

Berkeley Free Clinic at 50

Mutual Aid Meets Health Care

Finn Black

2019

The Berkeley Free Clinic (BFC) is an all-volunteer, worker-owned collective that provides free medical and dental care, peer counseling, and information in Berkeley, Calif. We were founded in May 1969 on the ideas that healthcare is a human right, that professional licensing is not required to provide good medical care, and that medicine should not alienate people from their bodies. [See “Berkeley USA, 1969,” FE 81, June 12–25, 1969]

Unlike most free clinics, which are usually run by medical schools and staffed by physicians, our services are provided by lay people whom we train in basic clinical skills. Although we do not provide comprehensive medical care, we are able to meet the needs of people in our community who would otherwise be forced to go to the emergency room for simple problems like rashes and coughs.

Our model of care dismantles the power dynamics in medicine in which professionals serve as knowledge holders. We work to demystify healthcare, involving clients in learning about their bodies and helping them make informed decisions. As we turn 50, we’ve been reflecting on our history, values, and how to stay strong and relevant in a gentrified Berkeley that looks very different from the Berkeley of 1969.

At any given time, the BFC consists of roughly 250 members organized into 12 sections which specialize in providing direct services or logistics. Sections conduct their own recruitment, training, and decision making processes while drawing on the clinic’s physical and financial resources to provide services. Issues that impact multiple sections are handled at all-clinic meetings, which make decisions by majority vote.

Since we’re a large collective, change at the level of the entire clinic happens slowly, but the system of small sections makes it possible to implement projects without having to overcome the inertia of a large collective. The majority of our funding comes from individual donors and private grants, which gives us the freedom to use our money the way we choose.

Since our services are free, we do not deal with insurance companies, freeing us from certain government regulations. For example, we are not required to call the cops if someone reports being assaulted. We see roughly



Volunteers and trainees in front of the Berkeley Free Clinic.

4,000 patients a year with an annual budget of about \$400,000, and the majority of those people are houseless, undocumented, and/or uninsured.

We were founded on May 25, 1969 in response to the People's Park riots, when a group of street medics set up an emergency field hospital in a local elementary school. Most of our first members were Vietnam War veterans who had been trained as combat medics and gotten involved in the anti-war movement upon returning home.

Although the BFC began as a street medic response to police brutality, we soon began providing general medical care to people in Berkeley who otherwise lacked access. Initially, we provided 24 hour urgent and emergency care along with an evening drop-in clinic. There was a peer counseling program called Radical Approaches to Psychiatry and a team that provided 24 hour response to psychiatric emergencies, drug overdoses, and bad acid trips. We had a network of dentists who would see patients for free, a drug-information hotline, and an information and referrals system that linked new arrivals to Berkeley with places to crash.

In the first two years of its existence, power and knowledge within the BFC was held by military veterans.

New members had to individually apprentice themselves to a medic, which led to an exclusive structure. Even though the clinic was in theory anti-authoritarian, individuals who could make the biggest time commitments gained the most institutional knowledge and authority, even if that authority wasn't formally acknowledged.

Throughout our history, a challenge of being a non-hierarchical collective is that when hierarchy does manifest itself, it doesn't tend to happen in a way that is consensual and accountable.

In 1970, however, a group of radical feminists approached the clinic to start a women's reproductive health night. This group, which at its peak was 120 members strong, brought a critical analysis of gender and power dynamics to the clinic and pushed for collective decision making and an end to the apprenticeship system. Most of the original military trained members left as a result of these changes and the clinic became much easier to get involved with.

In the 1980s, the BFC began to shrink. Prior to then, the clinic received government funding, but Reagan's budget cuts caused a financial crisis that forced an elimination of the night shifts. Reductions in welfare programs also made it harder for people to drop out of the workforce and devote their time to unpaid projects.

The clinic continued to cut back on services through the 1990s, when daytime and afternoon shifts disappeared and the clinic adopted its current evening and weekend schedule. In 2005, word spread that BFC alumni often went on to attend top medical schools. Pre-medical students at U.C. Berkeley began joining to gain clinical experience and now make up over half of our volunteer applicants. Although pre-medical and anarchist are not mutually exclusive categories, we now get more applications from folks who aren't specifically interested in anarchist projects.

The high proportion of students led to higher turnover, and thus a loss of institutional memory and a constant need to train more volunteers. Due to higher turnover, the BFC entered a period where many sections were in survival mode, struggling to train enough members to remain sustainable.

As we near our 50th Anniversary, several things have happened that seem to indicate a new era of revitalization at the clinic. One of these events is U.C. Berkeley's plan to develop People's Park. Seemingly unaware of our history, the university has reached out to BFC several times looking for our support. They asked us to conduct outreach to the unhoused folks in the park, hoping to show that the people they are displacing were offered services.

More insidiously, they offered to give us a space for the clinic in the new development. Although our current building is condemned for demolition and we are unsure of what the future holds, we declined the offer.

The numerous Antifa demonstrations that occurred in Berkeley in 2017 also brought new energy to the clinic. The BFC was born from rioting and fittingly, the need to fight fascists in the streets spurred us to return to our roots as street medics. We made connections with other health workers in the streets, and some joined BFC and brought fresh energy to the clinic.

The past two years have seen the formation of a trans health collective, street medic and overdose prevention workshops, a program to provide outreach medical services at homeless encampments, initiatives to provide mutual aid to sex worker organizations, and a deepening of our connections to other radical organizations in the Bay Area.

One of the beautiful things about being an anarchist collective is that we understand how to survive in the margins and do more with less. Despite the financial challenges of surviving in a gentrified city, the radical imagination is still our most valuable resource and the biggest limit on what we can do is our sense of what is possible.

Our continued existence is contingent not on money but on creative and enthusiastic folks getting involved. If you'd like to learn more about how to join our collective, visit berkeleyfreeclinic.org. We have open information sessions every third Monday at 7:30 pm and are located at 2339 Durant Ave., Berkeley, Calif. 94707.

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