

# THE REPORT

HEALTH SCIENCES ASSOCIATION OF BRITISH COLUMBIA

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2018 Vancouver Women's March  
Photo: Sally T Buck, Flickr

## The tide is growing

Exploring ongoing efforts to end violence against women

# BUDGET 2018 IS A LEAP FORWARD



On Feb. 20, the BC NDP unveiled its first full budget. We were there, reviewing the new measures that mark a clear shift in priorities compared to the previous government.

Child care was a major focus of the February budget. For parents across the province who struggle to afford it, the government's one billion dollar investment is a game changer. We welcome this important step, which lays the foundation for a truly accessible childcare program in BC. We are glad to see investments in training for early childhood educators, and resources for early intervention services for children with disabilities.

HSA was engaged in the provincial budget consultation process. We submitted recommendations to the Select Standing Committee on Finance and Government Services, alongside the BC Health Coalition. We encountered a government that was open to engaging with us. It was refreshing to see the views of healthcare professionals and frontline workers taken seriously.

While not all of our recommendations were implemented, what we witnessed was a willingness to engage in dialogue and a meaningful attempt to foster change. We know that the problems with our public healthcare system can only be solved if we work together, and this means collaborating with a government that has a desire to listen, and shares HSA's solutions-oriented approach to strengthening public healthcare.

Many of HSA's recommendations were adopted. We've seen a commitment to decrease surgical and diagnostic wait

times. The government has also pledged to expand team-based healthcare – a longstanding call of HSA – with a \$150 million investment to improve primary healthcare. We know the pivotal role health science professionals play in the delivery of primary and community care, and are glad our message is resonating with the new government.

It's clear that HSA's government relations strategy is working. The union's dedication to sound policy research and our effective coordination with other stakeholders, including the Canadian Centre for Policy Alternatives – BC and the BC Health Coalition, is shaping our reputation as an expert in provincial health issues.

But we know our work isn't done. HSA will continue to advocate for comprehensive human resources planning, and bring attention to the workplace issues of health science professionals and community social service workers. We will continue the ongoing work of building members' capacity to engage with their MLAs through HSA's constituency liaison program. And we will continue to work closely with provincial and national partners on campaigns that seek to improve the public health system, and with our allies in the labour movement to strengthen workers' rights. We hope you'll join us in this work.

While there is much to be done, it's a leap forward for strengthening social programs and correcting years of underfunding and neglect. In light of this, there is much to celebrate.

***“The union’s dedication to sound policy research and our effective coordination with other stakeholders, including the Canadian Centre for Policy Alternatives – BC and the BC Health Coalition, is shaping our reputation as an expert in provincial health issues.”***

*Val Avery*



HSA MEMBER WENDY STONE FILLS OUT A WORKLOAD SURVEY AT LOGAN LAKE HEALTH CENTRE.

## UPDATE: GOVERNMENT SETS NEW GAS RATES FOR TRAVEL

Are you reimbursed for gas expenses by your employer? The Government of Canada establishes standard rates. For the year 2018, the automobile allowance rate in British Columbia has increased to \$0.55 per kilometer for the first 5,000 kilometers driven, and \$0.49 per kilometer thereafter. These rates are a \$0.01 increase from 2017.

## WORKLOAD GRIEVANCES UNDERWAY

Building on extensive member participation in a thorough union investigation, HSA has filed a series of more than 300 policy grievances to address the systemic workload concerns covering more than 12,000 members.

The grievances span all health authorities and a number of professions, and speak to the chronic understaffing of health science professionals.

The union's focus is shifting from extensive surveying of the problems to identifying solutions. Member participation is key to this process. Members who have suggestions for departmental or worksite changes that would relieve workload concerns should contact the union at [workload@hsabc.org](mailto:workload@hsabc.org).

Members who are not covered by policy grievances but who are experiencing workload concerns are encouraged to continue to participate in the workload investigation, and should reach out to their local steward team to investigate filing individual grievances as appropriate, and to fill out the in-depth workload survey at [workload.hsabc.org](http://workload.hsabc.org).

## MSP PREMIUMS TO BE REPLACED BY EMPLOYER HEALTH TAX

After a longstanding call for reform from thousands of British Columbians, the provincial government took a step this year towards abolishing Medical Service Plan (MSP) premiums. On Jan. 1, the BC government reduced MSP premiums by 50 per cent,

following the launch of a taskforce last fall mandated with investigating exactly how to implement the elimination of premiums within four years.

This February, the province announced in its 2018 budget that MSP premiums will be replaced by an employer payroll tax, which will take effect Jan. 1, 2019. Employers whose payrolls fall below \$500,000 annually will be exempt from paying the tax.

The government will be undergoing consultations in the upcoming months to further investigate how best to implement the tax. The province plans to completely eliminate MSP premiums by Jan. 1, 2020.

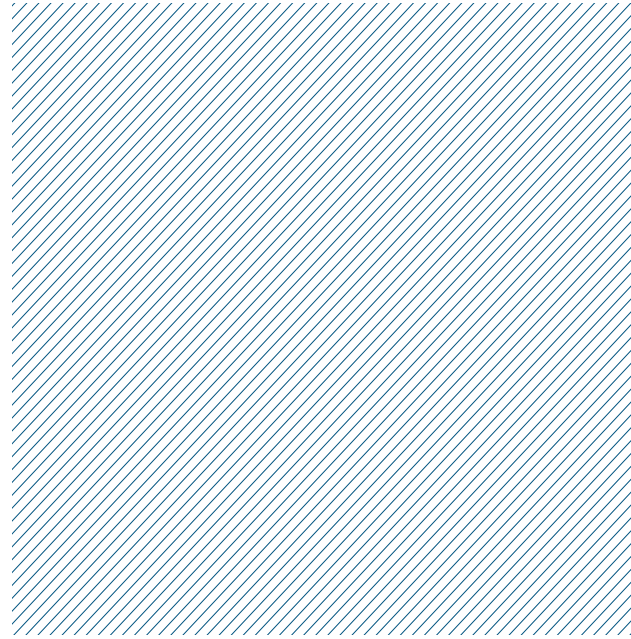
MSP premium rates follow a regressive tax structure, meaning that low-income earners pay a larger percentage of their income compared to high-income earners. BC remains the only province with such a structure for collecting health premiums. Low-income earners have been particularly hard hit by premiums over the last 16 years, with rates doubling between 2001 and 2017 under the BC Liberals.

The unfair tax structure of MSP premiums, in addition to its high administrative costs, have led advocates to call for reforms.

Under the Health Science Professionals Bargaining Association (HSPBA) collective agreement, employers pay 100 per cent of the premium. "This benefit was negotiated on behalf of members, and all savings as a result of reduced premiums should be directed to the benefit of members," says Jeanne Meyers, HSA's Executive Director of Legal and Labour Relations. The HSPBA has asked that the employer keep all savings in a trust until an agreement can be reached about how savings will be managed.



Scholarship winner Emily Chow with HSA President Val Avery and mother Helen Yeung.



## PUBLIC SERVICES MATTER

### DAUGHTER OF HSA MEMBER AWARDED NATIONAL SCHOLARSHIP

HSA IS PROUD TO ANNOUNCE THAT EMILY CHOW, DAUGHTER OF HSA MEMBER HELEN YEUNG, HAS RECEIVED A NATIONAL UNION OF PUBLIC AND GENERAL EMPLOYEES (NUPGE) 2017 NATIONAL SCHOLARSHIP.

Chow is awarded for her essay exploring how public services advance the well-being of visible minorities. She writes in her essay, "Public services can aid in overcoming the challenges visible minorities face, putting them on equal ground/ platforms for opportunity by establishing a solid infrastructure in education, health care, employment, and other components of public services."

The scholarship is one of five equal opportunity scholarships awarded by NUPGE, HSA's

national union. The annual scholarships are awarded to children of current and retired NUPGE members entering a public post-secondary education program.

"Once again we were inspired by the young people who entered. Their essay entries were wide ranging and, in some cases, quite poignant and filled with insight," says NUPGE President Larry Brown. "We hope that our financial assistance will go some way to helping the young persons selected achieve their dreams."



HSA delegates gathered in December to establish bargaining priorities for the Health Science Professionals Bargaining Association (HSPBA). The contract expires in March 2019.

## GEARING UP FOR BARGAINING

### PREPARATIONS SET IN MOTION AT HSPBA BARGAINING PROPOSAL CONFERENCE

From Dec. 3-5, delegates from around the province met to discuss hundreds of bargaining proposals submitted by members from HSA chapters across BC, in preparation for the next round of negotiations of the Health Science Professionals Bargaining Association (HSPBA) provincial agreement. In what was a productive three days, delegates also elected a bargaining committee, with several members running for election to the committee.

The conference brought together delegates elected by members in each of the union's 10 regions, the HSA board of directors, representatives from other unions in the HSPBA, and union labour relations and negotiating staff. It offered a meaningful opportunity for union members to come together and

set priorities for the next round of bargaining negotiations, with common themes emerging across proposals.

"We accomplished some excellent groundwork over the course of the conference. HSA's new bargaining committee will be moving forward with clear direction from the membership regarding how we can improve working conditions for our province's invaluable health science professionals," says HSA President Val Avery.

She says she is thankful to all of the members who shared input with delegates, and to all those who worked thoughtfully on the formation of bargaining proposals.

While the current five-year HSPBA contract is in effect until March, 2019, negotiations can begin in advance of the expiry

of the agreement. By beginning preparations now HSA is well equipped to move forward in the bargaining process.

HSA is the lead union for the HSPBA. The association covers more than 16,000 HSA members, in addition to members of the Professional Employees Association (PEA), the BC Government and Service Employees' Union (BCGEU), and the Canadian Union of Public Employees (CUPE) including members in the Hospital Employees' Union (HEU).

HSA members covered by the Community Social Services, Community Health and Nurses bargaining associations are set to meet March 22 in New Westminster for bargaining proposal conferences for members in those collective agreements.



# LESSONS FROM A WELL-OILED MACHINE

HSA'S CHAPTER AT THE BC CANCER AGENCY'S VANCOUVER CANCER CENTRE IS A FORCE TO BE RECKONED WITH

**BY SAMANTHA PONTING**  
HSA COMMUNICATIONS

Turning out impressive numbers for its events and meetings, the chapter's core team has excelled at member outreach, rights education, and communication. They know that a strong chapter is an important step to creating a workplace where all workers are respected.

It has 632 members, and its 12 stewards and five occupational health and safety stewards are all actively working to engage the membership.

Some might say the chapter is a well-oiled machine, driven by a sense of determination. "Well, you see, we're very persistent. That's what makes us work very well together. And we're determined," says Chief Steward Elaine Leong.

In 2017, the chapter held six chapter meetings, nine steward meetings, and sent 21 bargain-

ing proposals to the HSPBA Bargaining Proposal Conference in December. Leong says the chapter meetings have averaged 50 to 60 people, nearly 10 per cent of the membership.

Organizing six chapter meetings in a year is not a simple task. Different stewards take on roles from room bookings, placing food orders, writing an email announcement, attendance forms, handing out collective agreement books and creating a dynamic Powerpoint presentation - working collaboratively to form a polished and effective meeting. For members who can't attend meetings, notice boards at each of the six work-sites are updated regularly. Frequent walkabouts help increase chapter meeting turnout and build momentum for chapter events.

Leong says the team's greatest accomplishment in 2017 was a

food truck event they organized with HSA's Vancouver General Hospital chapter. Together, the chapters attracted 450 members. "We gave out free vouchers to our members and just got them to come out, to enjoy the sun and the food," says Leong.

Sharing in tacos and ice cream, the chapter introduced members to their steward team and spoke about what the union could do for them.

Looking ahead to 2018, Leong says her chapter's major priority is to engage more members.

"A strong chapter is an active chapter," she says. "We're always actively thinking of fresh ideas to draw in those members, and I think that's what keeps us motivated."

She would like to increase the number of people attending chapter meetings and build the steward team to include greater

departmental representation, so that members across the workplace are well educated and actively involved in building stronger working conditions.

“We want to empower our members and let them know they share in the responsibility of knowing their collective agreement, because if they’re not aware of their rights as workers, then how can they hold their employer to them?”

### Inspired by one another

“As a chapter we’re learning and growing, but we have so much more to learn from other chapters,” says Leong.

That’s why she is working to establish regular meetings with other chief and assistant chief stewards. Stewards from other chapters have been invited to attend the BCCA chapter meetings. Leong hopes that through this networking, her chapter can be a source of encouragement and support for others. And a little encouragement can go a long way towards recruiting fellow members into leadership positions.

This was the case for Leong when she made the choice to run for Chief Steward.

“Why did I do it? Because I was nominated. I thought maybe someone had confidence in me,” she reveals.

“Otherwise, I would have never run. I was only a general steward for one year prior so I thought I had big shoes to fill for someone who hardly had any experience.”

But Leong is confident that there’s a place for everyone in the union who wants to advocate for a better workplace.

“Well anyone can do it! As long as you have energy and you’re motivated, and you believe in your rights.”

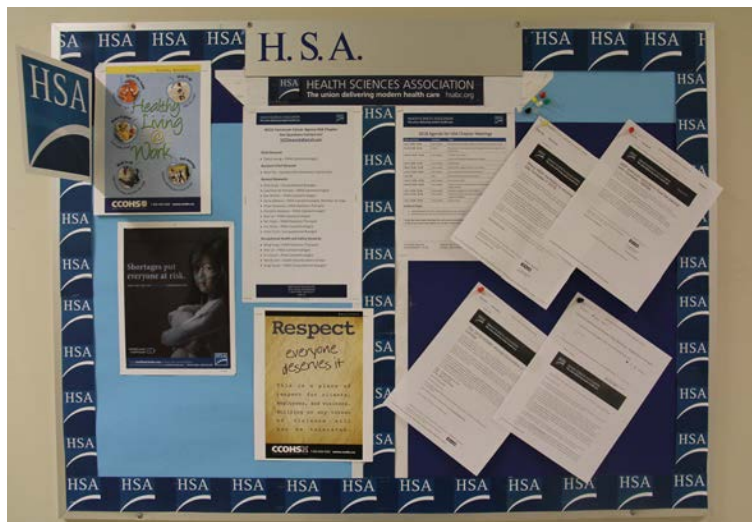
“We get our inspiration from our fellow stewards and from head office. With the support of head office, and all of our stewards putting in the extra effort setting things in motion, we know we are able to deliver.”



## WELCOME PET FACILITY WORKERS!

HSA extends a warm welcome to new HSA members working at the BC Cancer Agency’s PET Cyclotron Radiochemistry Facility, housed underground at the Vancouver Cancer Centre.

These 13 new members work as cyclotron operators, lab safety coordinators, radiopharmacy chemistry technicians, quality assurance specialists and validation specialists. Welcome to the HSA family!





FINANCE MINISTER CAROLE JAMES. PHOTO FROM PROVINCE OF BRITISH COLUMBIA

# BUDGET 2018: A WELCOME SHIFT IN PRIORITIES

**BY ANDY LONGHURST**  
HSA RESEARCHER AND POLICY ANALYST

**THE NEW BC NDP GOVERNMENT UNVEILED ITS FIRST PROVINCIAL BUDGET ON FEB. 20 WITH HISTORIC INVESTMENTS IN HEALTH CARE SERVICES, A NEW UNIVERSAL CHILD CARE PROGRAM, AND AFFORDABLE HOUSING.**

The three-year budget plan includes:

- \$150 million to improve access to primary health care through multi-disciplinary health care teams, including health science professionals;
- \$548 million to improve seniors' care, with a focus on long-term residential care;
- \$290 million as a continued response to the opioid overdose crisis (already announced September 2017), including improved mental health and addictions services;
- \$105 million in funding toward eliminating or reducing deductibles on prescription drugs for low income households;
- \$1 billion for BC's new universal child care program, which will reduce costs for families and create more than 22,000 new licensed child care spaces, with additional funding to reduce waitlists for supported child development and aboriginal supported development programs;
- \$18 million to services that provide outreach, counselling and crisis support for women and children who experience domestic violence, sexual assault and other crimes;
- Hiring more teachers and bringing BC's total to more than 3,700 new teachers across the province to support students.





HSA PRESIDENT VAL AVERY WITH MINISTER OF MENTAL HEALTH AND ADDICTIONS JUDY DARCY

HSA is pleased to see the creation of BC's first new social program in a generation – universal child care. Starting bold with a \$1 billion investment over three years, this funding builds a strong foundation for early childhood development that meets the needs of all families and children.

HSA has advocated for provincial action to address long wait times for families trying to access early childhood intervention services, including occupational therapy, physiotherapy and speech and language pathology.

“Recruitment and retention for health science professionals is a big challenge – and means that families and children can face long waits accessing publicly funded care. A focus on inclusive child care for children with disabilities is very welcome news,” says HSA President Val Avery.

Budget 2018 also takes strong actions to address housing affordability with a focus on supply, demand and increasing security for renters. With \$1.6 billion in operating and capital funding over three years to build and maintain affordable housing, Budget 2018

represents the biggest housing investment in BC's history.

In addition, the budget tackles the problem of speculation in the housing market, which makes it very difficult for young professionals and working families to afford a home. A speculation tax and increases in the foreign buyers tax were introduced to reduce international housing demand and curb investor-led speculation.

These historic investments were not welcomed by all. Some pundits claim that our province cannot afford new programs and service improvements. But the evidence does not support this argument. In fact, BC is in very good fiscal shape with strong economic indicators.

Senior Economist Iglia Ivanova and Public Finance Analyst Alex Hemingway of the Canadian Centre for Policy Alternatives – BC recently noted that “now is the time to do this as interest rates remain near historic lows, our debt level is manageable and our taxes are some of the lowest of all provinces.” Surpluses are budgeted for the three years of this budget plan.

The BC budget did fall short in some key areas. The BC Poverty Reduction Coalition – comprised

of over 70 coalition members and 400 supporting organizations – was disappointed that there were no increases to income assistance and disability rates, which leaves more than 190,000 British Columbians struggling to survive.

The basic welfare rate is just \$710 per month. Poverty and inequality are unnecessary and expensive to society – and contribute to poor health and avoidable pressures on the health care system.

Even though BC has remained one of the most prosperous provinces in Canada, Finance Minister Carole James notes that British Columbians have suffered from previous budgets that fail to put people first.

“For too long, British Columbians have not been able to get the services that they need or afford to live in the communities in which they grew up in. We are taking bold action to change that with Budget 2018 – a budget that works for everyone in BC,” says James.

For more on this historic budget, read analysis provided by the Canadian Centre for Policy Alternatives ([www.policynote.ca](http://www.policynote.ca)) and the BC Health Coalition ([www.bchealthcoalition.ca](http://www.bchealthcoalition.ca)).



CANADIAN HEALTH ECONOMIST STEVE MORGAN, BC FED SECRETARY TREASURER AARON EKMAN, AND CLC PRESIDENT HASSAN YUSSUFF SPEAK AT A PHARMACARE TOWNHALL IN VANCOUVER ON FEB. 21.

# A PLAN FOR EVERYONE

## THE CASE FOR UNIVERSAL PHARMACARE

**BY SAMANTHA PONTING**  
HSA COMMUNICATIONS

About one third of Canadians do not have prescription drug coverage. For some people, this can mean life or death. This is the tragic story of Judy Pope, a Cambridge, Ontario woman whose life-prolonging medicine was so expensive that she died without it. Her husband Gary tells their family story in a video produced by the Canadian Labour Congress (CLC) as part of its Plan for Everyone campaign, a national campaign calling for the creation of a universal Pharmacare plan.

Tommy Douglas, the founder of Canadian Medicare, always envisioned universal Pharmacare as part of the public health system.

“We believe it is time to complete the work that Tommy Douglas started,” says CLC President Hassan Yussuff. Doctors

***“Our cherished Canadian Medicare program is the only such program in the world that ends when a patient is handed a prescription to fill.”***

*- Canadian Health Economist Steve Morgan*

for Medicare, the Surrey Board of Trade, and CARP (formerly the Canadian Association for Retired Persons) are partners in the campaign.

Yussuff says approximately 3.5 million Canadians do not have any form of prescription coverage. Women and low-wage precarious workers are least likely to be part of a plan.

Yussuff says that for workers with plans, “Workplace coverage could be allocated to other things if not part of Pharmacare.”

Provincial and territorial governments and the federal government are all spending money on

prescription programs in some fashion. The BC government announced Feb. 9 that it would be injecting \$105 million into the province’s current Pharmacare program to eliminate deductibles for families with net annual incomes under \$45,000.

Ontario recently extended prescription coverage of 4000 different medications to people under age 25. Depending on the province or territory, there may be some coverage available based on income, age, or disability.

However, these programs still leave many Canadians without coverage. Others are unable to

## The economics of Pharmacare

According to the CLC, it would cost the federal government 4.5 billion dollars to implement a universal Pharmacare plan, in addition to the funds currently spent across governments on Pharmacare.

“There’s been many different studies done, including one from the CCPA, one from the parliamentary budget office – every one of these studies have established that there will be massive savings for Canadians as a whole,” says Yussuff. The CLC reports that a \$1 billion annual investment by the federal government would bring \$7.3 billion per year in savings to Canadians.

Without broad, coordinated purchasing power, Canada is left paying the second highest prescription drug costs in the world, next to the United States. There is evidence from examining cases in other countries that there would be massive savings if Canada were to combine its purchasing power under one plan.

The case of New Zealand is a stark example. Yussuff reports that New Zealand pays on average 40 per cent less for brand name drugs than Canada, and 90 per cent less for generic drugs. In some cases, this rate can go as high as 600 per cent more. For example, a year supply of Lipitor – a drug that lowers cholesterol – costs \$15 per year in New Zealand. The same drug costs \$811 in Canada.

Access to medication is an important component of preventative care. According to Statistics Canada, 100,000 people self-reported that they have seen an increase in their use of public health services because they didn’t take needed prescriptions.

Meanwhile, the Parliamentary Budget Officer estimates that every year, 60 million prescriptions go unfilled because of patients’ inability to pay.

Yussuff says universal Pharmacare also makes sense for employers. “We believe a healthy workforce will lead to a more productive workforce in this country.”



## Pressure is mounting

A Plan for Everyone campaign has been building steam. On Feb. 6, a large-scale lobbying effort saw union representatives from across the country gather to speak to politicians about a universal Pharmacare plan.

“Our day started out with a meeting with the health minister. We laid out for her the reasons for this to happen,” says Yussuff.

“We had 324 lobbyists that took our call to members of parliament, other cabinet ministers and senators to engage them in the conversation.”



On Feb. 27, the federal government announced that Ontario Health Minister Eric Hoskins will chair an advisory council on the development of a national Pharmacare strategy.

While the announcement was welcomed by the CLC, some critics, such as MP Don Davies, question the value-added of launching a new committee when research and consultation into Pharmacare has already been underway through the Parliamentary Health Committee. The committee has heard from 90 witnesses across Canada.

“The minister is awaiting three committee reports to provide some guidance to her,” says Yussuff.

The CLC is also ramping up its on-the-ground efforts, with town halls happening across the country, and it has collected more than 30,000 signatures on a petition.

“We’ve got to keep the heat on. We need our federal government to be there.”

**[Sign the petition at aplanforeveryone.ca.](http://aplanforeveryone.ca)**

# DOMESTIC VIOLENCE AND WORKPLACE SAFETY

## Why policy change is needed

**BY SAMANTHA PONTING**  
HSA COMMUNICATIONS

When we talk about health and safety in the workplace, domestic violence issues rarely enter the discussion. Yet for someone who has been awake most of the night from duress, their ability to manage workplace risks and hazards can become a serious issue.

“For those people that might be in a workplace driving company vehicles, working on a drilling rig, or doing iron work, you need to have your wits about you,” says Tracy Porteous, Executive Director of Ending Violence Association of BC (EVA BC).

“If you’ve been up all night because you’re being abused and you’re experiencing a level of trauma that causes you sleeplessness, all it takes is one second for an accident to happen.”

Danger can also arise for someone being stalked at or around work. Their physical and emotional safety and the safety of their co-workers becomes compromised.

“The number one place for her to be stalked or followed is at home. The number two place is at work,” says Porteous.

“If she has an estranged spouse that is threatening to hurt her, he may be following her to work, he may be sitting in his car,” she explains. “All of her co-workers are at danger because

they could get caught in the crossfire.”

Porteous says that the most dangerous thing a woman can do who while in a violent relationship is leave their partner. Her safety is most at risk during the period between two and 18 months after leaving.

A 2014 study produced out of Western University found that one third of workers across Canada had experienced domestic violence at some point in their life, and in over half of these cases, violence followed the

*“I personally know women who have been fired because their bosses have said ‘if you miss one more day of work, you’re going to lose your job.’”*

person to work.

According to a US study published by the American College of Epidemiology, homicide accounts for the largest or second largest cause of workplace deaths among women, depending on the year. Approximately one third of women murdered at work are killed by intimate partners.

“I think a lot of employers don’t understand why they should care about this, or why this is a business issue for them. It doesn’t take very much scratching of the surface to under-

stand,” says Porteous.

Provinces and territories across Canada consistently have regulations that require employers to address workplace hazards. However, many provinces, including BC, have no regulations that outline the responsibilities of employers to address workplace hazards that employees face as a result of domestic violence.

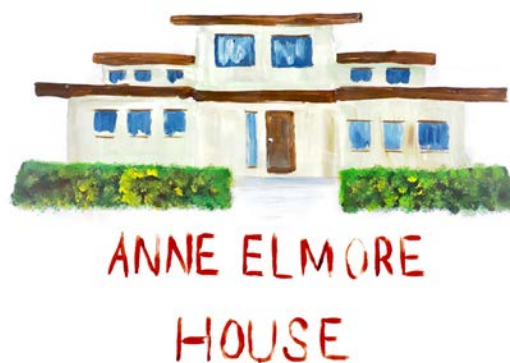
“We’re not there yet,” says Porteous. “But the employer’s responsibility to do something about a hazard is very clear.

I think it would be neglectful of an employer if they knew that somebody on their staff was experiencing domestic violence or perpetuating violence and they didn’t address it.”

In contrast, Ontario has made some important headway on this issue. Section 32.0.4 of Ontario’s Occupational Health and Safety Act names domestic violence as a threat to workplace safety, and, in cases where domestic violence could expose a worker to a workplace physical injury, requires the employer to take “every precaution reasonable in the circumstances for

HSA members work in transition house societies across BC, supporting women and children experiencing violence. They work as counsellors, program coordinators, advocates, support workers, residency workers, and receptionists, among others.

March is Community Social Services Month. We thank all members who work tirelessly in the community social services sector.



Anne Elmore House is a transition house operated by the Campbell River and North Island Transition Society.

the protection of the worker.”

In the past, EVA BC has called for provincial policy or legislation that delegates responsibility to the employer to deal with hazards associated with domestic violence and sexual assault, even when it doesn't happen in the workplace. In 2015, WorkSafe BC published an employer handbook on addressing domestic violence in the workplace. While serving as an importance resource, Porteous says a clear mandate for employers to address domestic violence is important. “We don't have that yet but we do believe that it is needed.”

Job-protected leave from work is critical for employees experiencing domestic or sexual violence who may need to relocate or seek community services such as medical attention, legal services, or counselling.

“They might have to go to the hospital to attend to their injuries. They might have to go to court. They might be so traumatized that they can't keep up and will need to have some time off,” says Porteous.

According to a 2014 national study, 8.5 per cent of domestic violence survivors reported losing a job due to domestic violence. 82 per cent said domestic violence negatively impacted their work performance and 38 per cent said it affected their ability to get to work.

Workers in precarious jobs, such as those in the service industry, are particularly vulnerable.

“I personally know women who have been fired because their bosses have said ‘if you miss one more day of work, you're going to lose your job,’” says Porteous. “And this is not ok. This is a tragedy.”

There is legislation in both Ontario and Manitoba providing job-protected paid leave to survivors of domestic violence, and in the case of Ontario, these protections are extended to survivors of sexual violence and parents whose children are at risk of domestic or sexual violence.

Ontario provides 10 consecutive or intermittent days of leave per year in addition to 15 consecutive weeks of leave annually.

Manitoba provides up to 10 consecutive or intermittent days per year and 17 consecutive weeks annually. In both provinces, five of these days must be paid.

In 2017, BC NDP MLA Jodie Wickens introduced legislation to amend the Employment Standards Act to allow for 10 days paid leave and 17 weeks of unpaid leave for an employee who has experienced, or whose child has experienced, domestic or sexual violence. While the bill passed its first reading, it was not passed before last year's election.

But legislation is just one piece of the puzzle. Porteous says that “more than anything, what we need to see is more investment in community anti-violence services and cross-sector anti-violence teams, because we know they're saving lives.”

“We have to understand that when people have been hurt in this way, we have to rally around them,” says Porteous.

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# The role of men in preventing violence against women



BC LIONS PLAYERS PRESENT TO YOUTH AT A SCHOOL IN NORTH DELTA ON THE BE MORE THAN A BYSTANDER CAMPAIGN.

HSA, through the BC Federation of Labour, is a supporter of EVA BC's Be More Than a Bystander campaign, a partnership between EVA BC and the BC Lions football team, which seeks to educate the public about how to speak up against violence against women. A major component of the campaign is youth education in schools.

Since its inception in 2011, the program has educated over 106,000 people across BC, says Porteous. In the off-season, members of the BC Lions travel across the province visiting high schools to discuss the role of men in ending gender-based violence.

Porteous says women have been carrying the majority of the burden when it comes to educating society about

gender-based violence.

"But we didn't really feel like we were reaching men," recalls Porteous. "So I went to the BC Lions and I said, 'Ok look, you guys are at the top of the food chain in terms of your large iconic stature of masculinity in the world, and it would be very powerful to have you, more than any group of men, speak up about this issue.'"

"Anybody who has had the opportunity to be in a room when these big football players are talking about the importance of respecting women and girls and the importance of all of us contributing to making a safe and respectful community...you can hear a pin drop," she says.

"Because it's so unusual. It's so unusual to hear men, especially big alpha males, talking about this."

*"Women have been carrying the majority of the burden when it comes to educating society about gender-based violence."*

## THE FACTS ON DOMESTIC VIOLENCE

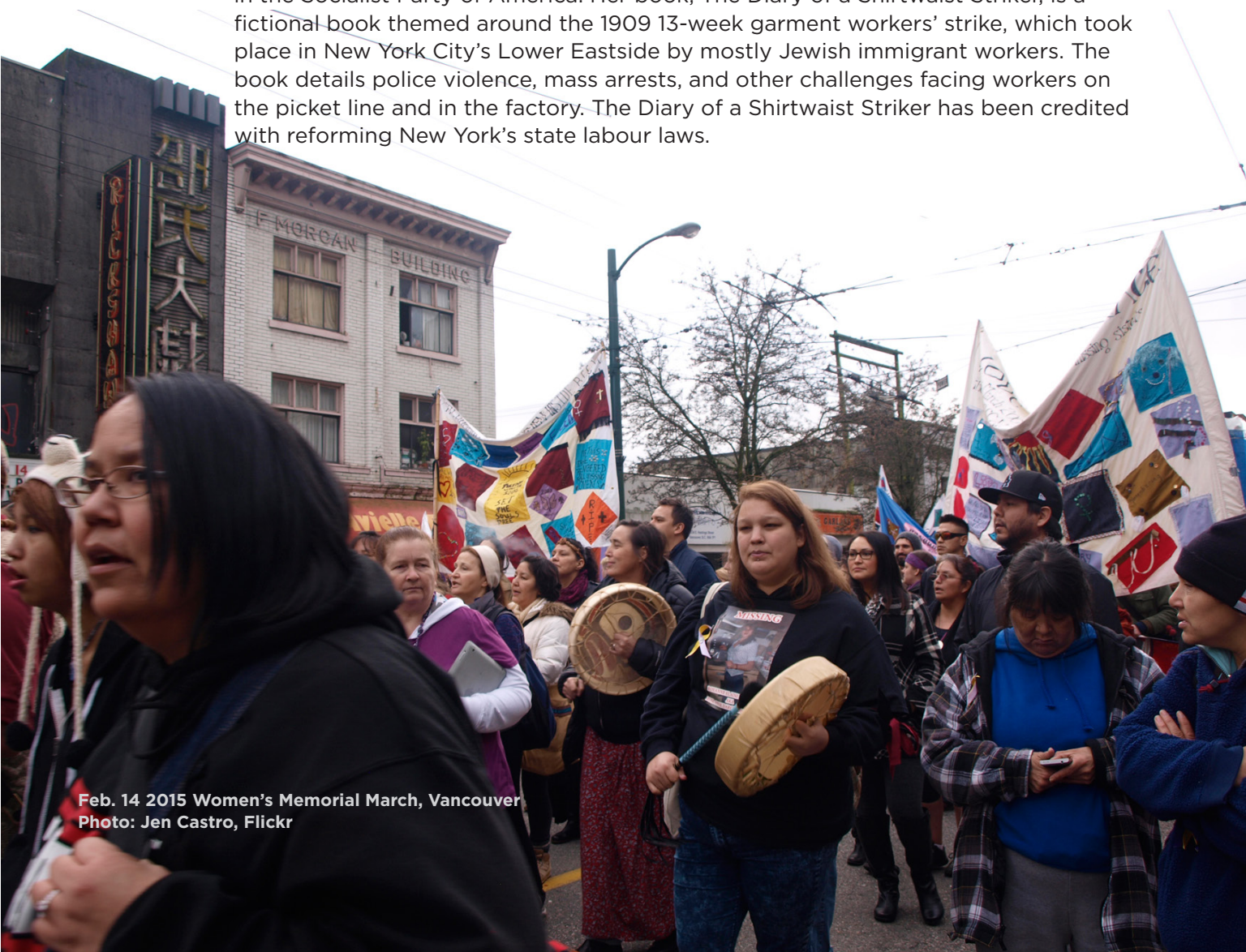
When you look at the statistics, it's clear we have a long way to go to end violence against women. While reports suggest Canada has experienced an overall decline in violent crime, rates of domestic violence are actually on the rise, according to the Ending Violence Association of BC (EVA BC).

- In BC, domestic violence charges by Crown Counsel have increased from 9,000 in 2002-2003 to 12,000 in 2009, 2010, and 2011.
- In 2009, domestic violence represented 11 per cent of police-reported violent crime in Canada.
- Indigenous women, women with disabilities, and young women are at the highest risk of intimate partner violence
- According to a 2014 Statistics Canada survey, Indigenous women report being three times more likely to experience violence than non-Indigenous women, and three times more likely to experience spousal violence.

# The origins of International Women's Day

Celebrated every year on March 8, International Women's Day commemorates the global struggle for women's rights. It was officially adopted by the United Nations in 1975, but the day is said to have been originally launched at an international women's conference organized in August, 1910 in Copenhagen, Denmark, before a meeting of the Socialist Second International. The launch was part of a strategy in promoting equal rights and suffrage for women.

A National Women's Day, a precursor to the 1910 International Women's Day, was held in New York on Feb. 28, 1909. The idea has been attributed to Theresa Malkiel, a Jewish labour activist, writer, suffragist and anti-racist who rose to leadership in the Socialist Party of America. Her book, *The Diary of a Shirtwaist Striker*, is a fictional book themed around the 1909 13-week garment workers' strike, which took place in New York City's Lower Eastside by mostly Jewish immigrant workers. The book details police violence, mass arrests, and other challenges facing workers on the picket line and in the factory. *The Diary of a Shirtwaist Striker* has been credited with reforming New York's state labour laws.



Feb. 14 2015 Women's Memorial March, Vancouver  
Photo: Jen Castro, Flickr

# HOW TO EFFECT CHANGE AS A MEMBER-AT-LARGE

**BY SAMANTHA PONTING**  
HSA COMMUNICATIONS

“We need to be looking at the world through different eyes,” says Carol Bourque, an HSA Member-at-Large (MAL) for Region 10, and a Health Records Administrator at the University Hospital of Northern BC in Prince George.

Bourque says the most rewarding part of being a MAL is being able to bring a different perspective forward within her union. “Living up in the North, it feels like a lot of decisions are often being made in the Lower Mainland,” she says. “In Vancouver, for example, they have so many hospitals in a small radius. Up here in the North, it’s at least an hour to the nearest hospital. The region is larger. Our issues are different. It’s nice to be able to bring a voice.”

Bourque was elected two years ago, and her term expires April 28, on adjournment of the union’s 2018 annual convention.

Under Article 11.3 of the HSA Constitution, nominees must have been an HSA member for at least one year prior to their term in order to run for an MAL position. Two MALs are elected for a two-year term for each region with 1,999 members or less, and two alternate MALs may also be elected in case an MAL needs to step down. Regions with more than 1,999 members are entitled to elect an additional MAL for each additional 1,000 members. HSA is divided into 10 regions across BC.

Bourque has used her position as an MAL to shed light on the experiences of Indigenous women, particularly through her work on the HSA’s Women’s Committee. “I’m Indigenous. I’m Métis, and living in Prince

“*Our issues are different. It’s nice to be able to bring a voice.*”

George. I’m able to bring an understanding of the cultural differences and the differences Indigenous women face,” she says.

“My family has been affected by the issue of Murdered and Missing Indigenous Women. I have a relative who has been missing for 16 years out of Alberta. So I think being able to bring that perspective is important.”

Members-at-Large participate in the HSA’s standing and special committees, serve as delegates to the HSA’s annual convention, and participate in the union’s regional meetings and the BC Federation of Labour convention. One MAL delegate for each region also sits on the HSA’s Resolutions Committee. As committee members, MALs give input into the committee’s work.

“On the Women’s Committee, we’ve been putting together resolutions to go to convention and brainstorming how we can promote more involvement,” says Bourque.

The Women’s Committee has been working actively to promote greater representation of women in the union’s elected leadership positions. “The majority of our membership is women. The leaders within the union should reflect the members it represents. I believe inspiring and motivating women is so important,” says Bourque.



She says it’s critical to give women a voice and let them know that it’s ok when they have different viewpoints. “Having diversity brings so many different perspectives.”

When asked what words of encouragement she would give to women who are considering running for elected positions, Bourque said, “It’s just an amazing opportunity, to be involved and to know that you can have an impact.”

“There are opportunities within HSA and people should take advantage of them,” she says. “I’ve learned so much. The resources that are provided to the MAL, they’re just amazing, and there is so much more to learn.”

“A lot of people don’t even realize what the union represents. So come out to a meeting. Ask questions. Check out the website. It’s good to be involved and to be a part of the union from a different standpoint.”

Bourque says that Region 10 just elected a large group of stewards, and a few young women have stepped forward. “It’s awesome. I’m going to encourage them to take advantage of every educational opportunity that is open to them,” she says.

“You don’t realize how important your voice is until you have the opportunity to attend convention or the opportunity to be a Member-at-Large. Here’s your chance, right?”



# READY TO RUN?

## IT'S TIME TO DECIDE IF YOU'LL THROW A HAT IN THE MUNICIPAL RING

**BY CAROL RIVIÈRE**  
HSA COMMUNICATIONS

ON OCT. 20, BRITISH COLUMBIANS AROUND THE PROVINCE WILL ELECT MAYORS, CITY COUNCILLORS, SCHOOL TRUSTEES AND REGIONAL DISTRICT DIRECTORS.

Vancouverites will elect park board commissioners, and Gulf Islands residents will elect trustees to represent them on the Islands Trust.

It's time for anyone who is serious about running for these positions to start recruiting their campaign team, planning their campaign strategy, and raising the money to fund it.

HSA members hold elected positions in communities throughout BC, and have a lot to offer their communities by serving as local government decision makers.

Local labour councils, composed of delegates representing all the unions in a region, will spend months prior to the October election working to identify candidates who support the issues that really matter to working families,

and will serve as effective community advocates.

In deciding whether to endorse a candidate, labour councils consider each candidate's position on a range of issues, as reflected in such things as the voting record of incumbents, the candidate's responses to a labour council questionnaire and, in many cases, an interview with labour council delegates from several different unions. Affiliated unions then let their members know which candidates have been endorsed by their local labour council. Voter turnout in local government elections is often low, so having a labour council's endorsement can be a deciding factor for many candidates.

HSA members who plan to run for local government are urged to contact the labour council in their area as soon as possible to find out the process and timeline that their labour council uses to vet candidates.

Members can also contact Carol Rivière at the HSA office to obtain contact information for their local labour council.

### LOOKING FOR SUPPORT FROM HSA?

In previous municipal elections, HSA was able to provide members with Political Action Fund support so they could take union-paid leave to run or work on campaigns. New electoral financing legislation prevents HSA from providing such support in the 2018 election.

Please contact Carol Rivière at [criviere@hsabc.org](mailto:criviere@hsabc.org) to discuss other ways that HSA may be able to support you to run or work in the upcoming election.

# JOINT HEALTH AND SAFETY COMMITTEE EVALUATIONS NOW DUE

**BY GERI GRIGG**  
HSA OCCUPATIONAL HEALTH AND SAFETY OFFICER

EACH JOINT OCCUPATIONAL HEALTH AND SAFETY (JOHS) COMMITTEE IS REQUIRED TO CONDUCT AN ANNUAL EVALUATION TO ENSURE THE COMMITTEE IS COMPLYING WITH REGULATIONS, AND TO IMPROVE FUNCTIONING AND SET GOALS FOR THE UPCOMING YEAR.

## WHAT SHOULD WE LOOK FOR?

An evaluation tool is available at [www.worksafefbc.com](http://www.worksafefbc.com). The tool is easy to use and covers important parts of the JOHS committee's work and process, such as:

- Do we meet monthly?
- Do we conduct inspections regularly?
- Do we have quorum at our meetings?
- Are the minutes posted where all workers can see them?
- Do members of the committee have time away from their work tasks to prepare for and attend the meetings?

## Find the Joint Health and Safety Committee Evaluation Tool at [www.worksafefbc.com](http://www.worksafefbc.com).

- Does the employer provide a minute taker for the committee?

### WHAT ARE SOME COMMON ISSUES THAT ARISE?

1. *More employer representatives than employee representatives.*

The regulation is clear that a JOHS Committee must have equal representation from the employees and employers. Any imbalance must favour the employees. Supervisors who exercise managerial functions cannot be employee representatives. They can attend to address specific issues within their departments at the request of the committee, or they can represent the employer.

2. *The minutes are on the Intranet.*

Hard copies of the minutes must be posted for a minimum of three months in a location that is accessible to all employees. In many sites, this is near the union boards.

3. *Investigations exclude the employee representative.*

Preliminary investigations must take place within 48 hours. This is to rectify any imminent dangers. If an employee representative is not available, the union supports the employer taking action immediately to rectify a hazard (such as a spill or leak). A more robust investigation can take 30 days. Do not let your employer rush through an investigation to avoid including you.

4. *Issues of psychological safety are not coming to the committee.*

The JOHS Committee is charged with preventing injuries and diseases in the workplace, including non-physical injuries or risks. In many cases, the JOHS is the best place to discuss issues such as compassion fatigue, workload, and dealing with difficult people.

If you have not done an evaluation for your JOHS Committee, the time is now.

If you have a question about occupational health and safety, contact [ggrigg@hsabc.org](mailto:ggrigg@hsabc.org).

# HOW IS MY PENSION AFFECTED WHEN I WORK PAST 65?

BY DENNIS BLATCHFORD

HSA'S PENSIONS AND BENEFITS ADVOCATE DENNIS BLATCHFORD ANSWERS COMMON QUESTIONS RELATED TO PENSIONS.

**I am nearing my planned retirement date when I turn 65 early next year. However, as I get closer to the day, I am considering whether I am truly ready to retire. I feel good, I like my job, and my spouse and I are caring for an elderly relative. This means for a few years at least, we wouldn't be travelling far even if we had the time and inclination to do so. Are there any consequences to working past age 65 that I should be aware of?**

For the purposes of your Municipal Pension Plan (MPP) pension, no, there are no differences if you continue to work past age 65. You and your employer continue to contribute to your pension just as before.

The only barriers to remaining a contributing member of the plan would be if you reached the maximum 35 years of pensionable service, or, you aged out of the plan. But that wouldn't happen until the year you turned 71; over six years from now. Other than that, it's full steam ahead until you decide it's time to put your feet up.

**So if I continued to work until age 71, would my contributions end on my birthday?**

No, your contributions would end on Nov. 30 in the year you turn 71. In your case you would be nearly 72 before your contributions would end. Past the Nov. 30th date, the pension plan would not accept your contributions.

Instead, the plan would start sending you your monthly pension. However, this doesn't mean the end of your employment. You'll simply be keeping more of your earnings should you choose to remain working. Plan members have been known to work well into their 70s.

**What about Canadian Pension Plan (CPP) contributions?**

Again, no change. CPP would continue to accept your contributions and you would build a higher CPP benefit as a result. Again, like the MPP, there is an age limit for contributing (age 70) and then you must collect your CPP pension. The CPP reforms that allow contributions to age 70 are actually quite a good deal, allowing significant improvement in CPP benefits for those able to maximize their contributory window.

Over a typical retirement, this represents a lot of extra

income, although only about 1 per cent of eligible Canadians take advantage of it. Of course if you die early it's not a good deal. But you are more likely to see 85 (and beyond) than any previous generation, so the trend is certainly in your favour.

**What happens to my Old Age Security (OAS) if I continue working past 65?**

With OAS you also have a choice. You can collect the benefit, which would form part of your taxable income for the year, or, simply defer your OAS and collect a higher benefit later. Remember that OAS has an automatic enrollment system, and most people will be notified shortly after turning 64 that they are enrolled. If you have been notified but don't want your OAS benefits to commence at 65, you will need to contact them.

If you haven't received a notice, you should assume that you are not enrolled and you will need to take steps in order to receive the OAS benefit. For more information on OAS and other federal programs, Employment and Social Development Canada has a lot of online information that will be of value to you. Good luck with your retirement planning.

If you have a question or concern about pensions, contact [dblatchford@hsabc.org](mailto:dblatchford@hsabc.org).



Young Worker - precarious employment  
 - not having to work multiple jobs  
 - environmental responsibility \*  
 - pro technology \*

Young In Union - educating new union members + young workers  
 - knowing how/who to connect to  
 - talk to students before they enter the union

Engage - career fairs / students  
 - social media  
 - welcome to young workers in the "welcome kit"  
 - regional young workers forums (pending feedback on availability)

Barriers - we are often the coverage as casuals (sometimes working multiple sites or even contracts)  
 - workload  
 - ignorance, just don't know  
 - lack of space in leadership roles

# YOUNG WORKERS STEP UP

HSA'S FIRST YOUNG WORKERS' FORUM, HELD LAST NOVEMBER, BROUGHT HSA'S YOUNG MEMBERS TOGETHER FROM ACROSS THE PROVINCE TO EXPLORE THE MANY ISSUES FACING THEM TODAY.

**BY SAMANTHA PONTING**  
HSA COMMUNICATIONS

"I was really curious to see if there were any other young workers out there," says Kirsten Zaleschuk, describing her decision to attend HSA's first Young Workers' Forum (YWF), held from Nov. 26-28, 2017, for HSA members 35 and under.

"Because I am young, new to my field, and new to a union, I figured I'd give it a shot so I could learn more."

21-year-old Zaleschuk works as a transition house counsellor, women's support worker, and receptionist at the Campbell River and North Island Transition Society. She first heard about the forum through a phone call. She was driving when HSA reached out to her about the event.

She quickly discovered that, like herself, there were other young HSA members interested in improving their workplaces,

strengthening their union, and participating in community solidarity.

As it turns out, young workers are becoming an increasing portion of HSA's membership - one third of HSA's members are 35 and younger - with more and more young people entering jobs in the health and community social services sectors.

"I learned that I wasn't alone," says Zaleschuk, which can be a powerful experience for a budding labour activist who's new both to her field and to her union. There aren't many young workers where she works, so she was surprised to see so many of them representing their union at the forum. 21 young workers from across BC participated.

"And I learned, more than anything, that the union was interested in what we had to say, which was pretty neat, and actually a pretty big eye-opener."

The interactive forum was an opportunity for young HSA members to come together and discuss important questions facing the union related to its engagement of young workers. Participants explored some of the broader challenges facing young people in the workplace, and provided feedback to HSA.

Over the course of three days, they came together to learn about the work of the HSA and its partners, such as the BC Health Coalition and the BC Federation of Labour. Participants learned about young workers' occupational health and safety and the province-wide Fight for \$15 campaign. There were also panels on migrant justice, poverty and inequality, and environmental activism.

"All of this sparks kindles of flame for that passion for social justice," says Zaleschuk.

"The forum was more about

# “We have a lot of clients and patients who think we’re young, so how can we be qualified? How can someone in their 20s assist them when they’re in mid-life?”

sharing what we had to say rather than being told what we had to know.”

“They encouraged us to network. They encouraged us to challenge the policies and the protocols, the practices that the union had in place. All-in-all it was a very nurturing place for young minds.”

“It really encouraged us to come out of our shells and get more involved,” explains Zaleschuk.

## Challenges facing young workers today

Over the last three decades, Canada has, like many Western nations, experienced a tide of neoliberalism, whereby cuts to social spending, increased economic inequality, the privatization of public assets, and the deterioration of union rights have shaped national economic policy. As a result, young people as a whole have not had the same advancements as the generation that came before them. According to a 2015 article by the Canadian Centre for Policy Alternatives, 60 per cent of low-wage earners make less than 15 dollars per hour and are aged 34 or younger. The majority are women. In the face of precarious work prospects and crippling debt from post-secondary

education, young workers have had significant challenges to overcome.

Zaleschuk says ageism is a real barrier for young workers. “We do face a lot of ageism. We have a hard time being hired for full-time positions or part-time positions so a lot of us struggle with precarious work. A lot of us don’t know our rights.”

She says the education and work experience of young workers isn’t always respected.

“We are considered to be inexperienced even though a lot of us have been in school very recently for a number of years to get our degrees or our diplomas,” she says. “We have experience shadowing other professionals and learning through their experience.”

“Some of our experience isn’t valued because it is either practicum or clinical experience, not paid experience.”

Zaleschuk says clients and patients sometimes share similar attitudes. “We have a lot of clients and patients who think we’re young, so how can we be qualified? How can someone in their 20s assist them when they’re in mid-life?”

## Steps to inclusion

When asked how HSA could

better engage young workers, Zaleschuk says it begins with reaching out. “The only way I ended up even attending the YWF was a phone call. Otherwise, I wouldn’t have known it was taking place.”

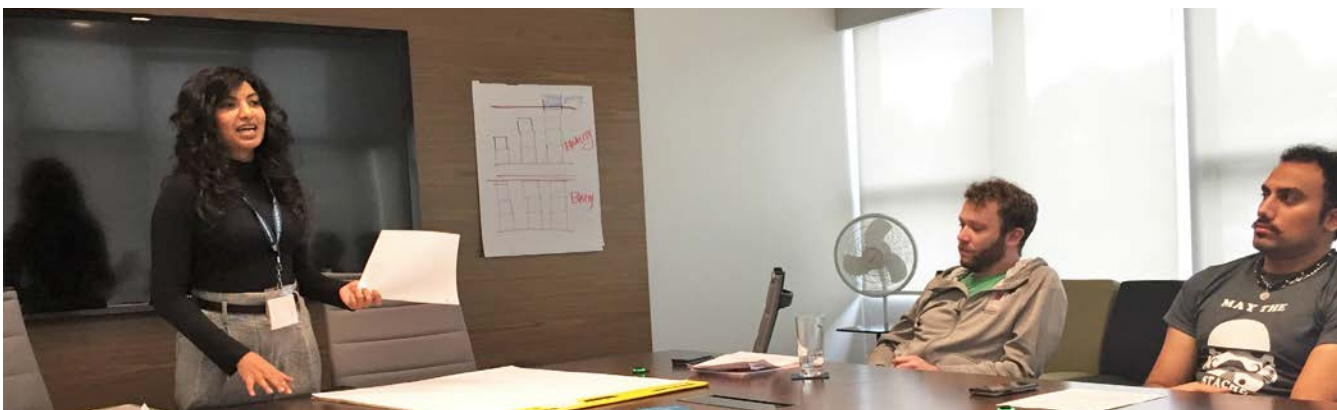
She says it is important to be present on social media and create opportunities for networking. Since the YWF, HSA young workers have started their own Facebook group and are able to bring to each others’ attention different events and social issues.

“I would also say education is a huge piece. I commend HSA for inviting us to their workshops and conferences, and being supportive of us getting there and back.”

“They are willing to support workers, any worker, in all aspect of their lives – career, personal, or otherwise.”

Thinking about formal change, Zaleschuk says it would be beneficial for a young worker to sit on each of the union’s existing committees. “We bring different perspectives. We have a different take on the ideas that are existing, and some new ideas.”

“I think it is very important to have all ages and all demographics’ dynamics present on the existing committees.”





## BRIDGING THE GENERATIONAL DIVIDE AMONG LABOUR ACTIVISTS

Zaleschuk's involvement in the union is fairly new. In January, she volunteered to be an Occupational Health and Safety (OH&S) steward, in part, because of her passion for health services and sense of curiosity. She felt encouraged coming out of HSA's Young Workers' Forum in November.

"Being the youngest member to attend the Young Workers' Forum and being taken seriously in my ideas, my thoughts, what I had to share, say, contribute - that meant a lot. And that really encouraged me to get more involved with the union and to continue to attend events, to stick my neck out and become an OH&S Steward."

She recognizes she has a lot to learn from the experience of others. With the help of HSA, she reached out to Carmen-Anne Menegozzo, a retired HSA union activist also living in Campbell River. The two had never crossed paths before. Menegozzo's involvement with HSA ended in 2015, after 33 years of service as a steward, board member, and staff member.

Zaleschuk spoke to Menegozzo about her involvement in HSA, the role of young workers in union work, and building unity between generations.

**What was your job and where**

**did you work?**

I started out working for the Royal Columbian Hospital in New Westminster as a medical lab technologist, then worked for HSA for seven years. The last 15 years were spent at the Campbell River Hospital as a lab technician.

**What made you decide to get so involved with the union?**

I got involved with HSA because my father was a staunch union supporter. I liked his views on the benefits of being part of a union and how it would help me in my life and career.

**What are your thoughts on young workers in the union?**

Young workers seem to get information from more sources than older workers, but I believe HSA is doing a good job staying in sync with them. I think it would be beneficial to young workers if HSA did more work on why we have unions in the first place. Benefits are hard-earned, not simply given — and the stroke of a pen could change it all. Workers, young and old, can't just sit back and think they'll be there forever.

**What challenges do you recall facing from your time as a young worker (below age 35)?**

I experienced challenges at work because I was an activist.

My employer did not like that I was spending time working for the union, and that these duties took me away from work. There was a certain resistance and it was felt. It made things more difficult. Tense. But I knew that I had the backing of the union, which allowed me to continue on.

**How do you think HSA can foster intergenerational harmony between younger and older workers moving forward?**

I think there could be more mentoring in the union. The union itself could be more proactive in pairing people up and encouraging community connections. People don't have to be from the same workplace in order to address the same issues, successes, and challenges.

**Any thoughts in closing?**

The union helped me grow so much. I was such a shy person, one who never liked to stand up in front of people or be in the spotlight. When you get involved in the union, you end up having to do those things. Eventually I was leading classes of 20 - plus people, thinking 'wow, I've come so far.' The education and opportunities presented to me by the union helped me grow. For people who don't have confidence, know that HSA helped build me up a lot.



## HSA STAFF PROFILE

HERE TO SERVE MEMBERS LIKE YOU

**Name:** Samantha Ponting

**Job title and department:** Communications Officer, Communications

**What you actually do, in your own words:** I frame the work of the HSA and its members in digestible and interesting ways. One of my major projects is the production of *The Report*. I support HSA's campaigns by producing campaign communications tools, doing graphic design and assisting in the development of strategic messaging. I keep my thumb on the pulse of current news and public policy changes, and help communicate these developments to members.

**Why this matters:** I think it is important for our work to be informed by the bigger picture, so that we can most effectively advocate together for quality public health care and quality jobs. Through making connections between the work of HSA, public interest groups, and the broader labour movement, we can build unity. Through communications, I am able to encourage members to get involved in their union, which ultimately makes HSA, its campaigns, and its collective agreements stronger.

**Secret talent unrelated to job:** Drumming and singer/songwriting. I can also hold my own at Boggle.

**Literary, TV or movie character most inspiring to you:** Katniss Everdeen, for her courage and resilience, and her resistance to the "divide-and-conquer" strategies of the Capitol.

**Job before HSA:** Program Coordinator at Next Up BC

**Crappiest job you've ever held:** My first job was a serving position at a café called the Bukamaranga Bean and Bagel. I had to be at work for 6:30am, the boss withheld our tips, and only the guys were allowed to be bakers. They made an extra dollar per hour even though we shared tips evenly. I wish my 14-year-old self knew what I know now about workers' rights!

**Interesting thing you did to help a member in the last week:** Through my work on *The Report*, I supported a few of our dynamic young workers in sharing their voices on issues that matter to them.

**Scariest situation you found yourself in:** Camping overnight alone in Alaska without bear spray.

**Your perfect day looks like:** Sleeping in, eating a nice brunch, and writing music in a sunny location, perhaps while travelling in a foreign country. Then I'd cap the evening off with some live music.

**Currently binge watching:** The Big Family Cooking Showdown.

**Longest you've ever been awake:** I was awake for about 24 hours when my travel alarm suddenly broke on a trip in Scotland. I stayed awake to ensure I would catch my morning flight.



**“My participation in the union is valued and nurtured.”**

**“As a young worker I am proud to be a member of HSA. HSA has given me many opportunities through steward training, the Young Workers’ Forum, and convention to begin my journey of knowledge about workers’ rights and issues. With that growing knowledge I am happy to serve as a steward in Northern Health.”**

**JENNIFER HISCOCK, RESPIRATORY THERAPIST, UNIVERSITY HOSPITAL OF NORTHERN BC**