



PUBLIC EMPLOYEE Advocate

THE NATIONAL PUBLICATION OF AFT PUBLIC EMPLOYEES



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Healthcare reform: A moral and economic imperative

RANDI WEINGARTEN, AFT President

IF THE AMERICAN SYSTEM for ensuring access to healthcare was a patient, it would be very sick indeed. Forty-seven million people are without coverage, and many millions more have inadequate coverage. Costs are spiraling out of control. Increasingly, even those who have health insurance find themselves paying more for less coverage and fearing that things will get far worse.

Addressing America's healthcare crisis is a moral imperative. It is simply unconscionable that, in a country that considers itself to be civilized, so many among us are deprived of a basic human necessity.

Unions are developing **support** for **comprehensive** healthcare reform that addresses **access**, costs, financing, delivery and **quality**.

It is also an economic imperative. The cost of healthcare now causes a bankruptcy in America every 30 seconds. Businesses that offer healthcare often find themselves at a competitive disadvantage. And healthcare entitlement costs are eating up such a large share of government spending that they put a stranglehold on other, equally worthy, investments.

But there is reason to believe a breakthrough is possible. Most people agree things have gotten so bad that we have no choice but to drastically revamp our healthcare system. President Obama and key congressional leaders have made healthcare reform a top priority. And groups that sparred during the last major effort to change our healthcare system have found common ground on some important issues, including the realization that doing nothing is not an option.

The AFT is working with the AFL-CIO

to do all we can to avoid the mistakes of the past and, this time, actually achieve secure, high-quality healthcare for all. Working with progressive organizations, other allies and, crucially, employers, the AFL-CIO is developing support for comprehensive healthcare reform that addresses access, costs, financing, delivery and quality.

President Obama convened a healthcare summit in March that brought together many of the constituencies needed to make healthcare reform a reality. AFT vice president Ann Twomey, president of the Health Professionals and Allied Employees, represented the AFT

at the summit. The president made clear that healthcare reform is among his most urgent priorities.

The White House summit participants wrestled with—and found some common ground on—many of the toughest issues in healthcare reform. Not surprisingly, there also was disagreement on the details. No one would pretend that reforming our healthcare system will be easy.

Twomey had an opportunity to speak with President Obama about the need for safe staffing standards and the inclusion of healthcare workers in the process of defining healthcare reform. She outlined a number of considerations that should be part of any healthcare reform proposal:

A public plan option. This would allow people to purchase health insurance from a public provider, in direct competition with private health insurance. It especially would

help those who don't have employer-provided health insurance or are ineligible for programs such as Medicare and Medicaid.

Retain employer-provided insurance and favorable tax treatment for these plans. Our unions negotiated these plans, often in lieu of salary increases. These plans cover more than 160 million Americans and are the bedrock of our healthcare system.

Accountability. Hospitals must follow responsible business as well as safety practices. They should be held accountable for the public funds they receive. And they must provide services needed by communities, not just services they deem profitable.

Quality. Preventable medical errors result in an estimated \$37 billion annually in unnecessary costs. The key to reducing such errors is safe staffing levels. One study shows that nurses intercept 86 percent of medical errors. Other studies have established that when nurse staffing goes down, patient deaths go up. Nurse-to-patient staffing requirements must be part of healthcare reform.

Research and technology. A commitment to medical research and technology has the potential to greatly improve quality and efficiency of health services, and to lower healthcare costs.

President Obama and Democratic congressional leaders want to have a healthcare reform plan in place by Labor Day. Despite the hopeful signs that a transformation of America's healthcare system is within reach, many powerful forces remain aligned against the reforms we seek.

Moving forward, activism from union members like you will be critical. Rest assured that the AFT will continue to push for true reform and that your support will be essential to secure victory.



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What qualities, skills, experience do you want your boss to have?

CANDIDATES FOR the director of unemployment insurance (UI) in one state recently fielded questions from employees as part of the interview process.

Employee involvement came about after more than 50 Colorado WINS members working in the UI division of the Colorado Department of Labor and Employment (CDLE) sent a letter to the human resources director requesting representation on the hiring committee.

"We believe that open communication and transparency in this process is crucial, and that including WINS members demonstrates a positive first step in making our partnership real," the letter read.

Considering that the three job finalists are outside candidates, workers in the department wanted to know first and foremost what steps the newcomer will take to learn the business of UI.

While employees welcome the prospect of a newcomer, Kathy Zamperini, a labor and employment specialist and one of four Colorado WINS representatives on the hiring committee, says: "You have to know the job in order to be able to manage well."

The union representatives asked the candidates, among other things, to:

Explain what, in their experience, would



ERNIE LEYBA

prepare them to address the issues of job-related stress and lowered morale among UI employees due to an unprecedented workload;

Discuss their experience and philosophy in engaging frontline employees in decision-making;

Describe their experience in integrating technology to improve work processes and introduce efficiencies (for example, telework/flexplace); and

Describe their labor-management relations experience, particularly with regard to interest-based bargaining.

"Our main issue, which envelopes a lot

of other issues, is just communication," says Zamperini. "We feel that we have a lot to contribute as frontline workers, and that's what we are trying to emphasize in our department.

"We have a lot of ideas. We recognize the problems in providing service to our customers and we want to be heard. We want someone in that position who will listen to us, who will respond to us and who will treat us as professionals."

"You have to know the job in order to be able to manage well," says Kathy Zamperini, left, with Adam Gonzalez, Jan Handke and Manuel Jurado—union representatives on the hiring committee.

New coalition defends professional integrity, public interest

First project: 'Integrity at Work' contest

THE AFT JOINED 18 other organizations on May 20 in launching Professionals for the Public Interest (PftPI), a coalition of unions and professional associations aiming to shield the integrity of their members' work against outside pressures.

"The simple fact is that the people who do the work care more than anybody else, know more than anybody else, and can do more than anybody else about improving public

services," said AFT president Randi Weingarten during a news conference at the National Press Club in Washington, D.C. "When professionals are left out of policy-making, what we get is top-down, ivory tower policies that don't work. Worse, what we get is a stifling of the thought process and the freedom to speak."

Common ground—advocacy on behalf of their members and recognition that the skills and judgment of professionals offer enormous value in achieving democratic goals—brought the unions and professional associations together to form PftPI.

PftPI defines professional integrity as encompassing professional standards, knowledge and the common good. Workers' integrity is compromised when external policymakers ignore the workers' professional judgment and implement a decision that compromises public welfare.

The coalition's goals, Weingarten said, are to uphold the highest standards of personal conduct, professional practice and service to the community.

As its first project, PftPI is kicking off an "Integrity at Work" contest, which seeks compelling stories and ideas about defending your professional integrity on behalf of the public good. For details, go to www.pftpi.org. The deadline is July 31 and finalists will be chosen by Labor Day.

The coalition is being spearheaded by the Department for Professional Employees, AFL-CIO. In addition to the AFT, charter members include the American Association for the Advancement of Science, the American Chemical Society, the American Federation of State, County and Municipal Employees, the American Library Association, the American Public Health Association and the National Association of Social Workers.

TELL YOUR STORY!

Share your stories and ideas about defending your professional integrity on behalf of the public good at www.pftpi.org.



Mending Healthcare

Our system needs reform, and it needs it now.

NEARLY 2,500 MILES and 10 states separate Pete Brown and Teresa Riley-Wilcox. But they share a common experience: Increasing out-of-pocket healthcare costs are eating away at their pay increases—and family budgets.

“You are actually making less because you are paying out more,” says Riley-Wilcox, a member of the Professional Staff Association at Rhode Island College in Providence where she is a senior recorder/advisor. “You are getting that raise, but it is eaten up by the increase in [healthcare] contributions you have to make.”

Brown expresses a similar sentiment. “It seems like when we get a raise, it keeps pace with the rise in our healthcare costs,” says Brown, a member of the Montana Federation of Historical Society Workers and a historic

architecture specialist with the state Historic Preservation Office. “But it doesn’t amount to much more take-home pay.”

Reform: ‘A fiscal imperative’

In the past decade, healthcare premiums for employer plans have risen six to eight times faster than wages. To bring down costs, employers have increased workers’ premiums, co-payments, co-insurance and deductibles. The high out-of-pocket costs can have serious consequences for those who fall ill: Medical bills are one of the leading causes of bankruptcy in this country.

“Healthcare reform is no longer just a moral imperative, it’s a fiscal imperative,” President Barack Obama told participants at the White House Forum on Healthcare Reform in March. “If we want to create jobs and rebuild our economy and get our federal budget under control, then we have to address the crushing cost of healthcare this year, in this administration.”

The U.S. healthcare system isn’t what it should be considering the nation’s wealth, says historic architecture specialist Pete Brown.



To the critics who say the administration is taking on too much by tackling healthcare in the midst of an economic crisis, the president said: “When times were good, we did not get it done. When we were in peace time, we did not get it done. There is always a reason not to do it. It strikes me that now is exactly the time for us to deal with the [healthcare] problem.”

The president clearly intends to get reform under way this year. By allocating \$630 billion over 10 years to finance healthcare reform in his budget, the president has shown just how serious he is.

After the forum, U.S. Reps. George Miller and Henry Waxman of California and Charles Rangel of New York signaled their desire to pass healthcare reform this year. In a letter to the president, the congressional leaders noted that “comprehensive reform is essential to controlling healthcare costs, reviving our economy and expanding coverage.”

AFT’s core principles for reform

The AFT is prepared to work with the White House, Congress and other stakeholders on the much-needed reform of our healthcare system, AFT president Randi Weingarten says.

Although it’s too early to predict what kind of healthcare reform law will emerge from Congress, the AFT has several ideas about what the legislation should include.

First, healthcare reform must provide universal coverage by making sure there is affordable health insurance. Delegates to the 2008 AFT convention in Chicago passed a resolution endorsing the United States National Health Care Act, also called the Expanded and Improved Medicare for All Act. By adopting that resolution, our union pledged its support of legislation that moves the country toward the dual goals of universal coverage and access to quality care at a reasonable cost.

Second, there must be a public insurance plan included as an alternative to pri-



JASON SAVAGE

vate insurance. Such an option is the key to controlling healthcare costs and ensuring affordability. President Obama believes that having a public option “gives consumers more choices,” and “keeps the private sector honest” because of the competition.

Finally, the AFT strongly opposes taxation of employer-provided healthcare benefits.

The taxation of health benefits is unfair to workers, says Rachel Quinn, an assistant director of the AFT’s research and information services department.

“The cost of health insurance varies by factors beyond the employees’ control. For instance, a health benefit valued at \$15,000 in ‘additional income’ is based on the claims data for that group,” Quinn explains. “Should employees be penalized if they work with a group of older, more expensive employees versus those who work with younger employees who tend to have significantly lower claims?”

In November 2005, former President Bush’s advisory panel on federal tax reform recommended that the federal government tax the value of employer-provided health benefits as income. (See December 2005/January 2006 issue of *Public Employee Advocate* at www.aft.org).

The panel’s recommendation went nowhere until the 2008 presidential campaign when Republican candidate John McCain

proposed taxing healthcare benefits.

Candidate Barack Obama opposed it. Re-

cently, however, the Obama administration has signaled it may be willing to tax these benefits.

Pete Brown’s senator—Democrat Max Baucus, who is chair of the Senate Finance Committee and poised to play a key role in healthcare reform legislation—also is open to taxing recipients of employer-provided benefits.

Baucus’s position has drawn sharp criticism from his constituents, including the 17,500-member MEA-MFT, the AFT’s state federation in Montana.

“We think it is absolutely absurd that that is on the table,” says MEA-MFT president Eric Feaver, who also is an AFT vice president. “We just don’t understand why we would tax those who have benefits to provide benefits for those who don’t when maybe we should talk about the taxation of everyone to provide benefits for all,” says Feaver.

No time to waste

Reform cannot come soon enough for many AFT members like Pete Brown and Teresa Riley-Wilcox, who share the view that healthcare is a human right.

“I compare what we have to other countries and our system isn’t what it should be considering how wealthy our country is and how morally upstanding we claim to be,” says Brown.

Healthcare is a major issue in nearly every contract negotiation. Locals are in an ongoing struggle to maintain affordable healthcare, while employers seek to shift the rising costs to employees.

AFT members will be taking their views, concerns and experiences with healthcare costs straight to Capitol Hill on June 11 during the AFT Healthcare-AFT Public Employees joint conference.

Brown won’t be there, however. He’ll be in Chicago where he and his wife are taking their nine-month-old daughter for specialized surgery. He’s thankful they have that option with their insurance company—and family in Chicago that they can stay with.

Brown says their maximum out-of-pocket cost for the operation will be \$2,000. What he doesn’t know, however, is the payment plan.

“Our hospital here [in Helena] doesn’t charge interest,” says Brown, noting that he and his wife paid off previous hospital bills in installment. “We have a home equity account that we will pull from if we have to pay all of it at once.”

Pay raises are being eaten up by rising healthcare costs, says Teresa Riley-Wilcox.



CONSTANCE BROWN

How are healthcare costs affecting you and your family?

“Healthcare costs continue to rise, especially prescription drugs, and insurance companies continue to increase the number of denied medical claims and items that are not covered. The middle class continues to suffer the most [because] we make too much for medical assistance but not enough to pay all out-of-pocket expenses without having to do without something else—or use credit.”

ANNETTE JAMES
Alaska

“I have stopped taking some of my medications and canceled several doctor visits for my diabetes.”

DAVID HATFIELD
Illinois

“My sister was unable to afford healthcare coverage, which delayed her cancer diagnosis.”

BONNIE KOSHOFER
New York

“Out-of-pocket costs and non-covered benefits are crazy. ...[it] takes a paycheck or two just to cover the basics.”

CHERYL RITSCHARD
Indiana

“Our monthly payment for healthcare is more than our mortgage payment.”

NEIL INFANTE
New York (retiree)

“We have older parents with health issues and we are trying to deal with helping them find ways to pay for healthcare.”

MARY RASTLER
Oregon

Your biggest health and safety problem on the job is?

IT’S YOUR VOICE We want to hear from you on issues throughout the year! Visit www.aft.org/voices today where you can respond to this and other questions.



AFT to Congress: Fill the prescription for health and safety

Legislation would extend OSHA coverage to local, state and federal employees

MORE THAN 8 MILLION government employees don't have health and safety protections on the job.

Are you one of them? You are if you work in one of the more than 20 states, including Colorado, Illinois, Kansas, Montana, New Hampshire, North Dakota, Ohio, Pennsylvania and Wisconsin where public employees don't have health and safety protections.

The labor community hopes that will change—and it can if Congress passes the Protecting America's Workers Act (PAWA) of 2009.

In addition to expanding Occupational Safety and Health Act (OSH Act) coverage to local, state and federal employees, the bill would, among other things, codify regulations that give workers the right to refuse to do hazardous work.

"The Protecting America's Workers Act is a good, sound bill that should be enacted into law," Margaret Seminario, director of health and safety for the AFL-CIO, told members of the House Committee on Education and Labor April 28. "Four decades after the passage

of the Occupational Safety and Health Act, it is time for the country and the Congress to keep the promise to workers to protect them [from] death, injury and disease on the job."

"...it is time for the country and the Congress to keep the promise to workers to protect them [from] death, injury and disease on the job."

—MARGARET SEMINARIO, AFL-CIO

At press time, PAWA had 33 co-sponsors. There were no co-sponsors, however, from many of the states where public employees have no OSHA protection, including: Colorado, Kansas, Montana, North Dakota, Ohio, Rhode Island and Wisconsin.

AFT members who work in these states and who want OSHA protections should contact their members of Congress to enlist their support for PAWA.

Meanwhile, the AFT health and safety program is holding two train-the-trainer sessions this summer to qualify AFT members as

U.S. Department of Labor-authorized OSHA trainers. These AFT members will be available to train members in non-OSHA states on the rights they are being denied.

And, at press time, a delegation of AFT Public Employees leaders and members were scheduled to meet on June 11 with Donald Shalhoub, deputy assistant secretary for the Department of Labor's Occupational Safety and Health Administration, to discuss the need for federal indoor air quality standards.

Why do some public employees have OSHA protections? Under the OSH Act of 1970, a state can elect to run its own program provided it is as effective as the federal program. Another condition is that the program must cover state and local employees—even though the federal law does not.

Twenty-two states have OSHA-approved health and safety programs that cover both private sector and state and local government employees. Connecticut, New Jersey and New York also have approved programs, which only cover state and local employees.

POSTSCRIPT

Retirement security at risk for younger workers

THE APRIL/MAY ISSUE of *Public Employee Advocate* reported that Alaska lawmakers closed enrollment to their public employees' defined-benefit retirement plans, instituting in their stead a defined-contribution investment program for all new hires starting July 1, 2006.

The Alaska Public Employees Association (APEA) has been battling to reverse the policy ever since. This year, Ryan Marquis joined the fight. Marquis, 26, was among the APEA members who testified at legislative hearings as part of the union's efforts to inform lawmakers about the effects the retirement switch is having in the workplace—namely, recruitment and retention.

"I'm concerned that any possible cost savings provided by defined contributions, opposed to defined benefits, will be far outweighed by the costs of lost employees," Marquis told the House Labor and Commerce Committee in March.

While Marquis doesn't know if he'll make a career out of public service, he says he has "talked to people who are skilled and have training and once they



M. SCOTT MOON

Ryan Marquis says the defined-contribution retirement system has created a barrier to recruitment and retention.



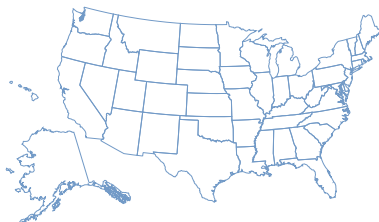
are vested after five years, they say there is nothing that is keeping them here."

Marquis, a member of the APEA's Kenai Borough Employees Association, says he was inspired to get involved by all the people who are in the defined-benefit plans—who aren't affected by the switch—who have taken up this fight.

He also researched the issue. "No one could explain to me how my system worked," says Marquis. "That's when I really started looking into it and that is when I realized how awful the plan is."

Marquis, a lead maintenance supply specialist for Kenai Borough, says his employer-provided retirement is basically a 401(k).

"I put in 8 percent of my wages automatically and the borough matches 5 percent," says Marquis. "When I retire, that's the money that's in my account. That's the money I retire on. According to the last statement, I had about 50 percent less than what's been contributed. I would have been better off taking the money and putting it underneath my pillow."



MD As part of the AFT Public Employees mobilizing and organizing training, April 25-May 2, 26 AFT leaders, members and affiliate staff from seven states talked with hundreds of members and potential members of AFT-Maryland who work and live around the Annapolis capital area.



MICHAEL CAMPBELL

Work-site meetings were on the agenda at the mobilizing and organizing training.

Early morning leafleting, work-site meetings and home visits were part of the daily routine for the training session participants who found that furloughs, salaries, health-care, retirement security and privatization are among the workforce's top concerns for upcoming contract negotiations.

The group met with workers represented by the Maryland Professional Employees Council (MPEC), which represents more than 5,000 professional state employees, and AFT-Healthcare Maryland, which represents some 2,000 nurses and other health-care professionals statewide.

Ginny Walsh, MPEC chief steward, says that state budget challenges—and the solutions proposed by elected officials, like unpaid furloughs and benefit reductions—require a highly mobilized union membership. “With an involved, committed membership, we can deal with the difficult issues we are facing and we can make progress over the longer term.”

MT Full-time faculty and adjunct faculty at Montana State University-Bozeman voted for representation by the MEA-MFT.

The Associated Faculty of MSU comprises a unit of 385 full-time, tenured and tenure-track faculty and another unit of 180 adjunct faculty.

The vote was the third in as many decades, and this time proved the charm.

“In talking with unionized faculty around the state, we saw that union representation ensures that faculty can work with administration—backed by a legally enforceable contract that guarantees the rights of both parties,” says Sandy Osborne, a professor of health and human development.

NY Two inquisitive computer technicians and two strong unions were able to block an asbestos removal project at Westchester Community College (WCC) in Valhalla, N.Y. The project violated health and safety requirements.

The two technicians, members of the Civil Service Employees Association, saw a sign announcing removal of asbestos the following week, when staff and students would be using the building. The technicians researched the company named in the notice and found a history of safety violations. They took the information to their union and to WCC Federation of Teachers president Anne D’Orazio, who also is a member of New York State United Teachers’ health and safety committee. D’Orazio wrote to the WCC president, who shut down the operation immediately.

The case, says D’Orazio, “is a nice collaboration of two unions working together.” Now, the college is working with the unions to establish procedures that include proper notification, protective measures and employee involvement.

VT When Somali pirates hijacked the Maersk Alabama off the Horn of Africa in April, they also took hostage of the hearts and minds of the crew’s family members, including AFT member Andrea Phillips, wife of Capt. Richard Phillips.

Phillips, a registered nurse at Fletcher Allen Health Care in Burlington, Vt., is one of 1,700 registered nurses and licensed practical nurses at the hospital who are members of the Vermont Federation of Nurses and Health Professionals (VFNHP).

Phillips thanked her community and the nation for their support during the five-day ordeal. The family also asked for privacy as they move forward.

Privacy—time alone for the family to heal—is exactly what her colleagues gave. Under the VFNHP contract, union members can donate accrued paid leave to a co-worker. “I just think it’s the best gift we can give them,” said union member Joanne Rheaume.

Weingarten honored for service to public institutions

AFT PRESIDENT RANDI WEINGARTEN was honored at “Demos Celebration 2009: A Time for Hope and Action” on May 6 in New York City.

Stephen Heintz, Demos board chair, lauded Weingarten for her “tireless service to public institutions that affect the lives of children, families, communities and the future of our country.”

Weingarten reciprocated—thanking Demos for its work, particularly in the areas of public education, economic opportunity and workers’ rights.

Demos is a public policy research and advocacy organization that promotes, among other things, shared economic prosperity and a strong public sector working for the common good.

For the past several years, Demos has been a national partner in the AFT’s work to explain how government is important

to a strong democracy. Its public opinion research about the work of government and the public’s expectations of government have been helpful in crafting the AFT’s message about the importance of government to the public at large.

“Just as public education, at its best, is the great social equalizer, the labor movement, at its best, is the great economic equalizer,” Weingarten said. “Together they are the linchpins that create opportunity.”

“But, today, America’s labor laws are not working for working people. We need a strong labor movement to help restore fairness to the workplace, to help rebuild the middle class, and to give employees a greater voice. And it is not lost on me that when more workers are gainfully employed, their children fare better and their communities are stronger.”

Labor-management committee taking steps to foster civility in the workplace

DO YOU KNOW WHERE you can go to report behaviors at your workplace that don't rise to the level of illegal discrimination but make you uncomfortable and create an unpleasant work environment?

"Where do you go if your boss screams at the whole staff or calls you out in a staff meeting in an intimidating way?" asks Annie Noonan, assistant director for contract administration at the University of Connecticut Professional Employees Association (UCPEA).

UCPEA has been working on that answer and others relating to workplace civility since summer 2008 when the Something's Happening Committee was formed.

The committee is made up of representatives from the university; UCPEA; the Connecticut Employees Union Independent, an affiliate of the Service Employees International Union; the Connecticut Police & Fire Union, an affiliate of the International Union of Police Associations; and the State of Connecticut Administrative Clerical Bargaining Unit, an affiliate of the American Federation of State, County and Municipal Employees.

Noonan and UCPEA vice president for membership services Cara Workman represent the union on the committee. The intent of Something's Happening, they say, is that all unions and all employees, regardless of where they stand in the organizational structure, have an equal role and responsibility to create a work environment that supports fairness and civility.

The committee has found that it's not just the screaming boss or the bully who makes workers uncomfortable. There are plenty of subtle types of behavior that undermine morale, including gossip and bad work assignments, says Noonan.

Since the new year, UCPEA has surveyed its members about their workplace experiences and has co-hosted two seminars with the committee for UCPEA-represented employees.

"The main intention [of the seminars] was for people to learn what resources are available on campus if they thought they were treated unfairly or witnessing unfair treatment; and also to openly discuss in small groups and in a safe environment their personal experiences," says Workman, who is director of University Events.



THOMAS GIROR

Presenters also helped make distinctions between discrimination, harassment and general unfair treatment.

Fear of retaliation keeps people from reporting inappropriate behavior, says Cara Workman.

The second workshop, geared toward UCPEA members who supervise other UCPEA members, included information about supervisors' legal obligations to intervene and report inappropriate behavior.

UCPEA president Kevin Fahey reminded supervisors that they "set the tone and atmosphere in the workplace" and must model the expected behaviors.

"We kept hearing from our members at both events that retaliation is on people's minds, and that's why they don't report things," says Workman.

The university has gotten the message. The committee is close to finalizing the university's first nonretaliation policy and has made several recommendations to the university, including mandatory civility training for new employees.

Up next, Noonan says she'd like the committee to define civility.

"What will a civility policy mean? Do you have to tell people to be polite and nice?" asks Noonan. "You wouldn't think so, but the answer is, 'Yes, sometimes you do.'"

Visit www.ucpea.org for more information. Something's Happening Committee coverage can be found under the "member information" tab.



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