SPECIAL ELECTION EDITION

IT'S UP TO YOU

The Guardian asked freelance reporter Rod Mickleburgh to question five leading provincial politicians on issues of concern to members of the Hospital Employees Union. He talked to Labor Minister Allan Williams and Health Minister Bob McClelland of the Social Credit party, former labor minister Bill King and former health minister Dennis Cocke of the NDP, and B.C. Conservative leader Vic Stephens. These interviews have been edited — if at all — only for reasons of length.

Williams

Mickleburgh: Your government has said over and over that it is not going to bring in right-to-work legislation. Why not?

Williams: Well, from my point of view, I am philosophically opposed to right-to-work legislation. We have developed a system in Canada which, while it may require improvements and adjustments from time to time to meet changing circumstances, has worked, has provided a measure of security for the employees, has provided the basis for stability in industrial relations that doesn't exist in other jurisdictions, and therefore I don't propose to see any change take place. It's democratically based. It's up to the workers to decide whether they wish to be organized or not. If they don't wish to be organized, then there's no problem. It affords the opportunity for employers. If their terms and conditions of employment are so attractive to the workers that they don't need a union, then the problem is solved.

And practically, there is a very serious problem in British Columbia. We have 46 or 47 percent of the workers organized and the introduction of so-called right-to-work legislation which is situs a question of union security would not have any effect in British Columbia if we were to introduce it now except to cause chaos. People who are presently in unions, unions which presently negotiate with their employers would still do it. You could pass right-to-work legislation and it wouldn't affect the building trades, the craft unions, for example, one bit. Those unions are strong enough. They have a history of trade union organization on a craft basis, and it's not going to go away, because right-to-work legislation is not legislation which wipes out unions. It only interferes with union security provisions. If you look at the jurisdictions where there is right-to-work legislation, we've examined most of them — they generally are in agrarian communities with a very low level of organization, down as low as 2 percent. Therefore, the situation is entirely different from a practical point of view than it is in British Columbia.

There's another very serious consequence from right-to-work coming into a system such as we have in British Columbia and in Canada, and that is that it offers the prospect of there being union and non-union workers side by side in the same plant operation and I've looked at the situation in British Columbia where this does take place and I find that it causes friction and stresses within the work force such that not only do the employees suffer but so does the employer. The whole operation is capable of disruption from moment to moment at the whim, almost, of the workers who are fighting amongst themselves over organized and unorganized status, so that doesn't contribute to economic stability which we need so much.

Mickleburgh: Yet there does seem to be support for the idea within the Social Credit party and it has been said that some cabinet ministers support it.

Williams: I think it's quite clear. There's no secret about it. At three successive Social Credit conventions, the matter has been raised. At three successive Social Credit conventions, I have spoken against it, and the party has rejected it. There's another aspect of that that I think bears some careful consideration. I think it's a favorable sign that we have in our political organization, whether it's Social Credit, NDP, Liberal or Conservative, an opportunity within parties to discuss these matters, but our system of government is such that irrespective of what resolutions may be passed at a party convention, the government is obliged to govern for all the people and is not bound by the dictates of a convention.

This is not unique to British Columbia. As a matter of fact, I recall in 1973, the same situation confronting Dave Barrett. When the party said the NDP is now the government and therefore the NDP will do what the party says at convention, Dave Barrett gave them the very short, sharp answer that that was not the case and I wouldn't want to see that system changed. There has to be the opportunity within political parties for this kind of debate to take place, but we must never lose the underlying principle that the government governs for everybody.

Mickleburgh: Would you rule out a referendum on the question?

Williams: This was a matter that came up at the Social Credit convention in 1974. I'm opposed to a referendum. I'm a technique which is foreign to our parliamentary system. It's very popular in the States. We don't have that kind of history, that kind of tradition, and our parliamentary system doesn't allow for referenda to be put forward by a particular percentage of voters in the community. There are people who think it's a good idea but I don't happen to think it is. We have elections every three or four years. There is an opportunity for government to change and therefore there's an opportunity for people to express their views.

Now, I think there may be some exceptions to my comments with regard to referendum, but I think they only arise in those areas of fundamental concern to the province or the nation, and I would say constitutional change, for example, is one where referendum could be looked at. The difficulty, even then, is the framing of the question and the care that must be taken to ensure that in the presentation of the question and the arguments for and against that the electorate is well and truly informed. That I guess is one of the main reasons I'm opposed to referendum, that there is opportunity for misinformation, for error, and for an ill-informed or uninformed electorate to express their view.

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Editorial

Some important people have been saying some reassuring things. Provincial Labour Minister Allan Williams tells us there is no reason to suspect that the jackboots of right-to-work will echo in triumphant march across British Columbia.

And Health Minister Bob McClelland maintains that our health care service is not being forced into a state of economic anemia, nor does he agree that Social Credit government budget restrictions will reduce the hospital work force.

Reassuring words — if one happens to believe in the existence of the good limb fairy, or a moon made of green cheese. But for students of reality, the province has entered dangerous days and the words of government sources are not to be taken at face value.

Let’s look first at Mr. Williams and the philosophy he espouses. In fairness to the man, it is perhaps wrong to picture him as some kind of modern-day pied piper who would lure us into a sea of false security. He may well mean what he says when he argues that right-to-work legislation is not in the offing.

But if so, he is overlooking one crucial point — one that must not be missed by the rest of us: his is not the only voice of authority. From that same Sacred cabinet of political opportunists we have the wild bull of the north in the form of Don Phillips — an unblushing spokesman for the right-to-work forces. There are others. And from the backbenches we have such neanderthal thinkers as Jack Kempf and Lyle Kahl, who would seemingly like to sell right-to-work door-to-door in packaged form.

In addition to these readily available irritants, is the sizeable army of right-to-work promoters among Social Credit’s rank-and-file membership. Williams has beaten them off in convention and correctly notes that even if they carried the vote one day, the Social Credit government would not be duty-bound to abide by such a vote. But the pressure is there. And it is growing. It is, or will be, a force to be reckoned with.

Then there is the question of the Williams letter asking for details of a referendum in which right-to-work went down to defeat in the state of Missouri.

Reasonable people will agree that a Ministry of Labour worthy of its name should have an interest in such industrial relations developments.

But why was it the labour minister and not one of his researchers who wrote the letter, as would have been the case under normal circumstances?

An interesting question. We’ll leave it at that.

There are other interesting questions, some of which should be aimed at Health Minister McClelland and the funny money people who have been tightening the balance-the-budget noose around the all-too-vulnerable neck of our health care delivery system.

Why, for instance Mr. McClelland, are you so sure that a budget increase of five per cent — even with a possible addition of another two-and-a-half per cent — will allow the health care employment force to remain at its present size?

Are you not aware that the needs of many hospitals far exceed these restrictions? Do you not know there are forecasts of another thirteen per cent increase in inflation?

Something has to give. And hospitals have made it clear that this will mean the loss of jobs. Our best estimates are that one in ten jobs will vanish.

McClelland says any layoffs would be due to the changing nature of health care delivery, and that such a negative situation would be balanced by employment through new programs.

Nice election talk. But is there the proof?

Perhaps as they fill us with assurances of well-being, Williams and McClelland should be reminded of the similar tactics of Prime Minister Trudeau in 1974. He fought the election by opposing wage and price controls. We all know what happened after that.

What we don’t know is what will happen after May 10 if Social Credit is returned to power.

It is an uncertainty that health care employees, as well as the rest of the work force, can ill-afford.
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WILLIAMS

Mickleburgh: Okay, then why did you write a letter to Missouri suggesting that the right-to-work referendum held there last year was unconstitutional? Williams: I'll tell you exactly how the letter to Missouri arose. We had at the Socialist Workers Party conference as I said a moment ago the question of the right-to-work referendum raised. It was defeated. Some weeks after that one of my colleagues came back and said, did you know the Missouri referendum was right-to-work in Missouri and it was soundly defeated. And I said, well, don't you worry about it or who, and he said, 'I don't know.' And, in fact, I decided to try to find out what the situation was in Missouri because states are in the North America with regard to right-to-work. I think there are 20... 22 states which have right-to-work laws to find one defeated in particular in Missouri which is a state which does have a right-to-work law would be in that part of the United States which would lean toward unions and right-to-work. So I decided to find out what the situation was there. And we found that the Democratic Governor wrote, holds a position similar to the minister of labor—that they are not going to have a commissioner of labor. They are not going to have any labor office. That, you know, not only did they have the right-to-work law but they had all the details because it was of interest to me. I've found out that most of the matters that must by now be obvious to everyone who have sent me the material which is produced. That is the one things I am not going to right-to-work, I've got the right to work. I've been published by trade unions in this country. I wrote to Mr. Butler was in the same vein.

Mickleburgh: You weren't asking about right-to-work, you were asking about the legality of putting on a referendum of right-to-work which was the wording of the Missouri right-to-work credit convention, and if you're opposing right-to-work, why are you writing a letter to Missouri seeking information on the subject? Williams: You're asking the wrong questions. I asked, I said, how did the referendum come to be placed on the ballots. I was interested in that. But I also argued with you, I was not interested in the number of people in the labor force, how many of them were favorable, not the voting results in the different areas of the state. I just wanted to know, since it was defeated over 60 percent, whether or not they wanted to know whether that was a general defeat or whether there were areas that were in favor and some that were against it. I just wanted information about it and I got no response. One of the officials of the Missouri Democratic Party and got some information on the campaign that had been defeated in both the rural and the urban areas and the referendum was defeated. It was defeated in both the urban and the suburban areas of the state. And it was defeated, I believe, by about 60 percent. Then with different referendum procedures that the electorate can call for a referendum. It was organized by the Missouri State Legislature which for four years has called a referendum. It got a private members bill on right to work on the floor of the legislature and it was defeated and he went the referendum route a little bit later.

Mickleburgh: We all know that Pierre Elliott Trudeau campaigned for right-to-work and prices control and 16 months later the Liberal government was returned to power. Was there circumstance that changed? The government has consistently taken a position against right-to-work. There is any conceivable circumstance that could change that policy? Williams: Not so far as I'm concerned. I think in British Columbia today with the position of the government even one in my view of increasing numbers of the part of the employers involved in collective relations on the part of employers and the government's still going to go on both sides before we have the kind of industrial structure which in my view is essential to our economic and social development. That progress is not going to be made if the conditions of the labor market and the government and the government's situation stability which in my view is essential to our economic and social development is not being made. That progress is not going to be made. It would be haphazard if you were thinking of a new machinery to right of work. If it will be haphazard if it recognizes that I can say one thing, and I mean that I am not about without fear of contradiction, that the question of right to work has not been raised in any of the cabinet discussions that we have had since I've been minister.

Mickleburgh: What about the changes the Social Credit government is bringing in right-to-work legislation as the Essential Services Disputes Act? Williams: There is a suggestion that the Essential Services Disputes Act is right-to-work legislation and it is not, it is not. I can't believe that any piece of legislation brought by a trade union leader... he must know what the law is... and not only that. If it would deny them the opportunity to negotiate with employers, in other words, clamber around collective agreements, and the government has not denied that. As a matter of fact, it is predicated on the fact that there are already collective agreements and on the concept of collective bargaining process. I think the answer to all the criticisms of the Social Credit service legislation is found in the fact that the Social Credit legislation was brought in October 1977 and modified in May 1978.

Mickleburgh: The hospital workers have used it and they haven't been very happy with it. Williams: I'm talking about the problem of the hospital. What I'm saying is that the essential services disputes legislation, yes, the legislation is an essential piece of legislation, it gives the employer power to have to face the facts when they don't conform with the act. It gives the employer power to have an employer who won't go along with the provisions of the law is faced under the act and yet they're facing no penalty. Williams: Well, as I say, I asked the essential services agency to come forward with this problem and make reorganization. And the people have to have to change the legislation depending on what those problems are. People say, well you're threat- ening the whole of the health care system. There's one aspect that has to be brought in mind. It's very new and it's taking place in B.C. Indeed in Calgary. There's some history of using of the essential services process but not a lot.

Therefore, it's developing very slowly. And I was briefly with Paul Walter when he came over from the Canada Industrial Relations Board the need even in West Coast area and the policy is better the role and the procedure be followed by arbitrators. This will be developed.

Mickleburgh: Is that the problem, thought? Is there problem with the arbitrator or is it with the thing? Williams: Well, I suppose it's a question of which comes first, the chicken or the egg. You know, there's one thing you have to bear in mind and that is that in the context of the training, an error is made, then that has to be corrected. How do you do it? We had in the case of the H.R.T. arbitration, we had the arbitrator pushing off and farther and farther, going what that the arbitrator board had done, and in fact, the long way to get something, it could have been the only way.

The situation could have been unhappy with what the arbitrator does and what they may have, on the advice of their lawyers, been advised that certain arbitration board was contrary to the law. Certainly, H.E.U. finding that the arbitrator could challenge the award if it were contrary to law, and I was that when the arbitrator is facing a situation that there's been a significant shift in popularity so far as the railway industry is concerned. You know, you do go through the process to the court, are you saying, you can't take our right to strike away or our right to strike?

You know, that situation has changed over and over again. Now, you have trade unions saying, look in order to provide some kind of stability for the thing can be ongoing, we would have employers saying, no way we're going to turn over our management responsibility to this party. My answer to that particular point, there is a certain area, and essential services area is one, you know, you've got to have some way of bringing across the path, but only if everybody somebody produces something better than arbitra- tion and then we are going to go. And we're not going to do it unless the employers or trade unions to stand single and then on that to their bill or bargaining and to have health, safety and life-saving measures. Mickleburgh: You're familiar with the problems the hospital workers are having. In good faith they've tried to get a binding arbitration, and there's a problem like that. Have you asked them to have the act that if they don't conform with the act. The act will say the employer's they won't go along with the provisions of the law is faced under the act and yet they're facing no penalty.

Mickleburgh: Okay, let's say it's not working. Williams: Yes, I say it's not working. I know there's a problem there. We're working it out. It's a new mechanism to make sure there's no trouble and that's the changes are made to see that doesn't mean that the union is going to get everything it wants. It's not a problem, the function, and people have to think about the function, the view put forward by the employer and the employer put forward by the employees representative.

One thing that both the union and the employer agree is that the funds available for the provision of health and medical care in this province are not limitless. Therefore, demands have to get to a point where demands are not to be taken to this for arbitration each time, and as soon as you put it forward, it's the same as saying we've warded our right to strike. Mickleburgh: But they say it's not working. Williams: Okay, I know there's a problem, that's why we're working it out. And that's why I'm saying the union is going to get everything it wants. It's not a problem, the function, and the function, and people have to think about the function, the view put forward by the employer and the employer put forward by the employees representative.
services they like to provide. It also affects the medical profes-
sion. Small practices are closing because the high costs are
becoming increasingly expensive and require major capital.
We all need to make sure that our government is not going to take some time.

Mickleburgh: Okay, finally we get to Social Credit. Mr. Leitch, Social Credit government is re-
elected, is there anything you can expect in the area of labor relations law?
Williams: The government has reassured us that we've just talked about, the whole question of the appropriate treatment of the unemployed is a great deal of our time because the government is functioning fairly well under the system we have today. There may be some legislation that will be required but I think the matter that I spoke about ear-
lier is readily perceived there.

The organization and expansion of industrial relations con-
cepts in the public sector, the one that touches on the essen-
tial fairness, is by comparison, relatively new. The big increase in trade union activity, trade union jobs coming into the public sector. I guess, at the very least, the trade union activity came when the BCGC was organized. We therefore think that's going to require greater attention and it's the job of the employer that's involved in that, the multitude of municipalities, school districts, recreation communities, colleges, universi-
ties, all of whom are pretty new.

We have municipalities that are being organized right today. They have their own industrial relations committee, looking for advice and they're running a bit ahead of the legal system. It maybe is more skilled in tech-
niques. So it would appear to me that this is an area of some fluctua-
tion and therefore will require more of our attention. You know, when we included municipalities in the Arbitrations Services Disputes Act last year, while there was a lot of criti-
cism as compared to the flow of mail that we have in arbitration of councils and coun-
tries, we do understand the practice and understand the act. They didn't realize that under the code, many positions of high wages were already covered. They didn't realize that in keeping them open to such as has recently been clearly understood by Lord Mayor of Prince Rupert.

If you're going to have a strike, you have a bunch of things of the ones that you sit down and talk about, what are the strike, you have a bunch of your main breaks and they have to work out an arrangement on the behalf of the government on the other side. That's exactly what's required in these cases. The legislation only says that there's a requirement for arbitration, there's a requirement of the municipality and the employees to sit down and re-
cognize the fact that they have to be done at certain times in order to keep it op-
ened in the private sector for years.

Mickleburgh: Then why is it not necessary to an act like that? Why is it that we have their own?
Williams: It's because the par-
ties are not able to recognize not that there's an act. Because the act of the government in the public sector is going to get involved. We'll only get involved if the parties don't recognize

Mickleburgh: The NDP has been accused of Social Credit government, want-
to bring to right-wing legislata-
"tive work," in an area that if cer-
tain things occur, we'll provide the service, but it's limited.

The public sector has to rec-
cognize, I think that gives us an idea of what's happening in Prince Rupert, that the public sector organizations, that people realize that they have an obligation and that they'llerry couple organizations will respond. I don't see any diffi-
culty. You might consider that if we don't want to use the essential ser-
ices legislation any more than the private sector, it is, because that legislation is only used when it is broken into, that is, when the system breaks down, it doesn't do anybody any good.

Mickleburgh: Why should a member of a trade union vote Social Credit rather than NDP?
Williams: One of the reasons is we have the same sort of Social Credit government, although union involvement, and they have been left to sit on their own in that position. We've got five or six trade unions running for this B.C. General election. I think we've got more trade union involvement than political parties, but I don't want to use the right-to-
work groups in B.C. to facil-

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speaking, all of the disputes taken in total were creating absolute havoc with the econ- omy and they were hampering the revenue to the government. In the end, the government had to act. There were other reasons, too.

Mickelburg: Isn’t that what the government was doing under the Essential Services Disputes Act? It was preventing strikes by taking away the welfare of the province to the terms of reference under which it was established.

King: Sure. And that’s as broad as the ocean. That’s up to the provincial government. The thing that is wrong with this notwithstanding, this is a continuing mechanism on the part of the government. We do not believe in pre-judging. We believe in main- taining the strike in force in relying basically on the references.

Now, if it is necessary to act, you don’t need a statute. Con- vena the legislature and deal with it in open debate which is what the crisis you mention is about. There’s a big difference be- tween a continuing statute in force and closed doors and going behind closed doors and going behind the curtain and convening the legislature, debating the circumstances of the strike, and trying to reach an agreement with the workers. It is that step that we part from Social Credit.

Mickelburg: What about the strike stopped by the Essential Services Disputes Act? They opt for bind- ing arbitration, and if the strike comes down, then it’s chal- lenged in the court. What would the NDP do about situations like that?

King: We are in agreement with those particular cases, but I’m very gravely concerned, as was Mr. Vanier in the labor, about insulting indust- rial action under the discretion of the tribunals, where there are disputes, except in the case of industrial activity. But in terms of industrial relations, I do not feel that the courts have a role in a strike, and I have no basis in the code through private clauses to ensure that the labor rela- tions board held that jurisdiction.

Mickelburg: Are there specific criteria and restrictions that make to the current labor code?

King: I’m afraid I’m not the labor critic any more.

Mickelburg: But it’s your code.

King: Okay. Well, I certainly am concerned how the people in the community change from time to time. I have no idea about the number of them that I’m concerned about. I’ve met CUPE and they are very much concerned about employer accreditation. While I don’t agree with what they do, I think they feel that they are on a point of concern. There are some prob- lems of this nature of association and I think we would have to do something about it.

There are other things that I think have to be reviewed and understood.

Mickelburg: To what extent should hospital employers have to give wages?

King: They should have the full right to strike. They should also be able to bring in labor services provision of the labor code which ensures that any service that is necessary to maintain life and safety be pre- served and that can be done, in essence, under the economic sanction of their strike. I’m in favor of the full strike by any people that will help with that intelligence education and the labor services provision, and then about industrial relations’ ed- ucation, the propriety of unions functioning and the order out and I would post the same. The same of course would, and that’s the main point. I’m sure we will become the exception rather than the rule.

The thing that you do on an appeal to intelligence and other methods, to more sophisticated government assistance, rather than on a strike, will put some discretion. I just don’t think that approach works.

Stephens: First of all, do you think there should be the right to strike?

Mickelburg: I think it would be preferable, but you don’t take away the right to strike unless you provide them with a proper strike, and that is a good, or better. For example, if a person were on strike, but the teachers of British Columbia have done very, very well in the arbitration situations, so I don’t believe it’s a matter of going into a strike. I think that strike in order to keep peace with what is happening in society, in our community, in society, we have to strike to strike until we were in a posi- tion of winning that strike with support to ensure that the hospital workers have good and working conditions.

Mickelburg: Are you talking about a new form of binding arbitration?

Stephens: Yeah, I think that with this arbitration between the vari- ous parties can settle these things, as with the teachers, there are other things. One of the things we must remember that public servants, the workers on the tax- payers’ dollars, should be recognized. But the workers are entitled to uninter- rupted service for the money that they are paid. If they are working for this unwillingly, I don’t think people who work in the public service are going to distinguish clearly between striking in the public service for their jobs and being in the private sector, to me, they are two dif- ferent things.

Mickelburg: Are you familiar with the “controlled strike” that the Hospital Employers Union took in 1976, in which certain services were declared essen- tial, and the workers continued to perform those services while others were off the job?

Stephens: Yes, I think that I have been involved in a certain amount of responsibility. What it indi- cates is that not all workers are to be responsible, and at the same time, to be able to stand up for what they think are the opportunities to right things. It’s a delicate situation, the fact that hospital workers would do that, I think is not really that far apart in working in public service and being better or stricker.

Mickelburg: So you would go along with the “con- trolled strike concept”?

Stephens: Well, I’m not op- posed to the idea of having something to replace it with. You don’t take away the right to strike and say, to heck with it. It seems to me that it is not responsible of government to come up with a workable for- mula that is satisfactory to the hospital workers before you take away the right to strike taking away the right to strike.

Mickelburg: Would they have to agree with it before you would take away the right to strike?

Stephens: Certainly it would be sensible to conventions do to the Conservative government of that kind of legislation without full consultation with the people that’s affecting.

Mickelburg: What do you think of the Essential Services Disputes legislation?

Stephens: I think there’s a gross misunderstanding of the act because it doesn’t change very much. The legislation has already been there for back to back to work. Barrett did it in 1972, it is now 1979. It’s when he legislated the pulp workers back. The unfortunate part about the Essential Servi- ces Disputes legislation is that it is the public, not the legislature, the right to debate these issues, and hands is completed that can make a judgement without a group of people who have a responsibility. The power of the government to put people back to work has not been made clear in that legislation. What has been changed is the avenue of where the legislation is gone to debate the issue is gone. I think that’s certainly a part of the legislation, that people’s right to strike or to not strike, because it really matters, because it really hasn’t. That power has always been there.

Mickelburg: You’ve been cal- culated that there were well over a billion dollars in that going to hospitals, in layoffs in the public sector.

Stephens: No, certainly not. As everyone knows we have 115,000 unemployed in British Columbia, we have 300,000 people going by the highest, highest taxatio- ny. What you have to know is how, if government spending creates jobs, with the highest spending government in the highest employment. We believe that the only way you really add to the cost of living is more money in the hands of the government, you can spend it, and invest it, and save it, as they choose, rather than the people who are choosing the politicians. That way you create more opportunity for some people to move out of the public sector, government services do not have to be in the private sector. But unless there’s a shift, then I think the wage is really, and the modern wages that are in the private sector and put them on hold, they would ultimately lead to disaster.

Mickelburg: Aren’t you going to lose health care workers in the public sector that what you’re suggesting is good for the economy?

Stephens: Well, I don’t really think, so quite frankly. I think what you have to realize that there’s five or six reasons why these people don’t come in the public sector through retire- ment and people who choose to do that. They don’t have to resign, they have to have mass layoffs. What you actually end up doing is by increasing the number of jobs in the public sector and the higher the cost of the public sector. You allow that government can come to the government in the form of tax. That isn’t necessary in my opinion that people from(people) Simply, by creating more jobs is the private sector, as people leave the public and service go into the private sector, you just don’t rein. It seems to me that that’s a good, healthy ap- proach.

Mickelburg: Speaking of healthy, what would you do about health care workers?

Stephens: What are you cutting them? Are they too healthy?

Stephens: No, as a matter of fact, we believe the priorities of this government are too twisted. They recently announced a package to try to shift some of the sport complex for the city of Vancouver and at the same time, the same amount of money to be divided of all the hospitals in British Columbia. I’ve got to ask where are the priorities of government. Are they back to sports complexes, but I don’t take sport complexes equal to all of the needs of all the hospitals in British Columbia. My personal view and $250 million on hospitals, or $100 billion before we get started talking about a sports complex.

Mickelburg: So you’d increase hospital spending?

Stephens: We, well, we would cer- tainly, the wrong direction, it was needed. We feel very strongly that hospital care is a number one priority of government, as is education.

Mickelburg: Are you suggesting that the NDP’s new Social Credit scheme is responsible for the NNP’s record in health care?

Stephens: Well, I think the NDP’s of the NDP’s record in health care, they made a breakthrough after the more or less dry years of the W.A. C. Bennett. But that doesn’t mean I think what they think they had very good intentions but they very bad busi- ness. What I think what the present government has neither the good intentions, the good busi- ness management. I would like to see the NDP in the government, the NDP would be the best of both worlds, a desire to see the NDP improve the health care, at the same time, recognize the need for social, tax, and other federal fiscal restraint and control.

Mickelburg: One of the first things the Socreds did on coming to power was to vastly increase the per day costs for people on welfare. Do you think they’re heading to a user-pay philosophy in the hos- pital sector?

Stephens: Well, I don’t see any- thing that anybody can afford to pay anything. I see no reason why they have to pay anything. Now, I’m not saying they should pay everything, and I’m supportive of an insurance scheme that spreads the costs to make it bearable. I think the people who simply cannot pay anything, like old people, those people should be pro- vided with it. There is a group of people who are really quite pre- carious, I think we have to protect them. You know, we pay $18 to $20 a month for our families, and when we go to take out, we don’t object really to the insurance, because we feel we get the good service we get.

Mickelburg: You’re not ag- gression that the situation in the United States where people are sometimes stag- gering to pay for their health care with hospital costs.

Stephens: Absolutely not, and I don’t think if the United States would advocate that, I think if they’re going to advocate that, but that, that can’t carry every- one. We have to have a social safety net for everyone, that everyone gets everything for nothing. That can’t be done. We are in a country where we do with hospital care is essential to our way of life. We will still pay for it, but we have been decided that, by sharing the cost, that the people who would otherwise suffer should not be able to afford more than others simply take up the costs for those who are in the system. We have quite a healthy way of doing it. You don’t go all the way, you don’t have to pay a lot of money in dollar in being able to say, well I paid at least for my family, no one there think Canadians like that. They don’t want charity all the way down the line. They want to pay for what they get.
Mickleward: Why should a member of the Hospital Employers' Union vote in this election?

Stephens: Well, for very basic reasons. I suppose the number one reason is you want to have somebody in your hospital who's going to be a friend and a contact. For example, if you have any kind of trouble with the hospital, if there's a dispute about a bill, the person in the union will know exactly what's going on at the hospital and what the bargaining position is. They're not going to be afraid to tell you the truth about what's going on.

Mickleward: And they won't have to worry about their jobs?

Stephens: They won't have to worry about their jobs at all. They are actually paid more than people who work for the hospital.

Mickleward: I see. Well, thank you very much. Good luck to you.

Mickleward: And you're on the cover of the newspaper?

Stephens: Yes, I am. There's a lot of publicity.

Mickleward: Could you first of all explain what changes the government has made to its hospital budget? What has happened on hospital budget increases lately?

Mickleward: Well, first of all, it's not a freeze. We attempted to freeze the budget in the last budget, but that would be available to the members. The government has increased taxation and the Local Authority Taxation and the New Economy Indicators and come up with this new budget. I think it's going to be better for the hospitals that would be as close to flat as possible.

Mickleward: The Bank of England has set the interest rate at 3%, which is a pretty high interest rate for the time being.

Mickleward: The British Council has spent more money on its programs in the last year, and they have increased the costs for the last four terms.

Mickleward: What is your opinion of the government's policies?

Stephens: I think it's a bit of a mixed bag. I think they've done some good things, but I think they've also done some bad things. I think they've done some things that have been beneficial to the country, but I think they've also done some things that haven't been beneficial.

Mickleward: Well, thank you very much.

Mickleward: The United States hospital costs are very high for the top-

Mickleward: Well, first of all, the costs are not very high for a hospital. The costs are very high for the insurance companies. The insurance companies have increased the costs for four different reasons. First, they have increased the costs for the collection of the premiums by the hospitals. It's not significant for the insurance companies to make money on their hospital budgets, nor is the ministry's role in the setting of the hospital costs.

Mickleward: I think it's a very good idea to have the government pay for the hospital costs, but I think it would be better if the government had a more direct role in the setting of the hospital costs. I think it's a very good idea to have the government pay for the hospital costs, but I think it would be better if the government had a more direct role in the setting of the hospital costs. I think it's a very good idea to have the government pay for the hospital costs, but I think it would be better if the government had a more direct role in the setting of the hospital costs. I think it's a very good idea to have the government pay for the hospital costs, but I think it would be better if the government had a more direct role in the setting of the hospital costs. I think it's a very good idea to have the government pay for the hospital costs, but I think it would be better if the government had a more direct role in the setting of the hospital costs. I think it's a very good idea to have the government pay for the hospital costs, but I think it would be better if the government had a more direct role in the setting of the hospital costs. I think it's a very good idea to have the government pay for the hospital costs, but I think it would be better if the government had a more direct role in the setting of the hospital costs. I think it's a very good idea to have the government pay for the hospital costs, but I think it would be better if the government had a more direct role in the setting of the hospital costs.
Mickleburgh: Why should a member of the Hospital Employers’ Social Credit in this election?
McClelland: Well, in the first place, I think we should make a point right here that we have developed a series of programs that will allow him to get a job over the long haul, and I’ll tell you, I think that will be a major point in hospital system, everyone is aware that that does not matter to them and we should study the rest of the world. And, they find that costs are the most important concern by every government in every jurisdiction in the world right now.
We’re in a situation right now where the hospital systems are collapsing in some other parts of the world. Great Britain is in chaos. The United States is in a mess as a matter of fact the other day, as you know was an article in U.S. News and World Report. There are 25 hospitals in New York City are 25 hospitals in New York City that are in serious financial difficulty or bankruptcy. What you’re saying is that many hospitals are under pressure to cut costs and we have nothing to do for the state to bring in a larger percentage of things in health care, and you know, there are too many of them and there are a large percentage of the budget. But after all, it’s one of the greatest needs in people’s lives and, as far as financial concern, they’re not spending on basic care anymore. They’re cutting the number of the basic care programs that we set up?
Mickleburgh: Can you give an example of that?
McClelland: Yes, let me give you the example of the hospitals in this province, in the province of British Columbia, where we have 26 patients in the hospital, in the province of everyone. Our standards—just to close that out of some of the political aspects of that, this province in British Columbia leads Canada in the provision of hospital services. I just like to close that out of some of the political aspects of that, to close that out of some of the political aspects of that, there are only a percentage of those which have been able to introduce some form of social program in the last three years. The first one of these, the Royal Columbian Hospital, program, of course, is that last major of those. There’s also universal access to it, which is the introduction of dentistry, and it’s not an accident that we’ve been able to build on that, because of the good management of our economic health that we’ve been able to look after our social health. It’s really a simple as that. That’s why I think members of the Hospital Employers’ Social Credit will vote for the Social Credit party.
Cocke: Mickleburgh: You’re probably seen those Social Credit ads criticizing the hospital construction that is happening under their government compared for the NDP? Were those ads accurate?
Cocke: Well, I think it’s a series of Socrates ads. What do they do? They lump the entire thing together and they have been on the drawing boards and completed during their terms of office, rather than any of the things they’ve got going now and so on. Could you just make some comment on the whole situation? Ask a construction worker whether or not they’ve been building hospitals. Completing them? Sure. The ones that we started. They couldn’t stop the Royal Columbian or Queen’s Park’s extended care hospital at UBC, and all the others. They’re doing a lot of talking and not much doing.
Mickleburgh: Are the figures accurate, though?
Cocke: I don’t think so. In fact, I think you’re wrong on those figures at all, in fact, I’m looking at all those figures and making a statement. One thing you must bear in mind that I’m presenting this to our audience under the ad or in the ad, I found it so far I see to a source that was made for Social Credit ads.
Mickleburgh: Do you feel that Social Credit is spending the right amount of money on health?
They claim the health care budget has been up from $500 million of the NDP to about $575 million which is about 8 percent of the budget, which say it’s the highest percentage in the land.
Cocke: Well, you know, it’s very difficult to show a comparison. Some provinces have, in other areas, and so on and so forth. No question about it, it’s very difficult to show a comparison. They’ve been spending a lot of money on health care, and you know what’s been happening is that a large percentage of the budget. But after all, it’s one of the greatest needs in people’s lives and, as far as financial concern, they’re not spending on basic care anymore. They’re cutting the number of the basic care programs that we set up.
Mickleburgh: Can you give an example of that?
Cocke: Well, let me give you the example of the hospitals in the province. The hospitals are in a position now where patient care is jeopardized, just because of the cuts. They’ve been cut so heavily on them. They’re short-term and that’s affected the people under whom these facilities.
Mickleburgh: But $550 million is a lot of money.
Cocke: Nononsense. The last issue, that is the last quarterly report from the Economic Council of Canada, said that health care is well within the means of Canadians, that it only requires about 15 percent of our gross national product and we’re already spending much well within our expectations.
Mickleburgh: Would the NDP increase this?
Cocke: The NDP would have to. Not throw money away by any sort of stretch of the imagination. With the NDP would do to be sat down and see to it that all the beds in hospitals are properly served and make sure that the funding was there for it. Look, we believe in universal health care. That’s all there is to it.
Mickleburgh: Another boast of Social Credit is the employment of the unemployed. Is it as good as they say?
Cocke: Well, they’re having a long-term deal of the unemployed. You see, when you bring in a long-term care program, what you need is not only direct care is back facilities. And the acute care hospitals are still overburdened chronically ill patients who should not be in those hospitals. But they see, that the people need extended care hospitals and now we’re in the back position. We were back in 1972, they’re not providing the backup. Because that, they must like the credit for a program, a program of which we negotiated with the government under the federal government.
Mickleburgh: What changes would you make to the program if the NDP is elected?
Cocke: Just improve it. Get some more facilities on line so people can be properly served.
Smile, it could get worse

By HOWIE SMITH

The layoffs have already started. They're the result of Social Credit cutbacks in B.C.'s hospitals.
The Hospital Employees Union, in mounting their public campaign to protest the cutbacks, has pointed out that not only will hospital workers be losing their jobs. The quality of health care in B.C. will deteriorate and everyone will lose. At best the union faces an uphill battle and you may find yourself saying "Smile, it could be worse ..." But what if the cutbacks were made under different circumstances. What if the Social Credit government had first passed a "right-to-work" law (as some claim they plan to do in the future) and what if they then brought in hospital cutbacks? It could go like this ... Hospital management, faced with an irremovable government, looks for a way to cut costs. They may cut the budget in medical supplies, say, the suppliers, either pay the price or do without. So they look elsewhere. How about wages? The workers have a contract setting out wages and conditions. It was negotiated in good faith through their union and signed by management. It seems there is no way out of it. But wait. What about B.C.'s new "right-to-work" law? Management calls in their lawyers, they have a conference ... and come out smiling. The next day the newspaper ads appear: HOSPITAL WORKERS WANTED — salary: minimum wage.

Two weeks later the layoffs start. Everyone who receives a notice is a union member. Some of those laid off have been there over ten years, some over five years. They all get two weeks notice. The union reacts swiftly, taking hospital management to the Labour Relations Board and then to court. They claim that management is violating their signed agreement and that the agreement applies to all hospital employees. Management disagrees. They argue that the new "right-to-work" law allows them to hire whoever they want, union or non-union. Wages they say, are now an individual matter between management and each worker.

Time drags on. Several months later half of the employees are receiving minimum wage. Some are new, others, frightened of losing their job, have agreed to a cut in pay. Finally, the court makes its ruling:

"A non-union man's rights would be diminished, reduced, curtailed if a union member acted as his agent because the union might insist upon higher wages or shorter hours than the non-union worker might be willing to accept in order to remain gainfully employed. Hence it was a violation of the act for the union to seek recognition as the sole bargaining agent."

In other words, under "right-to-work" every individual is guaranteed the right to work for less, regardless of negotiated union wage rates.
The union has lost. Within a year only one quarter of the hospital employees are still union members. Conditions slowly worsen but little can be done. The following year hospital management applies to decertify the union. A vote is taken and the union loses. After all, one worker is heard saying, "who wants to pay dues to support a union that can't even make management stick to a signed agreement. It's either work for less or don't work at all."

Sound too fantastic? An impossible nightmare? Unfortunately it isn't. It's all too possible under so-called "right-to-work." In fact, the words of our made-up court decision are all too real. They were spoken, verbatim, in the Supreme Court of the State of Louisiana in 1955, during a test of that state's "right-to-work" law.

The prospect of our own hospital management (the Health Labour Relations Association) pitting a group of low-paid, non-union workers against a better paid unionized work force isn't that far-fetched either. Take for example the summer of 1978 when more than four hundred provincially subsidized student jobs were sacrificed by the HLRA in an attempt to establish a lower paid, non-union class of workers in hospitals. In that instance, the HLRA insisted that they be allowed to pay non-union student workers a wage rate 39% below union scale. The union objected, saying that the students were entitled to full union rates. The Vancouver Sun confirmed union fears when they reported that "Burnaby General Hospital has eliminated before the Labour Relations Board that it gave union jobs to students because student wages were lower."

HLRA spokesman, Chester Hooper, denied that there was any attempt to undercut the union agreement but was quick to point out just how easy it would be to enlist this lower paid work force: "The boys and girls are all out there waiting ... They'll break down the doors at that (lower rate)."

If British Columbia had a so-called "right-to-work" law, they wouldn't have to break down any doors. After such a law had stripped B.C. workers of their right to secure union protection, everyone would be "free" to work for less for less.

That's the real story behind "right-to-work." So when you think of the current Social Credit cutbacks against our health care system and someone says "Smile, it could be worse ..." just think about the possibility of this government giving us a "right-to-work" (for less) law and remind them of the end of that saying — "So I smiled, and sure enough, things did get worse!"

EDITORIAL

S increds give back "blood money"

As Premier Bill Bennett was fond of saying in the early part of his term, the government has no money of its own. It collects and spends only as the agent of the people.

Ideally, it should collect and spend each year no more or less than is needed for the efficient management of the province's affairs. In practice, it rarely works that way. Political priorities, rather than financial planning, usually dictates budgetary policy.

It would be nice to think that the latest Social Credit budget reflects today's economic realities in British Columbia — that things are so rosy that we can suddenly afford hundreds of millions of dollars in tax cuts.

The truth, of course, is that the Socials are able to offer all this relief only because they have collected too much money in their first three years in office. They have deliberately and cynically distorted the financial and economic realities for political gain.

When they should have been reducing taxes or spending more to alleviate the hardships of unemployment and soaring education and medical care costs, they were siphoning the money away for an election bribe.

Bennett and Finance Minister Evan Wolfe would have us believe that the budget is evidence of prudent financial management. In fact, it is just the opposite. The accumulation of $285 million in surplus in two years means nothing more than that the government took that much more out of the people's pockets than was needed — at a time when they could ill afford it. The true motives behind this budget are betrayed by the way in which all this largess is distributed. Are things really so good that we can have a lower sales tax than was possible through all the boom years of the W. A. C. Bennett governments? Last year the sales tax was reduced to five cent per $100 with the generous assistance of the federal government.

We have a crisis in medicine and education, but the health and education budget gets a small allocation for the inflation rate. Arbitrary cabinet orders prevent municipalities, school districts and hospital boards from meeting their true costs while handouts go to individual taxpayers. Municipalities, schools districts and hospital boards do not vote. Individual taxpayers do.

Those tempted to bite the carrot Bennett is now dangling in front of them do well to remember the stick he used to beat them when he came to power. Blood money paid for that carrot. The seven-per-cent sales tax, the doubled ferry fares and auto insurance premium, the multiplying gas and electricity bills the horrendous property taxes and all the other punishments that the Socials inflicted on the people of B.C. for having dared to throw them out of office in 1972.

Not all the goodies the Bennett government can offer can erase the memory of those vengeful acts — acts now proven, by the Socials' own budget, to have been financially and economically quite unnecessary.

The relief now being supplied is what British Columbians have earned, not what the government has given them. It comes in spite of the Socials, not because of them.

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