

## 'WE HAVE A DEAL'

Health unions unite to defend job security

**B**.C.'s three health unions launched province-wide co-ordinated action April 27 to underline their determination to implement the employment security agreement with Victoria and health employers.

Although a majority of Health Labour Relations Association members support the deal, the majority fell short of the two-thirds needed to ratify.

In an unprecedented province-wide action, HEU, the B.C. Nurses' Union and the Health Sciences

Association targeted five facilities which opposed the deal for hour-long study sessions.

"Our message to members of the HLRA is to be constructive and creative in their proposals for a solution to this crisis," said HEU secretary-business manager Carmela Allevato. "The agreement has been reached, it is time for it to be implemented."

The memberships of all three unions ratified the deal by overwhelming margins in votes concluded April 20.

"These study sessions give our members a chance to examine the impact of the employers' failure to ratify on health care in their community," said BCNU president Debra McPherson. Many hospitals announced their deficits would be sharply higher without the agreement.

"This deal says waste and inefficiency will not be tolerated," said Maureen Whelan, executive director of the Health Sciences Association. "This is why many administrators have a problem."

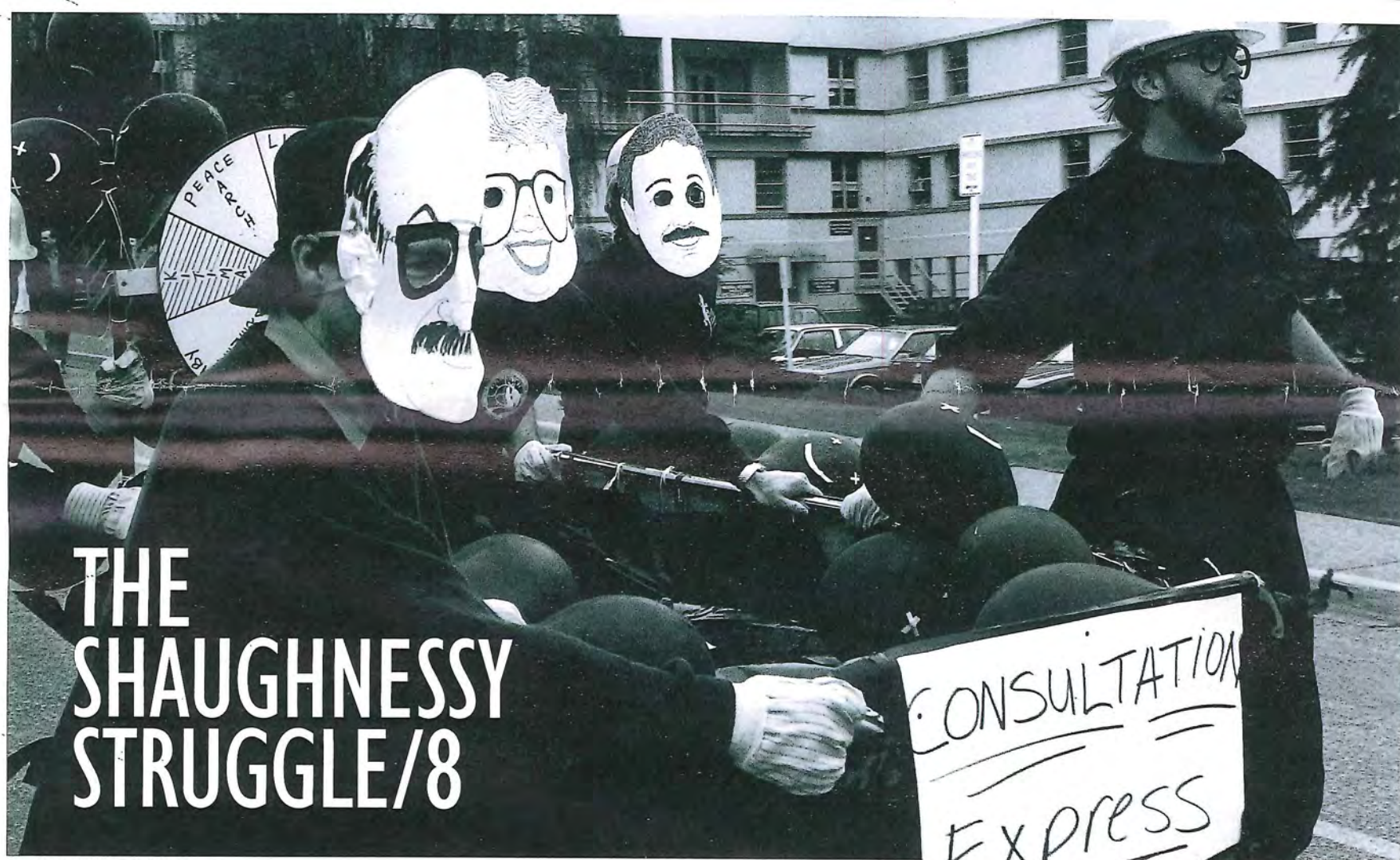
# Guardian



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THE VOICE OF THE HOSPITAL EMPLOYEES' UNION

APRIL/MAY 1993



## THE SHAUGHNESSY STRUGGLE/8

SHAUGHNESSY LOCAL PHOTO



HEU's Maurice Smith rides the Anti-NAFTA Caravan to Ottawa to protest Tory trade policies.

PAGE 4

## Stepping down

HEU president Bill Macdonald has been forced to step down because of ill health. His farewell note to union members on PAGE 3



HEU members and their issues are front and centre on Working TV, a new cable television program which premieres this month. Schedule details PAGE 16.



## Health employers must do the right thing: ratify the deal

**C**RITICS called it a sweetheart deal between unions and government.

Now it is seen as the only way out of large deficits for many hospitals around the province. Hospital boards are finally realizing that voting against the job security agreement was a bad idea.

HEU calculations indicate that failure of the deal would cost the health care system an additional \$30 million per year for each of the next two years. That is a total of \$60 million to be cut from an already overburdened system.

That would mean more cuts to services, and more jobs lost.

But we will not let that happen. HEU and the other health care unions are committed to maintaining the deal as it is written, and we are willing to talk about ways to resolve the current deadlock.

We will not bargain concessions. We will continue to demand that government enforce the deal. We



## COMMENT

by CARMELA ALLEVATO

will ensure that the narrow interests of administrators and boards do not damage the quality of healthcare in B.C.

A hospital board that rejects a job security deal designed to treat workers fairly, help to implement health care restructuring and save money, has no right to continue to make decisions at all.

The ministry of health has the power to dismiss boards, which it did only recently in Vernon and at Shaughnessy Hospital.

It is no coincidence that hospital boards have rejected a deal which would finally take a hard look at management waste and inefficiency.

Both government and employers know how serious we are about protecting the terms of this deal.

Recent study sessions at selected facilities have shown employers that our members are committed and that the three unions are united. Health Sciences Association, the B.C. Nurses' Union and HEU are working together with unprecedented success to build support for the agreement within communities.

I have every confidence that the union membership will succeed.

The decision of HEU president Bill Macdonald to step down for reasons of ill health saddened the Provincial Executive, as I know it will all HEU members who had the opportunity to work with Bill.

In a special message sent after Bill advised us of his decision, the executive expressed appreciation for his work, noting that his "guidance, counsel, extensive knowledge and historical background of HEU have been instrumental in helping the organization to become the most progressive, grass roots labour organization in B.C."

We'll review Bill's trade union career and the impact of his leadership in our next issue of *The Guardian*.

## Guardian

"In humble dedication to all those who toil to live."

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## Letters

The Guardian welcomes letters to the editor. Please be brief.  
Write to 2006 W. 10th Ave., Vancouver V6J 4P5.

### MP commends HEU for stand on gays and lesbians

I am writing to congratulate you on the outstanding coverage of equality issues affecting lesbians and gay men in the November/December 1992 issue of *The Guardian*. Too often these important issues are ignored and those voices trying to raise them are silenced and marginalized. It is great to see that the HEU is providing such strong and courageous leadership in fighting homophobia both at the workplace and more generally in our society and in our health care system. Best wishes to the HEU Lesbian and Gay Committee. Please do not hesitate to contact me if I can be of assistance in any way.

SVEND J. ROBINSON,  
MP, Burnaby-Kingsway

### Ponderosa workers say thanks

The members of the Hospital Employees' Union, Ponderosa local, wish to pass on our sincere thanks to the Provincial Executive, as well as individual members of the HEU throughout the province.



The fact that, in essence, no concessions were granted to CCERA to achieve a settlement after a long strike sends a strong message to this organization province-wide.

Perhaps most importantly, our members came to realize that we would not be allowed to drift apart from our sisters and brothers in other locals - something Ponderosa administrator George Cheyne, was clearly counting on. The "divide and

conquer" mentality got them nowhere!

Personal thanks, and our warm wishes, must go to our local representative, Judi Verbruggen, who braved snow and ice many times to join us here during many crises. Also negotiator Fred Cuddington, should take a bow: his consistently calm manner must have been extremely irritating to the excitable Mr. Cheyne.

Ponderosa members also frankly acknowledge

the outstanding level of financial support that they received was a key factor in Mr. Cheyne's and CCERA's decision to end this pointless dispute.

CONNIE KOMORI,  
Ponderosa local chair,  
Kamloops

### CASAW welcomes HEU support

We would like to convey to you our appreciation of your generous donation toward our

struggle against Royal Oak Mines Inc.

We realize that this strike has become history in the making and the results of this dispute could very well affect the Canadian labour movement as a whole.

Again, we wish to thank you from the bottom of our hearts, and we know that collectively, the unions of Canada will prove to Peggy Witte and Royal Oak that they will not be the first in Canada to bust a mining union.

HARRY SEETON,  
CASAW local 4 president,  
Yellowknife

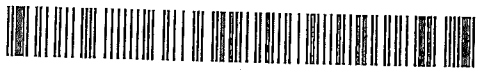
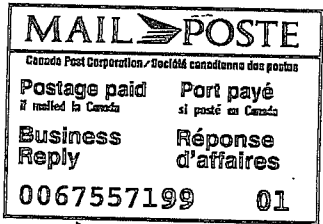




# Calling all LPNs!

The Licensed Practical Nursing Committee of HEU's Provincial Executive needs your help. We're conducting a survey of LPNs in HEU to determine how many are employed as LPNs and how many have been forced to work in other areas of health care. Please take a few minutes to fill in the attached card and mail to HEU. Postage will be paid by HEU.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Employed at (name of employer): \_\_\_\_\_  
Employed as an LPN?: ☐ Yes ☐ No Department: \_\_\_\_\_  
Employed in other work?: ☐ Yes ☐ No Department: \_\_\_\_\_  
License: ☐ Full ☐ Conditional ☐ Unlicensed  
Years employed: \_\_\_\_\_  
Trained at (name of school or facility): \_\_\_\_\_  
Now working: ☐ Full time ☐ Part time ☐ Casual



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# What we're up to

People and events around the HEU. If you have news for us — a retirement, an election, a rally, a vote or whatever — please, let us know.

## Cherington, Deer Lake workers reject rubber cheques

Two of HEU's Lower Mainland locals needed little encouragement to take political action last month when their employer blamed Victoria for his inability to issue payroll cheques.

A bureaucratic foul-up in Victoria April 1 left more than 120 health care facilities around the province without their regular funding to cover the end of March payroll.

It was a minor inconvenience in most facilities, where lines of credit or overdraft protection enabled the employers to carry on.

Not so at Surrey's Cherington Park and Burnaby's Deer Lake Lodge, where the bosses have no credit rating. HEU local members could not obtain their cheques because the bank refused to release them — no money in the employer's account.

After some argument, a Cherington local delegation headed down to MLA Penny Priddy's office to demand action. In Victoria, health ministry officials got on the phone to the employer and to the local bank branch.

By 5 p.m., Cherington local secretary Yvonne Krasey was able to report the problem resolved.

## Cull replies to UBC local demand for abuse probe

When HEU UBC local members became alarmed



**WOMEN'S DAY:** HEU secretary-business manager Carmela Allevato was among speakers in Vancouver March 6 who addressed an International Women's Day rally against the North American Free Trade Agreement.

last fall about their employers' apparent inability to protect staff and patients from sexual abuse by another patient, they demanded action from health minister Elizabeth Cull.

Cull's reply to their September appeal came in mid-March. She declined to appoint an inspector under the Hospital Act, saying she was satisfied that correct procedures were followed "in this case."

The case will be monitored, she said, and hospital employees should be prepared to report incidents "and to be involved in resolving the issues around these incidents."

## Cull promises consultation for hospitals facing "changing role"

When HEU, BCNU and HSA learned from ministry of health sources early in March that 15 hospitals were scheduled

for a "change of role" in 1993, they pressed hard for more information.

The first "change" was the announcement that Shaughnessy Hospital would close. In the wake of that decision, HEU secretary-business manager Carmela Allevato challenged health minister Elizabeth Cull to name the rest.

On March 10, Cull declared that no more hospitals would close. "I want to assure workers and the general public," she said, "that no other hospitals are closing and that no change in role for any hospital will take place without extensive consultation with everyone involved."

## Royal Jubilee, Cumberland locals launch newsletters

Two of HEU's Vancouver Island locals have launched newsletters this

Cont. on page 4



**WHERE'S KIM:** Vancouver MP Kim Campbell wasn't available early in March when members of the Vancouver and District Labour Council, including (second from left) Sheila Rowsell of G.F. Strong local, showed up to protest Tory UI cuts.

# Bill Macdonald steps down as president, Muzin assumes post

Bill Macdonald announced April 15 that he is resigning as president of HEU for health reasons after nine years at the head of B.C.'s biggest health care union.

He will be succeeded by HEU first vice-president Fred Muzin, a biomedical technologist from the St. Paul's local in Vancouver. Muzin is serving as acting president until Macdonald's resignation takes effect on July 30.

"Bill Macdonald has steered HEU through the difficult years of Social Credit restraint programs, and some tough bargaining rounds which included two sets of job actions," said HEU secretary-business manager Carmela Allevato.

"Bill's work is culminating with the historic job security agreement with the provincial government that will protect HEU members during the difficult changes that are now taking place in the health care system," Allevato said.

"Perhaps most importantly, Brother Macdonald's legacy to HEU members is a series of changes that has made HEU more democratic than ever," she said.

Macdonald, 61, worked as an

orderly at Shaughnessy Hospital and Chilliwack General Hospital after moving to B.C. from his native Scotland. He was first elected to the HEU Provincial

Executive in 1978, and in 1984, he was elected to the first of five terms as president.

When Macdonald became HEU president in 1984, HEU was celebrating its 40th anniversary and was re-entering the Canadian Labour Congress and the B.C. Federation of Labour.

The Social Credit government was imposing restraint policies, which included attacks on health care workers through layoffs and wage controls.

In 1987, HEU took part in the fight against the Socred anti-labour law, Bill 19, which was repealed late last year by the current NDP government.

During Macdonald's years as president, HEU members went on strike in 1989 and took job actions in 1992. The 1992 job actions led to important gains in the HEU contract, including pay equity.

The 1992 job actions and HEU protests against cutbacks later in the year paved the way for the job security agreement with the B.C. government recently ratified by HEU members.



MACDONALD



MUZIN

**FAREWELL NOTE:** Bill Macdonald, forced to step down as president because of ill health, sent this message to union members.

To fellow members of the Hospital Employees' Union:  
After almost ten years as president of the Hospital Employees' Union, I have decided to step down on July 30, 1993.  
I was first elected president in 1984, the 40th anniversary of the Union. I had hoped to serve until 1994, the 50th anniversary, but continuing health problems have convinced me to reconsider.  
Given the uncertainty of my attendance at work, I think it would be unfair to deny the membership of the union access to the services that are the president's responsibility.  
It is with a sense of sadness that I take this final step, remembering as I do your support and trust. I make no distinction between members, activists and staff when I say that I am proud of all we have accomplished together over the past 10 years.  
In 1980, upon his retirement, president Bill Black said "This is your Union, it's a good Union, look after it" — words that are as valid today as they were then. I cannot think of any better advice to leave you with.

*Bill Macdonald*  
In solidarity,  
Bill Macdonald



# What we're up to

Cont. from page 3

year to keep their members up to speed on events in their facility.

Cumberland Local News focuses on health and safety issues in its first edition.

Royal Jubilee local has an impressive desktop publication for its inaugural issue of *Holding The Fort*. Both are worthy additions to the growing number of HEU local newsletters.

## Myrna Poisson accepts three-year post at WCB

Veteran HEU staff representative Myrna Poisson has accepted a three-year appointment to the WCB Review Board.

Poisson is no stranger to the WCB, having represented many HEU members at the board during the past few years.

She undertook her new duties in April.

## Campbell River local quick to defend hospital

When rumours of severe funding restraint and bed closures swirled around the Campbell River and District General Hospital, HEU's local activists didn't wait to respond.

They formed a Campbell River Action Committee on the heels of the Shaughnessy Hospital closure announcement to defend their own hospital.

A leaflet went out to the community alerting everyone to the problem and the committee set out its action plan: an information program in the community, pressure on local politicians and a warm reception for finance minister Glen Clark when he visited town on March 23.

As Clark found out, HEU members are everywhere and they're quick off the mark to defend health care services.

## HEU on hand for On-to-Ottawa caravan send-off

HEU vice-president Maurice Smith was on hand in Courtenay April 16 when the Action Canada Network's On-to-Ottawa caravan set off for the national capital.

The car cavalcade will cross the country, arriving in Ottawa in time for the massive demonstration scheduled for May 15 against the North American Free Trade Agreement. A similar caravan



**STANDING TOGETHER:** HEU members from the Sunshine Coast turned out with picket signs early in March to support locked-out IWA members seeking a contract with Bayside lumber products.



**PIE BENEFITS:** Ian Ross, president of the Alzheimer's Association, receives a cheque for \$1,600 from Sharon Pape, chairperson of HEU Evergreen local's Good and Welfare Committee in White Rock.

left Trepassey, Nfld., on April 23.

Smith, an HEU member from the Burnaby local and a member of the Action Canada Network's national committee, joined the trek for the first leg of the B.C. journey.

Also on the trip are veterans of the original 1935 On-to-Ottawa trek which was organized in the Depression to demand work and wages for the single unemployed. The trek was broken up by a RCMP riot in Regina.

## G.F. Strong workers protest service cuts

HEU members at Vancouver's G.F. Strong Centre organized a community

protest in February to highlight the employer's decision to eliminate services to pre-school children by August and to phase out out-patient services to children under 12 over a two-year period.

Parents of children affected by the cuts said there are no alternatives to the services offered by G.F. Strong. Eighty-three children are affected, including some who attend an integrated daycare staffed by HEU members.

Despite the protest, which included a special meeting with centre administrators, the employer is determined to press ahead with the service cuts.

## Evergreen raises \$1,600 for research

HEU's Evergreen local in White Rock makes an annual special effort to contribute to Alzheimer's research through a fundraising effort to which almost every local member contributes.

The fifth annual bake and garage sale last fall raised \$1,600, most of it in payment for 200 delectable pies produced in a marathon baking session which lasted until 2 a.m. Pie cooks included Sharon Pape, Bobbie Fischer, Norma Dunstall, Diane Geissinger, Marilyn Fiddler and Karen Bouillet.

The local wishes to extend its special thanks to all who assisted, including Evergreen administration, which provided storage space and allowed the sale on the premises.

# HEU pay equity process moves to next stage

Teams from HEU and health care employers are wrapping up a series of more than 3,000 interviews with HEU members and management in 21 facilities as part of the pay equity plan in the Master Collective Agreement.

The interviews are an important step in establishing the job value comparison plan which is needed to determine who will get pay equity adjustments this year and in future years.

Under Article 69 of the master agreement, HEU members who are found to require pay increases because of gender based wage discrimination will get pay equity adjustments starting April 1, 1993, and once a year until wage discrimination has been eliminated.

An amount of money equal to one percent of the payroll will be spent on the pay equity adjustments until pay equity is achieved.

The pay equity adjustments for 1991 and 1992 were interim adjustments. For this year's and future pay equity increases, a job value comparison plan is required to determine the true value of the pay increase.

The interviews are necessary to determine the full range of duties and skills involved in each job.

Using factors such as education, training and experience, physical demands, mental demands, independence, supervision, responsibility, communication, services to people, and working conditions, the jobs will then be assessed and compared to determine the wage inequity that must be eliminated.

If the union and management cannot agree on issues in this process, the disputes will be referred to pay equity arbitrator Stephen Kelleher.

This process may not result in decisions on pay equity adjust-

ments until the fall, but 1993 pay equity adjustments will be paid retroactively to April 1, 1993.

"Our thanks go out to the pay equity committees in the locals for their hard work and support during the interview process, and to the members who were interviewed," said HEU secretary-business manager Carmela Allevato.

"The interview process has been a success, with our members

describing well the work they do and its value to health care. We fully expect that this process will set the groundwork for getting rid of gender based wage discrimination," Allevato said.

Work is already under way to tabulate and analyze the results from the interview reports.

## Analysis of pay equity data is next stage

## HEU offers bursaries to aid education

HEU is offering 14 bursaries for post-secondary education study to members, their children and spouses for the 1993/94 academic year.

The bursaries, with a total value of \$6,700, can be used at any post-secondary institution. They will be awarded on the basis of financial need and demonstrated satisfactory academic standing.

Applications, marked "bursaries," must be received at the Provincial Office no later than July 19, 1993.

For application forms and further information, write or call the HEU Provincial Office: 2006 West 10th Ave., Vancouver, B.C., V6J 4P5, telephone 734-3431, local 230.

HEU bursaries are administered by the bursaries committee of the Provincial Executive.

# HEU presses ahead on key classification issues

HEU is continuing to work on benchmark reviews for transportation attendants, cooks, bakers, stationary/power engineers and computer operators/technical specialists.

The reviews could lead to improved pay for all members in these benchmarks, with increased pay being retroactive to April 1, 1991.

Under an addendum to the Master Collective Agreement reached last year with health employers, the two sides agreed to review the benchmarks and if necessary take them to arbitrator John Kinzie.

Due to employer non-cooperation, the benchmark reviews are

being taken to Kinzie, who has ruled that he will be able to review a wide range of evidence about changes to the benchmarks.

Early in April, Kinzie rejected a request by employers that he restrict his role to that of a classification referee, which would have limited the evidence that could be introduced and the scope of pay changes he could order.

Hearings are taking place for computer operators and stationary engineers, and hearings into the reviews for cooks, bakers and transportation attendants will be heard later in the year. The process has been slowed by employer foot dragging.





JANE BURTON PHOTO

## MARCH FOR SHAUGHNESSY

More than 500 health care workers marched on Vancouver City Hall April 27 to demand city council support for a task force review of the decision to close Shaughnessy Hospital. After hearing an evening of submissions, many targeted at closure supporter mayor Gordon Campbell, city council agreed.

Finance minister Glen Clark's lean health care budget boost makes a job security deal even more important

# TIGHT MONEY

By CHRIS GAINOR

Just as premier Mike Harcourt promised in January, this year's B.C. budget increases spending on B.C. hospitals by only three per cent.

That funding increase, the smallest in many years, is directly related to other government decisions such as closing Shaughnessy Hospital and reducing the workforce in acute care hospitals by 4,800 full-time equivalent positions.

"The three per cent increase in hospital spending will mean difficult adjustments for patients and caregivers in the coming year," HEU secretary-business manager Carmela Allevato said after finance minister Glen Clark delivered his 1993 budget address.

"Clark's budget can only work if a job security deal is put in place," Allevato said.

Despite the tight health budget, right-wing critics of the government launched an hysterical campaign against property tax increases proposed but later withdrawn by Clark.

"We need fairer taxation that hits the rich and wealthy," Allevato said. "Fairer taxation is important to fund health, education and social services. The budget critics should get their facts straight — they're not paying their fair share and corporations are drastically under-taxed."

Health care as a whole got only a 4.2 per cent increase and education a 3.4 per cent increase in Clark's budget. Although both areas have traditionally done well in budgets brought in by NDP governments, this year the pressure is on to cut deficits.

Even though the provincial

deficit was cut to \$1.5 billion from \$2.4 billion two years before, Clark's budget was greeted with anger from the media and business, who attacked Clark for not cutting government services deeper.

They pointed to other provinces, including the NDP governments of Ontario and Saskatchewan, which are slashing services, freezing or cutting wages, and laying off workers in the name of deficit fighting.

The recession is a big reason for ballooning deficits, but an even bigger problem is the federal policy of cutting funding to social programs it shares with the

provinces.

The Tory government has reneged on commitments to pay a portion of health care, post secondary education and welfare costs, forcing every province to cut back.

"If the federal government had lived up to its cost sharing commitments to the provinces, British Columbia would now have a budget surplus of \$783 million," Clark said in his budget address.

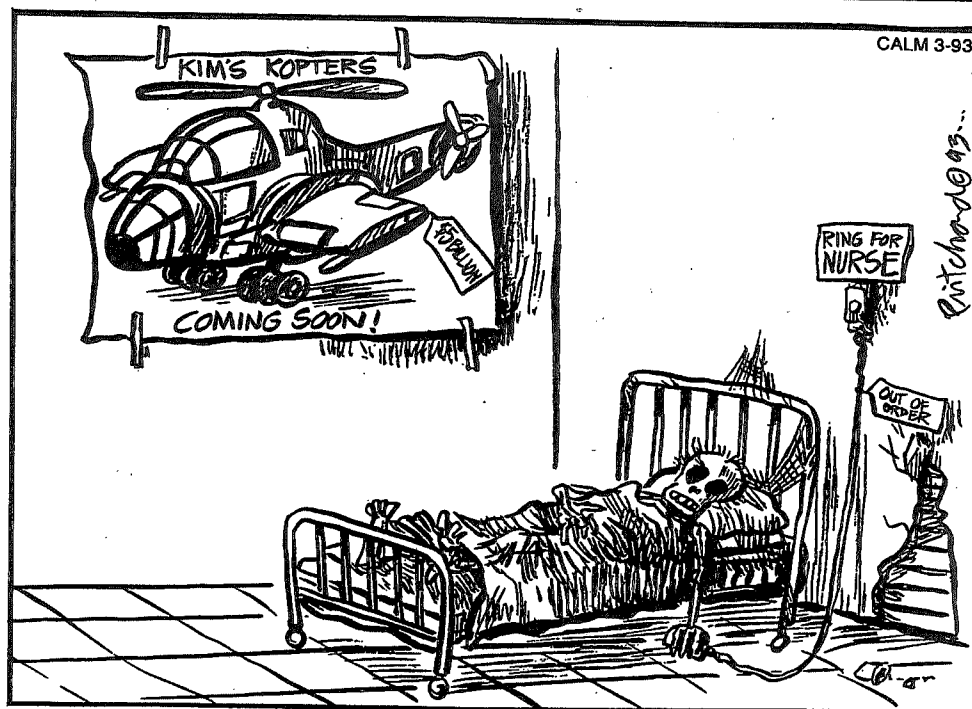
In addition to tightening the screws on spending, Clark dealt with his made-in-Ottawa deficit by increasing the sales tax, "sin taxes," and taxes on wealthy

British Columbians and corporations.

While Clark is going to raise Medical Services Plan premiums this year, he is increasing the number of poorer British Columbians who will get premium assistance or all their premiums paid.

HEU remains in favour of eliminating medicare premiums. B.C. and Alberta are the only provinces in Canada that charge medicare premiums.

As well, the deductible for Pharmacare Plan E, which covers everyone but seniors and welfare recipients, will go up to \$500.



## Rich use deficit fear as weapon

Conservatives who urge a war on deficits are only using deficits as a weapon in their war on social programs.

A special one-day conference held in early March in Vancouver on public services and public finances was told that conservatives are coming dangerously close to making our system of public services the major casualty of the war on deficits.

Some of Canada's top economists and B.C. public sector labour leaders, including HEU's Carmela Allevato, told the Investing in People conference that B.C. must resist conservative propaganda about budgets, taxes and public services.

"The rich and multinationals made out like bandits through our tax system," said Osgoode Hall law school professor and tax expert Neil Brooks. "Those who went to the party in the 1980s ought to pay for the mess."



Brooks listed the numerous tax dodges used by wealthy Canadians and corporations. For example, the capital gains tax exemption brought in by the Tories in 1985 costs Canadians \$2 billion a year.

The tax burden on corporations fell in the 1980s while poor and middle income Canadians saw their share of the tax burden increase.

The cause of today's large deficits are not social programs but the series of tax breaks for the wealthy and corporations that began with John Turner's budgets in the 1970s, Brooks said.

In spite of this fact, conservatives continue to manufacture big deficits and falsely blame them on social services, he added. "A vital and large public sector is crucial."

Simon Fraser University economist Marjorie Cohen said unemployment will never be tackled unless it is made an economic priority. While the Tories and even some NDP governments are focusing on deficits, she said it is good to see that U.S. president Bill Clinton has identified jobs as his priority.

University of B.C. economist Gideon Rosenbluth said a low unemployment policy is the best way to fight deficits in B.C. "High unemployment goes with high deficits," he said.



## NOTEBOOK

### A reader's letter helps clarify our policy



By GEOFF MEGGS

The letter printed at the right is one we thought we might never print.

HEU member Terence MacDonald, who wrote both this letter and an identical one to the Provincial Executive, began to think so, too. He chal-

lenged my initial decision and I took his position and mine to *The Guardian* editorial committee for a ruling.

The result was a good debate over what a letters column should be and what it should not in a democratic organization founded on full and free debate.

When the new *Guardian* was launched in 1991 we put the letters up front, because we wanted to show that we place tremendous importance on the members' views. (We have such an overflow in this issue that we have expanded the column to a second page.)

The letters column is a forum for discussion, criticism and comment from anyone who cares to speak up.

*The Guardian* editorial committee established some simple guidelines. Letters should be brief, they should be signed and they should be free of libellous, abusive, racist or sexist remarks.

Members' letters will have priority in the space available and our objective is to print all members' letters. There will be no censorship of letters critical of union actions or policy.

Terence MacDonald's letter was unique.

Rather than offer comments, it asked for them. Since the letters column is for readers' comments and because the union had responded directly, the initial decision was to put MacDonald's letter aside.

His identical letter to the Provincial Executive received the following reply from assistant secretary-business manager Chris Allnutt, which MacDonald found satisfactory: "The fight against racism and sexism in our society needs to include cultural activities. In undertaking those activities, we must strive for respect for the rights of everyone."

MacDonald is adamant, however, that his letter should be published. So here it is, Terence!

Does it fit the objectives of the letters column? Is *The Guardian's* policy on letters correct? We'd welcome our readers' views.

### Reader seeks comment

I was wondering if you could respond to the following: at the CLC conference session on women's issues there was a poem read likening the male appendage to a scab and questioning the results were that scab to be removed.

Further, at the CLC noon hour entertainment session and also at the HEU summer school there was a song sung stating that "if you are a white man, you are a thief."

TERENCE MACDONALD,  
Vancouver

## Letters

### Don't make restructuring too easy

I have sympathy with my brothers and sisters, not only HEU members but other unions, in regards to the closure of hospitals and beds.

However, our union cannot afford to make or agree to make concessions such as transfer of seniority, first job placement at another hospital, wage freeze, etc.

If we make the restructuring of health care easy for the government by agreeing to such concessions we not only jeopardize our collective agreement, which we fought hard for, but our future is bleak as a strong union.

In my opinion our executive should be saying "no concessions" and telling Ms. Cull to ensure job placement for the displaced workers or we will take action such as a strike or sit downs.

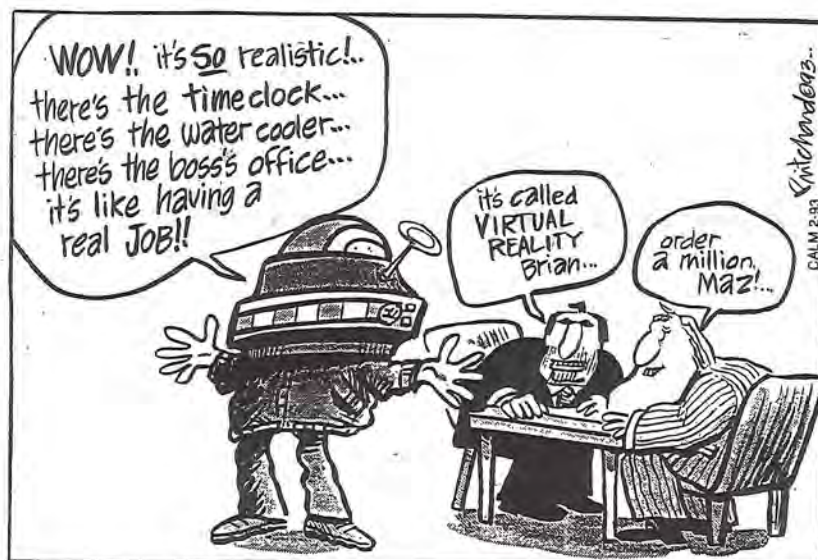
J.B. LATHAM,  
Surrey

### RCH staff wins praise

Please accept this letter as my way of thanking the members of HEU at Royal Columbian for a job well done.

On Feb. 16, 1993, I found myself in the not so enviable position of being slated for quintuple bypass surgery. As a 42-year-old male it came as more than small surprise to me.

Obviously everything turned out for the best as I am now at home savouring the opportunity of saying thanks. During my week-long stay in hospital, I became very impressed with the way in which



your members carried out their various duties.

The professionalism and positive upbeat attitude showed through and came to help me in my time of need.

If possible, please express my gratitude and sincere thanks to all concerned.

ROB JONES-COOK,  
Langley

### NDP vows to fight Tory funding cuts

These are tough times both in Canada and in B.C. We are deeply concerned that the federal government has abrogated its commitment to share costs with provinces and has continued to cut trans-

fer payments for health, education and social services.

Federal cuts to transfer payments means a \$1.6 billion loss or \$1,200 per household for all British Columbians.

Federal cutbacks to major cost-shared programs will total \$5 billion each year by the end of the decade. This is a complete abdication of federal responsibility for sharing costs of health, education and social services. The feds must pay their fair share.

As New Democrats, we support decent wages and working conditions and the collective bargaining process. As New Democrats, we affirm that health care and quality education must be a top priority of

governments. It is essential that the federal government contribute their share of costs in full.

Rest assured that we will continue to actively press the federal government and the new prime minister to reinstate federal funding that is owed to British Columbians for health, education and social services.

We look forward to the coming federal election to continue our struggle against the sellout of Canada through the Free Trade Agreement and NAFTA. Audrey McLaughlin is the only federal leader to state categorically that both deals will be cancelled. Her NDP Economic Plan is based on the goal of full employment. We must restore our economy so that jobs and quality services that you care so much about will be maintained.

LYLE MACWILLIAM,  
MP, Okanagan-Shuswap  
MARGARET MITCHELL,  
MP, Vancouver East,  
Ottawa

ing my union dues to help push the gay movement itself.

I respect and love the person but not the act — big difference.

MARILYN LAW,  
LPN, Prince George

### Member opposes support for gay movement

I believe I should respect and love the gay person just as all people god put on this earth for me to work alongside.

However, I resent pay-

## LOCAL PROFILE



FIGHTING FOR RESPECT: New HEU group home members Brian Knudsen and Robin Allan find their work undervalued.

### Victoria group home workers choose HEU

By STEPHEN HOWARD

HEU's new organizing policy is keeping pace with restructuring in health care, winning five new certifications in community care agencies this spring.

Group home workers like Robin Allan and Brian Knudsen joined HEU to win fair pay, respect for their work, and to bring stability and improved client care in a field with a high staff turnover rate.

They both work at homes run by Island Community Living in Victoria, where workers voted unanimously to join HEU in February.

Knudsen coordinates care delivery at ICL's Central Saanich House which has four mentally handicapped residences requiring 24 hour care. Allan is the assistant manager at Braefoot House, a four-resident home in a quiet residential area.

They provide a wide range of personal care services, administer medication, coordinate their clients' work and recreational programs, meal preparation and housekeeping.

Wage rates for group home workers are substandard: \$10 an hour to start and 60 cents more after a year. Benefits are few and far between, and the ICL workers haven't had a raise in two years.

The wage scale is a sore point for Allan, who earns about \$12 an hour as assistant manager. "You could have 10 degrees and you'd still get \$10 an hour," she says.

Winning higher wages and more full time workers in their first contract will also help improve the quality of client care.

Other group home and community agencies staff have also chosen HEU to win better wages and improved working and caring conditions. HEU now represents workers at Western Human Resources homes in Victoria and Burnaby, Crossroads Human Services and Cornerstone Community Services in Victoria, and drivers for the Victoria Cerebral Palsy Association.



# Labour

## Medical supply workers urge boycott

Unionized workers at a New Jersey warehouse of a major U.S. medical supply company are mounting a broad-based boycott campaign against their employer to win both a fair contract and their jobs back.

The 77 Teamsters members were locked out in October 1991

after they voted to reject a bid by their employer Fisher Scientific to cut health care benefits in their contract.

Three months later the multi-million dollar company fired them, and brought in scabs.

Boston city council was the first municipal government to enact a

ban on buying supplies from Fisher for its hospitals. New York City and three other key cities have since joined the boycott.

Support for the workers' cause is also coming from physicians, scientists and a number of universities, which have also boycotted Fisher.

The company manufactures and supplies medical facilities with everything from glassware to sophisticated instruments. Fisher has a big slice of the B.C. market, selling about \$1 million of supplies to six major hospitals alone.

So far, the boycott appeal has not been extended here.



**TOO MANY MULRONEYS:** B.C. Federation of Labour president Ken Georgetti was besieged by unemployed Brian Mulroney's March 3 in a Vancouver demonstration organized to protest the Tory attack on unemployment insurance benefits.

## Unions condemn UI cuts

Trade unionists across Canada marched, demonstrated and protested last month in a last-ditch effort to turn back vicious Tory cuts in unemployment insurance benefits.

Despite a massive 50,000-person march in Montreal and smaller protests in many other centres, the Conservatives refused to back down on elimination of benefits for workers who quit without just cause.

In Vancouver, at least 50 trade

unionists in Brian Mulroney masks mocked the prime minister's resignation in a rally protesting the changes. Under the new law, Mulroney will not qualify for UI because he quit — but he's not likely to suffer.

Last minute amendments to protect women who quit because of sexual harassment were denounced as inadequate by leaders of the women's movement and the labour movement.

Before the changes, people who

quit could receive benefits after a 12-week wait.

The National Action Committee on the Status of Women released statistics showing that the majority of people who quit are low-income women in non-union jobs.

Women make up 53 per cent of voluntary quits even though they make up only 37 percent of all UI claimants.

NAC pointed out that there is no simple legal definition of what constitutes "just cause" in quitting a job.

## Women close wage gap just a little

The wage gap between women and men shrank slightly in 1991, but women still earned 30 per cent less than men.

The report by Statistics Canada showed women working the full year and full time earned \$26,842 on average, up two per cent after inflation from 1990, while the earnings of men remained steady at \$38,567.

As a result, women narrowed the gap to bring their earnings to 69.6 per cent of men's, up from 67.6 per cent.

However, this marginal improvement may have more to do with the rotten state of the economy, which denied men any wage gain, than with a lasting advancement for women.

Spokespersons for women's groups cautioned that there was no cause for celebration. They wanted to see if the figures reflected a real trend or if the shift was just a result of the unending recession.

According to the National Action Committee on the Status of Women, the wage gap in Canada remains much wider than that experienced by women in many Western European countries, which have more progressive policies on child care, work and family life.

For example, in Sweden women's earnings are 90 per cent of men's, in Denmark 85 per cent and in France 80 per cent.

The Statistics Canada report also showed older women were subject to more severe wage discrimination than younger women. Women aged 15 to 24 earned 86.4 per cent of what men in the same age group earned, and women aged 55 and over earned only 63.6 per cent of what men the same age earned.

Single, never married women earned 91.1 per cent of what men of the same status earned. Married women earned 64.9 per cent of what married men earned.

## U.S. labour wavers on medicare plan

Health care reform has hit the top of the American political agenda, but the U.S. labour movement is divided on whether or not to push for a Canadian-style medicare system.

American adoption of Canada's system would be a major victory for Canadian health care workers fighting to defend our universal medicare system.

But anything less than a universal medicare system in the U.S. will continue downward pressure on Canada's national health care programs thanks to free trade.

With Hillary Clinton poised to bring down her recommendations on health care this spring, the major U.S. unions are split.

Many support a single-payer system like Canada's and are campaigning for it in many states.

But an equal number support the "managed competition" option favoured by Clinton and much of the corporate establishment.

Under "managed competition" all Americans would be enrolled in one of a small number of huge health service organizations

which would provide all types of health services.

Competition among these huge health organizations would supposedly control costs, but workers would receive only minimum basic coverage and even those benefits could be taxable under some proposals.

Even health care unions, like New York's Local 1199, are ambivalent on precisely what system they want. Without a united effort behind a single proposal, American workers are likely to get less than they deserve.



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# THE SHAUGHNESSY STRUGGLE

By **DON PAYZANT**

• Don Payzant is editor of the HEU Shaughnessy local newsletter *Opening Statement*.

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## Gradually

the campaign was gaining momentum and Shaughnessy executive members made presentations to the Vancouver General, St. Mary's and Royal City Manor locals. And as the coalition worked, so the Transition Team struggled to speed up its efforts. But the task force to close Shaughnessy's emergency ward blundered when it cited staff shortages for diverting nighttime ambulance traffic.

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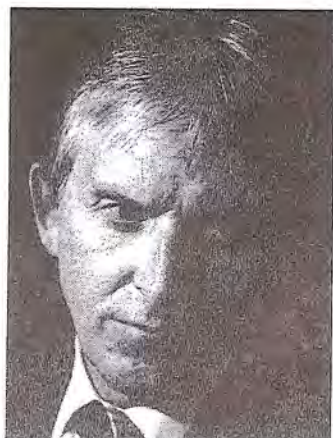
Shaughnessy staff feel learning to cope with "closure-related stress" is a sign of defeat.

AT GUARDIAN PRESS TIME, THE KEEP SHAUGHNESSY OPEN COALITION WAS ORGANIZING FOR A LOBBY TO VICTORIA TO DEMAND A TASK FORCE REVIEW OF THE CLOSURE DECISION.



The shorter work week won by B.C.'s health unions is winning international attention as a way to protect jobs and services, reports Geoff Meggs.

# 36 HOURS



**'The agreement is an important example of the strategies needed'**

**BOB WHITE, CLC PRESIDENT**

**C**RANBROOK LPN Vicki Poburn has already made plans for the 11 extra days off she expects this year thanks to the shorter work week in the job security agreement negotiated by B.C.'s three health unions.

"It will certainly help," says the single parent, who works both as a physio aide and a practical nurse at Cranbrook Regional Hospital. "My kids are in school, but I can use that time to do housework — or even have a day off."

Personal time — to rest, read, relax with friends or do whatever she wants — is one of the main benefits Poburn and her fellow HEU members expect from the reduction in the work week to 36 hours from 37.5.

It will be a relief from the brutal workload experienced by HEU members as health care funding declines and work intensifies. And economists who have studied the issue of reduced hours believe it will be good for the health care system as well as health care workers.

"At our facility they have asked if we can go home 15 minutes early to implement the shorter week," Poburn says. "That's not what a 36-hour week is for, because you still must come back and finish that work."

"Our members definitely want the full day, not 15 minutes here or there."

That extra time off has a second enormous benefit for Cranbrook workers and others around the province: it achieves 40 per cent of

the government's planned reductions in acute care without layoffs.

For that reason, the employment security agreement ratified by members of B.C.'s three health unions and rejected by health employers is being hailed across North America as a model of progressive labour relations.

"An issue that has to be confronted as the economy changes is work time, whether the work week or the work year," says Bob White, president of the Canadian Labour Congress.

"If we don't tackle the length of the work week, we'll have a few high wage full-time workers and a lot of unemployed people," he told *The Guardian*. "The agreement for a shorter work week is an important example of the strategies needed to deal with economic change."

"What happened here in B.C. is an example other governments should look at to deal with changes in health care that don't throw workers on the scrap heap."

Ontario's public sector unions are pointing to the B.C. agreement as the kind of protection they are seeking in their negotiations with the NDP government of Bob Rae.

The shorter work week is critical to rebuilding the North American economy, says Elaine Bernard, head of the Trade Union Program at Harvard University.

"The B.C. agreement is a real breakthrough because since the Depression no one has rolled back the work week except in the period right after the Second World War," Bernard says.

"The shorter week eventually forces increases in employment. Even in Japan, corporations are realizing they must work smarter, not harder. Longer work hours are not the solution to economic problems like unemployment."

Juliet Schor, a prominent American economist and author of a national U.S. best seller called *The Overworked American*, agrees.

**"T**HIS IS certainly a pioneering effort which I anticipate will be a tremendous success in giving employees badly-needed free time," Schor said in an interview. Health bosses are dead wrong, she says, when they claim that the shorter work week will make it essential to cut services.

Schor agreed with Poburn that "larger blocks of time are more desirable. They give flexibility. What studies show is that the amount of work done goes up and productivity increases."

"People can work 'smarter' when they work a shorter time and it forces both managers and employees to innovate."

"It's likely that management will find it leads to increased productivity and improved morale. To my knowledge, there is no comparable contract proposal anywhere in North America."

Poburn has already observed that change at Cranbrook. "The administrators are starting to

**'COMMITTED TO THE ACCORD:** Joining to announce the tentative employment security agreement in Victoria March 18 were (left to right) health minister Elizabeth Cull, HLRA representative Ron Mulchey, HEU secretary-business manager Carmela Allevato, BCNU president Debra McPherson, HSA executive director Maureen Whelan and finance minister Glen Clark.



CHRIS GAINOR PHOTO



**THE WORKING WEEK** has been dropping for 50 years. The result: better health care, more jobs, a better life for health workers.



**65 hrs**

IN THE 30s there was no unionization in health care and 65-hour weeks on brutal rotations were the norm for the women and men who founded HEU.

**44 hrs**

IN THE 40s work time began to come down as unionization increased. By 1944, more health care workers worked 44 hours a week.



**40 hrs**

IN 1951 union contracts at Vancouver General provided for 40-hour weeks for most employees, but conditions were much worse in the non-union sector.

**37.5 hrs**

IN THE 1970s health workers won a reduction to the 37.5-hour week throughout B.C., about half what they worked 40 years before.



**35 hrs**

IN THE 1980s hospital workers twice won the 35-hour week in arbitrations supported by the health employers, but each time the gain was wiped out by wage controls before it could be implemented.

**36 hrs**

IN 1993 health unions negotiated a 36-hour week as part of health care restructuring.

## We have a deal: The shorter work week is only months away

About 40 per cent of the job reductions set out in the employment security agreement will be achieved by moving to a shorter work week effective July 1.

That means new schedules for the hospital sector must be negotiated by that time.

The agreement provides for arbitration to be used to determine how the change should be implemented if the two sides fail to agree. The arbitration would be handled by D.R. Munroe.

Because of the HLRA's failure

to ratify the deal, this schedule may have to be changed.

"Our objective is to ensure that the time is accumulated in time off that will be meaningful for health workers," says HEU secretary-business manager Carmela Allevato. "We are not talking about 18 minutes more in the lunch break or an earlier quitting time."

The shorter work week will mean about 11 more days off each year for full-time workers.

How will hospitals manage with fewer hours?

Since hospital funding tight-

ened in the 1980s, hospital utilization has been falling. The shift to community services will speed that up. There should be less work to do.

In the past, however, administrators balanced their books simply by cutting workers, not by tackling the need to reform health services and eliminate unnecessary hospital use.

The result was more work for remaining workers. Because there was no incentive to tackle waste, we were left with a smaller, inefficient system where workers were making up for poor management with heavier workloads, injuries and stress.

The 36-hour week, combined with other voluntary measures, will help ensure that the shift to a restructured system is accomplished without layoffs.

have to see different ways of utilizing funds better," she says. "We wish they had done that a long time ago. They are having to come up with better ideas instead of laying people off all the time."

Schor's research, which provoked a major debate in the U.S., documented the fact that the average work week in the U.S. has been increased since the Second World War.

The average American worker now works 2,473 hours a year. That's 320 hours or almost two months more than a Japanese or German worker.

Annual gains in productivity can be used to cut worktime or to increase income. So if productivity goes up five per cent, the work week could be cut by that amount without affecting economic output.

American workers have been forced to do the extra work, largely to finance the treadmill of consumer purchases every household is told it needs.

The result: those with jobs work longer and longer and those without don't work at all.

And there are other staggering social costs, Schor found. With more and more women entering the workforce, the longer hours of work are taken directly from hours which previously were used for childcare.

Family and marital stress and breakdown are a direct result of the unceasing demands for work, both on the job and in the home.

This is particularly important for working women. Schor's research proved that housework, which is overwhelmingly done by women, is just as labour-intensive as it was 40 years ago. We have automated washing machines and powerful vacuum cleaners, so we wash clothes and clean up twice as often. Only the microwave oven has directly reduced time required for household chores.

The shorter work week frees up some of that time for the employed and transfers the work to unemployed workers, taking them off welfare and social assistance.

Before unionization in the 1940s, a 44-hour week was common throughout Canadian industry and in health care.

The 40-hour week was implemented during the 1950s. In the 1980s, HEU members twice

won the 35-hour week only to have the gain wiped out by wage control legislation.

Significantly, one of the arbitration awards which granted the 35-hour week was signed by HLRA president Gordon Austin, who now says health employers are unsure if a 36-hour week is possible.

Implementation of the shorter week was one of the main reasons cited by health care employers for rejecting the deal in a vote completed April 25. (In fact, 55 per cent of B.C. hospitals supported the deal, but a two-thirds' majority was required for ratification.)

## The question is how can we afford NOT to shorten the work week?

**JULIET SCHOR**

Hospital administrators have responded to protests from the business community, which exploited grossly-inflated HLRA cost estimates to undermine public support for the 36-hour week.

But analysts like Schor believe the employers have it all backwards. The question is not "can we afford the shorter work week?" but "can we afford not to shorten the work week?"

"If current U.S. trends in work continue for another 20 years," she says in the *Overworked American*, the average person would be on the job 60 hours a week, 50 weeks a year — for an annual total of 3,000 hours.

"If it sounds like Dickens' England, that's because it would be.

"If hours rise again, how can we solve the parenting deficit, marital problems or the adverse health effects of stress and overwork?"

"And then there's the ecology: another round of work, produce and spend may put the human habitat beyond the point of no return."

• Juliet Schor's *The Overworked American: The Unexpected Decline of Leisure*, is widely available in paperback from Basic Books.



# Canada's health workers plan strategy

*Meeting for the first time ever, caregivers confront corporate agenda and attacks on medicare*

By CHRIS GAINOR

A large HEU delegation took part in the first ever Canadian national conference of health care workers, which was held in Montreal in February.

More than 500 health care workers discussed their common problems and possible solutions at the four-day meeting, which was sponsored by the Canadian Union of Public Employees.

The conference featured speakers such as CUPE national president Judy Darcy, Canadian Health Coalition chair Kathleen Connors, federal NDP leader Audrey McLaughlin and HEU assistant secretary-business manager Chris Allnutt. Much of the conference time was spent in workshops where discussion could take place.

Health care workers are facing the same problems in every province due to federal cutbacks to medicare, and other policies which are part of the corporate agenda.

The workshops produced a number of ideas, including:

- Cooperating closely with other unions and community groups to win better collective agreements and defeat elements of

the corporate agenda such as free trade.

- Dealing with total quality management programs being promoted by hospital management by resisting any program that is based on getting more work without giving power to workers.

- Political action is needed to fight off attacks on medicare from right-wing parties. Political action

also includes being critical of the NDP.

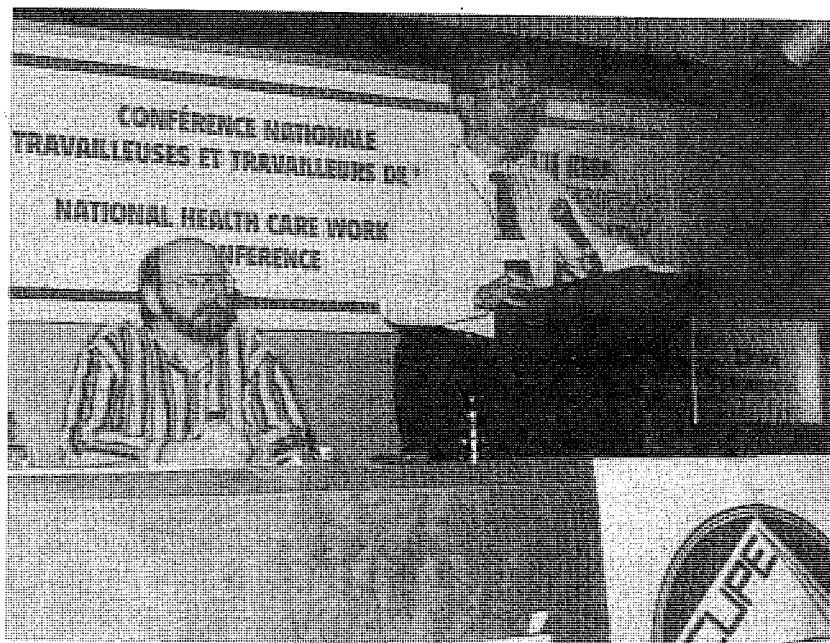
- Educating union members about the changes being imposed by governments and

corporations on health care. In her speech to the conference, NDP chief McLaughlin said that the federal government once paid half of all medicare costs. Now that share has been cut to a third, and by the year 2000, the federal share of medicare costs will be slashed to only 23 per cent.

"It means we are moving dangerously close to a two-tier, user pay system as in the United States," the NDP leader said in -30°F. "Clearly, this is not the kind of Canada we want to live in."

She said the federal NDP is committed to stabilizing federal funding of provincial medicare programs, defend the Canada

## Problems the same in every province



**BUILD COALITIONS:** HEU's Chris Allnutt, above, said community organizing is key. At right, HEU Provincial Executive members Maurice Smith and Fred Muzin and CLC staffer Lynn Carlisle joined protest against UI cuts.



Health Act, and help provinces reform their health care systems.

Dennis Rivera, president of the Local 1199 Hospital and Health Care Workers' Union in New York, spoke about the efforts by U.S. president Bill Clinton to

reform the U.S. health care system.

"Saving your system could help us save ours," Rivera said, adding that the North American Free Trade Agreement poses a threat to the living standards of Canadian and American workers.

## Canada's medicare map: diagnosis dismal

The president of CUPE's Ontario Council of Hospital Unions painted a bleak picture of budget cutbacks, bed closures, work speedups and layoffs across Canada in health care when he addressed HEU's Emergency Conference in Victoria in March.

Michael Hurley warned the HEU delegates that federal cutbacks and corporate rights contained in the North American Free Trade Agreement threaten the future of Canada's medicare system.

Hurley, whose council represents 20,000 Ontario health care workers affiliated to the Canadian Union of Public Employees, praised HEU for the fantastic job security deal with the B.C. government.

"The resistance you have mounted against cutbacks, closures and layoffs has forced the provincial government to acknowledge your union as a legitimate and unavoidable reality in any restructuring of the health care system in B.C.," he said.

Most of Hurley's address was an outline of what health care workers face in other parts of Canada:

- **Newfoundland:** Many outport hospitals have been closed, costing the jobs of 900 health care workers. Other workers have their salaries frozen. Many services, including visual assessments and hospital dental services, have been cut from medicare, but doctors are still able to bill more money.

- **Prince Edward Island:** While the government failed to close the island's four rural hospitals, it has concentrated acute care hospitals in the remaining hospital in Charlottetown. Many services, including burn care, cardiac care and abortions, aren't available on the island. Privatization is going on.

- **New Brunswick:** Hospital workers face wage freezes and layoffs. New Brunswick's hospital system is being reorganized along regional lines. Medicare services are being cut back.

- **Nova Scotia:** Major bed closures and layoffs are taking place, and medicare services reduced. The government has bought an unused military base and is offering families free housing on the base if they perform unpaid home-care for senior citizens living next door.

- **Quebec:** User fees are coming in for prescriptions for seniors, and hospital beds are being closed as budgets are cut. Families are being offered tax breaks to take care of their parents.

- **Ontario:** Major restructuring is going on. While doctors won a major fee increase from the NDP government, 5,000 hospital beds have been closed, and 9,000 full-time equivalent jobs have been lost over the last three years, including 2,125 in the past year. Hospitals are being closed and services cut. Even though services are supposed to be transferred to the community sector, cuts are leading to the closure of chronic care beds.

- **Manitoba:** Winnipeg hospitals have to cut 440 beds in the next year as budgets are cut back.

There is a weak labour adjustment agreement covering workers in the hospitals.

• **Saskatchewan:** A 3 per cent cut in hospital funding is leading to major cutbacks and layoffs. Regionalization is going hand-in-hand with closures of hospitals in smaller communities. Medicare services have been cut.

• **Alberta:** American-style hospital funding mechanisms are being introduced in hospitals. This means efficiency measures and time-and-motion studies.

In Ontario the ranks of administrators have increased, Hurley said, doctors are being paid more than ever, and the government has rejected doing away with long term care facilities run by corporations.

"Our members, I firmly believe, are not the root cause of the crisis in the health care system," Hurley said.

"Doctors, hospital administrators and the for-profit sectors have driven up the costs, and those are the areas that the government should be wrestling with."



HURLEY





JIM TYNAN/IMPACT VISUAL

**FAMILY CARING:** LPN Viola Morris says hello to Aminta Rodrigues and her grandson. The clinic provides care both in the home and in its neighbourhood facility, one model of the "closer to home" system proposed for B.C.

# CLOSER TO HOME IN THE BRONX

**A New York clinic is one way our health services may change in B.C.**

**H**EALTH CARE workers in the heart of the Bronx are rolling back funding cuts and the damage caused by a service-cutting administration to save a community clinic that could be a model for similar ventures in B.C.

The Dr. Martin Luther King Jr. Health Centre (MLK Clinic) was established 27 years ago when a War on Poverty grant funded 140 neighbourhood clinics designed to provide comprehensive primary care and to train neighbourhood people to do much of the work.

It's one model of community clinic which could develop here in B.C. as the health ministry moves services closer to the community.

Sixty-two of its 88 employees are members of Local 1199 of the Drug, Hospital and Health Care Employees' Union, HEU's counterpart in New York, proof of the role that HEU members can expect to play in the new "closer to home" health care system.

But MLK Clinic has faced a tough struggle to survive after its founding in 1966. According to

the union's *1199 News*, "it's a story with meaning for today's health care reform discussions."

"Working at MLK was a marvelous opportunity for the members of the community," clinic receptionist Carrie Edmunds told the *News*.

She was hired in 1968 and trained as a family health worker, a position which no longer exists.

"A team of a doctor, medical assistant, practical nurse, dentist and family health worker would meet weekly to decide the best health care program for a particular family.

"We made regular home visits to hypertensive and diabetic

**This may be one vision of the future for HEU members**

Both ideas are features of the community clinics proposed for B.C.

Today the clinic services almost 15,000 people, is expanding its clinic hours to provide service on Saturdays

and has begun plans to initiate a school health program with the school next door.

For health workers at the clinic, the key to their success was their commitment to provide quality health service to their community.



**COMMUNITY HEALTH:** Nurse practitioner Elsa Callender (left) examines pregnant community resident Maria Ayala. Receptionist Rossie Montgomery (above) started at the clinic as a family health worker.





# Coffee Break



## Footnote to Rodney King affair

Registered nurse Lawrence Davis, a member of SEIU Local 535 in Los Angeles, has received death threats, bricks through his window and harassment from hospital management since he testified about the injuries received by Rodney King at the hands of Los Angeles police.

Davis was an emergency room worker when King was brought in after the beating, which received national attention when an amateur videotape of the incident surfaced on the news.

Davis also testified at a medical malpractice hearing against his employer. Despite King's skull fracture and numerous other injuries, an emergency room doctor refused to treat him because he had no insurance.

## Welcome to union-free Mexico

Volkswagen has reopened a plant in Pueblo Mexico, after winning a labour-board ruling that it can fire all 14,000 workers. Volkswagen has decided to recall most employees, but is firing those involved in a July 21 walkout protesting a secret productivity agreement with union leaders.

Volkswagen wants to step up production at the plant in time for the North

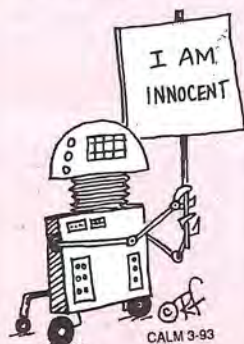


"SMART CAREER MOVE, BIXBY."

American Free Trade Agreement.

## Sheila Baxter gets to keep the dough

When anti-poverty activist Sheila Baxter won the VanCity Book Award — with its modest cash



prize — for her recent book on homelessness, she thought she should celebrate.

After all, *Under the Viaduct* was written in her spare time while volunteering as a staffer at End Legislated Poverty.

The Ministry of Social

Services had a different idea. They cut her off welfare for a month, thus taking the award for the provincial treasury.

Ever the activist, Baxter complained right to social services minister Joan Smallwood. Smallwood confirmed that Baxter was entitled to the money and her payments were restored.

## The price of Canadian poverty

A child raised in poverty is 2.8 times more likely to suffer chronic physical health problems and 1.7 times more likely to experience emotional problems, according to recent research.

Of the 250,000 Canadians who may need an emergency shelter during the course of a year, 20 per cent are children.

## Nobody could make this stuff up

The chief economist of the World Bank, Lawrence Summers, has called for pollution to be dumped on the poor.

In an internal memo, Summers argued the bank should encourage dirty industries to move to the less developed countries.

"The economic logic behind dumping a load of toxic waste in the lowest wage country is impeccable and we should face up to it," he wrote.

Summers' logic? First, life expectancy is lower in these countries, so there will be few deaths in older age from cancers caused by exposure to toxins during the working years. Second, the social cost of health-impairing pollution is calculated as lost wages from death and disease. Therefore, the poorer the country, the lower the cost of unnecessary disease and death. The World Bank apologized.



## Believe It or Not: Terrace hospital boss caught in web

The *Guardian's* Believe it or Not award for turning up administrative madness this issue goes to HEU's Terrace local where meticulous research has raised serious questions about how the hospital boss was spending public funds.

Local HEU leaders combed Mills Memorial's financial records. What they uncovered was shocking and warranted a union call for an investigation by the health minister.

Here's some of the madness they turned up:

- a \$400,000 hospital budget surplus wasted on a last minute spending spree;
- payments to a company owned by the husband of a senior administrator.

A union-made ceramic mug is on its way to Terrace local leaders. We welcome your examples of administrative madness. Address all entries to *The Guardian*, 2006 W. 10th Ave., Vancouver, V6J 4P5.

# NDP sets out its economic agenda for federal election

A federal NDP government would make a sharp break with Tory-style "trickle down" economics, says NDP leader Audrey McLaughlin.

McLaughlin released a detailed economic plan, the core of her party's federal election platform, in a news conference in Ottawa Feb. 18.

"The New Democrat plan represents a bold departure in Canadian economic policy, leaving behind the 'trickle down' economics of the past and introducing a full employment economy for the future," said McLaughlin.

The plan would create 500,000 more jobs over the next five years, reduce the unemployment rate to 7.1 per cent, lower the deficit and bring down inflation, without increasing taxes for low and middle income Canadians.

The NDP hired an independent

firm, Informetrica Ltd., to analyze the 60-page plan. Informetrica confirmed that the plan will reduce unemployment and inflation, as well as hold the line on the deficit.

Plan highlights include:

- an infrastructure program;
- a national child care program;
- a national investment fund to invest in innovative Canadian-owned, Canadian-based enterprises;
- eliminating the GST over five years by increasing taxes for profitable corporations and the richest people, cutting the defence budget and starting to tax private trusts;
- replacing the Free Trade Agreement and NAFTA with a new trade strategy including sectoral agreements; and
- increasing research, development and training.

— CALM

# Reports confirm health costs of the recession

Two new studies released by the U.S. Economic Policy Institute provide further evidence that periods of recession and high unemployment bring an increase in illness, death and crime.

John Hopkins University professor M. Harvey Brenner, in his report *Economy, Society and Health*, provides detailed evidence that recession and high unemployment lead to increases in illness, death, mental disorders and crime.

Stable economic growth with minimal unemployment, he says, is a major source of a population's health, provided investments are made in education, scientific

development, health care and social programs.

Professors Mary Merva and Richard Fowles of the University of Utah, in their report *Effect of Diminished Economic Opportunities on Social Stress*, focus on the recession of 1990-92.

They estimate that a one per cent increase in the unemployment rate results in a 5.6 per cent increase in deaths due to heart disease, a 3.1 per cent increase in deaths due to stroke, a 6.7 per cent increase in homicides, a 3.4 per cent increase in violent crimes, and a 2.4 per cent increase in property crimes.

— Solidarity/CALM

# Pigs race to the trough in 'corporate tax freedom day'

Ten plastic piggies lined up for the highest paid race of the year on top of a downtown Vancouver hotel earlier this year. It was Jan. 28, the first annual Corporate Tax Freedom Day.

The battery-powered pigs, each representing a profitable corporation, raced to the federal tax trough to see who could pay the least. They all won, and we all lost.

The B. C. Federation of Labour sponsored Corporate Tax Freedom Day to show that over 93,000 profitable Canadian corporations pay no federal tax dollars.

In 1990, Thomson Corporation had pretax profits of \$479,000,000 and paid a tax rate of 4.4 per cent.

Canadian Pacific Hotels made a pretax profit of \$24,500,000 and had a tax credit of \$1,300,000. The federation was not accusing any corporations of wrongdoing, pointing out that it was the fault of our tax system.

The Mulroney government reduced the federal corporate tax from 34 per cent to 28 per cent in the last half of the 1980s. Canada's corporate tax rate is now considerably lower than those of Germany, Japan and even the United States.

In the mid 1980s, the Nielsen Task Force on Taxation reported \$25 billion a year in tax revenue is lost because the government fails to collect taxes that companies already owe.

— BCFL Bulletin Board/CALM



## PUZZLE



Unscramble the jumbled words, one letter to each square to form ordinary words. Then rearrange the circled letters to find the missing words from the cartoon.

Answers: retire, layoff, union, contract, steward, untrue, emerge – RESTRUCTURING, ECONOMY

Wilmot looks forward to a stint of travel, golfing and painting.

Telephone: \_\_\_\_\_



April/May 1993 • GUARDIAN



# Guardian



VOL. 11 NO. 2 THE VOICE OF THE HOSPITAL EMPLOYEES' UNION APRIL/MAY 1993

## Bill Macdonald steps down

Ill health forces HEU president Bill Macdonald to step down. Fred Muzin has assumed his post.

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## The Shaughnessy struggle

Inside the long struggle to protect the services provided by Vancouver's Shaughnessy Hospital

PAGE 8

## The 36-hour week

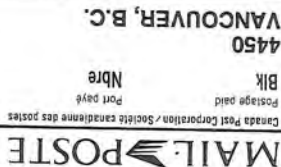
Labour unions across North America see an important breakthrough in the 36-hour week negotiated by B.C.'s health unions.

PAGE 10

## Closer to home in the Bronx

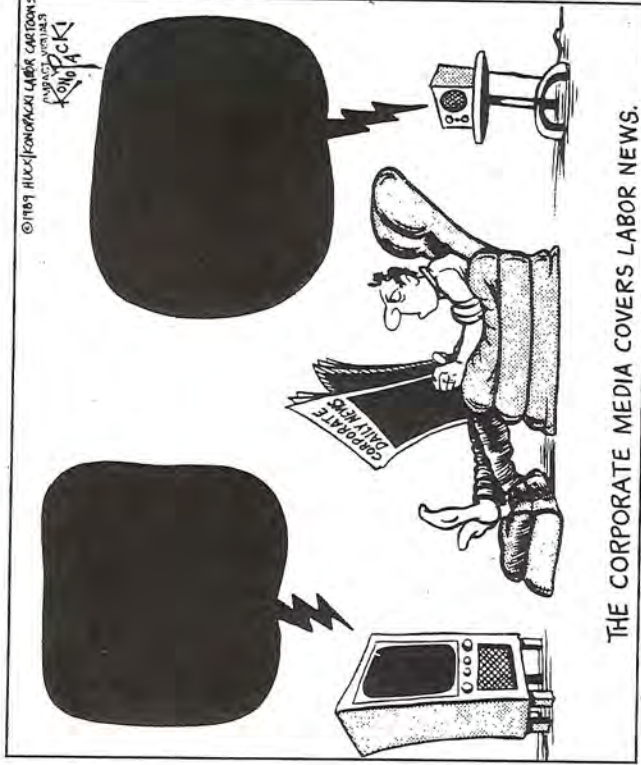
Now New York health workers defend vital community services in the heart of the city.

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