

# Healthcare NOW! National Strategy Conference

## Recommendations from Grassroots Break Out Groups

November 14, 2010, Philadelphia, PA

*These recommendations were compiled at the Healthcare-NOW! Strategy Conference in the final plenary session. They are now submitted to the Healthcare NOW! membership that was not in able to attend the conference for affirmation. These recommendations will shape Healthcare-NOW!'s work plan for the coming year. Questions, comments, additions, and responses can be sent to [Katie@healthcare-now.org](mailto:Katie@healthcare-now.org).*

### **Deficit Commission/National Legislation (Facilitated by Katie Robbins, and reported by Mark Piotrowski)**

The deficit commission represents a very real threat on working people and the movement to win single-payer.

- 1) Call to action that the next 45 days needs a mass mobilization of Healthcare NOW! supporters to participate in several actions:
  - a. Participate in the November 30<sup>th</sup> Call-In Day called by the Coalition to Strengthen Social Security, and lobby the Strengthen Social Security Coalition to add the message to protect Medicare for cuts, privatization, and raising the eligibility age.
  - b. Participate in a resolution campaign to get city and counties and other bodies to oppose recommendations that weaken the social safety net – no cuts, no privatization, no raising of eligibility of age
  - c. Call for the disbanding of the commission because they aren't able to meet the goals
  
- 2) National Legislation
  - a. Reaffirming support for a national single-payer system, and the movement to win HR 676
  - b. Encouraging people to get their Representatives to sign on to HR 676
  - c. Call on state groups that they do so that advances the movement for national single-payer when possible while affirming that working on the state level can advance the push for a national single-payer system.
  - d. Call on HCN to organize a national day of action in the spring and call on all HCN groups to participate.

### **State (Facilitated by Donna Smith and Amy Lange, and reported by Donna Smith)**

- 1) We are all in on Vermont! We are waiting for direction from those on the ground in Vermont to let us know how we can be most helpful to all the people working there – however, you need us, we are in with you! As long as it is a single-payer plan, we can use this as a model

for state legislation and campaigns. We need to support necessary waivers for moving to single-payer legislation in VT, CA, and elsewhere.

- 2) We want to strengthen collaborative efforts with states and promote the One Payer States group that is working on this effort to incorporate language of human rights, connect the dots of the homelessness and foreclosures, and collect complaints of health care abuses that can be submitted to the UN Special Rapporteur.
- 3) National Coordination of Best Practices for Media/diverse Messaging/ Tech Support through HCN as much as possible.

### **Challenging Corporate Power (Facilitated by Margaret Flowers and Drew Smith, reported by Margaret Flowers)**

We recognize that the corporations own our government and messaging – we need to apply economic pressure and expose the abuses of the corporation and use these opportunities to get media attention:

- 1) Pursue the divestment campaign to divest from private insurance companies and gain support through churches, universities, and other bodies to make that stand.
- 2) Bring out/Highlight/Expose those who are responsible for the corporate influence like the CEOs of the corporation – and compile their statistics – what percentage of policies they deny, what media boards they sit on, their salary and put them on posters like a serial killer so that it can be used in other actions
- 3) Organizing an action on K Street – and inviting other orgs that are also challenging corporate power – with a mass action to target the lobbyists – using red paint to symbolize bloody hands
- 4) In the spirit of the recent “It gets better” campaign – encourage people to post videos about their own health care experiences on personal youtube channels to create a campaign around health insurance abuses, inability to get care to tell their own story.
- 5) Shareholder Campaign like the one in Indiana – focusing on WellPoint – where activists bought a few shares and introduced a resolution at the annual shareholder meeting to get WellPoint to return to nonprofit status. This could be done in other health insurance companies too.
- 6) Support local actions such as protesting the closing of community hospitals like in Braddock, PA, the firing doctors of doctors in Ohio, and the nurses strike so that HCN can be a clearing house to support these efforts and the community can be notified of these events, and let the community know what is going on to support those actions

### **Outreach/Base Building (Facilitated by Lisa Patrick Mudd and Andrea Miller, reported by Lisa Patrick Mudd)**

- 1) Outreach – We need to identify groups that ethnically diverse, economically diverse, get outside your comfort zone,
  - a. Find a person in that community to give a brief presentation to engage with the members of the group – start of developing a relationship with them
  - b. Reach out to the uninsured and grassroots groups doing other organizing work
- 2) Actions Individuals Can Take – each person here to pledge to go to one group and try to find
- 3) Find two people to do exactly the same thing
- 4) Writing a letter, get commitment of time, and keep working on building the movement.

### **Education – (Facilitated by Rebecca Elgie, reported by John Shapiro)**

- 1) Collaborate in a way that allows for space to share messages based on what a particular group is working towards
- 2) Bring together diverse groups to have a collaboration around education and messaging – really share all of our great ideas and talent and do it in a way that we are really achieving short term goals.
- 3) Library of documents, videos, powerpoints and so on, that would be geared toward specific kind of messaging and education, but were accessible to the movement as a whole. Part of this collaborative group would be to come up with more short term goals that would be good ideas
- 4) Space to talk about ongoing questions that people deal with throughout the movement. What is the best way to state different aspects of the work.

### **Labor – (Facilitated by Mark Dudzic and Cindy Young, and reported by Traven Lashon)**

“ENGAGE THE VISION AND RESOURCES OF THE LABOR MOVEMENT IN THE FIGHT TO MAKE HEALTH CARE A RIGHT IN AMERICA”.

Labor can be a game changer because of the Financial resources , Troops on the ground, and the Principle of solidarity

The Labor movement must engage public employees who are under attack for benefits and pensions to be voices to stop/slow down the downward pressure by advocating health care for all

More education is needed among labor leaders and the communities we live in. Labor For Single Payer should consider being a clearing house for educational material. Let’s bring doc/nurses and residents from Canada (or other countries with universal health systems to educate).

Obstacles to this work include the a) Trust Funds and b) Politicians (and labor leadership) stating that “health care reform is done”

Opportunity lies in the Deficit Commission battle to protect the social insurance programs that we want to expand to win health care for all.