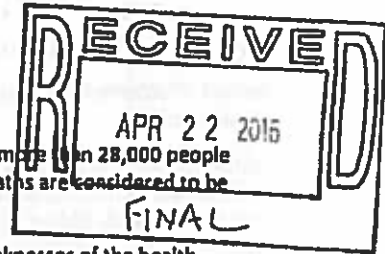


## #211 Proposed Resolution

### RESOLUTION ON A UNION RESPONSE TO THE EBOLA VIRUS DISEASE (EVD)

WHEREAS the Ebola Virus Disease (EVD) in Guinea, Sierra Leone and Liberia infected more than 28,000 people and killed more than 11,000, according to official reporting (the actual number of deaths are considered to be significantly higher).



WHEREAS the uncontrollable spread of EVD revealed the structural and systemic weaknesses of the health systems in these countries caused by decades of underinvestment in public health. Moreover, these weaknesses had a direct impact on the surrounding countries, such as Mali, Nigeria and Senegal, and even countries much further away, with EVD infections and deaths reported in the United States and Spain.

WHEREAS more than 500 health workers died of Ebola due to poor working conditions and inadequate safety measures. Despite the dangers, thousands of healthcare workers did not exercise their right to withdraw from unsafe workplaces. Where workers did take strike action this was not done opportunistically. It was a cry of extreme frustration by workers suffering under a long history of corruption, bad working conditions, understaffing and non-payment of wages. To this, the Ebola crisis was added, during which promises for compensation had been made, but with the health workers too often left to their fate.

WHEREAS: Comparing the reactions in the different countries faced with Ebola, it is clear that unions have an important role in the elaboration of the response: in countries where unions could work together with their employers and governments on the formulation of a response, such as Nigeria and Senegal, the disease was isolated and defeated. Also in Ghana, unions, employers and government together prepared for an outbreak. Unions in Spain and the USA, including SEIU, worked with government and management on appropriate measures to protect workers, patients and the population at large.

WHEREAS: In the three most affected countries, unions were not involved in the response and are still not part of the post-Ebola consultations. Guinean unions managed at first to make some life-saving improvements to the Ebola Treatment Units. But, once the government started a national response platform, health sector unions found themselves outside. In Liberia, public sector workers are not allowed to join a union and union leaders are harassed by their government when they try to improve the working and safety conditions in the Ebola Treatment Units.

WHEREAS Public Services International (PSI), the global federation of trade unions to which SEIU is affiliated, represents workers in the health and social care sector around the world. PSI, in collaboration with WAHSUN, the West African Health Sector Unions Network, developed a Trade Union Ebola Intervention Strategy, with two objectives: improve conditions for health workers and fight for strong public health care systems in West Africa. The tools for doing this include collaboration and exchange between unions; developing a large network of allies; lobbying to influence government and international policy, and promoting universal access to quality public health systems.

WHEREAS in the three most affected countries, healthcare services are funded mainly by external donors and that the lack of public funding and public governance is at the origin of the weakness of the health systems, and noting that tax evasion in Africa by multinational corporations and the very rich causes more money to be lost to African governments than the total amount of external aid that flows into Africa and noting that of the estimated \$30 trillion that sits in tax havens such as Panama, over \$10 trillion is estimated to have been derived from the least developed countries in the world.

WHEREAS the long-term involvement in the EVD countries of the multilateral development banks, such as the World Bank and the African Development Bank, as well as the bilateral donors such as USAID, the UK's DfID and France's AFD; and given that their influence has been to promote health sector privatization and reducing the public health workforce and wage bill; the PSI strategy requires extensive lobbying support from unions outside of Africa.

WHEREAS: In 2015, 1199SEIU United Healthcare Workers East, SEIU Nurse Alliance, SEIU Nurse Alliance California, SEIU United Healthcare Workers West, Doctors Council SEIU and AFRAM Western Region supported activities in partnership with PSI's Ebola Response Strategy: PSI brought health workers to the UN Ebola Conference at UN headquarters in New York City to set the global response mechanisms; SEIU Locals organized awareness raising activities for trade union rank and file and in hospitals in New York and California, and

## #211 Proposed Resolution

organised lobbying activities in different international and US organisations, both in New York and in Washington, DC.

**WHEREAS:** Under the Obama administration, the United States has done more than any other single country to help West Africa respond to the Ebola crisis, but to date taxpayers' money has primarily focussed on stopping the crisis, without addressing the reasons why the crisis was so terrible, namely the inadequate health systems. More than 100,000 workers were recruited across Guinea, Liberia and Sierra Leone to fight Ebola, yet these workers were on precarious contracts, in temporary employment and not employed directly by the state.

**Therefore, be it resolved:**

1. SEIU will continue to partner with PSI and strengthen the solidarity relationship with health care workers in West Africa to:
  - o Raise awareness among SEIU health and social care members of the fight against EVD and other international health emergencies
  - o Advocate and support trade union rights for health care workers in West Africa and beyond
  - o Assist PSI internationally in developing strategic organizing for health sector workers
  - o Join campaigns for the expansion of public health systems with universal access that are free at the point of delivery, including building an international health financing mechanism to address public health emergencies.
2. SEIU, in coordination with PSI, will lobby the US government, its agencies and relevant international organizations to:
  - o Ensure funding and other resources reach workers and health facilities
  - o Insist during funding and collaborations in West Africa and beyond for the respect of freedom of association and trade union rights
  - o Include unions in the elaboration of (on-going) work plans to face crises such as EVD
  - o Stop applying policies that enhance the vulnerability of countries and citizens, such as privatisation of and disinvestment in health care systems
  - o Invest in strong public health care systems, accessible to all
  - o reform the global tax rules to shut tax havens and close access to tax dodging by multinational corporations and the very rich so that sufficient domestic finance can be raised to tackle these problems

Submitted by:

1199SEIU United Healthcare Workers East  
SEIU Nurse Alliance  
SEIU Nurse Alliance California  
SEIU AFRAM Western Region  
SEIU United Healthcare Workers West  
Doctors Council SEIU