that two-thirds of all VDT users may be subject to some form of electronic monitoring on the job. There are three main forms of electronic monitoring:

Computer monitoring: A worker's computer keeps track of his or her work, such as the number of keystrokes, error rate, time it takes to complete each task, time between each task, and time away from the machine. Statistics are tabulated for each employee and printed out for the supervisor. Computer monitoring is used to measure each worker's speed and accuracy. The statistics make sweatshop practices like production quotas and pay by piece lucrative for office work.

Computer monitoring is most common in industries where large amounts of information is processed, such as insurance, banking, and financial services. In jobs like data entry and insurance claims processing, the use of computer monitoring is widespread.

Service observation: Supervisors listen in on phone conversations between an employee and a customer to evaluate the employee's level of courtesy and tone. Sophisticated new technology makes it possible to listen in without being detected, and employees are almost never informed when they are being observed.

Service observation is most common in customer service jobs in industries such as telecommunications, utilities, and travel. Often these jobs are monitored through both service observation and computer monitoring.

Telephone call accounting: A centralized phone system reports the time, length, and destination of all local and long distance phone numbers dialed from each extension. Telephone call accounting helps management control the cost of phone use. It also lets them flag employees who call the union office or who check on their children at child care.

## Monitoring as a Health Issue

The combination of deadline pressure and lack of control make clerical work an exceptionally stressful occupation. Automation contributes to the stress by making the work more repetitive, allowing for fewer natural breaks, and limiting the variety of tasks. Electronic monitoring is a high technology tool that takes more control away from employees by tightening supervision and amplifying the work conditions that cause health problems.

Asurvey of nearly 700 monitored workers at forty-nine companies conducted by the Coalition on New Office Technology (CNOT) revealed that electronically monitored workers report very high rates of health problems associated with VDT work. Almost 90 percent report symptoms of eyestrain, headaches, and back or neck aches. Monitoring also increases stress levels on the job: eighty-one percent of the surveyed respondents say that electronic monitoring makes their job more stressful.

Pressure to work faster at a keyboard contributes to a higher rate of repetitive strain injuries for monitored workers than found among unmonitored workers doing similar work. Alarmingly, 46 percent report hand and finger problems associated with carpal tunnel syndrome, a seriously deliberating repetitive strain injury.

A directory assistance operator wonders whether her supervisor is listening in on each call, while her computer counts whether she meets the twenty second quota for average time on a call and then automatically feeds her the next call. Sixty-nine percent of the CNOT survey respondents are subject to both computer monitoring and service observation.

### First Steps

At state and national levels a battle is shaping up over the use of electronic monitoring in the workplace. In Massachusetts, CNOT is leading the campaign to pass a bill in the Massachusetts legislature to prevent abuses of electronic monitoring in the workplace. Over forty unions, women's groups, and community organizations make up the Coalition. A bill modeled on the Massachusetts legislation is being introduced in Congress, and similar efforts are underway in a number of other states.

The Massachusetts bill would go a long way toward protecting workers from the worst abuses of electronic supervision. It would provide basic protections to the vast majority of white collar workers who are unorganized, as well as establish a foundation for bargaining on electronic monitoring for service sector unions. The bill outlines four rights for monitored workers: the right to know; the right to privacy; the right to due process; and the right to human dignity.

Though concerns about their health may bring office workers into electronic monitoring campaigns, the proposed legislation does not directly address the quality of the jobs that employers are using the automation to create and the health hazards of those jobs. In an age of drug testing and genetic screening in the workplace, however, the first goal must be to bring supervision and surveillance technology into the realm of public policy and to establish guidelines for appropriate uses of technology that protect basic civil and human rights.

Janet Wilder, a member of Boston DSA, is the education director at the Office Technology Education Project,

# Health Care as a Human Right

by Vicente Navarro

A mong Western industrialized nations, only the United States and South Africa lack a national health program that makes access to health care a basic right for all. The reasons given to explain this American exceptionalism are many. They include the following:

1. Americans do not want it. Americans are antigovernment. The elections of 1980, 1984, and 1988 showed that people want government off their backs. This explanation is heard even in progressive circles, but it is wrong. Since 1947, when Americans were first asked whether they would be willing to have their government establish a national health program, their answer has been a consistent and strong yes. This support has increased during the Reagan years. Some 75 percent of Americans want their government to establish a program that would guarantee health care for everyone. The Gallup poll of November 1988 showed that Americans thought that the establishment of a national health program should be one of the top four priorities of the Bush administration.

2. Americans are satisfied with their health care. The problem we encounter in the United States is limited to the 37 million who do not have health benefits insurance coverage. The problem, however, is not limited to the uninsured. High costs of medical care and insufficient coverage affect the majority, not just the minority of Americans. And they are aware of it; an overwhelming 89 percent of Americans want to see major changes in the financing and organization of health care, with only 10 percent showing satisfaction with the current state of affairs. According to an international survey of how people feel about their systems of health care, Americans are substantially more dissatisfied with their health care than are the citizens of other major Western democracies.

3. We cannot afford a national health program. The problem is not money. We already have greater health expenditures per capita than any other nation on earth. The root of our problem is the channel



through which this money is spent. The United States is the only country where the majority of funds are provided and administered by the private sector. This is the root of our problem of high costs and limited coverage. Most health funds, both private and public, are administered by 1,550 private insurance companies that reimburse providers for delivery of services. Keeping in mind that there are 1.7 billion hospital admissions and physician visits per year provided by 369,200 physicians in 1,047,438 hospital beds, and that providers are paid by diagnoses, visits, or admissions, one can see that an enormous administrative apparatus is required to sustain such a system. Twenty-two cents of every health dollar go to paper shuffling -- administrative costs in billing, managing, marketing, and other administrative tasks -- compared with only 10 cents in Canada, where the financing of the health system is public. If we had a system like Canada's, we would save \$50 billion a year just in administration.

4. People are not willing to pay higher taxes. How people feel about taxes depends on what they get in return. United States citizens pay less in taxes on average than citizens of the other seventeen developed capitalist nations. But averages are misleading. Looking at level of taxation by occupational groups, one sees that a steel-

worker in Baltimore, for example, pays almost as much in taxes as a steelworker in Goteborg, Sweden. But there is no comparison between what they get in return from their governments. The Swedish worker gets free health care, education (including college) for his or her children, family allowances, child care, and many other public services that our workers cannot even dream of. Production workers in the United States get less disposable income than similar categories of workers in the majority of developed industrialized nations. At a time when workers in the United States are under enormous economic constraints (their family income in constant dollars is the same as it was in 1972), they are not willing to pay higher taxes for services going to someone else (the politics of compassion do not work in times of austerity). But they are willing to pay higher taxes if the programs provided by those taxes will benefit them as well as others. This is why today it is more popular to call for a national health program in the United States than to establish meanstested programs for the "deserving" poor. Solidarity makes more sense than compassion, particularly when the new earmarked taxes (as in the Jackson National Health Program) would substitute for the premiums, out-of-pocket expenses, and other expenses that Americans now pay.

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In summary, we do not have a national health program because we do not have the money, or because people do not want it. We do not have a national health program because of the enormous political power of the insurance companies and the medical-industrial-complex that they support.

## What is Being Done?

The solutions that are being proposed follow two types of approaches. One, adopted by large sectors of the AFL-CIO leadership, Senator Edward Kennedy, and by candidate Michael Dukakis (augmented with proposals made by the National Leadership Commission chaired by former Presidents Nixon, Carter, and Ford), aims at covering the uninsured by mandating employers to provide basic insurance to their employees. For those who are not employed, the proposals call for state-based insurance pools that would provide subsidized premiums to those who cannot afford to pay individual premiums in the premium market. The funds for these pools would come from payroll taxes or taxes on employers who do not provide insurance coverage. Variations exist among these proposals, but their approaches are similar.

The problems with these approaches are many. One is that they leave the pattern of funding and organization of health care basically unchanged. The insurance companies will continue to administer the funds, reimbursing providers at market rates. Without organizational changes, the extra funds required in all these programs will represent a handsome subsidy to the insurance companies and to the medical-hospital institutions.

These proposals do not address the key problems faced by the majority of Americans, such as high costs and limited coverage. Most Americans will continue to have their health benefits coverage provided through their place of employment. Consequently, the level of health benefits coverage will continue to depend on the type of work and the bargaining muscle of the workers' unions. Service workers have only 40 percent of the coverage manufacturing workers have. The shift from fulltime to part-time work, from manufacturing to services, and from union to nonunion has also meant the decline of health benefits coverage among the 78 percent of Americans who get their health insurance through their place of work. Between 1980 and 1984, 5.5 million jobs were added to the workplace, but the number of workers with employer-paid health benefits fell by one million. This differential in health

benefits coverage divides the working class. This division will be further increased by expanding the means-test mechanism (used by the state health insurance pool to measure the level of subsidization) necessary to separate the "deserving" from the "undeserving." For the Democratic party, a type of program that divides its working class constituencies is suicidal. The identification of the Democratic party with means-test types of programs rather than universal programs is one of the main factors that has weakened the loyalty of the working class to the Democratic party.

The other type of approach is that proposed by Jesse Jackson during the recent presidential campaign. In this program, rather than paying premiums, payroll taxes, or out-of-pocket expenses, people would pay earmarked taxes based on the federal income tax code (the only tax system that is still progressive). Individuals and families would pay less than they pay now, and in return they would get comprehensive health care benefits, including coverage of many benefits such as long-term care that the overwhelming majority of people do not have. This lower cost and greater coverage would be possible because the federal government, in collaboration with the state governments, would be the major buyer of services (private insurance would play a very minimal role, if any), contracting with the private sector for the delivery of services. Fees would be federally regulated and hospitals would be paid on a prospective budget basis. Before payment, hospitals would need to have their shortand long-term financial plans approved by local and state health planning agencies, with active citizen participation. Means tests as well as copayments and deductibles would be eliminated.

The system proposed by Jackson is very similar to the Canadian one. Until 1969, Canada and the United States had similar ways of financing and organizing health care. The insurance companies in Canada operated like those in the United States. The majority of hospitals were voluntary hospitals, and the majority of physicians were paid on a fee-for-service basis. Even the health indicators were similar. Both countries spent the same percentage of their GNP on health care. In 1969, however, Canada introduced a national health program that gave to a federal provincial partnership the responsibility of insuring the population. Private insurance could only sell benefits not provided in the national health program. In 1969, the Canadian Medical Care Act (Medicare) introduced federal funding into a health care system that is administered



Tom McKillerick/Impact Visuals.

by the provinces. In order to receive matching federal tax dollars, the provincial health programs must adhere to five health care principles: (1) comprehensive coverage; (2) universal application of the program; (3) ability to transfer coverage to other provinces; (4) speedy accessibility to the system; and (5) public non-profit administration.

The Canadian system is far more comprehensive, less costly, and more efficient than ours. Most Canadians are pleased with their system, whereas only 10 percent of United States citizens are pleased with theirs. According to a recent Harris poll, the overwhelming majority of Americans would prefer a system like that in Canada to the one that currently exists in the United States. Popular wishes in American democracy, however, compete with the wishes of powerful lobbies that frequently determine what is politically feasible and what is acceptable. Jackson's proposal in that discourse is dismissed as too radical. This proposal, however, is very similar to the package that Senator Kennedy and Congressman Griffith defended (with AFL-CIO support) back in the early 1970s, when Nixon's Republicans proposed the employer-mandated coverage. It illustrates how much to the right the Democratic establishment has moved that the proposal now supported by Senator Kennedy and sectors of the AFL-CIO leadership is similar to that put forward by Nixon. and the package they once supported is now dismissed by the same forces as too far out. This is why the Democrats are in trouble.

Vicente Navarro was health advisor to the Jesse Jackson 1988 Campaign and is currently co-chair of the National Health Commission of the National Rainbow Coalition. He is professor of health policy at Johns Hopkins University.

# DSACTION

#### RESOURCES

\* The April issue of Labor Voice, DSA's Labor Commission newsletter, features articles on "The U.S. Health Crisis," "Eastern Airline Strike," "What is Socialism," and "The Big Picture in Latin America." Subscriptions available at \$10 per year from DSA Labor Commission, PO Box 28408, Washington, D.C. 20038.

\* A new newsletter of politics and public opinion, The Commonwealth Report, has just been published, with Guy Molyneux, former DSA organizational director, as editor. Subscriptions to The Commonwealth Report (186 Hampshire St., 3rd floor, Cambridge, MA 02139) are \$49 for institutions & \$20 for individuals.

#### REPORTS

\*Over 100 DSAers (see photo below) joined thousands of other activists for the historic April 9 March for Women's Lives/ Women's Equality. Carrying DSA banners and clad in fist-and-rose shirts, DSAers from as far away as MA, MI, NY, CA, OH, PA, IL, and NJ marched to demand the protection of the right to abortion and expansion of reproductive freedoms. Following the march, a DSA reception provided over 150 comrades with the opportunity to network with each other while listening to Barbara Ehrenreich, Frances Piven, Youth Organizer Elissa McBride, and DC local activist Lisa Foley talk about the need to speak out in support of these issues.

interested in bringing new life and purpose to the Commission. \$100 covers the cost of lodging, meals, and meeting expenses. For more information, write to the Religion & Socialism Comission Working Meeting, P.O. Box 80, Camp Hill, PA 17011.

\*The Mid-Atlantic Retreat will take place in Baltimore, Maryland June 22-24 at the Claggett Center. Workshops scheduled include: socialist feminism, DSA and the Rainbow, the history of socialism, an introduction to socialism, and more. Registration deadline is June 1, and registration is from \$30 to \$78 depending on accommodations and length of stay. For more information, call (212) 483-3299.

\*Hold open November 10-12 for the 1989 DSA Convention. This year's Convention will take place in Baltimore, Maryland. The Convention will include plenty of educational and decision-making sessions.

Join Michael Harrington, Barbara Ehrenreich, Frances Fox Piven and DSAers from across the country for this year's NATIONAL LEADERSHIP RETREAT July 1-3 in Poughkeepsie, NY. Panels and workshops on such topics as equity and the welfare state; the crisis of international socialism; labor solidarity; and much more. Tennis, volleyball, and lots of time for socialist socializing. Registration is \$120 for materials, room, and board for two nights. Scholarships available. Contact Sherri Levine at the DSA office for more information.



\*The DSA commission on Religion and Socialism has scheduled a working meeting for June 2, 3, and 4, 1989 to be held at Missionhurst-CICM Mission Center in Arlington, Virginia. The purpose of the meeting is to bring together DSA members who are

\* This summer's Youth Section Conference will be an educational and decision making meeting that you won't want to miss. The conference will take place August 17-20 at Findlay College, OH, one hour south of Toledo and two hours south-

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west of Cleveland. Past speakers have included Michael Harrington, Barbara Ehrenreich, and Ronald Dellums. Contact Elissa McBride at the DSA office for more details.

#### INTERNATIONAL

\* DSA was represented in the Middle East in March by International Affairs Committee Vice Chair Skip Roberts. Roberts joined with others from twenty-one Parties, most of which were affiliated with the Socialist International, for eleven days of meetings on the situation in Israel and the Occupied Territories. Sponsored by the Israel Labour Party, the delegates met with a broad range of Israeli-Jews and Arabs, ministers, such as Shimon Peres and Yitzhak Rabin, as well as grassroots activists, kibbutzim, and members of Mapalm and Peace Now.

The group also met with Palestinian representatives in the Territories. Roberts finished with a side trip to Amman, Jordan to talk with representatives of the PLO. He stated, "I return convinced that only a two-state solution, arrived at through negotiations between Israel and Palestinians, can break the cycle of violence and lead to a resolution that brings mutual security and dignity, as well as economic and social justice, for both sides."

\*DSA Organizational Director Patrick Lacefield was a member of the official observer team of the Socialist International during the recent national elections in El Salvador. Joining comrades from France, Canada, Venezuela, Spain, and Germany, Lacefield, representing DSA, was in Salvador as a show of support for Socialist International Vice President Guillermo Ungo, candidate of the democratic left coalition Democratic Convergence.

Lacefield accompanied Convergence leaders Ungo and Ruben Zamora in campiagn forays into the countryside and in the city during the campaign's last week. The Convergence was successful in promoting the need for a negotiated political settlement in their wide-ranging campaign. "The groundwork was laid for a national network of courageous activists, dedicated to utilizing the existing political space to push for an end to the war, respect for human rights, civilian control of the military, and radical economic reforms," insists Lacefield. "ARENA's victory, although expected, will make the Convergence's work more difficult and more valuable," claims Lacefield.



California

A successful California Leadership Conference was held April 28-30 at the Presbyterian Conference Camp in Pacific Palisades. Topics included: building locals; the emerging Latino majority; socialist feminism; autonomy of the California Democratic party; and organizing a DSA state network....Marshall Ganz spoke on "Participatory Politics and new Democratic Party" before Los Angeles DSA in March. LA DSA'ers joined with other activists March 22-25 to defend pro-choice clinics against antichoice extremists. DSA'er Harold Meyerson spoke at the LA Weekly's "Remaking Los Angeles" conference in March....A Bay Area DSA retreat was organized by the San Francisco and East Bay locals... Valley DSA meets May 22 to analyze how pandering to the farright led both the Reagan and Bush administrations to permit the spread of AIDS....Peninsula/Stanford DSA plans to organize a program on socialist feminism with Helen Longino presenting a talk on "Can there be a socialist-feminist science?"...."Turning Point for American Labor: The Eastern Airline Strike and Beyond" was the topic of a San Diego forum....Sacramento DSA heard Blase Bonpane, director of the Office of the Americas, speak on ending the U.S. wars in Central America....Santa Cruz held a meeting in March on "The Prospects of Socialism," based on Robert Heilbroner's New Yorker article, "Reflections -- the Triumph of Capitalism." Over fifty people attended this first organizing meeting for the Santa Cruz Local, and the meeting was covered in the Santa Cruz Sentinel with the headline "Democratic Socialists Denounce Capitalism."

#### Disrict of Columbia

DSAers were at the core of the Metro D.C. Coalition for Choice, a local support group for the April 9 March for Women's Lives/Women's Equality. The local helped initiate the Washington Committee in Solidarity with the Eastern Airlines Workers, which holds daily downtown pickets and organized a citywide fundraiser for the strikers. Norman Birnbaum, Georgetown University professor spoke to DSA on "The Idea of Progress and the Revolutionary Tradition." A Statehood Task Force to push education in the nation on that issue has been formed, and the local is preparing for its annual convention.

#### Illinois

Chicago's 31st annual Norman Thomas-Eugene V. Debs Dinner May 6th will give its national award to William Winpisinger, retiring President of the International Association of Machinists and a vice-chair of DSA. Local awardees are Milt and Sue Cohen, and the featured speaker will be Dr. Quentin Young, President of the Health and Medicine Policy Research Group....A successful citywide conference of 200 student leaders from more than twenty campuses and fifty organizations has led University of Chicago DSA'ers and the U. of C. Progressive Coalition to hold a leadership skills seminar. The Chicago local has been a part of the Illinois Labor Network Against Apartheid, which just sponsored a forum with Khola Mayeikiso, the wife of union leader Moses Mayekiso, who had been on trial for "treason" since October, 1987, until he was recently found not guilty and freed.

#### Town

The Iowa City local has organized a day-long labor history workshop for mid-May.

#### Kentucky

The University of Kentucky has created a fellowship program that will provide up to \$7,500 to qualified minority graduates and professional students. The fellowships are named in honor of 82year-old Lyman T. Johnson, a DSAer who in 1949 became the first black student at UK and has devoted much of his life to promoting civil rights in Kentucky. The March Central Kentucky DSA meeting heard Donna Hale and Julie Butcher of the UK Women's Law Caucus speak on "The Demise of Privacy at it Relates to Abortion." Central Kentucky DSA'ers viewed two radical films, Salt of the Earth and A Good Fight. The local was an endorsing organization of the state convention of the Kentucky Rainbow Coalition and they were represented by three official delegates. The local took the lead in

forging a prochoice alliance in Lexington.

#### Massachusetts

The Boston local organized a forum on "The New Hispanic Voters" with Nelson Merced, a newly elected member of the Massachusetts House of Representatives, and Yohel Camayd-Freixas a member of the Latino Committee of the state Democratic party. A forum on "Chances for Change in the Middle East" was held last month with professors Noam Chomsky and Gordon Fellman. The DSOX, Boston DSA's softball team, have begun spring training. Cynthia Daniels, occupational health coordinator in the Women's Health Unit of the Massachusetts Department of Public Health and Alix Brown, chairperson of the Women's Committee of I.U.E. Local 201 at a General Electric plant spoke on "Reproductive Rights at Work -- Hazards, Children, and Unions," at a Boston DSA forum. Cynthia Ward, director of the Commonwealth Electoral Coalition, spoke at the Public Lunch Group on helping progressives attain elected office. This year's Debs-Thomas dinner will honor Kristine Rondeau of the Harvard Union of Clerical and Technical Workers

#### Michigan

A conference on "Unheard Voices: Labor and Economic Policy" was held in March by Wayne State University's Labor Studies Program. Speakers included Owen Bieber, Michael Harrington, and Jeff Faux. After the conference, Harrington was the guest of honor at a Detroit DSA reception which drew close to 100 people.

#### Missouri

"The Politics of the Welfare State" was the title of a forum presented by Michael Harrington at Washington University....The prospects for socialism was the topic of the St Louis local's last membership meeting. A forum with a board member of the National Abortion Rights Action League on "The Fight to Preserve Reproductive Rights: Webster vs. Reproductive Health" was organized by the St Louis local prior to the April 9 March For Women's Lives. The next forum, "The Eastern Airline Strike: Watershed for the Labor Movement?" will be presented by DSAer and union activist Dave Rathke

New Jersey

Princeton and New Brunswick DSA locals held a joint meeting in March to plan the year's activities.

New York

Jim Chapin, former executive director of the Democratic Socialist Organizing Committee, spoke on the politics of hunger at four meetings in Ithaca. He also discussed events in El Salvador, having recently returned from a fact-finding tour there for the Socialist International. Judith Van Allen and Steve Emerman, who have just returned from two years in the frontline Southern African countries of Botswana, Zimbabwe, and Mozambique, spoke to Ithaca DSA on "Living on the Front-Line."....Michael Harrington, who spoke at the founding meeting of the Long Island Progressive Coalition (LIPC) in 1979, will be the featured speaker at its 10th anniversary luncheon June 3rd....Nassau DSA board member Mark Finkel was roasted on his 30th birthday on behalf of the Central America group Neighbor to Neighbor.

Stanley Aronowitz spoke to New York City's CUNY Branch on "The Crisis in Higher Education." A forum co-sponsored by NY DSA on "The Education Crisis in N.Y.C." heard DSAers David Dinkins and Deborah Meier, among others. NY DSA is preparing for its annual convention to elect officers and consider political endorsements. The NY Labor Solidarity Task Force showed the film Matewan as a fundraiser for the striking Eastern airline workers and raised over \$1,200 for the strike fund. Ticket prices were set at \$49 and \$12 -- the equivalent to Frank Lorenzo's promotional fares on the Easter Shuttle...Michael Harrington spoke on "Towards a New Socialism" when giving the Eighth Annual Stanley Plastick Memorial Lecture sponsored by Dissent magazine....The Workers Defence League gave its David L. Cendenin Annual Award to Monsignor George G. Higgins, the celebrated labor priest, at a reception at the Amalgamated Clothing and Textile Workers Union. Speakers included WDL chairman Harry Fleischman....DSAer Edwin Vargas, Jr. was the keynote speaker at the first east coast Latino labor conference, which drew over 200 Latino workers, union leaders, and labor activists.

Ohio

Women's History Month was celebrated in March by Cleveland State University, Sponsors included Cleveland DSA The local organized people to go to the April 9 March for Women's Lives....Cleveland, Bowling Green, Youngstown, Kent, and Columbus all organized events around DSA Organization Director Patrick Lacefield's midwest trip. Meetings took place with DSA locals, unionists, and on college campuses...Black Swamp DSA held a forum on Third World debt and the implications for the U.S. economy.

Oregon

Portland DSAer Beverly Stein was so successful in her campaign for election to Oregon State House that she was appointed an Assistant Majority Leader and co-chair of First Term Democrats caucus.

Pennsylvania

Cental Pennsylvania DSA heard Professor K. Robert Nilsson of Carlisle speak on "The Left in Italy." DSA'er Jack Spooner spoke in April to the Humanist Association of Harrisburg on "Socialism and Humanism."...."A Progressive's Guide to the Philadelphia City Budget Crisis" was the theme of a talk in March to a Philadelphia DSA forum by Carolyn Adams, chair of the Urban Studies Department at Temple University. The DSA Feminist Issues Committee heard Alice Gilbert, of Temple's Institute on Aging, discuss "Concerns of Middle and Older Women" in March; Marcia Weintraub of Temple's Psychology Department on "The Effects of Maternal Employment on Child Care" in April; and on May 21 will hear Susan Cary Nicholas, Women's Law Project, on "New Issues Concerning Reproductive Rights and the Forthcoming Supreme Court Case." Michael Harrington spoke to hundreds of people during a two-day visit to Philadelphia.

#### Tennessee

Metropolitan Nashville DSA's regular monthly membership meetings have focussed on issues related to electoral politics, with the upcoming meeting on changes in the Soviet Union.

Wisconsin

Michael Harrington spoke at Marquette University. His visit helped stimulate the reorganization of a DSA local in that city.

Washington

Seattle DSA held a very successful potluck meeting as a first step in reviving the Seattle local. A May Day meeting established their steering committee and discussed the national health care crisis.

## Advocating For Justice In South Africa

by Rob Meitus

It is not surprising that Nomonde Ngubo has had little time to herself since arriving from South Africa four years ago. Her description of the hardships of apartheid and her eloquent plea for sanctions against South Africa make her a speaker in great demand. Ngubo is currently on leave from the United Mineworkers of America, where she is an international representative and coordinator of the Royal Dutch Shell Boycott.

On April 11, she began a two week speaking tour sponsored by the Institute for Democratic Socialism and organized by DSA locals and chapters across the country. Ngubo visited twelve cities throughout OH, IL, TX, MO, OK, TN, KY, and IN, speaking to packed auditoriums at each stop.

At Oberlin College, Ngubo participated in an afternoon panel discussion with Cleveland activist Grace Jones. About 150 community members and students attended her evening speech enthusiastically receiving her call for a Shell boycott.

Ngubo received equally enthusiastic receptions at Bowling Green University, Wabash College, and the University of Illinois where students and faculty made up the bulk of her audiences. Chicago's DSA chapter targeted local labor groups in their promotion of Ngubo's whirlwind visit, but left enough time for an interview with In These Times. In Nashville, she spoke at noon at a local church, and in the evening 200 people crowded to hear her at Fisk University. In Texas, she met with members from the state's Black Caucus.

Ngubo will continue advocating for sanctions and telling the story of the struggle for a free South Africa.

Rob Meitus, a student at Columbia University, organized Ngubo's tour as an intern at the DSA office.

To find out about the Shell boycott, contact the United Mineworkers at 900, 15th St., NW, Washington, DC 20005 202 842-7350.

# Maggie Kuhn: An Inspiration in The Struggle for Social Justice

Carol Rogers, a union activist with AFSCME Local 2187, District Council 47, works at a Philadelphia city clinic and has been active in trying to save the district's health centers. Maggie Kuhn is the national convener of the Gray Panthers and a member of the Democratic Socialists of America. Established in 1970, the Gray Panthers works to eradicate ageism and bring about peace and social justice. There are more than 100 local Gray Panthers networks across the country. This interview was conducted on Friday, March 10.

Carol Rogers: What are the origins of the Gray Panthers?

Maggie Kuhn: The Grav Panthers started in 1970 when six of us were forced to retire. I had been working at the United Presbyterian Church in the Office on Church and Race. I was forced to retire because I had reached the age of sixty-five. Five of my friends were in the same predicament. We asked ourselves what we should do with the rest of our lives. We had been working in jobs we cared deeply about, on social justice issues that were important to us and those around us. How could we continue that work? To answer that question we had a stimulating series of meetings and invited people we thought would be interested. Over 100 people showed up. We decided at those meeting to work against the Vietnam War. We marched and got arrested and did our share. In 1971, we realized that Nixon was convening a White House conference on aging. It was then that we began to discover that there was age discrimination. Up until then we had personalized it. That was the second issue that we took on. Ageism, like sexism and racism, is a malaise and it needs to be eradicated with mass education. We also discovered that there was significant discrimination in the matter of health care. Health has become an expensive, moneyraising operation. Health is run for profit, when it should be run for people. Health care is now one of our major priorities.

CR: What are the other priorities of the Gray Panthers?

MK: Let me start out by saying that I am

very glad to be a member of DSA. DSA's analysis of the current society is very important to me and to the Gray Panthers, which organizes for justice and peace in a troubled world. The Gray Panthers has many priorities, including peace and the demilitarization of our society, and establishing a national health care program. CR: How have you gone about pushing your health care agenda forward?

MK: We have been studying the health system in Canada. Ten of us went to Canada in 1985 to look at their system. We looked at the systems in the various provinces, and we went to Ottawa to look at the federal system. We got the idea of working for changes state-by-state as the Canadians had done province-by-province. Massachusetts was the first state where the Gray Panthers worked hard to get the issue on the ballot in a non-binding resolution that would call for a new health care system. It was introduced and passed in 1986. It called for the Commonwealth of Massachusetts to urge the U.S. Congress to enact a national health program that was universal, community-controlled, efficient, and free. In short, it called for a socialized medical system.

CR: Can you describe the differences you saw between the Canadian system and that of Philadelphia and the U.S.?

MK: The main difference that we saw is that it is accessible, it is free to everyone. There is a slight difference in the payment system between the provinces, but the majority of the money comes out of taxes. CR: You have organized here in Philadelphia, as well?

MK: Yes. In addition to studying health care programs in other countries, we organized a series of health forums across the country. Thirty different cities, including Detroit, Boston, and Austin held hearings at which people testified about the current system, its inadequacies and its possibilities. Here in North Philadelphia over seventy people testified -- doctors, nurses, home health care workers, pregnant teenagers, the elderly, community activists -- for the need to change the current system. We held the hearing at Congressman William

Gray III's church, the Bright Hope Baptist Church. The Gray Panthers then chartered a commission to take that body of testimony and work on it from a strategic perspective. The testimony has been summarized and developed into working papers that have been distributed to members of Congress. The papers build a case for a socialized medical system. We want to publicize the horror stores — the outrageous bills, the closing of health centers, the closing of non-profit centers — so that we can move towards a more humane system.

We have also supported a revised version of Congressman Ron Dellums' bill on health care. In February, I testified in support of a more recent health care proposal that had been drafted by thirty physicians and supported by over 150 physicians. Two of the doctors who co-authored this plan are part of the Gray Panther's commission on health care, and the January issue of the New England Journal of Medicine ran an article on this new health care plan. This package also has the support of the Nurses Association, the National League of Nurses, the American Medical Students Association, and many other professional and community based groups.



Maggie Kuhn



CR: National health insurance is not a new idea.

MK: This is not insurance. Senator Kennedy's plan is more like an insurance system. This is a publicly-supported medical system that calls for publicly-supported hospitals, private care, and homecare. It would be administered out of a federal office as part of Health and Human Services and out of state offices. It would insure access to all, without charge.

CR: Can you speak historically about the struggle for a national health system?

MK: It has been around for a long time. In this specific form of tax-supported health care -- free and accessible -- it first burst upon Congress with the Dellums bill.

CR: The reasons why the unions started to fight for health insurance paid for by one's employer was because a national health system was not in the offering.

MK: That is a very important point. Organized labor is working very hard and pressing their companies to negotiate health benefits along with the union contract. The reason they have to do that is that there is no federal system.

CR: Now there seems to be a push for a national health system even by people and groups previously opposed to it, such as doctors. I guess that is in part because the cost has gotten so high and the quality of medical care so poor.

In Philadelphia alone we have over 120,000 uninsured people, 37,000 of them are children. We have a very limited public health system in this city. In fact, we are the only major U.S. city with no public hospital

MK: Philadelphia General was torn down because it was thought to be too expensive to maintain. This was during Mayor Rizzo's administration. He was pressured by the five medical schools in the area. All of the schools were building new hospitals and they said that they would take care of those people previously served by the public hospital.

CR: The promise was made that no one would go without care.

MK: That promise has never been kept. The patient load at Philadelphia General Hospital has never been picked up by those hospitals. It is particularly tragic for children and pregnant women who do not have the kind of care that is essential to the rearing of a healthy next generation. We are impoverishing the people of the future.

CR: I am sure that you have seen the statistics that in Philadelphia we have an extraordinarily high infant mortality rate. MK: It is like the Third World, worse than parts of the Third World. That came out in the hearings we had that I mentioned earlier. There is a commitment on the part of Temple Medical School and Temple hospital that may be an indication of a new neighborhood community-based support system. Temple was astonished that the witnesses had so little praise for their hospital.

CR: What kind of a commitment have they made?

MK: They have organized a Committee for a Better North Philadelphia and Karen Knibbe, the nurse-practitioner who presided at the hearing in North Philadelphia, is on the Board of that new group. The hearing was instrumental in the formation of the Committee, which is empowering the people of North Philadelphia, largely black and hispanic, who had not previously been empowered. The look in North Philadelphia is desolate, desperate and this Committee is committed to trying to do what it can to change that.

CR: Private hospitals have not taken over the care from the void left by closing down the public hospital. This raises the issue of privatization of government services. Can you address that issue?

MK: Privatization is one of the tragic outcomes of the Reagan years. The privatization of everything that had previously been the government's responsibility leaves many people without access to essential services.

CR: There had been a city clinic that had been run by the city that was then contracted out to a private hospital. Within a year, the number of poor people that were seen dropped by 18 percent, the number of people with medical assistance dropped, the number of people in total dropped. The reason for that is that private companies are interested in making a profit or they wouldn't be in the business. Health care should not be for people's profit.

MK: Services and programs that had been rightfully publicly funded and provided by people's taxes are no longer provided. People pay taxes and should then receive the programs that human beings need, including health and housing.

CR: I read in the paper that you sent President Bush a valentine and in it you included a coat hanger for all the women who would have to have illegal abortions if Roe vs. Wade is overturned.

MK:The right of women to choose is essential in a democratic society. I am particularly appalled at the terrorist tactics used by the anti-choice forces against women going to the clinics. These tactics intimidate the patients and the staff and are outrageous. On Father's Day, we are going to send Bush a communication reminding him about the unwanted children. We will ask him whether he can provided a scholarship to these children, whether he will assist them in staying in high school.

CR: Why do you think that it has been so hard for people to speak out on this issue when there is clear majority in favor of the right to choose?

MK: This conservative wave has intimidated many and made some people feel as if it is hopeless to speak out, that you won't be heard. We must continue to speak out.

CR: In the state of Pennsylvania there is no access for poor women because the state will not pay for abortions for poor women. What it was like before abortion was legal? Now people have access if they have the money to pay for it, but if it becomes illegal many women won't have that access.

MK: A friend of mine became pregnant. She had no money. She went to an abortionist, and I will never forget the Continued on page 13.

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### Safety

Continued from page 4.

Brock thus opened the way for a series of high-profile OSHA enforcement actions leading up to the 1988 presidential election. The transparent purpose was to deflect an expected attack from the Democrats on this and other working-class issues. Not surprisingly, the failure of the Democratic party to exploit job safety and environmental issues allowed Bush to get away with describing himself as the "environmentalist." This was only one of the many failures of the Democratic campaign; Another was, of course, Michael Dukakis's refusal to follow Jackson's lead in aggressively pursuing the issue of national health insurance.

### The Fight Back

As public concern about job safety increases, the AFL-CIO has started responding to the pressure. In 1987, under the leadership of United Steel Workers of America President and AFL-CIO Executive Council Safety Committee Chairman Lynn Williams, the federation called a national health and safety conference in Nashville. The turnout exceeded all expectations -- nearly one thousand rank-andfile local officers attended (most from the USWA but with healthy contingents from other industrial, service, and public sector unions). The conference produced a detailed program for OSHA reform. For the first time in U.S. history, this included an official AFL-CIO demand for legislation to establish mandatory worker committees at job sites. A common feature of both industrial relations and safety legislation throughout the world (including Canada), the notion of legally-mandated worker committees has always been resisted by the AFL-CIO in favor of its more conservative reliance on "free collective bargaining." This inadequate policy, among other factors, has led to stagnation in many sectors of the trade union movement. But pressure for greater workplace safety has pushed the AFL-CIO to the point of adopting what in the U.S. context is a relatively radical demand.

In response to a proposal from the Nashville delegates, the AFL-CIO also endorsed its most ambitious job safety program to date -- the establishment of April 28 as National Workers Memorial Day. For the first time in recent memory, the federation asked its state and local affiliates to organize an activity designed specifically for rank-and-file involvement. This day was created to celebrate and memorializes primarily the role of the rank and file rather than the accomplishments of leadership. The response has been most encouraging. In many places, Workers Memorial Day brought together the broadest union coalitions in years -- public and private sector, manufacturing, service, and building trades, men and women, black and white. Latino and Anglo.

The implications for the coming national health struggle are clear. When trade unions go to their members with an effective program on issues of deep personal concern, they win their members' commitment. Such programs also win support and respect in the community; they create the possibility of broad popular coalitions that might indeed have political strength. These coalitions can include sectors that normally show little sympathy for the more typical worker concerns of job security and higher wages. Given the stakes, unions and their supporters cannot ignore the challenge.

Eric Frumin is the director of the Department of Occupational Safety and Health at the Amalgamated Clothing and Textile Workers Union (ACTWU).

### Kuhn

Continued from page 11.

pain. She suffered, she screamed. I will never forget it. She couldn't tell anyone. The man who performed the abortion was intimidating. It took both of us a long time to get over the shock.

CR: Do you have any advice for activists

doing work on reproductive rights?

MK: We have to keep on marching, keep on speaking. Part of a new health care system would include abortion services. DSA does have a vision of the future. We have a vision of a society that counters the continued anti-social priorities of the present Administration. We must push that agenda

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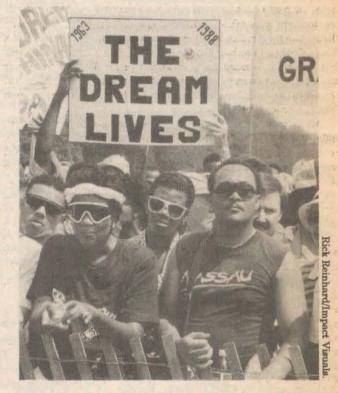
# The Civil Rights Movement: Social Forces and Personalities

by Manning Marable

PARTING THE WATERS: AMERICA IN THE KING YEARS, 1954-1963, by Taylor Branch. New York: Simon and Schuster, 1988. 1064 pages, index.

he Second Reconstruction, that brief and idealistic period when the cause of social justice for people of color seemed within reach, has come to an end in the decade of the 1980's. Some historians have marked the assassination of Martin Luther King, Jr., as the decisive turning point in the decline of progressive public policies and white support for the cause of racial equality and social justice. Others have pointed to the decline of the Black Power movement several years later, as Black militant organizations were repressed by the federal government and an electoral backlash ushered into power the Nixon and Reagan administrations. But the Second Reconstruction, whatever its limitations, achieved for the first time in American history the prerequisites for a political democracy which encouraged the full and unfettered participation in civic life of people of color. It destroyed the legal apparatus of Jim Crow segregation, moving this nation away from the social trajectory already firmly established in apartheid South Africa. It produced a generation of gifted and articulate social protest leaders, organizers, and theorists, whose activities and writings not only challenged and partly transformed the public's perceptions of race relations, but created a ripple effect in other nascent social movements among other social classes and groups which experienced the weight of exploitation and discrimination -- women, Native Americans, Latinos, working people, gays and lesbians, and many others.

Taylor Branch's much acclaimed work, Parting the Waters: America in the King Years, 1954-1963, is a well written and careful chronicle of the personalities and events which occurred between the landmark Brown decision of the Supreme Court, which abolished racial segregation in the public schools, and the second March on Washington movement of 1963, led by Black socialist A. Philip Randolph. Although the work is primarily centered around the personality of Martin Luther King, Jr., it attempts to provide a textured and detailed account of the strategy sessions, demonstrations, and public protests which comprised the effort to uproot Jim Crow. It presents in colorful detail the key figures inside the Southern Christian Leadership Conference, the Congress of Racial Equality and other civil rights organizations who successfully mobilized thousands of Americans during this decade to risk arrest, beatings, and imprisonment for the pursuit of a dream. The weakness of Branch's effort are not located in his writing style or dogged reportage of day-by-day events within the Montgomery County Bus Boycott of 1955-56, for instance, but in the absence of a theoretical grounding in African American social protest history, and more generally a failure to recognize that greatness of



leaders such as King is not found within their personalities, but in their relationship to the masses of their people in protest.

A major theme in Branch's thesis is a powerful and necessary indictment of the FBI's surveillance of King, civil rights organizations, and other desegregation leaders. In the postwar years, the FBI's power grew dramatically, and Bureau chief J. Edgar Hoover won the right to conduct "loyalty checks" on all federal employees during the Truman administration. By the mid-1950's, the American Communist party had ceased to function as a mass organization, with most of its leaders imprisoned, underground, or exiled. With the resignation of thousands of Party members in the wake of the revelation of Stalin's crimes, the Party shrank to a limited political sect. Although former Party members and individuals with socialist or Marxist backgrounds would exercise some degree of political influence within the civil rights movement, no evidence exists which indicates that a Marxist -- or even left social democratic -- perspective dominated the strategic vision of King or his comrades during this stage of history. Attorney General Robert Kennedy, who authorized extensive wiretaps against King and other leaders on national security grounds, stated in 1961 that "the U.S. Communist Party couldn't be more feeble and less of a threat, and besides its membership consists largely of FBI agents."

In sharp contrast, Hoover equated the demand for racial equality with Communist subversion. When Chicago Democratic boss Richard Daley criticized the Eisenhower administration for failing to take decisive measures following the lynching of Emmett Till in Mississippi in 1955, the FBI chief remarked: "Mayor Daley

is not a Communist, but pressures engineered by the Communists were to bear upon him." Hoover viewed with alarm the presence in King's entourage of advisor Stanley Levison and Marxist activist Jack O'Dell, who twenty years later would occupy a similar position with Jesse Jackson. Although the FBI could never establish an "internal Communist conspiracy" which supposedly manipulated the civil rights leadership, Hoover initiated a program of surveillance involving extensive wiretapping without court orders. Federal agents were fascinated with King's extramarital affairs, and closely monitored the leader's sex life as somehow part of his general subversive nature. Branch is most eloquent and powerful in his denunciation of the FBI apparatus: "Race, like power, blinds before it corrupts, and Hoover saw not a shred of merit in either King or Levison. Most unforgivable was that a nation founded on Madisonian principles allowed secret police powers to accrue over forty years, until real and imagined heresies alike could be punished by methods less open to correction than the Salem witch trials."

Many sections of Parting the Waters cover familiar material, and present little new information. Branch's contribution here, however, is to highlight well-documented stories with special emphasis on critical personalities. Since the establishment of the official holiday for Dr. King's birthday, there has been a regrettable tendency to transform this committed activist into an icon, freezing him on the steps of the Lincoln Memorial in the middle of the "I Have a Dream" Speech. Branch accurately relates the tensions and conflicts between King and other leaders, which the passage of time has obscured. The civil rights movement was actually a fractious desegregationist united front, with the NAACP and the Urban League occupying something of a rightist position, the Congress of Racial Equality and the Southern Christian Leadership Conference led by King in the center, and the militantly confrontationist Student Nonviolent Coordinating Committee occupying the left spectrum. NAACP leader Roy Wilkins was always jealous of King, for he believed that the younger man had usurped his rightful place at the head of the civil rights movement. Wilkins nearly destroyed plans for the 1963 March on Washington by his narrow opposition to socialist Bayard Rustin as the mobilization's coordinator. The Reverend J.H. Jackson, head of the massive National Baptist Convention, denounced the March on Washington as a "dangerous, unwarranted protest," and opposed King politically and professionally. Even Ralph David Abernathy, King's close friend and chief lieutenant, held a "long-simmering jealousy" toward Martin. In retrospect, given the personality conflicts and differences in ideological outlook, the remarkable feature about the desegregationist front was its ability to hold together for so long, and through so many difficult campaigns.

Perhaps one of the strongest features of Branch's work is a recognition of the vital and decisive contributions of African American women to the struggle for equality. Branch presents a series of Black women leaders: Rosa Parks, whose solitary protest on the Montgomery bus in December, 1955, initiated a year-long nonviolent campaign to outlaw Jim Crowed transportation; Dianne Nash, the child of a middle class Catholic family from Chicago who emerged as one of SNCC's decisive activists in the South; Septima Clark, the daughter of a slave family who ran the "citizenship school" at Highlander Institute; and Ella Baker, SCLC veteran and mentor to SNCC activists. This is not to suggest that Branch projects a feminist interpretation of events, or takes seriously the contradictions of sexism within the civil rights organizations. He appreciates and recognizes the important role of women to the cause of freedom, without truly understanding the internal struggle waged by women inside civil rights formations against sexist, secondary positions.

There are two important shortcomings of the book. Branch views the civil rights movement from the top down, in essence as a sequence of talking heads with sound bites. We receive a full view of what King says to Randolph, but both men were products of political and social forces which were linked to thousands of working class and poor people's institutions—churches, labor unions, civic associations. We learn that King conflicted with Wilkins, but nowhere does the author explain the social class composition and contradiction history of formations like the NAACP, the semi-autocratic leadership structure, and its tendency to accommodate its program to liberal elements of the white power elite.

More seriously, Branch has little understanding of the complimentary role of Black nationalism as an intellectual and political tradition to that of integrationism. Black nationalists like Marcus Garvey at the beginning of the century, and prominent nationalist leader Malcolm X in the 1960's, rejected racial integration as a goal, advocating the building of separatist economic, political, and social institutions for African Americans. They distrusted alliances with white groups and fostered connections with formations throughout the African diaspora. King's effectiveness as a symbol of love, brotherhood, and racial harmony was only really effective when the threatening image of a Malcolm X stood in the political wings. Both Malcolm and Martin represent two aspects of the same problematic—the struggle for Black Americans to achieve democratic rights and group self-determination.

Although it lacks an awareness of the complexities of Black social history, Parting the Waters is a sound introductory work of the period, presenting important information in a lively and moving style. It gives us a sense of the courage and commitment of the activists within the civil rights movement.

Manning Marable is a professor of history and chairperson of the Department of Black Studies at Ohio State University. His most recent book is African And Caribbean Politics: From Nkrumah to the Grenada Revolution.



As we go to press, the strike by Eastern Employees against Lorenzo continues. The solidarity among the workers and the support by the public has been an inspiration to all who believe that a strong labor movement is critical to the struggle for economic and social justice and human dignity. DSA stands by Eastern workers as they fight for their rights. To make contributions to the Eastern strike, send checks to the AFL-CIO "Fairness at Eastern" strike fund, 815 16th St, NW, Washington, DC 20006.

DEMOCRATIC LEFT



## Send Us A Message For Labor Day



This Labor Day issue of DEMOCRATIC LEFT is your opportunity to show your support for DSA and its publication by taking out personal greetings and/or display advertisements and asking your friends and colleagues to do the same. This is the only fundraising that DEMOCRATIC LEFT does throughout the year. Help us make it a success. Deadline: August 5. Make checks payable to DSA.

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# **ANIE HIGGINS REPORTS**

Twelve Long Years. That's how long it has been since the minimum wage was last raised. The minimum wage is currently at \$3.35, or 35 percent of the average hourly wage. The last increase took effect on January 1, 1981. The Congress is currently sqabling over whether to raise it to \$4.55 or \$4.25, neither which will be enough for a family of four to rise above the poverty level, but at this point any increase will be a welcome addition to the pay checks of millions of minimum wage workers and their families.

Working Harder, Earning Less. The U.S. Labor Department's Bureau of Labor Statistics reports that U.S. manufacturing workers were more productive last year, but their real hourly earnings still declined by six-tenths of one percent.

A Kinder Gentler Nation? The U.S. is number one in child poverty compared to seven other industrialized countries. A recent Urban Institute study found that the U.S. has much higher rates of child poverty than every other country in the study (Switzerland, Sweden, Norway, West Germany, Canada, United Kingdom, and Australia) except Australia, a significantly poorer country. A study conducted by the Center for Budget and Policy Priorities found that poor families are paying a growing share of their income for shelter. 63 percent of the poor who rent housing paid more than half their income for it. Only 8 percent of renters

who are not poor paid that proportion of their income for housing.

Labor Solidarity. A poll taken by the Washington Post during the third week of the Machinists' strike at Eastern Airlines showed that 46 percent of those polled thought that the union was right, while only 27 percent supported Eastern. 19 percent were not sure which side they were on.

Corporate Conspiracy? Public Opinion, however, didn't seem to influence American Express and their recent attempts to bribe people into flying Eastern. In several full-page newspaper ads, American Express offered to give you \$50 in American Express gift checques if you flew Eastern.

#### DEMOCRATIC LEFT

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