

HOSPITAL EMPLOYEES' UNION SUBMISSION

To: Committee on Democratic and Electoral Reform

Date: July 23, 2025

Introduction

The Hospital Employees' Union (HEU) is the largest and oldest health care union in British Columbia.

Established in 1944, HEU represents more than 60,000 health care workers in hospitals, long-term care homes, and community health sites.

Our members include care aides, clerical workers, maintenance and trades people, housekeepers, dietary aides, activity workers, lab assistants, security officers, and more.

They are the backbone of our province's health care system – people who love their work and are deeply committed to the care and well-being of British Columbians.

HEU and Democratic Reform

As a union, HEU is deeply rooted in democratic practice. From the local to the provincial level, it's our members who drive our union through democratic decision-making.

Members elect their local executives, their bargaining committees. And every two years, at convention, they elect our Provincial Executive, the highest governing body of our union.

Democracy is reflected in how we engage with each other, how we show up in our communities, and in our commitment to social justice. Member participation isn't just encouraged; it's foundational to everything we do.

HEU is also involved in furthering the democratic debate outside of the union – particularly at the provincial level in British Columbia.

Every election, HEU works to mobilize our members politically, because elections matter, especially for public services and workers' rights.

In fact, more than 76 per cent of HEU members voted in the last provincial election, well above the provincial average of 59 per cent.

Outside of elections, HEU advocates and supports reforms to our province's democratic institutions.

Most recently, in 2018, HEU played a leadership role in the *Make Every Vote Count* campaign that brought together a wide coalition of community, student and labour organizations in support of proportional representation during B.C.'s last referendum on electoral reform.

And that advocacy continues today.

HEU would like to propose two recommendations on democratic and electoral reform to the committee.

The first recommendation is about increasing democratic engagement and voter participation, while the second one focuses on changing how we elect Members of the Legislative Assembly (MLAs).

Recommendation #1: democratic engagement and voter participation

Our union recommends lowering the voting age in British Columbia.

In 1992, the provincial government under Premier Mike Harcourt lowered the voting age from 19 to 18 years old.

In 2019, the current provincial government made it possible for youth, aged 16 and 17, to apply for inclusion on future voters' lists when they turn 18.

This move was in response to declining voter participation rates as a measure to help young people be ready to vote at age 18.

Yet, it didn't go far enough to have the intended impact. B.C. election turnout still hovers between 51 and 61 per cent, with the 2024 election turnout at barely more than 59 per cent.

That's why HEU is calling on this committee to recommend to the B.C. legislature a reduction of the voting age to as low as 16 years.

Numerous research studies make it clear that the earlier someone votes, the more likely they become a "lifelong" voter.

In addition, young voters have a "trickle up" effect, where parents and other adults in their lives are more likely to vote when youth do.

Several international jurisdictions – including Austria, Argentina and Brazil – have already lowered the voting age to 16 at the national level. In addition, the voting age has been lowered to 16 in most German states, as well as Scotland and Wales for their subnational parliamentary elections.

In Greece and Indonesia, the national voting age is 17.

Many 16-year-olds work, pay taxes, and drive. They can join unions, be tried in court, and make medical decisions. They will live the longest with the impacts of decisions made today – on climate, education, health care, housing, and jobs – and we should trust them to vote for their own future.

This policy recommendation is in line with resolutions adopted in 2019 by the Green Party of BC and the BC NDP to support lowering the voting age to 16.

Evidence for Why We Need Reform – HEU's Story

Under our current "first-past-the-post" electoral system, there are two main problems our union has identified.

Firstly, too many British Columbians either don't vote in elections because they don't see any value in the democratic process, or they don't vote for someone they believe in, but vote instead to block someone they fear.

The second problem is that governing parties end up with far too many seats when compared to the number of votes they receive, leading to abrupt legislative shifts that don't actually reflect the will of the electorate.

HEU's research shows that during senior government elections, up to 30 per cent of our members do not vote for their preferred party. Instead, they vote strategically to prevent a particular party from winning.

For example, nearly one-in-six HEU members told us they voted strategically in the 2024 provincial election. On top of that, another 25 per cent of our membership said they did not cast a vote at all.

And while the biggest group of non-voting HEU members reported they were ineligible to cast a ballot, the third largest group of non-voters said they did not participate because they had lost faith in the system.

In total, up to one-third of HEU members say they're unable to vote for the party of their choice, or they're disillusioned with the current way of electing representatives to senior governments.

Recommendation #2: changing how we elect Members of the Legislative Assembly (MLAs)

Another problem with the "first-past-the-post" electoral system is the overrepresentation of government MLAs when compared to the percentage of popular vote their party receives.

This can lead to extreme policy swings when there is a change in government, even though the winning party almost always has less than 50 per cent of the popular vote.

And when a winning party does achieve more than 50 per cent of the popular vote, there is barely any opposition present in the legislature.

Either way, whatever percentage of seats a winning party secures, minority political views are underrepresented, or suppressed, under our current system. And voters, who did not cast ballots for the winning party, do not see their interests and views appropriately reflected in legislation.

Here is an example of how distorted election results have real, human costs.

In 2001, the BC Liberals won just 58 per cent of the vote, but 97 per cent of the legislative seats. That gave them unchecked power in a 16-year-long radical public policy experiment.

During their first mandate from 2001 to 2005, the overrepresentation of B.C. Liberal MLAs, and the absence of official opposition, made it possible for Premier Gordon Campbell's government to institute a series of extreme policy shifts across the entire public service, particularly in the delivery of Medicare.

For HEU members, the most damaging shift under the BC Liberals was the 2002 *Health* and Social Services Delivery Improvement Act, also known as Bill 29.

This bill focused on slashing health care spending in what became a failed attempt to improve service delivery. It allowed public health sector employers to privatize and contract out nonclinical services, regardless of existing collective agreement restrictions.

This led to the layoff of thousands of health care workers and a significant legal battle over the legislation's constitutionality.

In 2007, the Supreme Court of Canada ruled that key parts of *Bill 29* were unconstitutional, specifically those that nullified job security protections related to contracting out.

For the first time, Canada's highest court recognized collective bargaining as a right protected by the *Canadian Charter of Rights and Freedoms*.

This was a monumental legal victory for all Canadians, but it came at a very high cost to HEU members and B.C.'s public health care system.

Thousands of HEU members, many of whom were women and racialized individuals, were laid off due to contracting out under *Bill 29*. This was the largest mass firing of women workers in Canadian history.

HEU's dietary and housekeeping members – if they were rehired by one of the multinational corporations that took over health support services in our hospitals and care homes – saw their wages cut in half from \$18 to \$9.25 an hour overnight.

Additionally, they lost their pensions and all of their benefits. They lost their seniority and union protection.

But it went beyond compensation and job loss. Some lost their homes. Some, their marriages. Some even lost their lives.

In 2003, the BC Liberals then enacted *Bill 29*'s ugly cousin *Bill 94*, extending its provisions to private sector companies in health care.

Then in 2004, they enacted *Bill 37*, rolling back the wages of all HEU members by 15 per cent. A wrong that has barely begun to be rectified over the past two years.

Following their first mandate, the BC Liberals were never able to secure more than 45 per cent of the popular vote again, winning the next three elections by a few percentage points of the popular vote each time.

And still, their extreme policy agenda targeting public services pressed ahead.

In 2009, the BC Liberals allowed more than two dozen privately owned care home operators to "de-accredit" from the public health system.

Private operators fired some, or all, of their workforce to avoid the terms of the facilities subsector collective agreement, resulting in thousands of HEU members experiencing the same loss of jobs, wages, pensions and benefits that had taken place five years earlier.

Over the next 12 years, the BC Liberals also entered into several public-private partnerships (P3s) to build new hospitals and acute care towers.

They supported and expanded the footprint of private long-term care.

And they continued with contracting out thousands of other health care jobs, like hospital security, laundry services in the Interior, and medical transcription in the Lower Mainland, among others.

By 2017, the public health care system had been radically transformed.

As one senior B.C. Liberal advisor said in 2001, B.C.'s public service needed to be "nuked" as "labour's time was over."

Gordon Campbell had "a mandate from the people of British Columbia to crush [labour] like a bug."

Clearly, those 16 years of damaging B.C. Liberal policies hurt thousands of workers and their families in this province.

But it also set back public health care for a generation, severely impairing the delivery of care for patients, residents, and community clients.

This was only possible because of a broken electoral system.

It's worth noting that the BC Liberals did consider fixing this system when they held a proportional representation referendum in 2005. Fifty-eight per cent of voters chose to adopt a new voting system for electing MLAs.

Yet, the Campbell government ignored that majority result.

However, tearing up collective agreements and violating workers' rights was fine for the Campbell government, when they were elected with only a 58 per cent threshold of the popular vote.

That irony is not lost on the Hospital Employees' Union.

To reiterate, 58 per cent of B.C. voters supported moving to a new voting system, with the majority support across 97 per cent of all electoral districts, even though the exact same percentage had once handed the BC Liberals near absolute power that devastated public health care.

So, why was the referendum defeated? It's because the BC Liberals determined that 60 per cent was the magic number to pass it.

Thankfully, for the past eight years, the current provincial government has been fixing the deep damage.

Reversing privatization in support services.

- Hiring tens of thousands of new health care workers.
- Slowly moving P3 facilities back into public ownership.
- And building new, publicly owned and run health facilities.

But despite the measures the BC NDP government has taken since 2017, we still find ourselves grappling with the long-term impacts of these policy decisions.

Today, B.C.'s health system faces a persistent and critical staffing crisis and has the highest injury rate of any sector in the province.

The system struggles every day to meet the needs of an aging and growing population, while we're left trying to rebuild a workforce – one that was decimated by decisions made under a government who held nearly all of the power with barely more than half of the vote.

Conclusion

In conclusion, the Hospital Employees' Union believes B.C. should move forward with a new electoral system. One that moves away from apathy, that suppresses voters from casting ballots, or voting out of fear rather than voting for candidates and parties who inspire each voter.

And to end the extreme policy changes of the past.

That's why HEU is recommending there be a two-step referendum process.

The first referendum would give voters the option to choose ending the use of the current "first-past-the-post" system – yes or no.

If a majority of 50 per cent plus one choose moving to a new electoral system, then the province should undertake a robust deliberative process to develop alternative options for a new system.

Only then should the voters be given an opportunity to select the new electoral system from the options developed.

Ideally, this two-step referendum process would be completed by November 30, 2026, leaving more than enough time for Elections BC to implement the new electoral system for the fall 2028 general election.

This two-step referendum approach mirrors the journey New Zealanders took when reforming their democracy more than 30 years ago.

New Zealand is a jurisdiction that shares many similarities with our own province.

From population to geography.

From shared legal, social and parliamentary systems to reconciliation between Indigenous and non-Indigenous peoples.

It's a solid model to follow.

Thank you for your time and the opportunity to propose this submission for your committee's consideration.