

HSAА POSITION STATEMENTS & RESOLUTIONS

(chronological order of adoption)

1. Proposed North America Free Trade Agreement (NAFTA)
2. Mandatory AIDS/HIV Testing
3. Canada Health Act expansion
4. Attendance Management for Help, Not Harassment
5. Harassment In The Workplace Unacceptable
6. Student Placements
7. Volunteers Not Replace Employees
8. Social Union threatens Canadian values
9. Non-profit, publicly funded, high quality, accessible Child Care
10. Flat Tax is regressive
11. Employee and Family Assistance Programs supported
12. Local Unit Participation In Joint Activities exemplifies solidarity
13. Discrimination an affront
14. Parental Leave needs expansion
15. Elimination of Poverty
16. Free Trade Area of the Americas (FTAA) compared to NAFTA
17. Renovation of the Canada Health Act – support Romanow
18. Source Testing on voluntary basis
19. Just Transition Fund as part of Kyoto Accord
20. Indoor Air Quality – OH&S concerns
21. Eliminate Health Care Premiums
22. Lobby Alberta to join Federal-Provincial-Territorial Health Council
23. Job Protection & Compassionate Care Leave – change Employment Standards Code
24. Public-Private Partnerships & Unions – representation
25. Public-Private Partnerships opposed
26. Health Council urged to do research into workforce planning
27. Public Automobile Insurance supported
28. Lobby for Canadian Ratification of ILO Conventions
29. Lobby Canadian and Provincial Governments to implement ILO recommendations
30. Progressive Labour Law Reform a priority
31. Union-Made and Fair Trade purchase of HSAА Promotional Products
32. Canada's New Child Care System plan supported
33. Energy Deregulation and Utility Privatization opposed
34. Political Leave should be legal right
35. Reschedule implementation of Ground Ambulance Plan
36. Child Labour in Alberta – deregulation opposed
37. First Contract Arbitration – change the Labour Code
38. Promote identification and testing of hazardous Noise levels
39. Living Wage Policy
40. Organizing
41. Many changes required in Alberta labour legislation
42. Climate Change
43. Pharmacare
44. Reaffirming our commitment to medicare
45. Sustainable Environmental Ethical Purchasing Policies (SEEPP)
46. Purchase of union made and Fair Trade products strengthened
47. Family violence and the workplace
48. On equality - Operations statement
49. Net Neutrality
50. Electoral Reform in Alberta
51. The Global Financial Crisis
52. Improving the Canada Pension Plan for Canadians without Workplace Pension Plans
53. Resolution on Supporting Public Education
54. Resolution on the Elimination of Poverty
55. Resolution on Discrimination and Inclusion in the Workplace of Persons Living with Disabilities

#1

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON

THE PROPOSED NORTH AMERICAN FREE TRADE AGREEMENT

Whereas the Governments of Canada, the United States and Mexico are negotiating the formation of the N.A.F.T.A. with questionable provisions for labour, medicare and the environment, and

Whereas the Canadian Government's proposal to eliminate tariffs on trade will contribute to an increase in unemployment, and

Whereas the huge labour over-supply problem in Mexico leaves little chance that a free market will stimulate the rise of Mexican wages to increase beyond its current level, and

Whereas the loss of funding from the Federal Government to the Provincial Government will affect our quality of life by draining our medicare and social programs,

Therefore be it resolved that the Health Sciences Association of Alberta opposes the Canadian Government's participation in the North American Free Trade Agreement as it stands.

Approved 1993 AGM
Retain as is, 2003 AGM

#2

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
MANDATORY AIDS/HIV TESTING**

Whereas from time to time there are suggestions for mandatory mass HIV screening for all health care providers in Alberta, and

Whereas such screening provides at most a snapshot of a particular moment in time and provides no assurance of the individual's HIV status at any time after the test, and

Whereas health care workers are at far greater risk of contracting the virus from patients, but standard HIV screening of health care consumers is not proposed, and

Whereas the cost of wholesale screening of health care workers would be prohibitive, and

Whereas such screening could lead both health care workers and consumers into a false sense of security, potentially leading to a relaxation of universal blood/body fluids precautions and exposure to not only undiagnosed HIV, but also to far more easily transmitted diseases such as Hepatitis B and C,

Therefore, it is the position of HSAA that mandatory mass screening of health care workers for HIV infection would be an unjustified abrogation of individual civil liberties, not in the best interests of health care consumers, workers or of Alberta taxpayers.

**Approved March 22, 1995
Amended March 11, 2002
Approved AGM May 2002**

**HEALTH SCIENCES ASSOCIATION OF ALBERTA
POSITION STATEMENT ON
HEALTH CARE**

Whereas the vast majority of Canadians support the five fundamental principles enshrined in the *Canada Health Act*: Universality, Comprehensiveness, Portability, Accessibility and Public Administration-- for physicians and hospital care, and

Whereas these principles are increasingly threatened by federal, provincial and territorial governments' reduction of resources for health care delivery, resulting in a shift of costs to patients and families, and in an increasing shift of health care provision from public institutions to private, for-profit providers, and

Whereas HSAA recognizes that while there are fiscal concerns, these must not supersede the primary goal of health care - the health and well being of Canadians, and

Whereas methods of health care delivery and health care funding have shifted a substantial portion of care from hospitals into community and home settings, and

Whereas the cost of pharmaceuticals and other supplies, which are essential in the delivery of health care, are prohibitive for many Canadians, and,

Whereas both federal and provincial government funding allocations have been inadequate to ensure that the health care needs of Canadians are met,

Therefore, it is the position of the Health Sciences Association of Alberta that it

1. Fully supports the five principles of the *Canada Health Act*.
2. Supports the inclusion of community and home care in the scope of the Act and the development of a national home care programme with defined standards of care and eligibility,
3. Supports the development of a national pharmacare programme
4. Supports the development of preventive health care programmes, and
5. Opposes the increasing shift of health care to private, for-profit enterprises, and
6. Urges that the federal government, in order to assure national standards, allocate adequate federal funding directly to health care, and
7. Urges the Alberta government to allocate appropriate funding to address the health care needs of Albertans, and,

Further, that the health and well-being of Canadians, both individually and collectively, must be the primary considerations in developing and maintaining our health care system. This can only be achieved through provision of necessary resources and strict adherence to all five principles of the *Canada Health Act*. Resource allocation must recognize demographic factors, including, but not limited to, population growth, age, and poverty.

#4

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
ATTENDANCE MANAGEMENT**

It is recognized that both the employer and employees have an interest in ensuring satisfactory attendance.

However, attendance management programs may result in inappropriate employer response in cases of illness, with the result that employees may feel harassed.

Therefore, it is the position of HSAA that the focus of attendance management programs must be to help the employee to achieve satisfactory attendance, but not to harass or intimidate employees, not to deny benefits.

Approved December 3, 1998

#5

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
HARASSMENT IN THE WORKPLACE**

Harassment is defined as any unwanted behavior, conduct, comment, question, gesture or physical contact, whether on a one-time basis or in a continuous series of incidents, which is likely to cause offense or humiliation or compromises an individual's dignity or self worth;

Sexual harassment is defined as any unwanted behavior, conduct, questions, gesture or physical contact which might reasonably be perceived by an employee as placing a condition of sexual nature on his/her employment, work assignment and working conditions;

HSAA recognizes that harassment in the workplace compromises the integrity of the employment relationship and endangers employee well-being and job performance.

It is the responsibility of the employer to provide a working environment which protects employees from harassment.

Therefore, it is the position of HSAA that harassment is considered unacceptable conduct. It is offensive, and in many cases intimidates or humiliates others, and will not be tolerated by HSAA.

HSAA will insist on a timely, thorough investigation to be conducted by the Employer in every harassment complaint, and will vigorously pursue redress for all bargaining unit members who are harassed.

**Approved December 3, 1998
Amended October 20, 1999, L.R.C.**

#6

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
STUDENTS**

It is recognized that student practicum placements are essential in the education of qualified health care personnel.

However, it is the position of HSAA that students should not work without supervision, or in place of bargaining unit employees

Approved December 3, 1998

#7

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
VOLUNTEERS**

It is recognized that the presence of volunteers in health care facilities can add to the comfort of patients.

However, it is the position of HSAA that volunteers shall not perform the work of, or replace, bargaining unit employees.

HSAA will pursue all possible avenues to enforce this position.

Approved December 3, 1998

#8

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
SOCIAL UNION**

The Health Sciences Association of Alberta believes that by reducing the role of the federal government, the social union between the federal and provincial governments threatens fundamental Canadian values of compassion and unity.

**Approved May 15, 1999
Amended October 20, 1999, L.R.C.**

#9

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
CHILD CARE**

Unions, by virtue of their role as social advocates, have a responsibility to influence and encourage the establishment of high quality, publicly-funded, non-profit and accessible child care.

HSAA believes that children are society's most valuable resource, and that their nurturing is the responsibility of everyone.

Therefore, it is the position of HSAA that cost effective, easily accessible child care be available to all parents, or those acting in a parental capacity.

Child care should be available to all parents, whether or not they are working outside the home.

Child care should be provided at an affordable cost, with subsidies available to low income families.

Child care providers should be well trained, with formal education in child care. Child care providers should receive terms and conditions of employment befitting the value of the services they provide.

Child care should be available in convenient locations, with hours that reflect the needs of the families they serve.

Governments must commit adequate resources to comprehensive regulations and their enforcement.

**Approved September 16, 1999
Approved October 20, 1999, L.R.C.**

#10

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
FLAT TAX**

The HSAA opposes a flat tax structure because it is regressive, providing a disproportionate benefit to the higher income Albertans.

Approved December 1999

#11

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
EMPLOYEE & FAMILY ASSISTANCE PROGRAMS (EFAP)**

HSAA recognizes the importance of Employee and Family Assistance programs which provide counseling and support for staff members and their families.

It is HSAA's position that these programs must be administered at arms length and completely independent of the employer. Confidentiality must be maintained and the utilization of these programs by our members must be voluntary. HSAA supports the concept of these programs and the provision of this benefit by the Employer.

Approved - AGM 2001

#12

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
LOCAL UNIT PARTICIPATION IN JOINT UNION ACTIVITIES**

HSAA believes in the concept of union solidarity expressed as the participation of its Local Unit Members in Joint Union Activities.

Such participation, in support of causes that benefit Union members and their families, is encouraged.

Approved April 6, 2000

#13

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
DISCRIMINATION**

The Health Sciences Association of Alberta believes that discrimination based on race, creed, religion or political affiliation, gender, family status, sexual orientation, place of residence, ethnic origin or disability is, on its face, an affront to the dignity of not only the person discriminated against, but also to basic principles of respect and tolerance.

Any differential treatment based on such factors must demonstrably be for a *bona fide* purpose, and where appropriate, these factors should be accommodated unless such accommodation creates an undue hardship (e.g. Employers, landlords, public services).

HSAA and its members will conduct their activities in keeping with these principles.

Approved March 2, 2000

#14

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
PARENTAL LEAVE**

It is the position of the Health Sciences Association of Alberta that the raising of children, while first and foremost the choice and responsibility of parents, is also a responsibility of our society at large. In keeping with this broad statement, we also affirm our belief that:

- Under no circumstances should provincial legislation have the effect of disentitling a parent from federal (EI) or contractual benefits.
- Parental leaves should be a minimum of one year, and preferably be available of up to eighteen months, particularly for the purpose of breast feeding.
- To foster the growing participation of fathers in the care of their children, there should be no distinction between male and female employees in relation to parental benefits, except where they can be demonstrably justified.
- Bonding with an adoptive child may, in some circumstances, be more challenging than with biological offspring. Therefore, we submit there should be no difference in the period of parental leave provided to adoptive or natural parents.

Approved AGM 2001

#15

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
POVERTY**

Whereas poverty is not the result of failure of the individual, but rather the failure of public policy in ensuring the economic and social well-being of Canada's citizens; and

Whereas poverty is not merely relegated to those unable to work, but also to the growing segment of society known as the "working poor"; and

Whereas the gap between the rich and the poor has widened dramatically over the past two decades, resulting in more people living in poverty than ever before; and

Whereas the existence of poverty in a province and nation as wealthy as Alberta and Canada is an unnecessary tragedy.

Therefore be it resolved that the various levels of government must take responsibility for public policy to eliminate poverty. As well, individuals and organizations must work with government to find a way to eliminate income inequality and poverty. The challenge is to provide the necessary support and social programs for those in need, while at the same time creating an environment of economic growth and individual initiative.

HSAA takes the position that in order to eliminate poverty, all Canadians must have access to the following societal factors:

- an adequate level of income, or reasonable minimum wage levels that are above the poverty level.
- access to a full range of human and social services.
- freedom from all forms of discrimination based on socioeconomic inequality.

Approved AGM 2002

#16

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
THE PROPOSED FREE TRADE AREA OF THE AMERICAS (FTAA)**

Whereas many citizens are concerned about the potential effects of free trade agreements on cherished social programs such as Canadian medicare, and

Whereas existing free trade agreements such as NAFTA have increased the power and influence of private corporations in the publicly funded and delivered health and education sectors of the economy, and

Whereas the proposed Free Trade Area of the Americas (FTAA) embodies the worst aspects of market fundamentalism and aims to apply these throughout the hemisphere;

Therefore be it resolved that the Health Sciences Association of Alberta reaffirm the sentiment contained in our 1993 Position Statement on the then proposed North American Free Trade Agreement, and that HSAA continue to oppose the anti-worker, anti-environmental and anti-social justice impacts of free trade agreements including NAFTA and the proposed FTAA; and,

Be it further resolved that HSAA cooperate with organizations such as the Canadian Labour Congress which passed a strong resolution at its Convention in June 2002 in which that organization intends to initiate various activities to mobilize resistance and opposition to the FTAA through education, awareness building, and cooperation with trade unions and social partners from across the Americas.

Approved 2003 AGM

#17

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
RENOVATION OF THE CANADA HEALTH ACT**

Whereas the vast majority of Canadians support the five fundamental principles enshrined in the Canada Health Act (1984): Universality, Comprehensiveness, Portability, Accessibility and Public Administration as these relate to Canada's provincial and territorial public health care systems; and

Whereas the practical application of these principles is increasingly threatened by a shift from publicly funded/public health care providers to publicly funded/private-for-profit providers, and a dramatic transfer of services from acute care services to the community, which do not, strictly speaking, fall within the Canada Health Act's definition of "insured health services"; and

Whereas the preamble to the Canada Health Care Act states "that future improvements in health will require the cooperative partnership of governments, health professionals, voluntary organizations and individual Canadians"; and

Whereas the National Health Accord, which emerged from Canada's First Minister's meeting of 5 February 2003, goes some distance to meeting the recommendations from Commissioner Roy Romanow's *Building on Values: the Future of Health Care in Canada*, but falls short of establishing full accountability mechanisms, and does not deal with expanding the Canada Health Act,

Therefore be it resolved that this Annual General Meeting reaffirms Health Sciences Association of Alberta's commitment to promoting public funding and public provision of all necessary health care services including support services, and reaffirms our desire to see governments cooperate to bring about full implementation of the Romanow recommendations, especially regarding strengthening accountability mechanisms in the Canada Health Act.

Approved 2003 AGM

#18

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
KYOTO**

We call on the Federal Government to create a JUST TRANSITION FUND as part of the implementation plan for the Kyoto Accord. This fund would ensure that workers and communities affected by the implementation of the Kyoto Accord will have meaningful assistance for jobs, income, training and other elements of a transition program.

Approved 2003 AGM

#19

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
SOURCE TESTING**

Whereas, HSAA members may be exposed to infectious body fluids at work, and

Whereas, said body fluids in the form of needle stick injuries, and other inadvertent exposure, could lead to infection and illness in the affected worker, and

Whereas, testing of the patient who was the source of the potentially infectious material may be helpful in predicting the potential transmission of certain pathogens, but

However, such screening at most provides a “snapshot” of a particular moment in time, and does not rule out infection in affected workers, and

Furthermore, such screening has the potential of instilling a false sense of security into the affected worker, and could result in the affected worker not taking necessary steps in further transmission of infection, and

Whereas, testing of Source patients does involve some risks minor risks to the patient,

Therefore, be it resolved that HSAA supports Source Testing on a voluntary basis, and

Furthermore, we strongly support and encourage procedural improvements, and educational programs for workers that will yield reductions in frequency of exposure, as well as train the worker on how to deal with exposure when it has occurred.

**Board approved June 16, 2003
Approved at 2004 AGM**

#20

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
INDOOR AIR QUALITY**

As a health care union whose members work for health care employers, HSAA should have a special interest in identifying emerging health hazards, and

Whereas air quality in all areas of employment, both on employer property (including all buildings, grounds and parking lots) and all off site locations, may be affected by:

- second-hand smoke
- various allergens (including mold, plant and animal allergens)
- chemicals
- scented products
- temperature, and
- humidity

Whereas exposure to such substances may cause or aggravate health problems for some people (especially those with asthma, allergies and other medical conditions), and

Whereas many health care employers have policies which are either too limited or only apply to on site locations.

Therefore be it resolved that HSAA supports and encourages the development of policies and procedures that:

1. Minimize or eliminate exposure to any second-hand smoke, allergens, chemicals, molds, and scented products in all areas of employment. (Both on and off site locations)
2. Recognize that workers who experience such health problems or disability are entitled to receive accommodation in accordance with Human Rights principles and legislation.
3. Ensure timely and accurate reporting to the Workers' Compensation Board where appropriate and necessary.

Approved at 2004 AGM

#21

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
HEALTH CARE PREMIUMS**

Whereas a central principle of the *Canada Health Act* is that medically necessary health care shall be free at the point of delivery, and that health care is intended to be a right of all citizens without resort to means testing ; and

Whereas Alberta and British Columbia are the only provinces that collect health care premiums; and

Whereas health care premiums are inherently inequitable in relation to an individual's or family's capacity to pay, costly to administer, and above all, violate the spirit of Canada's public health care system;

Therefore Be It Resolved that Health Sciences Association of Alberta join with allies who share our interests to lobby the two provincial governments to eliminate health care premiums.

Approved at AGM 2004

#22

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
THE FEDERAL-PROVINCIAL-TERRITORIAL
HEALTH COUNCIL AND ALBERTA**

Whereas a key recommendation of the Romanow Report *Building on Values: the Future of Health Care in Canada* has been partially fulfilled by the creation in December 2003 of a national health council with twenty-six experts from various perspectives and areas of the country; and

Whereas the Government of Alberta refuses to join the national health council; and

Whereas the Health Sciences Association of Alberta has vigorously supported the Romanow Report recommendations,

Therefore Be It Resolved that Health Sciences Association of Alberta lobby the Government of Alberta to join the national health council.

Approved at AGM 2004

#23

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
JOB PROTECTION AND COMPASSIONATE CARE LEAVE**

Whereas the Government of Canada, effective January 4, 2004, amended the federal *Employment Insurance Act* to provide compassionate care leave of six weeks paid and two weeks unpaid waiting period, and has also amended the *Canada Labour Code* to provide the statutory guarantee to employees under federal jurisdiction that, "... every employee is entitled to and shall be granted a leave of absence from employment of up to eight weeks to provide care or support to a family member if a qualified medical practitioner issues a certificate stating that the family member has a serious medical condition with a significant risk of death within 26 weeks..."; and

Whereas every province of Canada except Alberta and British Columbia has legislation that mirrors or is superior to the federal legislation and guarantees that employees who are covered under provincial jurisdiction cannot only take such leave but also return to their same jobs after taking compassionate care leave; and

Whereas amendment of the Alberta *Employment Standards Code* to mirror the *Canada Labour Code* would provide a common minimum standard that all employers in the province could model their own policies on, as well as provide all employees a guide to their rights,

Therefore Be It Resolved that the Board of Directors of the Health Sciences Association of Alberta lobby the Minister of Human Resources and Employment to include compassionate care leave and right of return to the same job in the *Employment Standards Code*; and

Be It Further Resolved that the Health Sciences Association of Alberta will endeavour to negotiate compassionate care leave provisions into all collective agreements and improve on the minimum legislated standards.

Approved at AGM 2004

#24

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
PUBLIC-PRIVATE PARTNERSHIPS AND UNIONS**

Whereas the Government of Alberta and some Regional Health Authorities continue to promote public-private partnerships (P3s); and

Whereas the Health Sciences Association of Alberta has taken a position that while P3s may be made to appear financially attractive in the short-term, they ultimately result in greater public costs and loss of public control than if projects were publicly funded and operated; and

Whereas such initiatives tend to result in lower wages, reduced job security, and the loss of money and other resources from local communities, possibly to foreign-owned corporations; and

Whereas the Health Sciences Association of Alberta believes that all working people deserve a union of their democratic choice

Therefore Be It Resolved that the Health Sciences Association of Alberta continue to support campaigns opposing initiatives that use public dollars to create private profit from the provision of public services; and

Be It Further Resolved that the Health Sciences Association of Alberta will continue to do its utmost to ensure strong union representation of health care workers regardless of where they work, including P3 facilities.

Approved at AGM 2004

#25

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON PUBLIC - PRIVATE PARTNERSHIPS

Whereas the Government of Alberta continues to endorse and promote public-private partnerships (P3s) in health care, education and other public services; and

Whereas P3s may be made to appear financially attractive in the short-term but ultimately result in greater public costs and loss of public control than if projects were publicly funded; and

Whereas a substantial body of evidence demonstrates that P3s lead to a decline in service quality while giving large profits to investors and putting greater fiscal pressure on governments; and

Whereas Commissioner Roy Romanow in *Building on Values: the Future of Health Care in Canada* demanded evidence that private provisioning of public health care services was better, and found that evidence was not forthcoming from privatization proponents; and

Whereas such initiatives tend to result in lower wages, reduced job security, and the loss of money and other resources from local communities; and

Whereas the long term nature of the contractual commitments will leave a legacy of debt and financial obligations for future generations; and

Whereas these combined effects will negatively affect local communities and their economies;

Therefore Be It Resolved that the Health Sciences Association of Alberta opposes public-private partnerships for public services including hospitals and support campaigns to keep public services and public infrastructure public.

Approved at AGM 2004

#26

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON

THE NEW FEDERAL-PROVINCIAL-TERRITORIAL

HEALTH COUNCIL AND LABOUR MARKET RESEARCH

Whereas the chair of the new national health council has stated, “There is already a lot of information out there, but there is an urgent need to convey it in a powerful way to inform expectations and give Canadians and health professionals a good idea of whether things are worse or better than before ⁽¹⁾”; and

Whereas the least developed health research agenda concerns workforce planning for paramedical technical and professionals; and

Whereas the provision of sufficient college and university places, and ‘recruitment and retention’ of qualified paramedical technical and professionals remains a significant problem for the public health care system in Alberta and elsewhere in Canada; and

Whereas effective research into workforce trends and requirements let alone effective planning for the secure employment of paramedical technical and professionals must be carried out in a coordinated fashion, including all of Canada,

Therefore Be It Resolved that the Health Sciences Association of Alberta urge the new national health council make research into workforce planning, for paramedical technical and professionals, a top priority.

(1) Health Council chair Michael Decter quoted in “Health-care reform may not be mission impossible,” Sean Gordon, *Edmonton Journal* January 3, 2004.

Approved at AGM 2004

#27

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON PUBLIC AUTOMOBILE INSURANCE

Whereas the total value of compulsory private passenger vehicle insurance premiums in Alberta increased 146% from 1991 to 2001, compared to a 27% rise in the consumer price index in that same period ⁽¹⁾; and

Whereas Alberta consumers now pay on average about twice as much for auto insurance than consumers in the other three western provinces with public auto insurance systems ⁽²⁾; and

Whereas the private automobile insurance plans' discrimination on the basis of age, gender and geography is a key source of profit for private companies; and

Whereas the 18 month rate 'freeze' of October 2003 has frozen rates at the highest insurance premiums in Alberta history; and

Whereas a public opinion survey conducted by Alberta Finance showed that 59% of Albertans would support public auto insurance, and 79% wanted the government to do more to ensure fair rates ⁽³⁾; and

Whereas the Alberta government has never explained why public automobile insurance would not work,

Therefore Be It Resolved that the Health Sciences Association of Alberta advocate for public automobile insurance for Albertans which does not discriminate on any basis other than at-fault claims history, traffic violations or criminal code driving offenses.

(1) *Automobile Insurance Discussion* paper, Alberta Finance, December, 2002.

(2) *Auto Insurance Rate Comparison Study: 17 Cities in Four Western Provinces*, Consumers' Association of Canada, August 27, 2003.

(3) *Auto Insurance reform on track for implementation in 2004*, Government of Alberta News Release December 30, 2003:

<http://www.finance.gov.ab.ca/whatsnew/newsrel/2003/AutoInsurance1230.html>.

Approved at AGM 2004

#28

HEALTH SCIENCES ASSOCIATION OF ALBERTA
POSITION STATEMENT ON
CANADIAN RATIFICATION OF ILO CONVENTIONS

WHEREAS of the 185 Conventions of the International Labour Organization (ILO), Canada has only ratified 30; and

WHEREAS of the seven core Conventions of the ILO, Canada has only ratified five; and

WHEREAS of the 30 ILO Conventions developed since 1982 - all of which Canada voted for at the ILO's Annual Conferences - Canada has only ratified two

THEREFORE BE IT RESOLVED the Health Sciences Association of Alberta work with its affiliated bodies to develop and coordinate activities designed to influence the federal and provincial governments to:

- have labour legislation comply with the ILO's freedom of association principles;
- ratify the ILO's core Conventions: No. 98 - the Right to Organize and Collective Bargaining Convention and No. 138 - the Minimum Age Convention; and
- establish an ongoing consultative process with the labour movement with respect to the ratification of ILO Conventions that Canada has voted for at the ILO's Annual Conferences.

Approved at the 2005 AGM

#29

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
ILO COMPLAINTS AGAINST CANADIAN
AND PROVINCIAL GOVERNMENTS**

WHEREAS since 1982, Canada's record with respect to the number of ILO complaints against restrictive labour legislation is the worst of any of the ILO's 177 member States with Canadian unions filing more complaints than the national labour movements of any other country; and

WHEREAS the federal and provincial governments have completely ignored the rulings of the ILO Governing Body; and

WHEREAS this disregard towards these rulings have led the ILO to request the Canadian government to consider allowing an ILO Study Mission to Canada to investigate the large number of complaints and the lack of responsiveness by Canadian governments to the ILO Governing Body's rulings,

THEREFORE BE IT RESOLVED that the Health Sciences Association of Alberta and its affiliates continue to lobby the federal and provincial governments to implement all current and outstanding ILO recommendations with respect to the various laws found not to be in conformity with ILO's freedom of association principles.

Approved at the 2005 AGM

#30

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
PROGRESSIVE LABOUR LAW REFORM**

WHEREAS there has been a dramatic increase in the use of legislation by the federal and provincial governments to restrict and/or deny the collective bargaining rights of Canadian workers as evident by the 170 pieces of restrictive labour legislation proclaimed by the federal and provincial governments between 1982 and 2004; and

WHEREAS the federal and most provincial governments are failing in their responsibility under international labour and human rights standards to protect workers' rights by their continuous legislative attack on workers' rights to organize, bargain collectively and take strike action.

THEREFORE BE IT RESOLVED that the Health Sciences Association of Alberta continue to condemn the use of legislation to restrict or deny the fundamental rights of workers; and

BE IT FINALLY RESOLVED that the Health Sciences Association of Alberta work with its affiliates to make progressive labour law reform a central focus of labour's political agenda and create public awareness around the right to freedom of association and collective bargaining.

Approved at the 2005 AGM

#31

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
PURCHASE OF UNION-MADE AND FAIR TRADE PROMOTIONAL PRODUCTS**

Whereas Health Sciences Association of Alberta attaches great importance to the values of organized labour and international solidarity, and

Whereas HSAA members believe in the dignity and value of each person's work, and

Whereas HSAA is opposed to nonunion sweatshop working conditions both in Canada and the rest of the world,

Therefore Be It Resolved that HSAA promotional purchases will be sourced where possible from either unionized manufacturers or fair trade - not free trade suppliers and should bear appropriate identifier(s).

Approved AGM 2005

#32

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
CANADA'S NEW CHILD CARE SYSTEM**

Whereas in its October 2004 throne speech, the federal Liberal government said that "the time has come for a truly national system of early learning and child care"; and

Whereas fully 90% of Canadians support a pan-Canadian child care plan that ensures that all children have access to quality child care regardless of family income, disability, race or where they live; and

Whereas an effective *Child Care Act* will guarantee standards and the principles of quality, universality, accessibility, developmental programming and inclusiveness;

Therefore Be It Resolved that Health Sciences Association of Alberta supports the best means towards this end - a publicly funded, publicly delivered, sustainable system for quality child care parents can count on and afford.

Approved AGM 2005

#33

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
ENERGY DEREGULATION AND UTILITY PRIVATIZATION**

Whereas the Government of Alberta endorses privatization of public utilities and deregulation of the same, and

Whereas deregulation was purported to reduce costs to consumers through increased competition, and

Whereas costs have increased significantly and no meaningful competition appears to exist,

Therefore Be It Resolved that HSAA supports public provincially or municipally run utilities whose rates are set/regulated to protect the citizens of Alberta.

Approved AGM 2005

#34

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
POLITICAL LEAVE**

Whereas Health Sciences Association of Alberta attached great importance to the value of full democratic participation in Canadian society, and

Whereas most HSAA members do not presently have a "political leave" clause in their collective agreements, and

Whereas not only HSAA members but all citizens would benefit from a legislated right of return to previous employment without loss of status after having been a candidate for and/or elected to governmental office,

Therefore Be It Resolved that HSAA set as a bargaining demand that a political leave article be introduced which would allow an employee to have leave of absence without pay so that the employee could be a candidate in federal, provincial, municipal or school board elections, and that employees who are elected to public office be allowed leave of absence without pay but with no loss of seniority and be able to pay the full share of the benefit plans under the collective agreement during their term(s) of office,

And Be It Further Resolved that HSAA develop and implement a plan to lobby all parties represented in the Alberta Legislature with a goal of obtaining legislation which will enable all workers to have political leave available as a right of citizenship.

Approved AGM 2005

#35

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
FUNDING AND DELIVERY OF
ADVANCED LIFE SUPPORT- GROUND AMBULANCE**

Whereas the Government of Alberta has abruptly pulled back from the reorganization of the provision of ground ambulance emergency medical services (EMS) for the province through the Regional Health Authorities (RHAs); and

Whereas all residents of the province should have access to Advanced Life Support when required, and only fully funded RHAs are capable of best delivering this service; and

Whereas the abrupt retreat of the Government of Alberta from implementing their own committee's recommendation that ground ambulance service be transferred from municipalities to the health regions has not been justified; and

Whereas the two pilot projects in Peace Country Health and Palliser Health Region which were well along the way to making the transition will in all likelihood be favourably reviewed in a years time,

Therefore Be It Resolved that the Health Sciences Association of Alberta strongly recommends the Alberta government reschedule the restructuring, provide adequate compensation to municipalities and ensure adequate funding to the RHAs so as to make Advanced Life Support emergency medical services available for implementation in all areas of the province by April 1, 2006.

Approved 2005 AGM

#36

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
CHILD LABOUR IN ALBERTA**

Whereas on June 3, 2005, Alberta earned the distinction of being only the second province in Canada to allow 12 year-olds to work in restaurants without a special permit, and

Whereas the effect of this ill-considered regulatory change is that any restaurant owner can hire children without obtaining government approval and that the Employment Standards branch will no longer be able to monitor where the children needing protection are located, and

Whereas the International Labour Organization's Convention #138 which has been ratified by most of the developing world says that for general occupations, the minimum age of employment should be 15 years of age, and 13 years of age for "light work", and

Whereas HSAA remains opposed to child labour in Alberta, Canada, and the rest of the world,

Therefore Be It Resolved that HSAA record its opposition to the Alberta government's deregulation of child labour permit restrictions.

**Approved by HSAA Board April 6, 2006
Approved 2006 AGM**

#37

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
FIRST CONTRACT ARBITRATION**

Whereas HSAA is on the record as advocating progressive labour law reform and has continued to promote the creation of public awareness around the right to freedom of association and collective bargaining, and

Whereas the Alberta Minister of Human Resources and Employment himself acknowledged, in the face of the ugly, and at times violent 2005 labour dispute at the Lakeside packing plant in Brooks, Alberta, that the rules relating to a first collective agreement need review, and

Whereas in the face of bargaining impasses which are experienced far too frequently by newly certified unions, including HSAA, the employer obtains unfair advantage, and

Whereas first contract arbitration if made available under the *Labour Relations Code* would ensure that workers who choose to form a union could do so without facing the spectre of months or years on a picket line to get a reasonable agreement,

Therefore Be It Resolved that HSAA continue to lobby the Alberta government to make progressive amendments to the *Labour Relations Code* with regards to “first contract arbitration.”

**Approved by HSAA Board April 6, 2006
And at 2006 AGM**

#38

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
NOISE**

As a healthcare union, whose members work for healthcare employers, HSAA should have a special interest in emerging health hazards, and

Whereas the Alberta OH&S Code recognizes that excess noise levels, as defined in section 218 a) & b), can cause loss of auditory function, and

Whereas some members may work in environments where noise levels may approach, but not exceed, legislated limits, and

Whereas there may be health problems we are not aware of and which are not reflected in current standards, and

Whereas baseline and on-going audiometric testing may identify loss of auditory function in situations where noise levels do not contravene legislated levels, and may assist in the establishment of a causal relationship between hearing loss and workplace noise exposure.

Therefore be it resolved that HSAA supports and encourages the development of policies and procedures which will:

- 1) Identify environments which may be detrimental to the auditory health of members.
- 2) Provide audiometric testing, at the expense of the employer, for members exposed to noise levels which may approach but not exceed legislated limits.

**Approved February 3, 2006
And at 2006 AGM**

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON LIVING WAGE POLICY

The Health Sciences Association of Alberta will:

- Support the activities of Public Interest Alberta, Vibrant Communities Calgary and other anti-poverty organizations that seek to pressure governments to commit to ensuring that workers directly employed, or contracted/subcontracted, or are employees of a partner organization, or are suppliers of goods and services to government will be paid a Living Wage*.
- Support a Living Wage for all Albertans, including a substantially improved minimum wage and a social welfare policy free of 'poverty trap' clawbacks.

Because too many Albertans do not have access to employment which would pay sufficient wage and benefits to constitute a living wage, causing them to live in poverty; and

Because the strength and solidarity of our communities depends on all citizens having access to a reasonable level of income from whatever combination of sources; and

Because poverty is not inevitable and can be partly addressed by municipal and higher levels of government adopting Living Wage policies to raise income levels; and

Because HSAA's mission statement is, *"To enhance the quality of life of its members and society."*

"A Living Wage is the amount of income an individual or family needs to meet basic needs, to maintain a safe, decent standard of living in their community and to save for future needs and goals. The amount of a Living Wage varies depending on the method used to measure the local cost of living in a particular community." - Excerpted from Vibrant Communities Calgary November 2006 newsletter

Approved 2007 AGM

#40

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON ORGANIZING

The Health Sciences Association of Alberta will:

- Continue well-funded efforts to organize workers without a union who would have a natural home in HSAA
- Maintain as priority organizing ambulance or emergency services workers where these workers do not have union representation already
- Maintain as priority organizing public sector hospital paramedical technical and professional employees who are not already in HSAA
- Maintain as priority organizing the remaining groups of public sector paramedical professional and technical employees who are employed in the community sector, but remain unorganized or shielded from true union organization by employer dominated associations
- Identify and develop longer term organizing objectives
- Be open to and available to assist our affiliates in the greater House of Labour with their organizing efforts
- Not engage in raiding

Because HSAA organizers have developed considerable momentum and experience through major campaigns and organizing drives

Because organizing the unorganized is an act of solidarity, a way to give back and build strength within the Association and our affiliates

Because through being organized in the Association, individual workers are able to assert their collective right to negotiate the terms and conditions of their employment

Because through collective action, members of HSAA join a movement for social and economic justice

Because labour rights are human rights {Insert NUPGE logo in published version}

Because HSAA's mission statement is, "To enhance the quality of life of its members and society."

Approved 2007 AGM

HEALTH SCIENCES ASSOCIATION OF ALBERTA
POSITION STATEMENT ON
CHANGES REQUIRED IN ALBERTA LABOUR LEGISLATION

The Health Sciences Association of Alberta will:

Advocate for changes to Alberta labour legislation, including:

- **First-contract arbitration:** If bargaining for a first collective agreement gets to an impasse, have first-contract binding arbitration available to help newly organized workplaces get a collective agreement without labour disruption and without workers being frustrated in their right to be represented by a union
- **Full bargaining rights:** Full and fair collective bargaining rights and the legal right to strike for public employees, including those in the health care sector
- **One labour law for everyone:** Creation of a new unified Alberta Labour Code for all working people in the province
- **Automatic certification:** Certification without the requirement of a vote when more than half the employees in a workplace sign a union card.
- **Anti-scab law:** Legislation that would make the use of replacement workers during strikes illegal.
- **No worker excluded from a union:** Lifting the prohibition on unionization for farm workers, domestic employees, nurse practitioners and all other excluded workers.
- **Cover all workers:** Extending the Occupational Health and Safety Act to cover all workers in the province, and ensuring that all workers are covered by Workers' Compensation.
- **Bring Alberta up to ILO standards on child labour:** Repealing Employment Standards regulation which allows 12 year-olds working for wages.

Because in keeping with the National Union's perspective, we believe that labour rights are human rights and must apply indivisibly unless compelling reason exists for restriction.

Because the Supreme Court of Canada has affirmed that collective bargaining to exist as a right must have real application that cannot be casually frustrated by the legislature.

Because all of the above are in keeping with HSAA's mission statement: To enhance the quality of life of its members and society.

Approved 2008 AGM

**HEALTH SCIENCES ASSOCIATION OF ALBERTA
POSITION STATEMENT ON
CLIMATE CHANGE**

The Health Sciences Association of Alberta will:

- Promote within the union and to individual members materials including those prepared by the National Union and affiliates on the subject of climate change
- Support the establishment of “Green Committees” within HSAA workplaces and encourage these Committees to join with other labour, environmental, faith and social justice groups to study and promote measures to mitigate and adapt to climate change in a manner that is fair to workers and their communities
- Encourage members to undertake consumer actions which will reduce energy consumption and increase recycling and reuse options
- Continue to examine our own practices and explore opportunities to reduce the union’s ‘environmental footprint’

Because, “Warming of the climate system is unequivocal, as is now evident from observations of increases in global average air and ocean temperatures, widespread melting of snow and ice, and rising global average sea level.”* referenced below

Because, “Continued GHG [Greenhouse Gas] emissions at or above current rates would cause further warming and induce many changes in the global climate system during the 21st century that would *very likely* be larger than those observed during the 20th century.”* referenced below

Because, “Altered frequencies and intensities of extreme weather, together with sea level rise, are expected to have mostly adverse effects on natural and human systems.”* referenced below

Because, “A wide variety of policies and instruments are available to governments to create the incentives for mitigation action. Their applicability depends on national circumstances and sectoral context.”* referenced below

Because, “Responding to climate change involves an iterative risk management process that includes both adaptation and mitigation and takes into account climate change damages, co-benefits, sustainability, equity, and attitudes to risk.”* referenced below

Because HSAA’s mission is, “*To enhance the quality of life of its members and society.*”

Approved 2008 AGM

#43

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON PHARMACARE

The Health Sciences Association of Alberta will:

- Advocate for the introduction of Pharmacare for all Albertans and Canadians, to be brought in on the same basis as set out by the five principles of the Canada Health Act.
- Support the Canadian Healthcare Coalition, Alberta Friends of Medicare and the National Union in their activities to pressure governments to commit to bringing about a pan-Canadian drug plan that would cover everyone for prescription drugs like medicare covers doctors and hospital care

Because people who do not have drug plan coverage may face unwarranted hardship, if not financial ruin, to obtain prescription medication; and

Because Pharmacare represents an affordable fulfillment of part of Tommy Douglas's vision of a "Second Stage of Medicare"; and

Because most employer sponsored drug plans cover only part of the cost of prescription drugs and the rest is paid out of pocket or by contractual benefits like the Flex Health Benefit Spending Account, and this can be a financial burden; and

Because in most cases, when a covered worker temporarily leaves her job by going on leave exceeding thirty days, or during the 'non-health related reason' portion of maternity leave, coverage can only be maintained by paying the full premiums for the applicable plans and this can be a financial burden; and

Because in most cases, when a covered worker leaves her job, is laid off, or retires, she loses her drug plan and so does her family; and

Because drug plans vary from one collective agreement to another, resulting in the inequitable outcome that some of our members have worse coverage than others even though their medical needs are the same; and

Because HSAA's mission is: *"To enhance the quality of life of its members and society."*

Approved 2008 AGM

HEALTH SCIENCES ASSOCIATION OF ALBERTA
POSITION STATEMENT ON
REAFFIRMING HSAA'S COMMITMENT TO MEDICARE

The Health Sciences Association of Alberta will continue to advocate for and support:

- Strict adherence to the five principles of the *Canada Health Act*:
 - (a) *public administration*
 - (b) *comprehensiveness*
 - (c) *universality*
 - (d) *portability*
 - (e) *accessibility*
- Inclusion of community care, rehabilitation, home care, and long-term care within the scope of the legal framework defining medicare in Canada
- Development of a national home care program, a national Pharmacare program, and effective preventive health care programs
- Assurance of national standards through allocation of adequate federal funding to publicly provided health care
- Allocation of appropriate funding by the Alberta government to address the health care needs of Albertans without shifting health care provision to private, for-profit enterprises
- Recognition by governments of demographic factors, including population growth, age, poverty and other social determinants of health in resource allocation

Because the vast majority of Canadians support the five fundamental principles enshrined in the *Canada Health Act*, and

Because HSAA recognizes that while there are fiscal concerns, these must not supersede the primary goal of health care - the health and well being of Canadians, and

Because methods of health care delivery and health care funding have shifted a substantial portion of care from hospitals and physicians' services into community and home settings, and long term care settings, with provision by many other allied health professionals, and

Because the cost of pharmaceuticals and other supplies, which are essential in the delivery of health care, are prohibitive for many Canadians, and

Because both federal and provincial government funding allocations have been inadequate to ensure that the health care needs of Canadians are met, and **Because** Tommy Douglas's vision of a "Second Stage of Medicare" remains to be completed, and

Because HSAA's mission is, "*To enhance the quality of life of its members and society.*"

Approved 2008 AGM

#45

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
SUSTAINABLE ENVIRONMENTAL ETHICAL PURCHASING POLICIES**

The Health Sciences Association of Alberta will:

- **Support the activities of social justice-seeking groups that advocate the adoption of Sustainable, Environmental & Ethical Purchasing Policies by municipal and provincial government and other large organizations, and**
- **Assist the social justice seeking groups in advocating that employers in Alberta also adopt Sustainable, Environmental & Ethical Purchasing Policies.**
- **HSAA will adopt sustainable, environmental and ethical purchasing policies for its own operations.**

Because the goal of Sustainable, Environment & Ethical Purchasing Policies as adopted by cities like Calgary, Toronto, Ottawa, Hamilton, and Vancouver is to ensure that the goods and services purchased by the municipality are produced according to recognized ethical and environmental standards, and

Because the goals of Sustainable, Environmental & Ethical Purchasing Policies are to ensure that garments purchased are made under humane working conditions in compliance with accepted international standards and also to ensure that any food, agricultural products and commodity purchases would be Fair Trade whenever possible, and

Because Employers in Alberta employ most of HSAA's membership, making Sustainable, Environmental & Ethical Purchasing Policies directly relevant to our working lives, and

Because HSAA's mission is: *To enhance the quality of life of its members and society.*"

Approved 2008 AGM

#46

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON

PURCHASE OF UNION-MADE AND FAIR TRADE PRODUCTS

The Health Sciences Association of Alberta will:

- **Ensure that purchases will be sourced, where possible, from either unionized manufacturers or fair trade (not free trade) supplies and should bear appropriate identifiers.**

Because HSAA attaches great importance to the values of organized labour and international solidarity, and

Because HSAA members believe in the dignity and value of each person's work, and

Because HSAA is opposed to sweatshop working conditions, and

Because HSAA's mission is: "*To enhance the quality of life of its members and society.*"

Approved 2008 AGM

#47

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
DOMESTIC VIOLENCE AND THE WORKPLACE**

The Health Sciences Association of Alberta will advocate for workplaces where our members and other workers are:

- Safe to go to and from work without the fear of domestic violence following them
- Safe from intrusion of an abusive domestic member into the workplace
- Safe from the threat of domestic violence towards co-workers
- Safe from negative consequences of domestic violence in the workplace

Because domestic violence is a workplace issue, and

Because employers are required to provide a safe workplace for their employees, and

Because it is each union member's responsibility to help eradicate domestic violence, and

Because governments continue to underfund or cut funding for programs that help prevent domestic violence, and

Because HSAA's mission is: *"To enhance the quality of life of its members and society."*

Approved 2008 AGM

#48

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**OPERATIONS STATEMENT ON
EQUALITY**

Solidarity in a union is based upon the principle that all union members are equal and deserve respect, cooperation and understanding.

HSAA believes that there should be no discrimination based on race, colour, creed, national or ethnic origin, political or religious affiliation, gender, gender identity, sexual orientation, marital status, family status, age, physical or mental disability.

HSAA's policies and practices reflect our commitment to equality. We urge members and staff to participate fully in activities mindful that all people deserve dignity, equality and respect.

Approved 2008 AGM

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON
“NET NEUTRALITY”

The Health Sciences Association of Alberta will:

- In conjunction with our role in the National Union, pressure the federal government for legislation that will protect network neutrality
- Publish relevant articles about ‘net neutrality’ in our media

Because Net Neutrality is the principle that every internet service provider will treat all internet traffic equally, and will not in any way interfere with, or interrupt, the transmission of any content regardless of its subject, source, ownership or destination; and

Because Canadians need non-discriminatory access to the Internet to ensure they are able to fully participate in the global economy and in the democratic institutions of this country; and

Because the Internet is an important tool allowing labour unions and civil society organizations to reach their members and the public; and

Because a number of major telecommunications companies appear to be pursuing measures that would see them act as Internet gatekeepers deciding what Internet traffic goes fast or slow or not at all; and

Because TELUS has already violated network neutrality when it blocked its internet customers in 2007 from visiting the website *Voices for Change* that was sympathetic to the striking members of TELUS, members of the Telecommunications Workers Union; and

Because HSAA’s mission is, *“To enhance the quality of life of its members and society.”*

#50
HEALTH SCIENCES ASSOCIATION OF ALBERTA
POSITION STATEMENT ON
ELECTORAL REFORM IN ALBERTA

The Health Sciences Association of Alberta will:

- Advocate for electoral reform in Alberta, including promotion of proportional representation

- Endorse and support the efforts of *Fair Vote Alberta* to have the Legislative Assembly create a Citizens' Assembly on Electoral Reform

Because the traditional first past the post system in Alberta has contributed to the lowest voter turnout for a provincial election in Canadian history in the March 3, 2008 election; and

Because the old way of doing things has not incorporated opportunities to expand democratic participation in elections; and

Because with a fair voting system that treats all voters equally, the number of seats won by the parties will accurately reflect voter intentions; and

Because HSAA's mission is, "*To enhance the quality of life of its members and society.*"

#51

HEALTH SCIENCES ASSOCIATION OF ALBERTA

**POSITION STATEMENT ON
THE GLOBAL FINANCIAL CRISIS**

The Health Sciences Association of Alberta will:

- Support the National Union's five point action plan for federal government intervention to ensure Canada has a strong economy and fair society for today and the future by:
 1. Creating a strong framework for financial stability
 2. Strengthening public services and investing in infrastructure
 3. Developing a modern industrial strategy and a new green economy
 4. Providing an income security package for working families
 5. Protecting and expanding pension security

- Promote coalitions between unions and social justice groups to push for the necessary economic and social change to prevent such a financial crisis from happening again.

Because Canada is faced with a global economic crisis; and

Because Canadians are worried about their jobs, their savings and their future; and

Because we need a comprehensive stimulus package and a long-term plan for our economy; and

Because this is an opportunity for fundamental and necessary economic and social reform; and

Because HSAA's mission is, *"To enhance the quality of life of its members and society."*

Approved 2009 AGM

HEALTH SCIENCES ASSOCIATION OF ALBERTA

POSITION STATEMENT ON
IMPROVING THE CANADA PENSION PLAN FOR
CANADIANS WITHOUT WORKPLACE PENSION PLANS

The Health Sciences Association of Alberta will:

- Pressure the federal government to amend the Canada Pension Plan to require employers without workplace pension plans to pay additional CPP premiums. The extra money would be used to pay improved CPP benefit to retired employees covering any years they work for employers without a workplace plan.

Because there has been a steep decline in the percentage of working people covered by a workplace pension; and

Because only about one quarter of private sector workplaces in Canada provide pension plans; and

Because most households that have no workplace pension plans have inadequate, if any, RRSP savings; and

Because limited RRSP savings plus the deferred income retirees will receive from Canada's public pension system will be insufficient to raise them above poverty levels; and

Because HSAA's mission is, "*To enhance the quality of life of its members and society,*" a mission that does not cease at an individual's retirement age.

HEALTH SCIENCES ASSOCIATION OF ALBERTA
RESOLUTION ON
SUPPORTING PUBLIC EDUCATION

The Health Sciences Association of Alberta will:

- Oppose any cuts to public education

Because research by allied organizations like Public Interest Alberta's Task Force on Post-Secondary Education and the Alberta Teachers Association has shown that cuts to education funding threaten the very foundation of our children's futures; and

Because when education funding is cut, class sizes increase, programs suffer, fewer new teachers are hired, infrastructure repairs are shelved and support staff and services are reduced; and

Because when P3s (public-private partnerships) are used to build schools, experience across Canada has shown that P3 projects ultimately result in greater costs than if traditional design and build methods are used -- resulting in a siphoning of public money from direct education spending; and

Because investing in Alberta's schools, public universities, colleges and technical institutes is essential for creating the "green" knowledge-based economy of the future and for building productive, healthy and diverse communities; and

Because by increasing -- not decreasing -- the support for our public educational institutions, government will not only help stimulate Alberta's short-term economic recovery, but will also be laying the foundation for Alberta's long-term prosperous future; and

Because raising tuition for people entering paramedical technical and professional programs will result in unsupportable student debt for individual graduates and more severe healthcare labour shortages in the near future, due to young people turning away from expensive post-secondary experience; and

Because HSAA's mission is, *"To enhance the quality of life of its members and society."*

**HEALTH SCIENCES ASSOCIATION OF ALBERTA
RESOLUTION ON
THE ELIMINATION OF POVERTY**

The Health Sciences Association of Alberta will:

- Join in solidarity with the organizations calling upon the provincial, federal and municipal governments to work together with community organizations and others to develop a comprehensive plan with measurable poverty reduction targets and timelines to eliminate poverty in Alberta

Because we endorse the *principles of **Dignity for All: The Campaign for a Poverty-Free Canada*** (founded by Canada Without Poverty and Citizens for Public Justice) *that freedom from poverty is a human right; we believe in equality among all people; we believe we are all entitled to social and economic security; we believe in dignity for all; and*

Because poverty in the midst of plenty is a failure of social policy not an inevitable or natural outcome, and consequently can be addressed by government and partner organizations; *and*

Because the reduction of poverty on the way to its elimination results in greater social cohesiveness and consequently better health outcomes for everyone in society, which in turn will make for less overall cost to the health care system; *and*

Because the reduction of poverty will result in positive economic benefit to Alberta, such as reduced crime, increased productivity in the workplace, and higher income and corporate taxation revenue; *and*

Because HSAA's mission is, *"To enhance the quality of life of its members and society."*

#55

**HEALTH SCIENCES ASSOCIATION OF ALBERTA
RESOLUTION ON
DISCRIMINATION AND INCLUSION IN THE WORKPLACE
OF
PERSONS LIVING WITH DISABILITIES**

The Health Sciences Association of Alberta will:

Continue to advocate for workplaces where members and others with temporary or permanent disability¹ experience no discrimination on that basis and experience inclusion in the workplace enabling them to work to the full extent of their abilities.

Because the marginalization and exclusion of persons with disabilities from full participation in meaningful work continues to exist in Alberta, whether because of discrimination due to stigma, lack of access to employment supports or other deficiencies in social policy; and

Because, although employers have a duty to accommodate employees with disabilities, the Union often has to intervene to protect the interests of such members; and,

Because as workers age, disability rates increase² and HSAA demographics show that over 40% of our members are aged 45 or more³; and

Because none of us can be certain that we will never experience a major activity limitation or disability over the course of our working lives; and

Because HSAA's mission is: *"To enhance the quality of life of its members and society."*

Approved 2010 AGM

¹ **World Health Organization definition: "Disability:** Any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being. http://www.drnbc.org/child.cfm?DPAR_PARENT_ID=2&DCHD_CHILD_ID=248

² Statistics Canada's *Participation and Activity Limitation Survey (PALS)* tracks persons whose activities are limited because of a physical or mental health-related condition or problem. By this definition, which covers a very broad range of limitations in terms of both type and severity, the total disability rate in 2006 was 11.5% for the total Canadian working-age population (15 to 64)—or 2.5 million people—rising to 15.1% for those aged 45 to 54, and 22.8% for those aged 55 to 64 (*Statistics Canada 2006*)

³ *Creating A Quality Work Environment Survey, 2006* [HSAA research publication]