

# THE KEYSTONE

A BIENNIAL NEWSLETTER  
PUT PEOPLE FIRST! PENNSYLVANIA



FALL/WINTER 2019 - 2020





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## WHO WE ARE

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

We're a membership organization made up mostly of people who know from our life experience that poor and working people need to unite and have a voice. No one else is going to do it for us.

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

## Join the Base Building Intensive Group (BBIG) this Winter!

Join the Base Building Intensive Group (BBIG) this Winter! Last winter Put People First! PA's statewide Base Building team put on a program over two months called the Base Building Intensive Group, or the BBIG. We envisioned this group to be a place where people from Healthcare Rights Committees (HRCs) across the state could learn about base building -- which is our practice of getting new members involved in the organization, connecting them to the committees in their area, and deepening their commitment to our work.

Base building is a central part of what we do in PPF-PA, and our team is dedicated to strengthening this practice in every part of the state. We saw a need to develop base building leaders in each of our HRCs, and also give new members interested in starting committees a chance to learn about how to build up a group in their region. This is all part of our work to make sure that everyone in our organization--from the newest members to the most experienced coordinators--is consistently doing work to bring new people into the organization, sustain their involvement, and strengthen our HRCs.

We brought together around 20 people for our BBIG retreat in Harrisburg in late February 2019, which included trainings on door-knocking, 1:1s, a session on staying organized as a base builder, and some focused brainstorming on developing strategies to reach our base in specific regions. We then returned to our parts of the state, and had biweekly calls to discuss how our base building efforts were going. The calls were a supportive space for people to talk about the challenges of door-knocking and organizing new people, issues they had in their outreach efforts, and questions about how to improve as base builders.



They also helped us hold each other accountable to our early base building tasks and gave newer members a supportive environment to coordinate their work. Over the course of several weeks, we built several new base building leaders in our organization -- including the coordinators of two of our newest HRCs (in the Mon Valley and Norristown).

This year, we are planning on making the BBIG even b-b-bigger than last year. If our movement is successful, it will be because each part of the organization developed clear, connected, competent, and committed base builders. As we expand our base building even more next year, our goal is that each HRC door-knock once a month between April and September, with leaders in that HRC coordinating followup with all the new contacts. In order to do this, we will need base builders in each region who practiced their skills in the BBIG during our base building "off-season." We'll be meeting from late January to late April. Join us this winter if you're interested!

Email: [iaan.reynolds@gmail.com](mailto:iaan.reynolds@gmail.com) if you have more questions, or if you want to get involved!

## Member Reflection: Kim J Atland

### *The Air We Breathe*

by Kim J Atland



I am Kim J Altland, I was born one-half of a set of conjoined twins. My brother failed to develop fully. I have had over 50 reconstructive surgeries.

At 18 my doctors asked if I wanted disability, I said no. I believed the lie, "If you work hard and you try your best, help would be given." Therefore, I went to work knowing I could not give 40 or 50 years of service like my grandparents. I tried to pay ahead. I joined the fire service and helped with local political campaigns. As I worked, people praised me for not taking the easy way out and going on disability.

In 2011 my health started deteriorating and I looked for the help I believed would be there. I applied for disability and was denied. Subsequently I reapplied. After 7 years, I still have no disability. Because the judge felt when I chose to work it proved I was not disabled. Somehow, magically my ongoing conditions were irrelevant and being over 50 had no affect on them.

I sit in my house unable to participate in life or be of some benefit to society, I developed depression adding to my health problems.

If I had any type of help, I could have spent the last 7 years being productive, not a burden to my family and friends. Funny how not one person who had praised me for not getting disability wanted to help in any way when I could not work.

All too often, people with medical problems are pushed off. We are viewed as not being worth any effort or help, and this makes blaming us for not being productive easy. We must put an end to this cycle of abuse and neglect.

Years ago Will Rogers said "Let this country get hungry and they are going to eat, no matter what happens to budgets, income taxes or Wall Street. Washington must not forget who rules when it comes to a showdown."

Far too long we have been hungry for an end to Racism, Militarism, Poverty, and Environmental Destruction. We stand here today together. This is a non violent protest of Ideas, Faith and Justice. This is not an Army of violence, guns and bombs.

In our unity we are stronger than they are. We will bend like the reed in the wind. We will be heard like the thunder rolling across the sky. They will be toppled like the Oak in the storm.

We must remember that healthcare is a human right, and more it is a necessity. Without healthcare, all we have left is pain suffering and death.

For this reason healthcare is like the air we breathe and the water we drink.

It is a necessity it must be provided equally and fully to all people. It is time we demand the help we need not just for ourselves but also for the good of our families, our children and our communities.

# Struggle is a School

by the Political Education Leadership Development  
(PELD) Team

Put People First! PA is building the power of the Pennsylvanian poor and dispossessed through uniting across difference and taking action together. In the struggle for our basic human rights, we come up against the most powerful groups in our society, who profit from our poverty and hold onto their power through our disunity and disorganization. We have a strong opposing force that we have to defeat and overcome if we're going to win.

This means that we have to be smart about how we organize: That our best intentions aren't enough. Fighting against an enemy means that we have to learn about where they're strong and where they're weak; we have to know where our own strengths and weaknesses are, how we get stronger, and how we can make our enemy weaker.

We know that our basic strength is in our numbers: there's far more of us poor and dispossessed people than there are people in the ruling class. We also know that our numbers are only really a strength if we're organized. This means we have to learn how to organize ourselves in a massive way, across differences. We learn about all of these things - who we are, who our enemy is, our's as well as our enemy's weaknesses and strengths, how to organize, get stronger, and build our numbers - in many different ways.

We learn them through studying history and theory, and actively applying what we've learned to the present. We look closely at other efforts to organize the poor, and we study and reflect on our own work, activity, and history as an organization.

All of these ways that we learn what we need to know are connected to each other, and they rely on us actually taking action together.

There's no way for us to really know what it'll take to organize massively and across differences besides going out and trying to do it. There's no way for us to really know how far we've built our strength, or if we've correctly identified our enemy's weaknesses, except by actively struggling for our rights.

That's what it means when we say "struggle is a school." We make our struggle a school when we draw lessons from our organizing. We make our organizing stronger by reflecting on what we've done in light of what we know from our own experiences, from our study of history, politics, the economy, and lessons from other efforts to organize among the poor.

Through all of these efforts taken together we elevate "struggle is a school" from a concept, to a reality of our organizing that is inherent in all actions taken through organizing. That way "struggle is a school" becomes an active part of our organizing culture, so that we are constantly assessing where we were in the past, so we know where we stand in the present, and can take constructive and educated steps moving forward.

Making our struggle a school means learning from our successes, and failures, our victories and shortcomings. That means having the maturity and the discipline to be honest with ourselves as an organization, and the wisdom to know that we're in a long process with many steps and stages to it. Making struggle a school isn't limited to just learning about how to plan better actions, or how to get better at running meetings or knocking on doors or meeting with representatives, though those are all important parts of it. It's also taking the time to reflect on what we're learning about our enemy and what it'll really take to defeat them: What it'll take to build an organization that can last and can win. (Continued on page 6)



## Struggle is a School Cont'd

A necessary part of making our struggle into a school is taking the time to collectively evaluate the things that we do as an organization. Evaluation means more than asking what went well and could be better in the future. It also means drawing political lessons from our work: Lessons about what we need to do to strengthen the unity, organization, and leadership of our class in the face of the determined and sophisticated opposition of those in power. Below are some general questions and guidelines for doing evaluation as part of the practice of making struggle a school:

1. What were the goals of the activity being evaluated? In what ways did and didn't we accomplish those goals and why? Were they the right goals and/or was this right kind of activity for advancing our organization's strategy?
2. What did we learn about how to build mass, politically independent, organization of the poor today?
  - a. What Leadership Across Difference challenges came up during the preparation for the activity and the activity itself?
3. What did we learn about how to lead across difference? What did we learn about the ruling class's strengths and weaknesses? What did we learn about our class's strengths and weaknesses?
4. How can we apply what we've learned?

## La lucha es una escuela

Spanish translation of "Struggle is a School"

Put People First! PA está construyendo el poder de las personas oprimidas y desposeídas en Pensilvania por medio de la unión a través de las diferencias y al tomar acción juntos. En nuestra lucha por los derechos humanos básicos, nos enfrentamos a los grupos más poderosos de nuestra sociedad, aquellos que se benefician de nuestra pobreza y se aferran a su poder fomentando la división y desorganización en nuestras comunidades. Debemos derrotar a una fuerza opositora potente si queremos ganar.

Esto quiere decir que debemos ser inteligentes sobre la forma cómo nos organizamos: nuestras buenas intenciones no son suficientes. Luchar contra un enemigo significa que debemos aprender dónde están localizadas sus fortalezas y sus debilidades; debemos saber dónde están nuestras propias fortalezas y debilidades, cómo nos podemos fortalecer y cómo podemos debilitar a nuestro enemigo.

Sabemos que nuestra principal fortaleza está en los números: somos muchos más los pobres y desposeídos que las personas en las clases gobernantes. También sabemos que nuestros números son una fortaleza únicamente si nos organizamos. Esto quiere decir que tenemos que aprender cómo organizarnos de manera masiva, a través de las diferencias.

Aprendemos sobre todas estas cosas - quiénes somos, quién es nuestro enemigo, nuestras fortalezas y debilidades, así como las de nuestros enemigos, cómo organizarnos, cómo fortalecernos, cómo incrementar nuestros números - de diferentes maneras. Las aprendemos al estudiar historia y teoría, y aplicando intencionalmente lo que aprendemos a nuestro presente. Esto lo hacemos observando de cerca otros intentos por organizar a los pobres y al estudiar y reflexionar sobre nuestro propio trabajo, nuestras actividades y nuestra historia como organización.

(Continúa en la página 7)

## La lucha es una escuela Cont'd

Todas estas formas de aprender estas cosas están conectadas y dependen de que nosotros efectivamente actuemos juntos. No hay manera de saber qué demandará el que nos organicemos masivamente y a través de las diferencias si no salimos y lo hacemos. No hay manera para realmente saber qué tanto nos hemos fortalecido, o si hemos identificado correctamente las debilidades de nuestro enemigo, excepto cuando luchamos activamente por nuestros derechos.

Eso es lo que quiere decir que “la lucha es una escuela”. Hacemos de nuestra lucha una escuela cuando extraemos lecciones de nuestra forma de organizarnos; y fortalecemos nuestra organización cuando reflexionamos sobre lo que hemos hecho a la luz de lo que ya sabemos gracias a nuestras experiencias, de nuestro estudio de historia, política, economía y de las lecciones de otros esfuerzos por organizarse entre los pobres.

A través de todos estos esfuerzos juntos elevamos el concepto de “la lucha es una escuela” y lo convertimos en una realidad de nuestra organización, inherente a todas las acciones emprendidas. De esa manera, “la escuela es una lucha” se convierte en parte activa de nuestra cultura organizativa, de manera que constantemente evaluamos dónde estábamos en el pasado, dónde nos paramos en el presente y tomemos pasos constructivos e informados para movernos hacia adelante.

Hacer de nuestra lucha una escuela significa aprender de nuestros éxitos, fracasos, victorias y deficiencias. Esto quiere decir tener la madurez y disciplina para ser honestos con nosotros mismos como organización y la sabiduría para saber que estamos involucrados en un proceso largo con muchos pasos y etapas.

Hacer de la lucha una escuela no está limitado a aprender cómo planear mejores acciones, o cómo mejorar nuestras reuniones, o ir de puerta en puerta o conocer a representantes, aunque todo esto es parte importante del proceso. También quiere decir tomar el tiempo para reflexionar sobre lo que hemos aprendido sobre nuestro enemigo y qué será necesario para derrotarlo: qué será necesario para construir una organización que se sostenga y que gane.

Una parte necesaria de hacer de nuestra lucha una escuela es tomar el tiempo para evaluar colectivamente las cosas que hacemos como organización. Evaluar significa más que preguntar qué salió bien y qué se puede mejorar en el futuro. También significa extraer lecciones políticas de nuestro trabajo: lecciones sobre qué debemos hacer para fortalecer nuestra unión, organización, y liderazgo de nuestra clase enfrentando la oposición sofisticada y determinada de aquellos en el poder. Enseguida listamos algunas preguntas generales y guías para evaluar como parte de la práctica de hacer de la lucha nuestra escuela:

1. ¿Cuáles eran las metas de la actividad siendo evaluada? ¿De qué maneras se lograron o no estas metas y porqué? ¿Fueron las metas correctas/ fue esta la acción necesaria para avanzar la estrategia de nuestra organización?
2. ¿Qué aprendimos hoy sobre la construcción de una organización de los pobres masiva y políticamente independiente?
  - a. ¿Qué desafíos alrededor del Liderazgo a través de la Diferencia surgieron durante la preparación de la actividad y la actividad misma? ¿Qué aprendimos sobre liderar a través de la diferencia?
3. ¿Qué aprendimos sobre las fortalezas y debilidades de la clase gobernante? ¿Qué aprendimos sobre las fortalezas y debilidades de nuestra propia clase?
4. ¿Cómo podemos aplicar lo que hemos aprendido?

# Transitions and Transformations: Building the Philadelphia Healthcare Rights Committee

With support from the statewide Base Building team, we identified in the Spring of 2019 that the Southwest Philly Healthcare Rights Committee (HRC) was not becoming a political center of gravity in our region, even after several years of work. The HRC played a key role in winning our first ever public hearing on rising ACA insurance rates in 2016, garnering hundreds of petition signatures, and mobilizing and testifying at the hearing. However, turn-over of leaders and staff as well as an over-reliance on staff led to a decline in the vitality of the HRC.

Over time, we came to recognize that the HRC was missing key practices that have strengthened our committees in other areas. The practices of successful HRCs include:

1. Taking advantage of the organization's internal democracy by having members participate on statewide teams, calls, and planning bodies;
2. Engaging with the campaign plan to grow, build members' leadership, and win victories;
3. Carrying out sustained base building and door-knocking work to become an organized force in our communities.

In Philly, PPF-PA members had been wrestling for a few years with our organizational structure, and how to best engage people with teams and HRCs. Since several PPF-PA members unconnected to an existing HRC lived in Philly, we decided that it made sense to expand from having a neighborhood-based HRC, to a city-wide one. The new Philadelphia HRC officially met for the first time at the end of May 2019.



Pivoting to the establishment of a Philly HRC was the right decision. We have since taken action against healthcare profiteers around the closing of Hahnemann University Hospital, which was the main hospital serving those on Medicaid/welfare insurance in Philadelphia. We have made new connections by base building and have deepened our relationships with our strategic partners in the PA Poor People's Campaign: A National Call for Moral Revival. We have stood up to local health insurance giant IBX, demanding that one of our members receive the healthcare he needs. Twice a month we meet together, collectively plan the work of our committee, and engage in political education.

Through the transition to a city-wide HRC, we have begun to accelerate the development of leaders in the Philly region. The biggest victory we've achieved through this transition lies in our deepened clarity about the need for our HRC to connect with statewide work, engage with the campaign plan, and consistently base build. Through the city wide committee, the core group of leaders in this region is more connected than before, and more committed than ever to the task of building a center of gravity in Southeast PA for our statewide struggle for healthcare as a human right.

# The Closing of Hahnemann Hospital

This Spring, Hahnemann Hospital, a 150+ year old Philadelphia Institution, declared bankruptcy and began the process of closing its doors. Here is the story of Hahnemann through member stories.

## Member Remarks given at the Poor People's Campaign: A National Call for Moral Revival Hearing by Clarissa O'Connor

My name is Clarissa O'Connor, and I grew up in Lancaster, Pennsylvania. I am currently a third-year medical student at Drexel University College of Medicine and a member of Put People First! PA.

I had just started my third year of medical school at Chester Crozer Hospital in June when I heard that Hahnemann Hospital was closing. Hahnemann was the main teaching hospital of Drexel. The hedge fund manager who had purchased Hahnemann a year earlier was filing for bankruptcy, having separated the valuable Center City real estate from the hospital itself.

Hahnemann Hospital opened in 1885, and became the de facto city hospital for the city of Philadelphia, serving mainly people on Medicaid and Medicare. Over 2,500 people are losing their jobs. 570 residents and interns, or doctors in training, had to scramble to relocate. This is a crisis.

I will not have the opportunity to learn from the doctors, nurses, and patients at Hahnemann Hospital. Since the closing, I have learned amazing things about the hospital. For example, Hahnemann midwives and ob-gyns built relationships with home birth midwives so that people laboring at home could be safely transferred to the hospital if needed. I also learned from members of ACT-UP that Hahnemann was the first hospital in the city to offer care to people who have HIV and AIDS.

There is no doubt that the closure of Hahnemann Hospital is a symptom of our ongoing healthcare crisis and the war on the poor writ large. In the City of Philadelphia the total number of primary care providers accepting Medicaid has declined in recent years. Communities with the lowest supply of primary care providers are more commonly low-income and have high proportions of people of color. There are 520,457 people on Medicaid in Philadelphia (33.2% of the population).

Hospitals are also closing across the country, especially in rural areas. In my hometown of Lancaster, PA, UPMC closed St. Joe's Hospital, leaving the city with one emergency room.

People in power, like the Drexel medical school administration, want us medical students to "feel bad for the people affected most by the closure." It's not hard to see this rhetoric as an attempt to cool our righteous anger and keep us from organizing. I am here to say that I am directly affected by the healthcare crisis, and I refuse to see my interests as separate from those of the patients and employees of Hahnemann Hospital. My membership in Put People First! PA has allowed me to see the closing of Hahnemann Hospital for what it is - a symptom of the ongoing crisis and war on the poor and dispossessed and an opportunity to organize our community, including medical students and healthcare workers, into our organization and vision of healthcare for all, no exceptions, and a united poor and working class across Pennsylvania.

We as Put People First! PA demand an end to hospital closures; a Public Healthcare Advocate, who will fight for the healthcare rights for all Pennsylvanians; the protection of Medicaid with no cuts or hurdles, the restoration of the adult benefit in Medicaid, the protection of Medicare, and the implementation of single-payer universal health care for all and access to mental health professionals."

# The Closing of Hahnemann Hospital

Excerpt from remarks given August 20th at Kingsessing Public Library event on the closing of Hahnemann Hospital

by Farrah Samuels



My name is Farrah Samuels, and I am a stage IV cancer survivor, and a proud member of an organization called Put People First! PA (PPF-PA). In the battle for securing all our human rights, we believe in supporting one another, which is why, most recently, we helped co-organize several rallies, protest actions and marches concerning the closing of Hahnemann Hospital in collaboration with PASNAP and District 1199c workers. It represents just one story in the recent onslaught of hospital and health care facility closings nationally that disproportionately affect low income individuals and working families. This deliberate attack on health care providers and the closing of facilities is a main component of this country's ongoing war on the poor.

Safety-net hospitals such as Hahnemann, have primarily served the lowest income and most vulnerable patients; and they can play an important role in maintaining the health and safety of the public, just as our schools, libraries, police and firemen do. It is a real shame when safety nets such as Hahnemann are driven to closure by real estate entities seeking to turn over a profit on the backs of the poor and dispossessed. I work as a consultant for several of the City's emergency shelters for the homeless, Center for Hope, SELF, and ODAAT, located in North Philly. Many of the homeless that come off the streets and enter the shelter system are then linked to permanent housing options through initial referrals from hospitals like Hahnemann. The condition of being homeless renders a lot of these folks medically fragile with a host of co-occurring chronic health conditions. Being on the street means they lack basic access to routine medical care. For years, Hahnemann has been the default healthcare provider of many of Philadelphia's homeless. Sure, the homeless can go to other hospitals, but many of them stay and congregate in the neighborhoods surrounding Hahnemann; and in their fragile conditions, they may not make the journey as far as another hospital. Proximity can mean the difference between life and death very literally.

Hahnemann has also been the healthcare provider for many of Philadelphia's inmate population from the county jail, Curran-Fromhold Correctional Facility. The jail routinely transported inmates to Hahnemann to address their medical needs. If you believe that healthcare is a basic human right, then you must also believe and support the notion that inmates are also entitled to medical care just like any other citizens. Many of us have experienced the trauma and pain of having a loved one locked up and wondering if they are ok or if they will get adequate care if they get sick. Where will they go now?

Hahnemann has also been a safety net hospital for many individuals covered by Medicaid and Medicare insurance, such as myself; and it has saved countless lives, including my own. In 2015, I was experiencing considerable stomach pain, fatigue and exhaustion. (Continued pg 11)

# The Closing of Hahnemann Hospital

Excerpt from remarks given August 20th at Kingsessing Public Library event on the closing of Hahnemann Hospital Cont'd



At the time, I was an Adjunct Professor of a course at a local college and struggling to put my life back together after foreclosure on my home, the death of my father, the loss of my job, and a brief stint with homelessness. It was then that I learned that illness does not discriminate; and we are all just one diagnosis or step away from things falling apart. I made a salary of \$5,000 that year, and as such, qualified for Medicaid. One day when the pain got too much to bear, I decided to go to Hahnemann's Emergency Department. I was examined, diagnosed with fibroids after initial x-rays, and sent home.

I learned that the initial analysis of my x-rays had missed something and that I had a rare form of soft tissue sarcoma cancer called leiomyosarcoma. I was told I had three months to live and that I needed to seek follow-up care with a hematologist and oncologist.

I began a rigorous routine of inpatient chemotherapy on an aggressive combination of four potent chemotherapy drugs and would spend one out of every three weeks, staying at the hospital to receive this treatment.

The entire treatment ordeal lasted 18 months and on Election Day 2016, I woke up in remission and also overwhelmed by the news of who had won the Presidential election. I knew what this change in presidential administration could mean for other uninsured or Medicaid-insured poor people struggling with chronic health conditions and life-threatening illnesses. I cried tears of joy and sadness at the same time. Had it not been for Hahnemann and their due diligence, I would not have been diagnosed, and may never have had the fighting chance I did to make it through the fire and be here today. And had it not been for Medicaid, I would not have been able to afford the treatment that saved my life. Everyone deserves that same fighting chance that I had.

Hahnemann's closing is a symptom of the larger financial and operational issues affecting hospitals nationwide. On average, in recent years, there have been 30 hospital closures in rural and urban annually; and this seems to be a trend with no end in sight. Meanwhile, hundreds of shiny, high-tech medical centers have opened in more affluent surrounding suburbs to cater to the rich in areas such as the Main Line.

It all begs the question of what health care really is and what we believe about it. Is it a basic human right, as we believe in Put People First! PA? Or is it a privilege for those who can afford it? Is it a commodity to be bought, sold, and traded by for-profit companies and investors more concerned with gentrification and building luxury condos for the rich than saving human lives? Help us secure care for all, stop the closure of more safety net hospitals and prevent needless deaths because every life matters.

# RIP Medical Debt

by Nijmie Dzurinko

Did you know that some scholars believe that Jesus died for our debt, not our sins? According to economist Michael Hudson, the word for sin and debt is the same in almost every language. He and other scholars like the Rev. Dr. Liz Theoharis assert that the Bible is about economics, not the distorted moral narrative of Christian nationalism we have been taught to believe. Jesus believed in debt jubilee, the practice of canceling all debts every seven years. He was against the exploitation of the poor by the rich, which is why he was such a threat to the state, and he was crucified, a punishment for political dissidents.

Over two thousand years later, medical debt is one of the leading causes of homelessness in the U.S. today.

Dealing with a chronic illness is bad enough, without worrying about losing your house! The stress of debt and dealing with insurance companies and bill collectors makes health conditions worse. In 2018, the American Journal of Medicine reported that almost half of cancer patients drain their life's assets within two years and are almost three times as likely to file for bankruptcy than those without cancer, which puts them at risk for early death.

When the fundraising team of Put People First! PA found out about RIP Medical Debt, we envisioned starting a medical debt jubilee campaign. We saw that various individuals and groups had worked with RIP Medical Debt to raise money to cancel medical debt in the past, but usually not organizing groups, so we had to conduct our campaign differently.

Purchase Date:  
August 2019

RIP MEDICAL DEBT

Put People First Medical Debt Purchase Report

State	County	Debtors	Amount abolished	Avg abolished
PA	Allegheny	353	\$462,081.28	\$1,309.01
PA	Armstrong	11	\$52,064.19	\$4,733.11
PA	Beaver	54	\$115,975.42	\$2,147.69
PA	Butler	52	\$57,298.54	\$1,101.90
PA	Clarion	7	\$4,674.89	\$667.84
PA	Crawford	33	\$52,740.95	\$1,598.21
PA	Erie	99	\$239,409.99	\$2,418.28
PA	Fayette	30	\$64,697.85	\$2,156.60
PA	Forest	1	\$347.00	\$347.00
PA	Greene	22	\$36,864.93	\$1,675.68
PA	Indiana	31	\$56,876.33	\$1,834.72
PA	Jefferson	13	\$3,989.34	\$306.87
PA	Lawrence	32	\$29,775.64	\$930.49
PA	Mercer	39	\$41,361.68	\$1,060.56
PA	Venango	14	\$20,815.67	\$1,486.83
PA	Warren	20	\$34,512.65	\$1,725.63
PA	Washington	73	\$83,614.27	\$1,145.40
PA	Westmoreland	98	\$244,997.74	\$2,499.98
<b>Totals</b>		<b>982</b>	<b>\$1,602,098.36</b>	<b>\$1,631.46</b>

Pictured: report from the first round of debt purchased through Put People First! PA's Medical Debt Jubilee campaign

RIP Medical Debt uses donations to purchase bundled medical debt portfolios that have gone through collection agencies for months or years. Using third-party credit data providers, it targets debt incurred by people facing financial hardship, and then forgives it. For every \$1 dollar raised, \$100 in medical debt is abolished.

The great thing about working with RIP Medical Debt is that they are experts at purchasing debt and they handle the fundraising platform. They helped us identify a set of counties in PA situated right next to each other with debt available for purchase exceeding \$1.5 million. That is the minimum amount of debt they need to conduct a campaign, meaning that we were responsible for raising at least \$15,000 over the course of four months. (Continued on pg 13)

## RIP Medical Debt Cont'd

There are three things about OUR Medical Debt Jubilee campaign that made it unique:

- We framed the campaign in a political way: as a call for debt jubilee and the universal human right to healthcare, not merely as a charity campaign. Everywhere we talked about the campaign we emphasized that we were raising funds to cancel debt because we don't believe in a healthcare system based on profit. Following in the footsteps of Jesus the revolutionary, we seek to abolish the very mechanisms by which people are forced into medical debt in the first place.
- We used the Medical Debt campaign as a place for leadership development and developing the clarity, competence, commitment and connection of our own members. Just as everything we do we do to develop leaders, the same with this campaign.
- We ensured that everyone who has their debt cancelled through the process has an opportunity to find out about and join Put People First! PA. We are about organizing and building power among the 140 million poor and dispossessed people in the U.S. today, millions of whom are suffering with medical debt. Every person whose debt is abolished gets a letter introducing them to Put People First! PA and inviting them to join or start a Healthcare Rights Committee.

Ultimately we raised over \$16,000 and abolished medical debt for individuals in 20 counties in Western and Central PA who make less than 2 times the federal poverty level, have a debt that is 5% or more of their annual income, or who have already declared bankruptcy. Over 1000 households saw debt relief through our campaign and thereby learned that they are not alone with their struggle, that people are fighting back, and that they can join our ranks.



## Member Reflection: Nathaniel Warren

by Nathaniel Warren

The first time I heard of Put People First! PA was when the Lancaster HRC began organizing around the closing of St. Joseph's Hospital. At the time I couldn't participate much, but I started to talk with members and helped put up posters about the action. About half a year later I was finally able to go to a PPF-PA action, and that's when I started to get more involved. I began attending meetings and went to the Leadership Institute in York. The community is what has kept me.

Lately I've continued to take on more roles within PPF-PA - I've joined the community care team, and I helped keep our group together during our recent Medicaid March on Penn Medicine Lancaster General Hospital. Life still gets in the way more than I would like it too, but when we talk about a movement of the working class, it's more than a platitude. I know I have a place here and will continue to be more and more involved in the movement.

# Dispatches from the UK

by Phillip

My name is Philip. I have had the privilege of visiting the US several times over the last few years. Two times on a J1 visa to work over the summer and another for a shorter but still sweet visit. I struggle to stay away: the wide open spaces, impressive vistas but mostly importantly, the inherent warmth of the people I've met in my time there. I have been welcomed, befriended and loved. That spirit stays with me, even after the plane ride home.

I have also been very lucky, I was born in the UK. I was born prematurely, c-sectioned. The intensive care unit being the first surroundings I became familiar with. I got better, thanks to the diligent work of the hospital staff looking after me and despite a traumatic start, my mother and father got to take me home. They could start their life with me, unburdened by worries of payments and costs.

Both my father and I have been rushed to hospital at least once in our lifetimes since then and have left healed and healthier with no bill attached to our treatment. My mother has recently had procedures to help with her vision as she grows older. All without fear of how we'd find the funds to pay. I have lived a life, grown up to become an adult knowing nothing else but universal healthcare in the National Health System (NHS).

I am lucky. I have loved ones in the U.S. whose debts get bigger and bigger with each treatment, people who I've met who are almost afraid to get sick because of the cost incurred, friends who have suffered because their medication has been switched to something cheaper. I don't know why it has to be this way.

Well actually, I do because we live in a world, in a system where profit is the goal above everything else - even our own lives. I'm sure you've heard the horror stories about the NHS: the waiting times, the care coverage. The NHS is in crisis, they say.

Every winter, on the loop, for over a decade. This is because providing a basic level of healthcare for all isn't profitable for the powers that be. For years now, our health service has been undermined, sold off and smeared. The health service that meant I am here today, alive.

Under a private system, my birth and it's complications could've cost my parents up to 23,000 pounds. That's 30,000 dollars. Money they just wouldn't have had. The NHS isn't perfect, I'm not here to tell you it is. A universal healthcare system is always going to be a struggle in the society we live in but the benefit to an average person, the lives saved and prolonged with it in place far outweigh the frustrations of sitting in a waiting-room chair a while. Something that still happens under the current US system despite privatization.

Most people in the US pay into work-based health insurance, taking about 20% of their earnings. In the UK, we pay 13% into a host of benefits and assistance services including disability allowance and unemployment. The NHS is just a small fraction of that. Let's be generous and say it's 5% of the money I currently earn, that's just under 11 pound a month... 14 dollars. A quick run to Wal-Mart. You could have this too, you just need to make yourself heard, be so loud they can't ignore you.

Put People First! PA believes that healthcare is a human right, just like me. They fight for universal healthcare, to support the poor and dispossessed who cannot afford increasingly expensive private insurances. I have U.S. American people that I love and I don't want to see them suffer anymore. Their lives and their health are priceless to me.

I don't want to come across as preaching, I just want you to consider there is an alternative. You don't need to spend ridiculous money on medicines, you don't need to worry about whether or not to call an ambulance. There is an alternative, we just have to fight for it.

# Put People First! PA's Demand for a Public Healthcare Advocate

by the Campaign Team

## What is a Public Healthcare Advocate?

A public advocate (sometimes called an ombudsman) is an appointed public official who helps protect the people against abuse by private and public powers. In our proposal, a Public Healthcare Advocate would manage an office whose whole staff would protect people's rights in the healthcare system in Pennsylvania.

## What would a Public Healthcare Advocate do?

The Office of the Public Healthcare Advocate would play three main roles:

1. Provide direct assistance to people who are struggling to get healthcare, including assistance enrolling in insurance, getting coverage, challenging denied insurance claims, and negotiating bills from medical providers. This assistance would return millions of dollars in unpaid insurance claims from insurance companies to patients every year.
2. Work with community groups (including Put People First! PA) and public agencies to educate the public on our healthcare rights, focusing especially on reaching poor and dispossessed communities who are most frequently denied their rights.
3. Work with the governor, legislators, and public agencies to report on how the health insurance system is and isn't working for people, advocate for patients, and provide recommendations to lawmakers to improve policies and practices.

## Who would a Public Healthcare Advocate serve?

The Office of the Public Healthcare Advocate would serve all residents, no exceptions. That includes people on all forms of private and public health insurance (insurance through employers, ACA plans, Medicaid/Welfare, Medicare, workers' comp, the VA, etc.), people who are uninsured, and people who are undocumented and people who are in prison.

## Are there effective Public Healthcare Advocates in other places?

Public advocates are a highly effective, proven model for ensuring accountability and transparency in both government and corporations as long as they are given sufficient powers and funding and as long as they remain politically independent. Pennsylvania already has public advocates for long-term care, utilities, and employment and housing discrimination. Several other states have public advocates who hold both private insurance companies and public insurance programs accountable. Connecticut's Office of the Healthcare Advocate is an especially effective model because it has a) strong powers to assist residents and report on healthcare injustices, b) guaranteed annual funding from a tax on insurance companies, and c) is insulated from political attacks by an independent advisory board and by being an appointed, not elected, position. Our proposal is largely based off of Connecticut's model, but we're also adapting it in some important ways, such as by designing our proposal to more explicitly serve people on Medicaid and people who are completely uninsured.

### City Council endorses health care advocate for Pennsylvania

TIM STUHLDOREHER | Staff Writer Apr 10, 2019



## Put People First! PA's Demand for a Public Healthcare Advocate Cont'd



### How would we organize to get a Public Healthcare Advocate in Pennsylvania?

Our goal is to get the State Legislature and the governor to pass a law creating a Public Healthcare Advocate. We anticipate that it will take us around two years to win this goal. Once a law is passed, ideally the Public Healthcare Advocate would be appointed through a transparent process in which a Community Advisory Committee would submit a list of candidates to the governor, the governor would nominate a candidate from the list, and the Legislature would vote to approve and appoint the governor's nomination.

Creating the Office through legislation (rather than an executive order by the governor) will allow us to protect the Public Healthcare

Advocate from political attacks. It will allow us to designate guaranteed annual funding for the Advocate and hold the next governor accountable to maintaining the position. This means that the ultimate decision makers in our campaign for a Public Healthcare Advocate are state legislators and the governor. We need to pressure them directly, and we also need to organize individuals and organizations who have influence over state legislators and the Governor, including staff in state agencies and our strategic partners.

### How would we make sure the Public Healthcare Advocate is accountable to the people and not to private profiteers?

Whether a public advocate can be strong and independent depends on how much power we build to create strong legislation. Our legislation would need to a) provide adequate, guaranteed funding that is protected from cuts in future years and b) build in accountability mechanisms like a community advisory board, a transparent appointment process, and independence from elections to make sure that the Office isn't captured by the insurance industry or swept up in partisan fighting. The Campaign Team will coordinate us to identify which exact accountability mechanisms we want to make sure are included in the legislation.

Ultimately, in order to ensure that the legislation and the Advocate are as strong and independent as possible, we need to be as strong and independent as possible so we can push legislators and the governor to pass a bill that meets our demands without being watered down. And if and when we win and pass legislation, we need to stay active and organized to make sure the Advocate remains strong and independent and continues to meet our needs over time.

### How does campaign for a Public Healthcare Advocate connect to our other strategies and help build our power?

An Office of the Public Healthcare Advocate would directly help our class not only by assisting people to get healthcare and get their medical bills paid, but also by building more accountability, transparency, equity, and participation into Pennsylvania's healthcare system. Organizing for a Public Healthcare Advocate is an opportunity to find our people, build our base, grow our Healthcare Rights Committees, develop our leadership, tell our stories, challenge profiteers, hold power-holders accountable, and deepen our strategic partnerships with our allies.

# The Powerfull vs. The Powerless

by Rich Burrill

"I can speak about the world in a way that is reflective of my life and my community. I don't have to calibrate my speech. I don't have to calibrate how I look. I don't have to calibrate how I walk to make other people feel a certain way. I have that right." - Author Ta-Nehisi Coates

It is obvious that the two major political parties in this country have no interest in the powerless: the homeless, the poor, and the working class overall. The Republicans have always been supportive of the wealthy business owners and huge corporations. Since Donald Trump was elected president, all of his appointees have been members of the rich 1%. All of his actions have benefited the greedy rich to the detriment of the rest of us. His party continues to support him. It is as if he has become the CEO of what could be called "the United States, Inc."

The Democrats, who used to be called "the party of the people" for many years, are also in favor of the moneyed class. All we need to do is watch the ridiculous Democratic debates on corporate-owned networks to hear what the candidates are asked by talking heads and their answers to understand this. Most of the candidates say nothing about the poor or the working class and how they plan to help us.

Over one hundred million eligible voters stayed home in 2016. Most of them feeling that it wasn't worth the gas money to vote for people who would run a government that does nothing for them. Many of these people never vote.

Both major parties focus on getting money from the rich to finance their campaigns. They know that the homeless can't vote without a fixed address. They believe it's not worth trying to convince the poor to vote for them. But that is exactly where they should go.

Members of Put People First! PA do that by lots of door knocking, meeting folks where they live, and listening to their stories. Some will join us to help build our base and our power, the power of the people.

In the past, it's been people who have organized to accomplish goals, e.g. the many women who advocated for the right to vote and finally got it in a Constitutional Amendment in 1919; and those folks who worked for civil rights, are just two examples.

Maryanne Williamson, a 2020 Democratic presidential candidate who was largely discounted said, "We the people are supposed to have the power, not the military-industrial complex. The Trump phenomenon won't be defeated by us doing the same old, same old. We're the people, and we're here! We can do it. The government works for us."

The government doesn't do it, the people do. Yes, it's a long struggle, but to accomplish our goals, we need to build power by meeting the people where they are.



# Lessons from the Popular Education Project's Summer School of Resistance 2019

by the delegation to the Political Education Project (PEP) school with support from the Political Education and Leadership Development team

For three weeks this summer, Kiki, Tammy, Hope and Jae attended the Popular Education Project's Summer School of Resistance as the delegation from Put People First! PA. The school was held in North Carolina, and it brought together about 40 students from organizations around the country who work on different fronts of struggle for our class, like immigration, cultural work, wages, housing, health care and more..

Each day included formal classes and material to study outside of class, on history, philosophy, theory and culture related to our work of organizing our base in struggle for our human rights. An important part of the pedagogy was the organization of the school, with students divided into base groups which were responsible for the various tasks of running the school, called militant work. This included: cleaning and maintaining the space, translation, cultural work, supporting teachers, facilitating debate, etc.

Our PPF delegation deeply experienced the struggle of the school, and came away with some key lessons:

- **“The Ruling Ideas are the Ideas of the Ruling Class”** The people who profit off of our poverty control the story about why that system exists, and we have to struggle to understand the truth so that we can build a radically better, entirely different system.
- **Discipline and study are vital to our work.** Our theory and practice must be built upon each other. If we want to win we are always striving to be smarter and stronger.



- **We must combat individualism.** Through shared militant work, organizational structures that ensure collectivity, learning to engage in feedback and self-reflection.
- **Our struggle in the U.S. is bound up with the liberation of the working class across the world.** The war economy and U.S. imperialism exploit and oppress the poor at home and abroad. We know we have a common enemy that uses us as pawns.
- **A strength of the ruling class is divide and conquer politics.** We have to develop class consciousness and learn to not see each other as the enemy. Some very hard differences came up at the school around race and levels of education.
- **Healthcare is a major weakness of the ruling class.** They have no good defense for the for-profit healthcare system that is killing us. All sectors of the working class are affected by it, so we can unite around this struggle.
- **Organization is the strength of the working class.** We are learning to powerfully show up for each other in collectivity. We struggle and heal together and love each other.

# Reflecting on the first Grassroots Organizing Exchange!

Edited by Tammy Rojas

July 12-15, 2019 Put People First! PA hosted 30 people from 10 States for a base-building exchange in collaboration with the Popular Education Project. People came from Alabama, Mississippi, Texas, Louisiana, Kansas, North Carolina, Massachusetts, Vermont, New Jersey and New York to see the work we are doing in Pennsylvania. The following are quotes from participants:



*"We hosted a doorknocking, a Leadership Across Difference training, a speak-out at Hahnemann Hospital, and several meals to get to know our partners in the Poor People's Campaign. I'm so proud of us for the new level of organization and collective movement we accomplished during the exchange! Forward together!" - Jae Hubay, Put People First! PA*

*"I have immediately begun to use a lot of the lessons that I have brought back from the exchange in my organizing efforts with the Vermont Workers Center. From planning strategies and delegation of responsibility to lessons in struggle and social skills, there was so much I was fortunate enough to have experienced. This type of organizational exchange is a powerful learning tool we must continue to use." - Volney, Vermont Workers Center*

## Put People First! PA Leaders Reflect on the Poor People's Campaign Moral Action Congress

Monday June 17 through Wednesday June 19, 2019, 80 people ages 14-70 from Pennsylvania participated in events at the Poor People's Moral Action Congress at Trinity Washington University in DC. The Congress brought together 1000 poor and dispossessed people and faith leaders from 40 states and the District of Columbia who are leading the Poor People's Campaign: A National Call for Moral Revival. The three day event consisted of a Presidential Public Forum, a full day of informative workshops and a hearing before the National budget committee, where we introduced the Poor People's Campaign Moral Budget. Here are reflections from the participants:

*"The Moral Action Congress was an amazing show of unity. I don't think there was any gathering of working class people from all over the country as big or significant. Pennsylvania's influence over the event was massive. It's evidence that our movement is growing and we will win." - Kiki, Johnstown, PA*

*"Being asked to testify in front of the house budget committee was a huge deal. It felt so surprising to be face to face with people in power, having them listen to us for once. Getting to tell my story about the poverty and economic issues of Johnstown, Pennsylvania was sad yet electrifying. Being included among such strong leaders from other states especially Rev. Dr. Barber, and Rev. Dr. Liz Theoharis made me feel like I do have a say in politics." - Savannah, Johnstown, PA*

# Indigenous Voices of the Poor People's Campaign

by Jennina Rose Gorman aka Katsitsioasta and Rachel Ishikawa



Rachel: Could just start by saying a little intro your name who you are?

Jennina: My name is Jennina Rose Gorman in English and Katsitsioasta in Haudenosaunee, which is my father's language. My father led the first Civil Rights March on Washington for Indigenous People. Dr. King actually became involved with my father and they started writing to each other. Dr. King was killed before my father and him ever got to meet in person.

So when I became involved with Put People First! PA (PPF-PA) and Mr. Willie Baptist came up in front of our Membership Assembly and started talking about the Poor People's Campaign, I lit up. I went running to him and I was like, "Is this the original Poor People's campaign? The one that Dr. King was working on before he was assassinated?" And he was like, "Yes," and I was like, "Sign me up!"

R: Do you feel like the conversation about indigenous people was well incorporated into the conference into the Congress itself?

J: I feel like it's very important for us moving forward to reach out to the indigenous peoples that were on that land prior to colonization and get permission from them before work can really start.

R: Out of this time the "Indigenous Voices of the Poor People's Campaign" was formed. Can you tell me about how that happened?

J: We participated in an Indigenous Sovereignty Workshop. I was so excited to be invited to the table because so much of my life, I've been denied that access to my identity that is native because I don't look the part. What I heard was a lot of individuals feeling that we were underrepresented and some discussion about the place of indigenous people in the Poor People's Campaign.

After that conversation I was talking to national co-chair Rev. Dr. Liz Theoharis who asked me how things were going and I told her that some issues came up that need to be addressed. And we managed to arrange for a special meeting after the Congress was over and I just want to say it is amazing how as a national leader she was so accessible and so willing to listen and learn.

What happened out of that was that I set up a Zoom line called the "Indigenous Voices of the Poor People's Campaign." Any and all indigenous people who are involved in the Campaign are welcome to participate in it. We meet bi-weekly and at the moment we're going through line-by-line of the Moral Budget and finding what things need to be changed so that they're more inclusive of everyone - not just indigenous people, but really so that everyone feels like it is a welcoming place to be. The goal is to stay connected with each other and to support each other through our struggles and support each other through our work and to share resources so that this doesn't happen again. So the idea is to maintain connection with indigenous people across the country so that we can help each other through this Campaign. **If you want to get involved contact Jennina at [t.s.gorman88@gmail.com](mailto:t.s.gorman88@gmail.com)**

# Lancaster Healthcare Rights Committee

## Timeline: A Roadmap

by Tammy Rojas

The Lancaster Healthcare Rights Committee has come a long way over this past year. We have held bi-monthly Committee meetings, contributed to the work on some of the statewide teams, met with state and local representatives, and made base building and outreach a priority. Through every action we took or event we attended, we grew in our leadership development.



We strengthened our clarity through research, conversations with other Put People First! PA leaders and political education discussions. We were competent in seeing our tasks through, deciding what is a priority and began to sway the narrative around poverty in our community. We have a core group that have become committed to the work and see the importance in making base building, political education and leadership development priorities going forward. Through all of this work we have become a connected group of leaders that support each other through the tough times and memorialize the time we spend together.

### **October/November/December 2018**

- Tammy attended a Popular Education Project event in North Carolina with other leaders.
- Took action over the announcement of the closing of UPMC Pinnacle .
- Tammy spoke at the first PA-PPC Poor People's Hearing

### **January 2019**

- Lancaster HRC leaders attended the HRC Leaders Intensive and Winter Steering Committee Retreat
- 3 leaders took part in the Winter Base Building Intensive Group

### **February 2019**

- Lancaster hosted a "Weekend of Action" and started their "Take Back St. Joseph's" Campaign
- 3 Lancaster HRC leaders participated in University of the Poor Spring 2019 Semester Courses.

### **March 2019**

- Lancaster held a rally outside the Lancaster County Government Center during a polar vortex & proposed a City Resolution for a Public Healthcare Advocate (PHA)
- 3 Lancaster HRC leaders attended the Moral Agenda Announcement and Demand Delivery
- Met with Lt. Governor John Fetterman
- Held a vigil for Antwon Rose

(Continued pg 22)

## Lancaster Healthcare Rights Committee Timeline: A Roadmap Cont'd

### April 2019

- Lancaster City Council to unanimously agree to a City Resolution for a PHA
- Attended the York Leadership Institute
- Lancaster HRC leaders attended the Fundraising Retreat hosted by the Fundraising Team
- Lancaster HRC leaders met with PA state representative Mike Sturla



### May 2019

- "In the Spotlight" article about the Lancaster HRC and the Poor People's Campaign a National Call for Moral Revival
- Lancaster HRC leaders went to Pittsburgh with other PPF-PA leaders to support the striking workers at UPMC in Pittsburgh.
- Matthew attends Mother Jones Leadership Program as a 2019 Mother Jones leader

### June 2019

- Lancaster hosted an action/march from the closed St. Joseph's Hospital to Cedar Lawn
- Robin, Matt & Tammy attended the Poor People's Campaign Moral Action Congress in DC
- As a MJLP Leader, Matt attended a 6 week study on the Poor People's Campaign
- Spoke out at public meeting on the rezoning of the UPMC Pinnacle Lancaster site

### July 2019

- Lancaster HRC took part in a Grassroots organizing exchange
- PPF-PA sends four leaders, from Johnstown, Lancaster and Philly to the PEP Summer School of Resistance
- Anne & Tammy joined the Philly HRC led action on the closure of Hahnemann hospital in Philly
- Lancaster spoke to community about poverty in Lancaster during Peace Fest

### August 2019

- Anne attended the yearly "Healthcare is a Human Right Collaborative" in Portland, Maine
- The Center for Collaborative Engagement with Franklin and Marshall College awarded PPF-PA and the PA-PPC: NCMR a grant for research leading to the production of A Lancaster Audit and Moral Budget
- Lancaster joined F&M professor and students in classes on Social Justice to help bridge the gap between college students and community

### September 2019

- Medicaid March: Lancaster HRC took action on Penn Medicine Lancaster General Hospital
- National Homeless Union Leaders from NC, NY, Mass and CA joined the Lancaster HRC for the Medicaid March then met for a meeting to start a Lancaster Homeless Union to begin the rebuilding of the homeless union movement in Pennsylvania

# Draft PPF-PA Community Care Fund Policy - July 2019

by the Community Care Team

Put People First! PA members struggle daily to meet basic material needs. We choose between paying for prescriptions or our utility bills. We ask ourselves is the priority next month's rent or putting food on the table this month? PPF-PA's Community Care Team is developing a Community Care Fund to support members through challenging times. Here's an excerpt from the DRAFT PPF-PA Community Care Fund Policy. To find out more, contact Farrah at [farrahsamuels@gmail.com](mailto:farrahsamuels@gmail.com).

## Purpose:

The following policy is being developed in accordance with the PPF-PA Community Care Team's Mission of coordinating and providing a system of social support and care to PPF-PA members by...

1. Helping members get through stressful and difficult periods in their lives; and
2. Aiding members in meeting their emotional and material needs.

This policy is intended to articulate a process by which individual PPF-PA members can solicit requests for material support within the organization to help them meet their material needs. Examples of material needs include but are not limited to: rent/ housing payments, utilities assistance, medical bills, and transportation needs. Material support requests are intended to support the needs of recent or current "active" leaders within the organization as described in PPF-PA's leadership development path document. More specifically, **applicants shall have been active in a PPF-PA leadership role for a minimum of 3 months.**

Material support requests should not be regarded as charity but rather as a way of sustaining and advancing leaders within the organization so that they can continue to participate in PPF and make meaningful leadership contributions. In no way, shape or form is Put People First! PA trying to assume the role of a social service provider. Nor do we believe that organizations providing services can or should take the place of the state.

## Short and Long Term Strategies for Establishing a Community Care Fund:

In the short term, material support requests should first be channeled through the local Healthcare Rights Committees or HRCs (by way of the HRC's Community Care Team representatives and/or the HRC coordinators) before being elevated to the statewide Community Care Team. This is designed to build the capacity of local HRCs and to encourage maximum benefit from local relationships and community affiliations and resources. Requests should only be brought to the statewide Community Care Team when it is determined that further promotion and coordination across the organization is necessary to meet the need.

As a longer-term strategy, the PPF-PA Community Care Team is working towards establishing a statewide permanent Community Care Fund that members can draw upon as needed. The PPF-PA Community Care Team is currently identifying individuals outside of PPF-PA who can make significant financial contributions to this fund and share our commitment of supporting and retaining grassroots movement leaders. Once a permanent fund is established, the statewide PPF-PA Community Care Team may assume responsibility for the intake, processing and tracking of material support requests from members across all HRCs.



# Sing, People, Sing! Which Side Are You On?

by Jacob Butterly

Within Put People First! PA, singing is a growing practice of our organization that deepens our collectivity and solidarity with one another. As we struggle together to end the systems of oppression that we live under, we are creating a collective identity of our class that is rooted in the struggle, and as with all identities, a culture that will reflect it. It warrants our study and attention to think and be intentional about the art and the music that colors this culture as much as the norms and practices we're making a part of it. And as we draw on a long history of lessons and experiences from the struggles of poor folk who have come before us, we too have a long history of music and art to look back on.



I've had the good fortune to sing 'Which Side Are You On' quite a few times now. Probably the most memorable was during the 40 Days of Action, in 2018 on the relaunch of the PPC:NCMR. We chose it for our moral-fusion direct action during the 5th week, focused on the 'Everybody's Got A Right To Live,' week - the right to unionize, to living wage jobs, income and housing. We had to sing for almost forty minutes, thundering through the gaudy halls of the state capitol building, as the cops were hesitant to make arrests that week. But as we hollered on and on, drowning out any other noise, the line of division between us and them became clearer and clearer. As Florence Reese herself said on many occasions, the gun-thugs and scabs were workers too - and they knew damned well which side they chose.

Florence understood that there was a war on workers, a war on the poor - she saw it firsthand in the hollars of Harlan County, Kentucky. Her husband was a coal miner, Sam Reece - a good union man and a lead organizer throughout his life, and her father and grandfather had both been coal miners. They knew firsthand the horrors of the company bosses, the mines, and the poverty that was forced upon them. From 1931-1939, through the Depression, Harlan County erupted in violence as the United Mine Workers came to assist the miners in their struggle when the company bosses cut their wages. At the height, almost 6,000 men idled on strike, with barely a thousand scabbing - but hundreds of outside gun-thugs were hired on by the company to protect them, each deputized by Sheriff J.H. Blair - who informed them to act with impunity to harass, beat and terrorize the striking men and their families.

Just as the UMW was setting in, in 1931, Sam stepped up to be one of the first major local organizers. The company ordered J.H. Blair himself, along with a number of deputies to raid Sam's home and have him killed or beaten so badly he wished he had been. Thankfully, Sam was warned ahead of time, but Florence and their children were at home unawares when Blair and his men broke down the door and ransacked the house, striking her and terrorizing the children.

## Sing, People, Sing! Which Side Are You On? Cont'd

When they left, she went inside and found the calendar they had ripped down off the wall, on which she wrote the titular song. Sam may have lived, but many other men died in confrontations with the gun-thugs and J.H. Blair, including Harry Simms. After the National Guard was called in, which broke up the long-standing strike and killed dozens of men, the UMW abandoned Harlan county and the National Miner's Union (the NMU, here out) moved in. Openly a part of the Young Communist League, they revitalized the strikes and established robust soup kitchens and aid programs to sustain the strikers. Harry Simms was only twenty years old when a deputy murdered him in broad daylight. The clergy in the hollar turned on the strikers too, denouncing the NMU as anti-religious communists and the Red Cross, which at this point had been neutral in the affair, began to exclusively provide aid to the scabs.

The song survived the strikes and the war in Harlan County, as did the Reeces. Florence would end up traveling and singing as a poet and folksinger, recounting the lessons from the strike and highlighting that there is no such thing as neutral in the war between workers and capital.

*"My songs always goes to the underdog – to the worker. I'm one of them and I feel like I've got to be with them. There's no such thing as neutral. You have to be on one side or the other. Some people say, 'I don't take sides – I'm neutral.' There's no such thing. In your mind you're on one side or the other. In Harlan County there wasn't no neutral. If you wasn't a gun thug, you was a union man. You had to be." -Florence Reese.*

The song has gone through what is colloquially called the "folk process," - a fancy way of saying that folks forgot some of the words after learning it and just wrote up their own verses. If you dig hard enough, you can find all sorts added to it. It's been made into death metal, jazz and everything in between. Here's the words that I fiddled with, which frankly I changed to make it focused less on being about chiding the men into being brave, and more about our class. Learn it and sing out, friends!

### **Which Side Are You On?**

#### **Chorus - repeat after verses**

#### **Which side are you on, ooh?**

#### **Which side are you on? (repeat both lines)**

Come all of you good workers  
Good news to you I'll tell  
Of how the good old union  
Has come in here to dwell.

My daddy was a miner,  
And I'm a miner's child,  
And I'll be with the union  
While out enemies run wild!

Oh workers can you stand it?  
Og tell me how you can?  
Will you be a lousy scab  
Or will you take a stand?

They say in Harlan County  
There are no neutrals there.  
You'll either be in the union  
Or a thug for J.H Blair

My momma was a worker  
She's in the clouds & air  
And when I'm with the union  
I know that she is there

Don't listen to the bosses  
Don't listen to their lives!  
Us poor folk don't have a chance  
Unless we organize!

## Arts & Culture



### I'm on the Side of the Earth

lyrics by John Peacefire

There's so many more of us than there are of them.  
So many of our kin are just born into this mess.

I don't know why the police aren't on our side.  
I don't know why we're not all on the same side.  
I'm on the side of the earth  
I'm on the side of the earth.

There's so many more of us than there are of them.  
So many of our kin are just born into  
This mess and all the things they obsess with  
And they are truly lost

But I'm on the side of the earth  
Livin' on a shoestring income  
I'm on the side of the earth  
Askin' myself how come  
How come the police aren't on our side?  
How come we're not all on the same side?  
I'm on the side of the earth

There's so many more of us than there are of them  
So many of our kin are just born into this mess  
So many things left unaddressed by our education  
And I really realized

I wish there were no sides  
When you got rising coastal city tides  
// johnpeacefire1.bandcamp.com \\

### Today's world

by Jennina Rose Gorman

Today's world was turned upside down and I  
found out on Facebook.

Today I learned I'd never again "See you  
around"

So bright, talented, kind- you had "what it  
took"

Taken from this world too early, you were  
supposed to do so much more....

I expected someday to see you on the big  
screen, you would've dazzled us all

You are the second that I went to college  
with, that left, shaking me to my core

It wasn't supposed to be YOU! You were the  
best of us...you weren't supposed to fall.

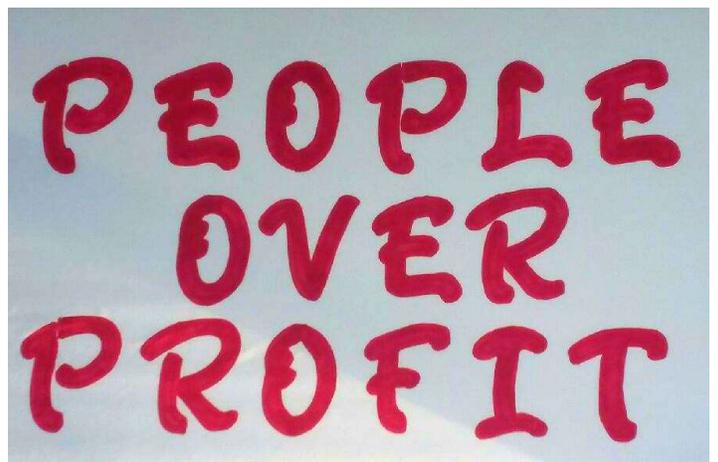
Today I learned I'd never laugh with you  
again, or act with you again, my heart is on  
the floor

I found out on Facebook.

So busy making a living, I've forgotten how to  
LIVE. You had so much talent, you could  
convey so much in a single look....

You are gone too early, you had so much to  
give....

To all my friends near and far, know that I  
love you and support you in every endeavor  
Please make the time to check on your  
friends often, even those who seem destined  
for greatness - maybe ESPECIALLY them...  
And forgive my clumsy tribute, I am not that  
clever. -



## In Memory Of

### Felicia Lance

by LaMetta Davis

Remember Felicia Lance with smiles for all the joy through all the years. She came to Put People First! PA's Leadership Institute and the Membership Assembly last year. She was about to become a regular member. I bless the memories within my heart because I can't see or hear her. I know she is nere though. She parted this Earth, but she will forever be in my heart.



### Willie Handley

by Ben Fiorillo

Willie Handley was a beloved member of our PPF-PA family. He made you feel good when you talked to him; like you were right where you were supposed to be. Willie was an elder who chose to be hopeful, when he could have been cynical. He was a teacher who used his own experiences of racism and poverty to help us understand history and shed new light on our struggle today. Willie moved us, with a gentle spirit and fierce words. The following is an excerpt from a speech he gave last year:

*"Most people today in this society, in the information age, don't have no feelings. I don't want you to leave here unless you feel me. If you feel what I feel, then you'll be able to pass it on to someone else...Dr. King was talking about 40 million poor people in America. Right now, we have possibly 140 million poor people in America today. The bad part of that, they don't know they're poor. Our job is to bring them into the leadership here...With Artificial Intelligence there'll be 240 million people by 2040 out of a job. Unless we change some things there's not gonna be no jobs for America's poor people. There'll be no white jobs, no Black jobs...I have a dream that I want 5 million people, and we're gonna go to Washington and shut it down. Once we shut it down, no one is going to be able to move. They gonna call Reverend Barber, they gonna call the people in the different organizations. They gonna ask them what they need... I want you to be able to go out here and next time I see, my question is to you, have you recruited anybody for the march? Every one of you is a soldier and we need more soldiers like you." - Willie Handley*

The Keystone is edited by the Put People First! PA Media and Communications Team. Interested in being a part of the process? Contact Tammy at [tammyrojas1977@gmail.com](mailto:tammyrojas1977@gmail.com)



### **A co-created M&C Poem**

We live in a world of contradictions the  
wealthy have more and more the poor less  
and less how did we get into this mess?  
We grow together in empowerment and  
solidarity to change narratives;  
Scary follow up calls  
New HRCs coming together, trusting each  
other  
We learn from great leaders how to  
harness our rage  
Strong connections made from  
organizations and people across the  
country  
Healthcare is a human right and were not  
going down without a fight!



## **Stay in touch!**

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