Cuba on front lines of fighting COVID-19

By Mirinda Crissman

Cuba continues to illustrate international health care solidarity in its response to the COVID-19 crisis. The island nation has sent brigades of doctors and supplies to Italy, Venezuela, Nicaragua, Jamaica, Suriname and Grenada. (teleSURenglish.net) Meanwhile, the United States has been criminally negligent in stopping the spread of COVID-19 and in testing and treating its own people.

Cuba has 28,268 members of military brigades working in 61 countries around the world, according to Dr. Jorge Hidalgo Bustillo, director of the Central Unit for Medical Collaboration. All of them are COVID-19 negative and are being monitored daily.

Through a joint venture with China, Cuba is producing large quantities of an antiviral medicine called Interferon Alpha 2b. This vital drug is recognized as one of the most effective medicines in treating this virus. It is credited with saving 1,500 people from [dying of] the virus in China alone and Cuba’s producer of medicines, Farmaco, is producing 21 other compatible medicines for the treatment of complications that may arise in patients with COVID-19.” (dissidentvoice.org)

The Cubans gave permission for the British cruise ship—the MS Braemar with five confirmed cases of COVID-19 and dozens of symptomatic travelers on board—to dock in the harbor at Mariel, west of Havana, on March 18. Cuba then treated those affected by the virus and arranged passage home for the rest of the passengers.

In explaining the gesture, Cuba’s Ministry of Foreign Affairs issued a statement March 18 on Twitter, saying, “These times call for solidarity, understanding health as a human right and strengthening international cooperation in order to address our common challenges; values that are inherent to the humanist practice of the Cuban Revolution and people.”

For Cuba: Global health care is a right

Cuba has proven its ability to stay in the forefront of medicine in areas like cancer care and ending mother-to-child HIV transmission. Cuba consistently lives its values by providing free health care around the world.

In 1965, Cuba established the National Center for Medicine in March of 1999. Since then the country has trained thousands of medical students from over 124 countries, free of cost, who pledge to return home to provide health care to the indigent.

Due to its first-rate nationalized health care system, the island nation has one of the highest life expectancies and lowest infant mortality rates in the world, according to the World Health Organization.

Cuba’s health care advances have seen the disappearance of malaria, polio, diphtheria, tetanus, pertussis and measles.

Cuba has been on the front lines of many global struggles, providing aid to those who need it. Cuban doctors were the first to arrive after calamitous earthquakes in Pakistan in 2005 and Haiti in 2010 and to fight a major cholera outbreak. Cuba’s revolutionary doctors cared for 20,000 cancer victims after the Chernobyl nuclear disaster in Ukraine from 1989 to 2011, all free of charge. Cuban doctors also helped treat those affected by Ebola in Western Africa in 2014.

In February 2020, underserved and neglected by the settler-colonial government of Canada, First Nations leaders from Manitoba met in Havana to discuss a possible health care partnership. (cbc.ca)

To put this meeting in context, an Ojibway-Cree person explained in a March 11 tweet: “During the HuNsi cri sis at my home reserve a few years back, the government sent body bags when we asked for help.”

All this aid is provided while Cuba has been under a unilateral blockade by the U.S. for over 60 years, with new sanctions imposed regularly.

Cuban doctors and nurses head to Italy to help fight the coronavirus: “We’re not superheroes. We’re revolutionary doctors.”

School bus drivers win emergency pay

By Steve Gillis

On March 16, elected officials of United Steelworkers Local 8737, the Boston School Bus Drivers Union, conducted mass meetings in the bus yards over loudspeakers with hundreds of drivers, monitors, dispatchers and support staff. They presented a multiparty agreement reached with Transdev—a division of the Paris-based transnational conglomerate Veolia, which employs over 170,000 workers in 104 countries and specializes in contracting with neoliberal governments to privatize water, waste, energy and transportation.

Of primary importance, the agreement mandates full pay and benefits during the COVID-19 emergency school shutdown, which began March 17. Separately, Transdev agreed to schedule training for new hires for the last week in April.

Four days prior, officials at City Hall informed us that they could not provide testing, protective gear, proper vehicle disinfecting, nor any more than the two paid cancellation days our contract had remaining. They told us to sign up for unemployment like every other laid-off worker of a private corporation if a closing happened and to wash our hands.

The next day we told City Hall that they had the biggest problem, keeping us from the virus. City Hall told us to shut down, which began March 17. Separately, Transdev agreed to schedule training for new hires for the last week in April.

Due to the measures taken in the New York-New Jersey area to prevent the spread of COVID-19, Workers World is temporarily suspending the printing and mailing of its printed edition, starting with the issue dated March 19. Current plans are to publish individual articles on the workers.org website, along with a PDF of what would be the printed version. We will review this decision as the impact of the pandemic develops.

Print issue suspended

We recommend that all subscribers with access get an email subscription and spread our articles around on social media. If you are a subscriber, your subscription will be extended by the length of the stoppage.

--- WW managing editors: John Catalinotto, Martha Grevatt, Deirdre Griswold, Monica Moorehead, Betsey Piette and Minnie Bruce Pratt.

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Disabilities & the virus

EDITORIAL Here’s a plan

Shame on you, de Blasio

Palestine vs. pandemic

China-Cuba anti-viral meds
Workers World Party is a revolutionary Marxist-Leninist party inside the belly of the imperialist beast. We are a multiple, multinational, multigender and multigenerational organization that not only aims to abolish capitalism, but to build a socialist society because it’s the only way forward! Capitalism and imperialism threaten the peoples of the world and the framework itself in the never-ending quest for ever-greater profits. Capitalism means war and austerity, racism and repression, attacks on immigrants, women, LGBTQ+ oppressed and mistreatment of people with disabilities. It means joblessness, increasing homelessness and impoverishment and hopelessness for the future. No social problems can be solved under capitalism.

The U.S. is the richest country in the world, yet no one has a guaranteed right to shelter, food, water, health care, education or anything else — unless they can pay for it. Wages are lower than ever, and youth are saddled with education or anything else — unless they can pay for it. This means joblessness, increasing homelessness and impoverishment, attacks on im/migrants, misogyny, LGBTQ+ism and imperialism on the lives of marginalized peoples, locally and globally.

WW: What were some of the major campaigns MSA worked on? What were some of the challenges MSA faced on campus?

Boston, MA 02130

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Economic rescue bill reveals class conflict

By John Catalinotto

March 23 — The emergency $1.8 tril- lion rescue bill for the combination COVID-19 and economic crisis stalled in the Senate last night. Democratic senators balked at saluting an obvious and obvious Republican giveaway to the super-rich who own and run the U.S. economy.

Observers expect the two capitalist parties that dominate U.S. political life—Republican and Democratic—will reach a “compromise,” as there is pressure on the Democrats to give in. The resulting bill, which the president is expected to sign, will provide a few more crumbs for the workers.

These are the same working people of all nationalities and skills who, when the country was run in the interests of the working class, have been functioning for the society. With many other workers and students forced to stay at home and shelter in place, medical caregivers, sanitation workers, food workers of all kinds from the farm to the supermarket and those who deliver goods and事物 are showing they are really essential to modern society.

Karl Marx wrote that the history of humanity has been a class struggle. The war of all against all and the market crash only exacerbated that class struggle between the biggest capitalists and the working class. Now the U.S. ruling class is pursuing every stop to make sure it gets all or nearly all of the nearly $2 trillion first installment pro- voked by the crisis.

The March 21 New York Times “quote of the day” indicated how in the struggle between workers and their bosses, the bosses are giving full attention to this government relief package. It quotes Democratic House Representative Ro Khanna of California: “The only industry that hasn’t been slowed down by the virus is the lobbying industry.”

Khanna referred to “the frantic efforts by lobbyists of all stripes to get a piece” of those trillions.

The capitalists want it all

As usual, the super-rich capitalists want it all. And the record of the Trump administration and Republican Party is to give everything away to the rich. From the beginning, Trump gave the capitalists and the corporations a trillion dollars in tax cuts, opened up government lands to plunder and constricted the rights of workers to organize.

The record of the Democratic Party leadership is to put up some token oppo- sition and then capitulate. That’s what the Democrats did last week with the first emergency bill that was supposed to give the public health system some way of containing the virus. Some $36 billion of the money appropriated was earmarked instead to subsidize the airlines industry.

That bill’s major provisions were sup- posed to make it possible for workers to stay at home when they’re sick so they wouldn’t spread the virus — paid sick leave for all. In the end this provision cov- ered only a quarter of the working class.

The paid sick leave provision omitted those 48 percent of workers who are employed by giant corporations like Amazon, Walmart, Burger King, Taco Bell, McDonald’s, etc., which employ more than 500 people and don’t give paid sick leave. It potentially omits the 27 per- cent of workers employed by small busi- nessess with fewer than 50 workers.

Republican Sen. Lamar Alexander was so opposed to the paid sick leave — in his ideological panic that it might become a permanent rule — that he prevented a better bill from being enacted and almost shot down the entire first emergency bill.

Republican Sen. Richard Burr not only protected the property of the super- rich, but he increased his profits. He used his insider knowledge about the pan- demic from being chair of the Senate Intelligence Committee to “unload 33,000 shares of a pharmaceutical company” just before the crash. You can read about this in a March 22 article in The Guardian by former Labor Secretary Robert Reich.

Now all the big corporations are using their lobbyingists and their other means of pressuring elected representatives to make sure that the $1.8 trillion package, allegedly aimed at preventing an eco- nomic collapse, serves their particular, narrow interests, just as Burr did. They want bailouts for their industry, interest- free loans, etc.

Meanwhile there is no equally strong voice for the working class.

The biggest noise from the Democratic Party leadership — an accolade to this giveaway — came when spokesperson Sen. Chuck Schumer complained about the proposed bill. Schumer told report- ers on March 22 that the bill as currently written would give bailouts to major cor- porations without accountability and that this would not be enough to support health care workers on the front lines.

This same Democratic leadership already made a big contribution to big business when it provided $1.9 billion in Sanders’ candidacy. Despite Sanders’ limitations — staying safely within the narrow interests of the super-rich—he needed some major points on March 17 regard- ing an emergency package. (tinyurl.com/ uqznslm)

Sanders called for a monthly $2,000 payment to every U.S. household for the duration of the coronavirus crisis; for unemployment insurance of up to $2,000 a week for a year; and a priori with a cap of $75,000; a moratorium on evictions, foreclosures and utility shut- offs; and a waiver on all student loan payments.

Sanders also called for Medicare to pick up the medical costs related to COVID-19 and for the federal government to coerce suitable industries to produce needed medical materials. Trump is instead try- ing to coax or bribe corporations into stepping up. For all his professed concern for the people, Trump is only interested in keeping the rich rich.

To the extent the final compromise bill lacks vital gains for the workers, it will show how much the Democratic leadership has capitulated to the corpo- rate thieves and their representatives in Congress. It will also show further how a system based on profit is ill-equipped to protect the health of the people.

Doughnut workers organize in Portland, Ore.

By Mike Kuhlenbeck

March 21 — Workers at a popular eat- ery, “Voodoo Doughnut,” in Portland, Ore., announced the formation of the Voodoo Doughnut Workers Union (VWU) on March 20. Their written state- ment asserted this was “to improve work- ing conditions and demand better wages or hazard pay.”

Employees who are still working the shop to cashing in their accrued paid time off and the market crash only exacerbated that class struggle between the biggest capitalists and the working class. Now the U.S. ruling class is pursuing every stop to make sure it gets all or nearly all of the nearly $2 trillion first installment provoked by the crisis.

The doughnut chain employs more than 1,500 workers in nine locations across Oregon, California, Colorado, Florida and Texas. Portland workers at the 22 SW 3rd Avenue restaurant, known as the “Old Town” location, have been organizing with the local chapter of the Industrial Workers of the World since June 2019.

VWU member Samantha Bryce told Workers World that conversations with co-workers about unionizing had gone back even further. “We have a right to stand up for ourselves and demand that our basic needs are met, that our health and well-being be a priority and that our dignity be respected.”

The March 20 statement noted, “VWU workers have voiced a number of serious grievances about their workplace, despite its hip and friendly image. The list includes safety concerns, low wages, stressful work- ing conditions and a lack of medical paid time off and sick leave, as well as sev- erence packages for all who have been laid off due to the COVID-19 crisis.”

Similar to restrictions on restaurants and bars across the U.S., Oregon Gov. Kate Brown ordered the state’s resta- urants to suspend dine-in services for at least four weeks and stay open only for takeout and delivery.

Bryce noted that as layoffs continue in nearly all company locations, it is unclear if these are due to meeting coronavirus COVID-19 needs or if unionization has played a role. "Many of us live paycheck-to-pay- check on poverty wages and should bene- fits from companies that treat us like we are nothing more than expendable,” Bryce emphasized. “Many of us now will be struggling to find work. Struggling to pay rent. Struggling to buy food. We need each other more now than ever. Now is the time to stand up, but when you do, make sure to stand together. For a ris- ing tide lifts all boats.”

VWU members have received sup- port and encouragement from the Burgerville Workers Union, the Crush Workers Collective, Virginia IWW, Portland Solidarity Network, IWW Italia, Northwest Labor Press, New Season Workers United, Communications Workers (CWA) Local 7901 and Portland Jobs With Justice.

“I hope that our actions inspire other working-class folks to organize and support their fellow workers, as well as their sur- rounding communities,” Bryce added.

Support for low-wage food service workers organizing during the pandemic.

Greater Boston Marxists Association

Continued from page 2

work more effectively with the Greater Boston communities. Additionally, the Massachusetts State Senate and the House of Represen- tatives will be operating under said name, which has officially been changed to the Greater Boston Marxists Association.

We thank you all for your support in our recent adjustments and ask that you continue showing solidarity is to stay up to date on current events and global issues, specifically within the Global South and other states affected by imperialist powers.

If you’re interested in continuing to follow our campaigns and/or possibly joining our lead organizing team or our general organizing populace, please feel free to contact any of our organizers at GBMarxists@gmail.com.
Rikers prisoners on strike
Free ‘em all, shut down prisons

By Mirinda Crissman

While the history of captivity remains a stain on this society, those directly affected by these conditions point to things officials can do to protect the incarcerated population. When that fails to happen prisoners face no choice but to turn to matters into their own hands.

Jounalist Kim Kelly broke the news on March 22 that two dorms at Rikers Island are on strike. Their statement reads: “Two dorms of 45 inmates at Rikers are refusing to leave our dorms for work duties or for meals. We must take these actions in protest of the lack of personal protective equipment (PPE) and cleaning supplies provided to inmates, the crowded living conditions imposed on us prior to the pandemic and made worse by the daily addition of new inmates from other facilities, some of whom are highly likely to have been exposed to the COVID-19 virus, and the arbitrary disconnection of our phones for three hours on the morning of March 22. We demand the same calls issued by the Board of Correction to all states to indicate the need for all prisoners, especially from oppressed communities, to remain incarcerated. Mayors and prosecutors to stop adding to prison populations, especially from oppressed communities, for non-violent and minor crimes and multiple offenders, we must free them all. This moment, and every moment, calls upon us to demand that we use our resources to provide material care, not cages.

The first confirmed case of COVID-19 for an inmate at Rikers Island was announced March 18, just hours after it was confirmed that a guard at a security checkpoint tested positive. Since then, the number of incarcerated people at Rikers testing positive for the virus has reached at least 38. Given unsanitary conditions, overcrowding and lack of access to medical care at Rikers (medical facilities have zero ventilators), it is imperative that decarceration be prioritized before this vulnerable and captive population is decimated.

Nick Pinto described the subjugation at Rikers Island facilities for the Intercept: “They are locked in filthy intake rooms with dozens of other people for days on end, confined to housing units or dorm-style sleeping areas with scores of other people, dependent on staff for soap and on correction officers for permission and an escort to visit a medical clinic. The roughly 5,400 men and women detained in city jails on Rikers Island don’t have the agency to protect themselves from the disease, even as they are constantly exposed to the contamination of the outside world through the constant churn of three daily shifts of corrections officers and staff.” (March 18)

This particular jail and this country have a long history of super-exploiting the labor of incarcerated people. Responses to this global pandemic show that, unsurprisingly, the current moment is not divorced from centuries of violent history inside and outside prison walls.

Gov. Andrew Cuomo announced that New York state plans to use the labor of incarcerated people to produce 100,000 gallons of hand sanitizer a week. Inmates will receive $1.15 an hour or less for their labor, and hand sanitizer is considered contraband in prison, due to its alcohol content.

New York City has a Pandemic Influenza Surge Plan for Managing In- and Out-of-Hospital Deaths, which details using the labor of those incarcerated at Rikers to bury bodies. The city’s clever storage and cremation facilities are overwhelmed. Incarcerated people were digging graves on Hart Island in the 1980s and ’90s, where bodies of those who died of AIDS were sent to be buried. (nyc.gov)

Conditions are rapidly worsening at Rikers, and both Mayor Bill de Blasio and Gov. Cuomo’s responses are criminally negligent. The fact that they are not prioritizing releasing people from detention is setting the stage for genocide.

There is also a campaign demanding that Rikers inmates be released from their cells immediately. Call Gov. Cuomo at 518-474-8900 and Mayor de Blasio at 718-788-7055 to take part in that campaign.

Whether it’s the millions of people criminalized and incarcerated in the United States, or the hundreds of thousands of migrants detained within its violent borders, we must free them all. This moment, and every moment, calls upon us to demand that we use our resources to provide material care, not cages.

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COVID-19: Prison sentence = death sentence

By Joe Piette

Prisons are concentration camps for the poor — disproportionately Black, Brown, Indigenous, migrant-disabled and, increasingly, elderly. Prisons are especially dangerous places now because of the coronavirus COVID-19. That’s like other workers, prisoners and their supporters can fight like hell — and push back against incarceration policies that endanger their health and lives.

Former prisoners, their families and friends, and currently incarcerated people are leading the movement to empty local jails, Immigration and Customs Enforcement detention centers, youth detention centers, and state and federal prisons before COVID-19 hits full force. Health and “criminal justice” experts agree the virus will rapidly increase deaths in U.S. prisons. The U.S. has the largest concentration of carceral people in the world.

Incarcerated people are at high risk for infection and have seriously limited access to health care and hygiene within facilities. Overcrowded and unsanitary conditions of confinement, coupled with inadequate, negligent and often punitive responses to medical needs, mean that COVID-19 poses a deadly peril. The risks are further exacerbated because criminalized and incarcerated populations have disproportionally higher rates of serious and chronic illnesses, leaving them more vulnerable to viruses.

Mass pressure to decarcerate now

Groups from California to Massachusetts are demanding the release of as many prisoners as possible before the coronavirus COVID-19 decimates U.S. prison populations.

The American Civil Liberties Union of Pennsylvania joined the Amistad Law Center and the Abolitionist Law Center to send a widely publicized letter to Pennsylvania Gov. Tom Wolf demanding the release of 1,900 prisoners who are elderly, have health issues or are pregnant, and the parole or pardon of thousands more of the state’s 47,000 prisoners (tinyurl.com/r94wzkg).

Similar movements are growing in other states.

Beyond Prisons developed a “Short Guide for How to Support Prisoners During the COVID-19 Crisis” (tinyurl.com/adljgh) in collaboration with a number of organizers across the country. Organizer Kim Wilson told WW: “The Pennsylvania Department of Corrections is not reporting these as COVID-19 positive. They are saying the guards are taking vacations.”

The DOC and the Pennsylvania Department of Health are refusing to release testing information, citing an old state health law that allows officials to keep certain information secret during a disease outbreak.

With little confidence in prison administrators from any states to release actual infection rates to the public, incarcerated Workers Organizing Committee/Fight Toxic Prisons is asking prisoners to call 410-449-7140 during business hours to report any instances of incarcerated people becoming ill with the coronavirus.

Pressure is also mounting on judges, police chiefs, mayors and prosecutors to stop adding to prison populations, especially from oppressed communities, for non-violent and minor crimes and multiple offenders. Activists are also calling for those arrested to be released without cash bail. Cash bail policies allow those with money to pay their way out of detention while poorer defendants remain incarcerated.

People may not be able to stage mass marches on the streets but petitions (Free our loved ones now: tinyurl.com/qwb8n9h), press releases, social media campaigns and other virtual protests are making their voices heard loud and clear:

Don’t let COVID-19 turn a prison sentence into a death sentence! Let our incarcerated comrades go home now!

Injustice prevails despite mass prisoner release

By Martha Grevatt

Since March 14 the Cuyahoga County jail, located in downtown Cleveland, has released hundreds of prisoners to reduce the jail population in light of the coronavirus COVID-19 health emergency.

Many people are now asking the obvious question: “Why aren’t Cleveland’s example expanded across the country?” Most of the prisoners freed were so-called “nonsufficient offenders” not convicted of a crime, yet kept in jail because they lacked the funds to post bail. There are untold numbers of people across the country in a similar situation. They should be released, too.

However, there are important facts to consider before holding up Cuyahoga County as a model. The Coalition to Stop the Inhumanity at the Cuyahoga County Jail held a well-attended webinar on March 19 to discuss some of the injustices the released prisoners have been subjected to. Most remain under house arrest, forced to wear an ankle bracelet for which they are being charged $220 a month. By law these former inmates, not yet tried, are “presumed innocent.” Now they are being punished for crimes they have not been convicted of. The American Civil Liberties Union of Ohio has a petition to eliminate these exorbitant charges.

Other inmates felt coerced into taking plea deals in order to get away from the dangerous health situation in the jail. The courts were “putting people in a compromised state.”
Shale oil, energy debt and false promises

By Betsy Piette

Even before the first case of the coronavirus COVID-19 was confirmed in the United States, fault lines were appearing in financial markets here. Corporate debt reached 74% percent of the U.S. gross domestic product. It had more than tripled to a record $16 trillion – three times the 2008 global collapse. (New York Times, March 3) This makes shale the biggest engines of this debt. Within the much-touted shale oil industry, debt – driven by the excessive cost of fracking for natural gas and oil and the need to repay investors – is now six times greater than industry income. Much of this debt is held by leading global investment banks, which last year increased their holdings by nearly 40 percent. These banks dominate fossil fuel funding. JP Morgan Chase alone held $168 billion in oil and gas assets. Others include Wells Fargo, Citibank and Bank of America.

In March, energy banker Mike Lister at JP Morgan Chase reported: “Banks wrote off as much as $1 billion in 2019 in reserve-based shale loans, more than they have in 30 years of making them.” On March 9, demoglog,.com reported on the conditions of shale oil: “Shale oil producers have been expected to come due in 2020, followed by over $160 billion in debts over the following three years.”

This sudden rush to dump shale investment debt may be the final straw for banks and investors. The U.S. shale industry has incurred extremely high production costs – $30 to $50 per barrel compared to $4 to $12 per barrel for overseas oil. This has done little to discourage investment risk takers.

Even with stock markets crashing, it would not be surprising if Congress and the Trump administration were to slip in yet another bailout for the energy industry. For years, the industry has lured investors using model wells with higher than average productive capacity – while failing to meet financial requirements. These dynamics, both in the financial and physical sense, are creating an unsustainable paradigm.

For years, the industry has lured investors using model wells with higher than average productive capacity – while failing to meet financial requirements. These dynamics, both in the financial and physical sense, are creating an unsustainable paradigm.

In February, the industry’s solution was to push for the export of natural gas and oil, despite decades of prohibitive restrictions. Under the Obama administration, measures were taken to reverse the flow direction in pipelines, so that instead of bringing gas and oil into the country, they were delivered to new port facilities for export. The Supreme Court just allowed this to happen. ‘No borders or deportation of beloved community members.”

In the Trump administration, shale and natural gas have become critical drivers of the U.S. economy as this country became one of the world’s largest exporters. Pushing a program of “U.S. energy dominance,” Trump promoted the faulty argument that domestic oil and gas production benefit national security by insulating the U.S. against the actions of other countries. To ensure this dominance, while simultaneously lifting environmental restrictions, Trump also expanded economic sanctions against two of the U.S.’s largest competitors – Russia and Venezuela.

It now appears that relying on the shale industry to save the economy may have left the U.S. more vulnerable during times of crisis – like the COVID-19 pandemic.

Injustice prevails

Continued from page 4

according to Melekte Melaku of the Cleveland ACLU.

The freed inmates were also not given any resources to survive in an impoverished city, now in the throes of a worldwide economic meltdown.

Melaku also called emergency guidelines issued by the Ohio Supreme Court “rash and inadequate” because they did not call for reducing incarceration – even though “jails are where the virus is going to spread the fastest.”

Inhuman conditions

At one point the county jail, built to hold under 1,800 people, housed 2,400, with prisoners sleeping on mats on the luncheon floor. The coalition, formed after several prisoners died of dehydration in August, has more than 1,500 members.

These actions drew attention to physical and mental abuse of inmates; poor quality food, sanitation and medical care; overcrowding and its other inhumane conditions. While the overcrowding has finally been alleviated due to the COVID-19 danger, poor treatment of inmates continues.

Even operating below capacity, County Executive Armond Budish claims the population is now below 1,400, a figure the coalition disputes. Social distancing is unlikely and the virus can be expected to spread.

The March 19 webinar also took up the serious overcrowding at the halfway facility, Oriana House, where state and federal prisoners may be allowed to complete their sentences before release. Resident Brandon Baxter reached out to the news media after being housed with 15 other men in a room with eight beds. After the Cleveland Plain Dealer reported on the conditions, hundreds of residents were released.

His 17-year-old son was sent back to prison for violating a rule against speaking to anyone on the outside without permission. One of the “Oriana Three,” Baxter was released in a case of FBI entrapment directed against Occupy Cleveland.

The webinar, called in lieu of the coalition’s monthly meeting, brought in local immigration activists, who tied the conditions in the county jail to the struggle to close migrant detention camps.

Cleveland activists are circulating two petitions. One is to “Keep Coronavirus out of Ohio’s jails, prisons and courts.” An online petition for electronic monitoring (tinyurl.com/ary7zyx).

Within the much-touted shale oil industry, debt – driven by the excessive cost of fracking for natural gas and oil and the need to repay investors – is now six times greater than industry income.

At Border Patrol Expo

Protesters slam war on migrants

By Mirinda Crissman

San Antonio, Texas

“Border security” is a lethal operation. As the war against migrants rages on under the guise of securing the borders, acts of solidarity with migrants and other oppressed people grow. Many organizations gathered in opposition to the Border Security Expo here on March 11. Demonstrators held up banners and papier-mâché figures of migrants in front of the Henry B. Gonzalez Convention Center.

There, a speaker from the Southwest Workers Union stated: “San Antonio must make a very clear stance that ‘security’ is not enhanced by ramping up the lethality of forces lined up along the border or aggressively targeting immigrants. These are methods of terror. San Antonio should redefine ‘security’ to mean access to food, housing, health care, education and work. These are the things that lead to meaningful, secure lives, not assimilations at borders or deportation of beloved community members.”

Other organizations present included RAICES (the Refugee and Immigrant Center for Education and Legal Services), Autonomous Brown Berets de San Antonio, Esperanza Peace & Justice Center, FIRE (Fight for Immigrants and Refugees Everywhere), Poor People’s Campaign, Texas Indigenous Council, Workers World Party, Party for Socialism and Liberation, and Iraq Veterans against the War.

These opponents of imperialist violence picketed and chanted in unison at the hall’s exit as convention attendees were leaving. They were further irritated as they had to walk through demonstrators to get to their hotel across the street.

Veterans of Autonomous Brown Berets de San Antonio made it to the roof of the parking garage where they dropped a massive banner, which exclaimed, “Migras out of San Antonio!” Then the protesters busted out miniature cages and banners which read, “Stop Family Separations” and “Chinga la Migra!” before they began a press conference attended by mostly Spanish media.

After the press conference, demonstrators marched to the Alamo to crash a Border Patrol ceremony. Spirits were high, and the wide coalition of folks gathered in solidarity made their message heard.

Teresa Gutierrez, a national coordinator of FIRE, put the egregious sale of weapons into context: “During the Border Expo, an ‘all-terrain vehicle’ with a gun mount was demonstrated to participants and later published in the news. This show of force is completely offensive not only to migrants dying at the border but every decent human being. While cultural and other activities were cancelled in San Antonio due to COVID-19, the Border Expo went on, demonstrating the priorities of this rotten capitalist system: unending war no matter what.”

by workers.org  March 26, 2020  Page 5
The wealth we workers generate should go toward things that keep us happy and healthy, not an absurd Pentagon budget of $700 billion or another yacht for the capitalist vultures who prey on the sick and injured.

A nurse working in Central Texas

I'm a registered nurse and I work in an inner-city psychiatric crisis center. More than half the patients we serve are homeless. The organization I work for is social work driven and even though there are some RNs, I'm a registered nurse and I work in a psychiatric crisis center where staff are severely understaffed. I work with patients who have substance abuse issues, severe mental illness, and are on chemotherapy medications, was told she had to work from home. But she was not given a laptop, so she came back to work the next day. Then her supervisors told her to figure out how I could work without having direct patient contact. She came up with the idea that I could use her office and see the patients via telemed. I have been off work, but I'm due back at work tomorrow. My supervisor called me today to tell me the telemed idea fell through because leadership couldn't find a laptop (again!) for me to use to plug into telemed.

I was given the option — and strongly encouraged — to stay home, but I don't want to leave my co-workers short-handed. As it stands now, my supervisor happens to be out with an upper respiratory infection (no, not corona!) so I'll use her office and do everybody else's charting, computer work and other stuff that doesn't require patient contact. However, in their efforts, leadership does seem concerned about my safety. Either that or they know I've given my adult children instructions to sue.

At any rate, I don't see that same level of concern for our clientele by my organizational leadership, by local politicians or by the federal government. Social distancing and good hand hygiene are the order of the day. How do you do that if you're trying to find shelter and are on the streets all day?

A paramedic student in Austin

As an emergency medical technician and paramedic student I have witnessed firsthand the crumbling of our health care infrastructure in the wake of COVID-19. Clinical sites in hospitals across Central Texas minimized the initial spread of the virus and failed to implement increased protocols for infection control for weeks until it became all too clear the scope of this pandemic could no longer be avoided. In a single six-hour clinical shift, every patient I came in contact with in the emergency room was a patient with pre-existing conditions, with signs and symptoms of pneumonia including cough and fever. This was rather shocking for Central Texas patients, who have one [illness], then you can't have the other.

During this entire time, health care workers may or may not wear masks when in proximity to the patient. Triage tents are set up outside hospitals, but the workers are only provided with disposable standard nitrile gloves and there is no way to isolate patients while they wait to be seen.

Health care workers are already overworked thanks to the desire of our privately owned hospitals, nursing homes and ambulance services to maximize profits [during] COVID-19, and that is only making the issue worse. Rather than enough workers being brought in to take care of the influx of patients, we’re expected to work faster.

Health care workers — who include medical facility cleaners, record keepers and workers are not being tested, and the lack of guaranteed food, housing and income stability incentivizes them to hold onto the jobs they have left to do self-research on the virus. At my job as an EMT [emergency medical technician], the only training we’ve received on COVID-19 was a 15-minute video posted online that is not mandatory viewing.

We need more people on the job; we need a right to housing, food and health care; we need education on the virus; and most of all we need the profiteering to end.

A doctor’s scribe in rural Texas

The clinic experience here can be summed up in one word: inadequate. That’s thanks to a lack of organized response, research and education on COVID-19. There is little to no understanding from anyone, any level of care, from the doctors to the clerks, of the nature of this epidemic or how it is quantifiably or qualitatively different than influenza. They have consistently failed at every opportunity to give patients proper guidance and expectations for care of young children on through to elders.

This school year will be almost completely canceled across the world due to the virus. As of now, I am unable to afford the state registration required to work as an EMT in the state of Texas and must take a back seat as I am unable to join my fellow health care professional to work on a coronavirus. This is one of the most ethnically diverse cities in Europe, and in a crisis they require you to ask for help only in their mother tongue.

Another issue I see as a major problem early on was the lack of personal protective equipment supplies. I moved here from Central Texas in October 2019 where I worked as a registered nurse for nearly 20 years. My last job before coming to Central Texas was in surgery recovery. Similar to the emergency room, this is an environment that requires there be manual ventilation bags at each bedside. After Hurricane Maria devastated Puerto Rico [creating extreme need for medical supplies], we couldn’t replace these vital pieces of equipment, and many of them had expired.

There were also medications and other supplies we couldn’t replenish, and it took months for manufacturers in the U.S. to ramp up production, while the COVID-19 pandemic was already raging outside of China.

The following are lightly edited testimonies from health care system responses to the coronavirus COVID-19 from several workers who currently have jobs in Central Texas or have spent its lives working there.

EMT in Austin, Texas

The response from Central Texas hospitals and health care services has so far been what I expected from profit-based medicine. Precautions are taken only after symptoms are confirmed, and when they have a verified case of COVID-19. In order for a case to be verified, a patient must pass a strict series of questions and symptoms presentation before testing is ordered. What is happening in Italy today, and I fear it is a sign of what is to come for the rest of the world that focuses more on maximizing profits rather than saving people’s lives.

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Rank-and-file autoworkers win fight for safety

By Martha Grevatt

Working in an auto plant is a dangerous job. From slippery floors to toxic chemicals to improperly maintained equipment, auto workers deal with a range of safety hazards every day. Now there is COVID-19. On any given shift hundreds, even thousands, work under one roof. Plant setups do not allow 6-foot "social distancing" between workers. Moreover, workers at Ford, General Motors and Fiat Chrysler Automobiles have complained that cleaning of "high touch" areas has been minimal, restroom sinks do not have hot water, and job stations were not being cleaned between shifts or when workers rotate from one job station to the next.

At multiple plants run by the three companies, there are workers who have tested positive for COVID-19. Yet in Michigan, the state with the highest number of auto plants, Gov. Gretchen Whitmer's March 15 order to close "non-essential" businesses contained an exemption for "manufacturing." Other states were also allowing the plants to stay open, even after banning "large gatherings"—which happen every workday in a big plant.

Early on, the United Auto Workers union should have insisted that the plants be closed. Instead, union heads and company heads formed a "joint task force." Their "solutions" contained little more than unkept promises to sanitize the workplace and limits on how many workers could sit at one break table. All the while, salaried employees were being encouraged to telecommute.

"Rank-and-file workers were not appeased. As United All Workers for Democracy stated, "We do not believe a decision to close in another joint program between high-ranking union officials and auto executives, where those who are making the decisions on what continues to happen every workday in a big plant the inside of the plants will not have to live with the consequences of those decisions. We believe the correct decision to make in regards to our union leadership would be to demand a shutdown of all facilities and for workers to be paid their full wages until these facilities are safe to work inside of again." (nawd.org)

Both UAWD and another rank-and-file group, Autoworkers United, made campaign pledges to close the plants. Local union leaders also raised that demand.

**Strikes, walkouts at auto plants**

Meanwhile autoworkers began to take matters into their own hands. A group of 17 at FCA's Warren, Mich., assembly plant stopped work on March 16. Before that, FCA workers in Italy and Canada held strikes to protest the unsafe working conditions they were subjected to. On March 18, workers at FCA's Sterling Heights, Mich., assembly plant reported walking off the job at 5 a.m., "...to our union to handle any part or touch any equipment. By 8 a.m. all the plant's workers were sent home and FCA stopped production at the plant. Later that day the UAW announced that the three companies had agreed to close the plants until at least March 30. That was a huge victory.

However, thousands are still working under conditions that pose a risk of infection. These include many employed by third parties which supply parts to the Detroit Three big auto companies or perform janitorial services. Some Detroit Thermal workers have lost their jobs.

Hundreds of construction workers hired by subcontractors staged a walkout at a new FCA plant being built in Detroit. At least two of the skilled tradespeople have tested positive for COVID-19. FCA has since temporarily halted construction work on the new plant.

Grevatt, trustee of UAW Local 869, retired last year from FCA after 31 years.
Anti-racist activism accelerates

By Minnie Bruce Pratt

March 22 — As the coronavirus COVID-19 pandemic accelerates in the U.S.— amid appeals for the population to "work together" — hateful anti-Chinese and anti-Asian racism is being incited at the highest level of government. In a March 8 press conference, President Donald Trump claimed his repeated use of "Chinese virus" — instead of the World Health Organization-designated term "COVID-19" — incited racism at all levels. When asked if the term might put American at risk, Trump replied, "No, not at all." A CBS News reporter tweeted that another "White House official referred to the virus as the "Kung Flu" to her face." (Washington Post, March 17)

WHO officials emphasized the naming of COVID-19 was done specifically "to prevent the use of other names that can be inaccurate or stigmatizing." (globalhealth.org, May 4)

Trump’s response is not surprising, given his arrogant consistency in using racist language to damn African-American politicians, working-class immigrants, African countries and all Muslims.

His anti-Asian racism is also linked to a vile "American First" history of white supremacy — from syphilis to the bubonic plague — where they are at even higher risk. (Workers.org, March 29)

Disabled people for centuries have had to worry about every aspect of their health to survive and participate in what-ever activities we can manage to navigate, despite the obstacles put in our way by ableist prejudice and discrimination.

Now this pandemic has put a spotlight on our collective vulnerability, especially of those who follow same the disability community's regimen of intensely observing every aspect of our health.

LaSpina is a wheelchair user, who was diagnosed with disabilities, who depend on accessible mass transit. In the U.S. pandemic epicenter, mass transit usage was cut to one-third, leaving a broken hip. She complained that the official U.S. 6-foot social distancing rule discriminates against people with disabilities, who depend on home health aides to wash and dress them and do other intimate activities. People with disabilities are going to be forced to go without care and some may even be "run over in favor of people deemed more likely to survive and thrive. We understand what scarcity is, and we see the tough choices that emergencies impose. But we are not okay with being deemed less worthy of medical care, simply because we are disabled or chronically ill."

In Los Angeles, a middle school Asian student was recently sent to the emergency room after he was assaulted by a white student. (Workers.org, March 3)

The slogan "Nothing About Us Without Us!" communicates the idea that no policy can soon tell Congress whether or not disabled people. (Workers.org, Feb. 11)

The current surge of anti-Asian racism in the U.S. calls for oppressed people and workers of all backgrounds to step up in solidarity against the slurs and violence.

Disabled people can only continue if workers turn against each other, distorted by the bosses' propaganda, instead of uniting to fight exploitation by the system.

Capitalism is not going to save us — from a deadly virus, from climate crisis or from any of the local assaults that profit making takes on our lives.

Solidarity is survival — and the essential step on the road to socialism for the people. (Continued on page 10)

Disability activists fight for their rights

By Edward Yudelovich

New York

The COVID-19 coronavirus pandemic has laid bare the harm suffered by the next anyone can become a person with a disability," Nadia LaSpina told this reporter. LaSpina is a wheelchair user, who was diagnosed with disabilities, who depend on accessible mass transit, who are harder to do, like washing hands. Some of us can’t reach our hands as freely as others. Some of us can’t reach a sink reliably, or operate a soap dispenser by ourselves. We need them to make sure that the equipment is sufficient. (Workers.org, March 23)

Medical experts recommend frequent handwashing, as well as wearing masks. In the U.S. pandemic epicenter, mass transit usage was cut to one-third, leaving a broken hip. She complained that the official U.S. 6-foot social distancing rule discriminates against people with disabilities, who depend on home health aides to wash and dress them and do other intimate activities. People with disabilities are going to be forced to go without care and some may even be "run over in favor of people deemed more likely to survive and thrive. We understand what scarcity is, and we see the tough choices that emergencies impose. But we are not okay with being deemed less worthy of medical care, simply because we are disabled or chronically ill."

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Solidarity is survival — and the essential step on the road to socialism for the people. (Continued on page 10)
There have been relatively few confirmed cases of the coronavirus COVID-19 among the Palestinian peoples, as compared with the Israelis infected. This is in part owing to an early lockdown by the Palestinian Authority, as well as the population’s greater adherence to the needs of people there. Much of what has been available is smuggled through Egypt. This, together with Israel’s persistent military assaults that use Gaza as a testing ground for their booming weapons industry, has left Gaza’s medical infrastructure in tatters.

China and Cuba lead in curing pandemic

China and Cuba have made significant scientific advances in curing the COVID-19 pandemic. China is considered the world’s front-runner in the development of a vaccine, while Cuba’s antiviral drug, Interferon Alpha 2b, is reducing the number of deaths. Both countries, in different ways, are taking on the global health crisis of the pandemic.

The U.S. administration is concerning the virus globally by increasing sanctions and blocking aid to countries containing some of the world’s people.

On Dec. 31, China had alerted the World Health Organization about a new strain of coronavirus. The virus was causing a severe respiratory illness. WHO named the disease COVID-19. The actual virus that causes the disease is SARS-CoV-2, which was so named by the International Committee on Taxonomy of Viruses.

A week later, Chinese scientists had isolated the virus from a patient, sequenced its genome and published the information for the world to freely use.

In the West Bank and Jerusalem, Israel has continued its practice of night raids and mass arrests of Palestinians. There are also reports of four confirmed cases of coronavirus among Palestinian political prisoners, who are particularly vulnerable in overcrowded Israeli prisons.

Cuba and China unite to fight COVID-19

Cuba and China have already made a successful medical advance to cure some cases of COVID-19. Interferon Alpha 2b is an antiviral drug that Cuba developed during a dengue fever outbreak in the Caribbean in 1981. Interferon is a successful medicine able to cure some cases of SARS-CoV-2 and MERS viruses.

Interferon is a naturally occurring chemical in cells that alerts nearby cells of an invading virus, causing them to heighten their antiviral defenses. Dengue fever and coronaviruses have evolved the ability to destroy interferon and get through a cell’s defenses.

Cuba’s Interferon Alpha 2b is a drug that mimics the body’s natural interferon. It’s active in the cell’s natural interferon and thus boost the immune system against the illness.

Chinese doctors answer desperate call from Italy for medical help.

Interferon Alpha 2b, (tinyurl.com/ur434p) Martinez asserted, “The world has an opportunity to understand that health is not a commercial asset but a basic right. … [Cuba] has more physicians working abroad than practically any other country in the world, not because we are exporting anything but simply because we want to participate in building a world with better health conditions and living conditions.”

Under occupation, Palestine battles the pandemic

By Lyn Neeley

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China and Cuba lead in curing pandemic

By Susan Abulhawa

There are seven known coronaviruses and they all cause respiratory infections in humans. Once a coronavirus enters the body, it advances directly to the lungs and can cause a range of respiratory symptoms from dry cough to fever to pneumonia. Coronaviruses are zoonotic, meaning they transmit from animals to people.

The new, recent coronavirus, COVID-19, has a genome similar to SARS (severe acute respiratory syndrome) and avian flu, which can only be contracted through direct contact with birds.

Coronaviruses are covered with spikes that form a crown or corona around the virus. These attach to lung cells with their spikes allowing them to invade and kill the cells.

Many scientists are working on vac- cines by focusing on two features of the virus that form a crown or corona around the virus. These attach to lung cells with their spikes allowing them to invade and kill the cells.

Chinese scientists successfully created a similar vaccine for Ebola in 2017. They also used their experience and technol- ogy to create the new vaccine against the SARS-CoV-2 virus.

In a process not yet ready to proceed to human trials, Regeneron Pharmaceuticals in Tarrytown, N.Y., genetically modified mice to have immune human systems.

The mice are exposed to the SARS-CoV-2 virus, causing a build-up of antibodies to fight the virus. Scientists have isolated the SARS-CoV-2 virus and combined it with antibodies from humans who have recovered from COVID-19.

Cuba and China unite to fight COVID-19

In China, the Cuban-Chinese company, Changheieber, has been producing Interferon 2b since 2003. That drug helps people with compromised immune systems avoid some of the complications of viral infections.

When as COVID-19 was identified, China began using Interferon Alpha 2b on people who were infected by the virus, with over 1,500 people improving under treatment. Cuban infectious disease specialist Dr. Luis Herrera Martinez explained that “its use prevents aggravation and complications in patients at a stage that ultimately can result in death.”

Senior Chinese military doctors have been grieved by a combination of excessive demand from a population crippled and maimed by Israeli attacks, the inability to import new equipment or parts to repair existing equipment, chronic shortages of vital medicines and disposable protective gear, and chronic electrical blackouts.

The Trump administration’s defund- ing of the U.N. Relief and Works Agency for Palestinian Refugees in the Near East and the U.S. Agency for International Development also cut off a minimal level of relief provided to the medical sector.

Local authorities in Gaza are going to lengths to keep the virus out. They’ve built dozens of small housing units along the border with Egypt to quarantine arrivals. They’re also taking steps of setting up a field hospital in the same area. They’ve also restricted school attendance to serve as quarantine areas, in addition to temporarily suspending cross-ings at the border.

This is the most Gaza can do to avert a potential catastrophe. If the virus slips through, it is unlikely anyone will survive in a population of 1.8 million people.

It is also unlikely that Israel will do more than provide superficial support to Egypt for public relations. Egypt, in the West Bank and Jerusalem, Israel has continued its practice of night raids and mass arrests of Palestinians. There are also reports of four confirmed cases of coronavirus among Palestinian political activists, whose political work includes the Boycott, Divestment and Sanctions movement and Al-Awda: The Palestine Right to Return Coalition. A writer whose books include “Mornings in Jenin,” she is also the founder of Playgrounds for Palestine.

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Senior Chinese military doctors have been grieved by a combination of excessive demand from a population crippled and maimed by Israeli attacks, the inability to import new equipment or parts to repair existing equipment, chronic shortages of vital medicines and disposable protective gear, and chronic electrical blackouts.

The Trump administration’s defund- ing of the U.N. Relief and Works Agency for Palestinian Refugees in the Near East and the U.S. Agency for International Development also cut off a minimal level of relief provided to the medical sector.

Local authorities in Gaza are going to lengths to keep the virus out. They’ve built dozens of small housing units along the border with Egypt to quarantine arrivals. They’re also taking steps of setting up a field hospital in the same area. They’ve also restricted school attendance to serve as quarantine areas, in addition to temporarily suspending cross-ings at the border.

This is the most Gaza can do to avert a potential catastrophe. If the virus slips through, it is unlikely anyone will survive in a population of 1.8 million people.

It is also unlikely that Israel will do more than provide superficial support to Egypt for public relations. Egypt, in the West Bank and Jerusalem, Israel has continued its practice of night raids and mass arrests of Palestinians. There are also reports of four confirmed cases of coronavirus among Palestinian political activists, whose political work includes the Boycott, Divestment and Sanctions movement and Al-Awda: The Palestine Right to Return Coalition. A writer whose books include “Mornings in Jenin,” she is also the founder of Playgrounds for Palestine.
Disability activists fight for their rights

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discussion of how to best respond to the pandemic.

This is no surprise to the disability community, who remember how Trump and his administration valued lives. People with disabilities were a number of times for viola-
tions of the Americans with Disabilities Act, including by James Conlon. People with disabilities were used to being ignored, excluded, and spoken about with paraplegia. In 2003, Conlon com-
plained that the buses to Trump’s Atlantic City casino were virtually impossible to access in a wheelchair and was told po-
buses were available for wheelchair users. Conlon ultimately forced a settlement
with paraplegia. In 2003, Conlon com-
plainted that the buses to Trump’s Atlantic
City casino were virtually impossible to access in a wheelchair and was told no

out of Trumpp. (tinyurl.com/kr7gmm8) A U.S. Department of Justice investigation
discovery has found that the NBA Players Association is in violation of the Americans with Disabilities

Disability activists continue to fight for their rights. They have had a long battle to get access to the sportsworld and are still fighting for recognition. The NBA Players Association has been accused of discriminating against people with disabilities, and the American Civil Liberties Union has filed a lawsuit on their behalf.

The pandemic has highlighted the systemic racism and discrimination faced by people with disabilities. The NBA Players Association must do more to ensure that people with disabilities are included and valued in the sportsworld.
COVID-19 expone el fracaso de la atención médica de EE.UU.

En esta pandemia, las personas en los EE.UU. deberían preguntarse por qué el actual sistema capitalista de salud parece incapaz de combatir la propagación del coronavirus COVID-19. Deberíamos exigir por qué el gobierno no proporciona la salud de una manera más transparente y más eficiente. La realidad es que el sistema de atención médica en EE.UU. tiene el "mejor sistema de atención médica" del mundo. La realidad es que el sistema de atención médica con fines de lucro de EE.UU., que se basa en un sistema de atención médica privatizado, no proporciona las mismas y esenciales condiciones de atención médica a los pacientes en EE.UU. que proporcionan las redes de atención médica en otros países del mundo. La gran ironía ahora es que el sistema de atención médica con fines de lucro de EE.UU., que se basa en un sistema de atención médica privatizado, no proporciona las mismas y esenciales condiciones de atención médica a los pacientes en EE.UU. que proporcionan las redes de atención médica en otros países del mundo.

COVID-19 expone el fracaso de la atención médica de EE.UU.
El virus desencadena el caos capitalista

Por Deirdre Griswold
16 de marzo — El mercado de valores se derrumbó hoy. El promedio industrial Dow Jones de los precios de las acciones perdió casi 3.000 puntos en solo un día, a pesar de la inflación de varios bilhões de dólares en el mercado por parte del Banco de la Reserva Federal. Varias veces se cerró el mercado, pero continuó implosionando una vez que las operaciones comenzaron nuevamente.

Fue un evento monumental y la mayor caída en un día de los precios de las acciones en la historia.

Afetará no solo a los inversores ricos y propietarios capitalistas, sino a cualquiera persona cuyo plan de jubilación o ahorro vital está vinculado al mercado. Las empresas grandes y pequeñas también serán devastadas, que se despidan y se declaran en bancarrota para proteger a sus propietarios de pérdidas personales.

Esta peor caída en la historia ha dejado en claro que la pandemia de COVID-19 ha descubierto una debilidad cataclísmica dentro de la economía capitalista de los Estados Unidos. Pero eso no es lo que todo los países en危险 de dinero. Están culpando al coronavirus mismo por causar la catástrofe económica.

Una mirada más cercana muestra que tal afirmación es falsa.

No hay crisis económica en China

El virus ha estado en todo el mundo durante meses. Primer golpeó muy fuerte a China en diciembre en la provincia de Wuhan. Sin embargo, después de que el gobierno chino lanzó un esfuerzo masivo para evitar la propagación del virus, COVID-19 se ha contenido en gran medida en la propia China, gracias a las vigorosas medidas tomadas por el Partido Comunista. Pero el virus ha surgido en 162 otros países y territorios de todo el mundo, desde Irán e Italia hasta las aisladas Islas Feroe en el Atlántico Norte.

En comparación con lo que pasó en China, la pandemia de COVID-19 ha tenido hasta ahora un efecto mucho menor en la población de EE.UU. Sin minimizar la gravedad de esta enfermedad, que continuará propagándose, debe entenderse que hasta ahora se han reportado menos de 5.000 casos aquí y solo 87 personas han muerto, una pequeña fracción de lo que China ha sufrido.

Por el contrario, la crisis de los opiáceos, que se ha desatado en áreas económicas deprimidas de los EE.UU., mató a más de 50.000 personas cada año de 2016 a 2018 (el último año con estadísticas completas). (drugabuse.gov)

Sin embargo, ya hay predicciones nefastas de que la economía de EE.UU. ahora se contraerá seriamente y muchos, muchos trabajadores perderán sus empleos, tal vez millones, todo supuestamente debido al coronavirus. Esto es diferente a China, donde el trabajo se ha reanudado aunadas en las áreas más afectadas por el virus.

Un nivel muy alto de desempleo personal y comercial en este país limita el tiempo que las personas y las empresas pueden permanecer fuera del agua en una recepción. En el momento presente, no hay garantía de que el colapso mundial que se esperaba. Lo peor está por venir. Un nivel muy alto de deuda personal y comercial en este país limita el tiempo que las personas y las empresas pueden permanecer fuera del agua en una recepción. (lowwagecapitalism.com)

Ahora el fracking está a punto de colapzar. (Revista Fortune, 15 de febrero)

El actual ciclo de petróleo puede ayudar a dar lugar a que los movimientos independientes y ambientales han exigido durante años: cerrar el fracking. Pero no se debe a que los multimillonarios petroleros estadounidenses hayan visto la luz y abrazado un planetaa más verde. Es porque el petróleo de esquisto ha convertido en un bien tan caro que no puede generar ganancias cuando los precios caen tanto.

Este es un ejemplo clásico de sobreproducción capitalista. La sobreproducción es una característica incorporada del capitalismo y precipita una crisis económica. No significa que se esté produciendo más de lo que la gente necesita. Significa que se está produciendo más de lo que se puede vender para ganar.

La sobreproducción se genera por el vertiginoso despliegues de cada vez más productos para vender a la competencia. Para los capitalistas, la avaricia de ganancias significa que deben expandirse o morir, vender cada vez más un producto o servicio o hundirse.

Esta ha sido la causa de crisis periodicas desde que el capitalismo se convirtió en el modo de producción dominante en el mundo. También es lo que ha llevado a los países capitalistas a librarse de crisis morales desde en tantos han dividido el mundo en sus esferas de interés económico.

Esta propiedad privada de los vastos medios de producción por parte de un pequeño grupo de individuos súper ricos y sus bancos es lo que subyace a la actual crisis económica. El coronavirus es solo la chispa que desencadenó una explosión que se espera. Lo peor está por venir.