

VOICE OF THE ILWU

HONOLULU, HAWAI ⊗ GCUD 50

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August 2005



The union approach to safety on the job

Safety on the job is a big concern to every worker.

A workplace can be full of hazards. Slippery floors, sharp objects, moving machinery, dangerous chemicals, heavy lifting, or contaminated air are just a few examples of workplace dangers.

n Hawaii, these workplace hazards killed 27 workers and injured 28,668 others in 2003, according to the latest statistics from the state's Workers Compensation Data Book. The actual number of injuries is much higher, as these are only the cases reported to the Hawaii State Department of Labor and Industrial Relations. No one knows how many thousands of industrial injuries and accidents go unreported.

There are several reasons why workers don't report an accident or injury. The worker may not realize a condition is work related—this is particularly true for

occupational diseases which may occur many years after an exposure to toxic substances. The worker may be too busy to take time to report an injury or may feel the injury is minor. More importantly, many employers have counterproductive policies that discourage reporting—such as safety incentives and prizes for injury free days or drug testing people involved in accidents. These policies don't reduce injuries—they only reduce the reporting of injuries.

Identifying hazards

The best and most effective way to reduce injuries caused by a

hazard is to remove that hazard. This may sound like an obvious, common sense approach to job safety, but all too often, employers stop halfway and instead of eliminating the hazard, they blame the worker. Employers try to change the worker with behavior based safety programs (we call these BS programs) or require workers to wear personal protective devices (PPD) such as goggles, gloves, and ear plugs. In addition, many hazards are hidden or not easily recognized as hazards.

To identify these dangers on the job, many unions use a tool called "mapping." In one mapping exercise, workers put colored dots on a picture of a human body, placing the dot on the part of the body that was injured. In another exercise, workers put dots on a drawing of the workplace to indicate WHERE accidents occur.

—continued on page 2

Luana Hills Golf and Country Club workers (left) need to be very conscious of job safety. Many operate heavy equipment, such as wood chippers or back hoes, while others use chemicals, like herbicides and pesticides. Work can be dangerous if not done properly, and Luana Hills employees play an important role n keeping the workplace safe and injury-free. To find our more about Unit 442 I - Luana Hills Golf and Country Club turn to pages 4 and 5.

On the Inside

5 ways to control workplace hazards, page 2

Coming soon:
Medicare Part D, page 6

Demystifying family care leave, pages 7 & 8

Next Local Executive Board Meeting scheduled for Sept. 22-23, 2005 · 10:00 am · 896 Lower Main St. Wailuku

Union Safety and Health

Patterns of similarities point to workplace hazards

-continued from page 1

You then look for patterns. A worker may think difficulty breathing or a skin rash are due to their personal health condition. A body mapping exercise may show that several workers in a particular department have the same difficulty breathing or workers who use a particular cleanser have the same skin rash. Such patterns of similar injuries usually point to a workplace hazard that needs to be eliminated.

Unionized workers can and

should play a big role in insuring that their employers provide a safe workplace. Workers can use mapping to do their own analysis of workplace hazards. They can demand that management bargain with the union over workplace safety policies and program. And unionized workers can push for real safety by eliminating hazards and putting an end to management BS programs that blame the worker or over reliance on ineffective personal protective devices. •



Ron Walzer of Unit 1520 - Sheraton Keauhou Bay Resort & Spa points out patterns of injuries during his class on workplace safety at the 7th ILWU Labor Institute held July 2005 at the Local office in Honolulu.

Personal safety gear least effective 5 ways to control workplace hazards

Elimination

The best way to control a hazard is to eliminate it and remove the danger. This can be done by changing a work process in a way that will get rid of a hazard; substituting a non-toxic chemical for a toxic substance; having workers perform tasks at ground level rather than working at heights; implementing needle-less IV systems in health care facilities to eliminate needles; and other methods that remove the hazard altogether.

Substitution

The second best way to control a hazard is to substitute something else in its place that would be non-hazardous or less hazardous to workers. For example, a nontoxic (or less toxic) chemical could be substituted for a hazardous one.

Engineering Controls (Safeguarding Technology)

If a hazard cannot be eliminated or a safer substitute cannot be found, the next best approach is to use engineering controls to keep the hazard from reaching the worker. This could include methods such as using noise dampening technology to reduce noise levels; enclosing a chemical process in a Plexiglas "glove box"; using needles that retract after use; using mechanical lifting devices; or using local exhaust ventilation that captures and carries away the contaminants before they can get in the breathing zone of workers.

Administrative Controls (Training and Procedures)

If engineering controls cannot be implemented, or cannot be imple-

mented right away, administrative controls should be considered. Administrative controls involve changes in workplace policies and procedures. They can include such things as: Warning alarms; Labeling systems; Reducing the time workers are exposed to a hazard, and Training.

For example, workers could be rotated out of a hot area rather than spend eight hours per day in the heat. Back-up alarms on trucks are an example of effective warning systems. However, warning signs used instead of correcting a hazard that can and should be corrected are not acceptable forms of hazard control. For example, it is neither effective nor acceptable to post warning signs by an unguarded machine cautioning workers to work carefully.

Personal Protective Equipment

The use of personal protective equipment (PPE) is a way of control

ling hazards by placing protective equipment directly on workers' bodies. Examples of personal protective equipment include: respirators, gloves, protective clothing, hard hats, goggles, and ear plugs.

Personal protective equipment is the least effective method for protecting workers from hazards. PPE should be used only while other more effective controls are being developed or installed, or if there are no other more effective ways to control the hazard. This is because:

- The hazard is not eliminated or changed.
- If the equipment is inadequate or fails, the worker is not protected.
- No personal protective equipment is fool-proof (for example, respirators leak).
- Personal protective equipment is often uncomfortable and can place an additional physical

burden on a worker.

 Personal protective equipment can actually create hazards. For example, the use of respirators for long periods of time can put a strain on the heart and lungs.

While there are some jobs, such as removing asbestos, where wearing adequate personal protective equipment is absolutely essential, there are many jobs where employers hand out personal protective equipment instead of using more effective hazard control methods.

A word of caution

When planning for hazard controls, remember that the control selected must not eliminate one hazard while creating another. For example, it is not acceptable to remove air contaminants from one area by venting them to another area where another group of workers will be exposed. Hazard control measures should eliminate or reduce hazards for all who are potentially exposed to them.

Hazard control: whose responsibility?

The ability and responsibility to design jobs safely in the first place, or redesign them when a hazard is detected, lies with management. It is the role of workers and unions to promote the use of the "Hierarchy of Controls," making sure that employers are providing the most effective methods for hazard control possible. Remember: fix the workplace, not the worker! •

[Taken from the Labor Safety and Health Training Project. George Meany Center-National Labor College.]

Most Dangerous Industries

The Transportation and Warehouse industries, which includes longshore, are the most dangerous. One out of every nine workers reported an injury. Construction is the second most dangerous where one out of every ten workers reported an injury.

Transportation and Warehouse	1 in 9
Construction	1 in 10
Utilities	1 in 14
Agriculture, Manufacturing	1 in 15
Wholesale Trade	1 in 16
Hotels, Retail	
Health Care	1 in 20
Educational Services	1 in 32
Banks, Insurance	1 in 33
Professional, Scientific	1 in 61
Management	1 in 65



Union Safety and Health

ILWU Safety and Health Program

As a rank-and-file union, it is ILWU members who set the programs and policies of the union. They do this by sending their representatives to a special meeting—called a Convention—which is held every three years. The last Convention of ILWU Local 142 was held from September 15-19, 2003 in Honolulu. The next Convention will be held in September 2006.

he officers of the union are then obligated to carry out the programs and policies of the Convention. The union's policy on safety and health is spelled out in the "Report on Contract Administration / Safety and Health." Following is the section from that report that deals with safety.

Report on safety and health: The program

The current program is for each unit to strive to have a safety and health committee. The unit should designate the members of the safety and health committee. It shall be advisory to the Unit Executive Board (UEB) and the agenda of the UEB meetings should include Safety and Health. The unit's Safety and Health Committee is to provide advice and make recommendations to management on safety and health matters.

Each Division shall have a Safety and Health Committee. It shall assist units in the Local's Safety and Health program. The Local Safety and Health Administrator shall be the Local Contract Administrator. He shall assume the duties of the safety and health administrator, carry out the Local's program and coordinate the work of the Divisions and Units.

Purpose

The Occupational Safety and Health Act and the subsequent creation of the Occupational Safety and Health Administration (OSHA) has given workers a tool to enforce their rights to a safe and healthy workplace. Even though the State of Hawaii has been given the power to enforce and regulate the OSHA Rules and Regulations, this does not mean a guaranteed safe and healthy environment at the job site.

The employer is responsible for providing a safe and healthy workplace and some CBAs specifically state that the employer has that burden. Although the Union does not have the obligation or authority to provide a safe and healthy place of employment, a strong and effective Union safety and health program can aid in protecting the membership from harm.

In addition, it is not uncommon in contract administration (grievance handling) to find that the safety issue is raised when a grievant was involved in an accident or refused to obey an order on safety grounds. A common employer defense, is that the unsafe nature of the workplace was never raised before, and therefore it is not a credible argument now, when the

A common employer defense is that the unsafe nature of the workplace was never raised before, and therefore it is not a credible argument now . . .



Grievant is being disciplined. The establishment of an effective safety and health program can document reports or concerns about unsafe or unhealthy conditions before a member is disciplined.

Contract language on safety and health All contracts should include

a section on safety and health. As an example, the following: "The Company agrees to provide safe working conditions and facilities and to maintain all equipment in safe working order. No employee shall be required to perform a task that endangers his health or safety." This provides a specific section in the CBA which can be cited as being violated when a grievance is being filed over an unsafe or unhealthy condition at the workplace.

Another possibility is to propose contract language regarding participating in Union/Employer safety committees. For example:

"A safety committee will be established with an equal number of representatives from the Union and the Company. The safety committee will meet regularly to address all health and safety measures and make recommendations to the Company to immediately correct any unsafe or unsanitary conditions. A report

or meeting minutes of the safety committee will be posted. The final decisions regarding what action will or will not be taken (policy formulation, implementation, etc.) shall be solely the Company's responsibility."

It is important to make it clear that for safety committees where the Union members are part of the committee, that the committee only makes recommendations, that it is not authorized or obligated to discipline employees for safety violations, and that ultimately, the actions taken are the employer's responsibility and not the Union's. •

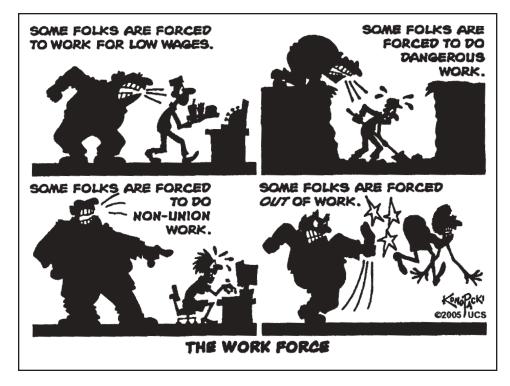
[from Twenty-Third Convention Proceedings, International Longshore and Warehouse Union ILWU Local 142, Honolulu, Hawaii, September 15-16-17-18-19, 2003]



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Spotlight



Unit Chairperson Sam Santos has held that position for nine years. Santos, seen here with Business Agent Shane Ambrose, is a machine operator and cuts everything from the fairways to extreme roughs. "It's important to help your fellow workers, and that's why I'm involved in the union," he said. "Just trying the represent the men-trying to help out." Santos is a long-time employee who has been with Luana Hills Golf and Country Club for 14 years.

A little slice of heaven on earth

KAILUA—Luana Hills Golf and Country Club is a stunning combination of lush rolling hills, 100 foot tall trees and dense tropical rain forest. The course layout is done in the "links" style, with undulating greens and tight fairways. According to its website, Luana Hills Golf and Country Club is "spectacular and somewhat difficult, yet beautiful."

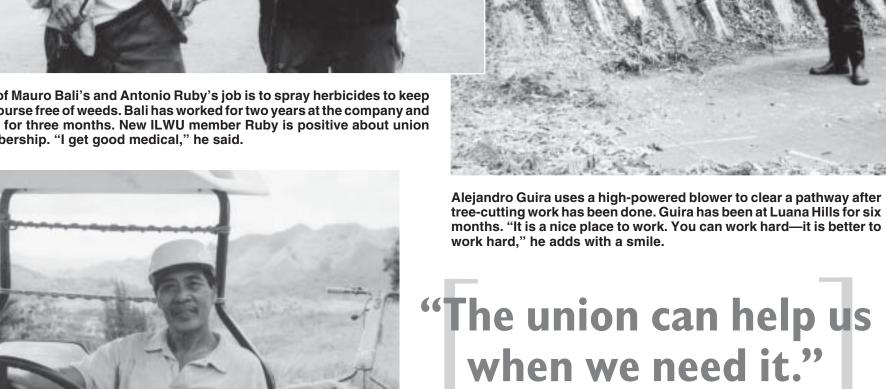
Tho keeps the course spectacular? The 17 ILWU members who work as groundskeepers, equipment operators, irrigators, and chemical applicators. "Only these many guys to maintain a full 18-hole course is an accomplishment," said Unit Chair Sam Santos. "Because the course undulates a lot, the work is that much harder," he explained. "It can be like a carnival ride cutting the grass, going up and down steep hills, and very hazardous."

> The workers, however have no complaints about the work that they do. Many enjoy being outdoors, especially in such a beautiful setting. They concentrate on doing the best possible job they can because they are proud to able to maintain this unique, difficult course.

> If you are an ILWU member and enjoy golfing, consider supporting your fellow members at Unit 4421 - Luana Hills Golf and Country Club—patronize union shops!



Part of Mauro Bali's and Antonio Ruby's job is to spray herbicides to keep the course free of weeds. Bali has worked for two years at the company and Ruby for three months. New ILWU member Ruby is positive about union membership. "I get good medical," he said.



Grounds maintenance worker Jessie Guira (left) gathers his equipment onto a golf cart and prepares to return to the maintenance building to check out at the end of the day. Luana Hills workers have a six-day workweek with one full day off and two half days off.

They start at 5:30 a.m. every morning. When asked about what it is

like being a union member, Guira replied "It is good, because the

union can help us when we need it."

Grounds main wood chipper than a foot in collage at the on KITV.



4421 - Luana Hills Golf & Country Club

- Location: 770 Auloa Road, Kailua, Hawaii
- Type of company: Golf course and country club with clubhouse and pro shop
- Industrial Grouping: General Trades
- ILWU members since 1994, when Luana Hills was known as Royal Hawaiian Country Club
- Total union membership: 17
- Bargaining unit makeup: Irrigation technician, chemical applicator, Equipment Operator I, Equipment Operator II, Groundkeeper I, Groundskeeper II, Building Maintenance Chief.
- Unit Officers/Stewards: Chairperson Samuel Santos, Treasurer William Calivozo
- Business Agent: Shane Ambrose
- The Luana Hills golf course was created by renowned course architect Pete Dye of Dye Designs. The course is a par 72. The front nine is carved into the slopes of Olomana, and the back nine is located in a tropical rainforest populated with rare native Hawaiian birds and other wildlife.



page 5

One of Roland Espino's jobs is to operate heavy equipment, like this backhoe. "I like being in a union because if I have a problem, they are there for me," Espino said.



Unit Treasurer William Calivoso has worked for Luana Hills for 13 years, and has served as Unit officer since 2000. "The members need somebody to stand up for them," he explained when asked why he became a unit officer.



Antonio Estigoy, who has been at Luana Hills for three years, said "I like it here, the benefits are good. And we are like brothers working together—it's good to have unity."



Grounds maintenance worker Edgardo Cabrera stands next to a wood chipper powerful enough to take whole tree trunks more than a foot in diameter. Cabrera's picture was used as part of a collage at the end of the new ILWU commercial currently airing on KITV.

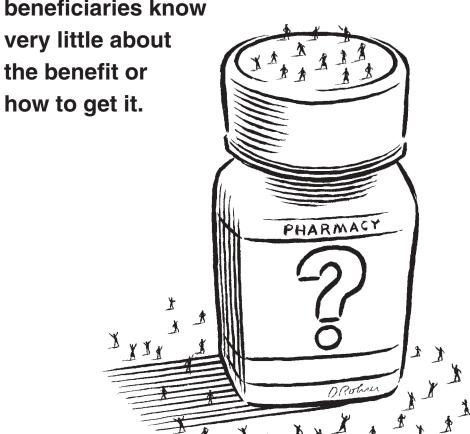


Dominador Taleboc Jr. (two years), Teodoro Lutrania (eight years) and Larry Arceta (five years) are highly skilled grounds maintenance workers.

News You Can Use: MEDICARE

Coming soon . . . Medicare Part D

The new Medicare prescription drug benefit (also known as Medicare Part D) will start up on January 1, 2006. That's just six months away, but most Medicare beneficiaries know



hat's because, unlike the rest of Medicare, the prescription benefit will not be offered directly by the federal government iself but by private insurers (like Kaiser and HMSA) instead. These insurers can't say anything about their plans yet because they're still waiting to hear if their plans have been approved or not.

In fact, the earliest insurers can say anything about their plans is October. That's when they will mail letters to retirees, put ads in the newspaper and television—and make life very confusing for anyone with Medicare.

The ILWU knows this is coming

and wants to help ILWU retirees. Meetings will be held in various locations statewide for ILWU retirees to get information from representatives about plan benefits and premiums.

If you are a retiree, please attend one of these meetings before making any decision to enroll in a plan.

Also, if you have a drug plan through your employer, contact your employer.

A schedule of meetings should be developed by October and meetings will be announced in the Voice of the ILWU, through pensioner clubs, and through the Units and Divisions.

If you'd like to attend, call the ILWU Division near you:

Hawaii Division (Hilo) - 935-3727 Hawaii Division (Waimea) - 885-6136 Maui Division (Wailuku) - 244-9191 Kauai Division (Lihue) - 245-3374 Oahu Division (Honolulu) - 949-4161

If you have any questions about Medicare Part D, contact Joanne Kealoha, ILWU Social Services Coordinator, in Honolulu at 949-4161.

Around the Union

Hyatt Regency Kauai now a Grand Hyatt

Poipu, KAUAI—Following a multi-million dollar renovation to guestrooms and suites, meeting space and public areas, the Hyatt Regency Kauai Resort and Spa has moved up in status to join a small, exclusive group of 23 Grand Hyatt hotels around the world. In the next few months, work should be completed on an additional 5,000 square foot garden treatment area to the resorts ANARA Spa.

The Grand Hyatt Kauai is the ILWU's largest unit on the island with 644 members. Hyatt manages the hotel and the property is owned by Kawailoa Development, a subsidiary of the Japanbased Takenaka Corporation. Takanaka is one of Japan's oldest architectural, engineering and construction firms with a 400 year history. The company now operates in 18 countries with annual sales of \$9 billion.

Hyatt operates 213 hotels and resorts in 43 countries. Most of these, 169 properties, are what the company calls Regency type hotels. Then there are a handful of Grand Hyatt and Park Hyatt hotels which represent the best of the Hyatt brand.

The Grand Hyatts provide upgraded services from the standard Regency type hotel and are equipped to meet the specialized needs of business and corporate travelers with state-of-the art technology and conference facilities. Grand Hyatts also feature more restaurants, additional lobby lounges, 24-hour business travel services, secretarial and meeting support, and fitness and

recreational facilities.

Park Hyatts are the other exclusive group of Hyatt hotels. These are smaller, five-star luxury hotels that cater to individual travelers. There are only 21 Park Hyatts worldwide—seven are located in the United States. ◆

ILWU organizes 480 workers at Pacific Beach

HONOLULU—On August 10, 2005, the final ballots were counted in an election for union representation at Pacific Beach Hotel.

The ballot count supported union representation by a single vote. The final count was 180 to 179 for the ILWU. There were over 480 eligible voters at the hotel. The election results were certified by the National Labor Relations Board on August 15.

This vote is the culmination of a three-year effort by workers and the ILWU to organize the hotel. In a previous 2002 election the union lost by a handful of votes after challenged ballots were opened. The NLRB overturned that election due to improper conduct by the hotel.

Work will now begin on negotiating the first contract with the hotel. The hotel's owner, HTH Corporation, recently signed off on a labor contract with the ILWU at HTH's property in Kona, King Kamehameha's Kona Beach Hotel. HTH Corporation also owns and manages the Pagoda Hotel in Honolulu.

The ILWU represents about 11,000 hotel workers in Hawaii. ◆

In memory of Willie Abear

WAHIAWA—Long-time ILWU member and rank-and-file leader Willie Abear of Wahiawa passed away on July 15, 2005.

Abear was well-known in his community as an outstanding baseball and basketball player, and later as a coach for the children of Poamoho Camp.

"I've known Willie for 44 years," said Poamoho resident Vaeleti Tyrell. "He lived down the road with two houses between us. He was a really nice guy. If somebody is in trouble, he is the first one to come out and say, 'hey, we have to take care of this, we have to help these people.'"

"Willie was instrumental in mobilizing members to come out for any type of union event, especially political action," said Oahu pineapple industry Business Agent Brandon Bajo-Daniel. "If the union needed help, he was always there, and he brought many others out with him. He was that well-liked and well-respected."

Division Director Dave Mori noted that a poem written by Abear's children on their father's passing asks the question, "We wonder if we ever thanked you enough for the sacrifices you made." Mori said, "We at Oahu Division could never have thanked Willie enough. He was one of our most dedicated, dependable, and respected union leaders. All the help that he has given to his membership over the years will never be forgotten."

Abear is survived by wife Janet, brothers Ted and James, sisters Carmen, Della, and Edith, children Elizabeth, Yvonne, Jennifer, Joyce, Andrew and Allan, eight grandchildren, and five great-grandchildren. ◆



News You Can Use: FAMILY LEAVE

What is a reciprocal beneficiary relationship?

The law defines reciprocal beneficiaries as two adults who are legally prohibited from marrying under state law.

This broad definition encompasses not only same-sex domestic partners but adult brothers and sisters, a widowed parent and a grown child, aunts and nephews, etc.

Those persons entering into a reciprocal beneficiary relationship must register their relationship as reciprocal beneficiaries with the Department of Health.

Who is eligible to enter into a reciprocal beneficiary relationship?

- There are no state residency or U.S. citizenship requirements.
- The two individuals must both be at least 18 years of age.
- Neither individual can already be married nor be in another reciprocal beneficiary relationship.
 - The consent of each indi-

vidual entering into the reciprocal beneficiary relationship cannot have been obtained by force, duress, or fraud.

• The two individuals entering into a reciprocal beneficiary relationship must be prohibited by state law from marrying one another, which include but are not limited to relationships such as brother and sister of the half as well as to the whole blood, uncle and niece, aunt and nephew, widowed mother and her unmarried son, and two persons of the same sex/gender. ◆



More on family care leave, page 8

Chart 2: Family Care Leave Definitions

The following table is based on the US Family and Medical Leave Act (FMLA) of 1993. The Hawaii Family Leave Law includes family members not included in the federal law—such as parents and grandparent-in-laws, grandparents, and reciprocal beneficiaries.

Reason for Absence	Definition
For A Child: Health Condition Requiring Treatment or Supervision	Any medical condition requiring treatment or medication that the child cannot self-administer;
	Any medical or mental health condition which would endanger child's safety or recovery without the presence of a parent or guardian; or
	Any condition warranting treatment or preventive health care such a physical, dental, optical or immunization services, when a parent must be present to authorize and when sick leave may otherwise be used for the employee's preventive health care
Serious Health Condition	An illness, injury, impairment, or that involves any period of incapacity or treatment connected with inpatient care (i.e., an overnight stay) in a hospital, hospice, or residential medical care facility, and any period of incapacity or subsequent treatment or recovery in connection with such inpatient care;
	Continuing treatment by or under the supervision of a health care provider or a provider of health care services and which includes any period of incapacity (i.e., inability to work, attend school or perform other regular daily activities).
Emergency Condition	A health condition that is a sudden, generally unexpected occurrance or set of circumstances related to one's health demanding immediate action, and is typically very short term in nature.
	The individual requires active assistance or supervision to provide daily self-care in several of the "activities of daily living" (ADLs) or instrumental activities of daily living (IADLs).
Incapable of Self-care	Activities of daily living include adaptive activities such as caring appropriately for one's grooming and hygiene, bathing, dressing and eating.
	Instrumental activities of daily living include cooking, cleaning, shopping, taking public transportation, paying bills, maintaining a residence, using telephones and directories, using a post office, etc.
Physical or Mental Disability	A physical or mental impairment that limits one or more activities of daily living or instrumental activities of daily living.

Send us your stories to publish in the Voice

We are always looking for stories to publish in the Voice of the ILWU. This is your union newspaper and we want to make it better. Examples of stories are: a story about your unit officers or union steward solving a workplace problem; a story about a typical day at work; a story about a funny incident or good experience at work; a story about members helping each other; a story about community service or volunteer work by any

ILWU member or retiree; a story about enjoying a benefit provided by the union contract; a story about union activities at your workplace or about union related activities of any ILWU member or retiree. Include a picture if possible.

Stories can be about almost anything, but should promote the work and principles of the union/ILWU. After all, this is a union newspaper.

Don't worry about your writing. If you send us enough facts and your email address or phone number so we can ask questions, then we can write the final story.

If we use your story or if we intend to use your story in the future, your name will be entered in a drawing, with a chance to win a digital camera and other prizes. We'll hold the drawing for the camera in August 2006 and drawings for other prizes every 3 months. Each entry will have one chance to win the other prizes and one chance to win the digital camera. You may enter as many times as you want. Full-time officers and staff may send us stories, but are not eligible for any prizes.

You may email your entries to ilwu142@flex.com or mail them attention Mel Chang, ILWU Local 142, 451 Atkinson Drive, Honolulu, HI 96814.



News You Can Use: FAMILY LEAVE

When can I take family care leave?

The Hawaii Family Leave Act and the US Family and Medical Leave Act allow covered workers to take leave to care for a family member with a "serious health condition." Under the federal law, a "family member" is defined as spouse, children, and biological parents.

The Hawaii law broadens the definition of "family member" to include parents in-law, grandparents, grandparents in-law, and reciprocal beneficiaries. In addition, the Hawaii law allows workers to use up to 10 days a year of their sick leave benefits to care for family members. This

part of the Hawaii law is fairly new and was amended by the Legislature this year. You should see your ILWU business agent if you run into problems with your employer.

Remember, the Hawaii law applies only to employers with 100 or more workers in the State of Hawaii and you must have worked for at least 6 consecutive months. The federal law applies to employers with 50 or more workers but you must have worked more than 1250 hours in the previous 12 months. •



What is a serious health condition?

Both the Hawaii Family Leave Act and the US Family and Medical Leave Act (FMLA) of 1993 apply in case of a "serious health condition." The following table from the US Department of Labor's website may help you understand what conditions are covered by the law. For more information -- see http://www.dol.gov/esa/whd/fmla/index.htm.

Ask your doctor if you are not sure whether your condition is

covered by FMLA. If your condition is covered, it is a good idea to get certification from your doctor. Most medical providers should have the Department of Labor Form WH-380 which is used for this purpose. The form does not require you to disclose the exact nature of your condition—only whether the condition is covered by FMLA.

It is also a good idea to inform your employer in advance (as much as 30 days if possible) and no later than two business days of your return to work, if you think your absence is covered by FMLA. This gives you important rights—and prevents your employer from counting your absence against you under a "nofault" absentee policy.

If you have any questions or problems about your rights under the Hawaii or US family leave laws, see your union business agent. ◆

US stingy on family leave

Some 128 countries provide paid and job-protected childbirth-related leave. The average paid leave is 16 weeks. These countries recognize the need for workers to take time off from their jobs to take care of their new born children and for this to be paid leave.

In contrast, US employers are only required to provide their workers with a miserly 12 weeks of UNPAID leave. This puts the US next to last place, only beating out South Korea, where workers get 8 weeks of unpaid leave. Australia is the only other advanced country where maternity leave is unpaid, but Australian parents are entitled to take up to 52 weeks of such leave.

This is based on 2000-2002 data compiled by Columbia University's Institute for Child and Family Policies. For more information, see their issue brief: "Mother's Day: More Than Candy And Flowers, Working Parents Need Paid Time-Off" - http://www.childpolicyintl.org/issuebrief/issuebrief5.htm.

The US may actually be worse than South Korea, as only an estimated 55 percent of the American workforce is covered by the family medical leave law. The law applies only to employers with 50 or more people on their payroll and only if the worker has been employed for at least 12 consecutive months and worked 1250 hours or more.

Chart 1: FMLA Serious Health Condition Definition

Understanding what is a serious health condition will help you get the most out of the family medical leave laws. The following table is based on the US Family and Medical Leave Act (FMLA) of 1993. For more information, go to the US Department of Labor website—http://www.dol.gov/esa/whd/fmla/index.htm.

Reason for Absence	Definition	Examples
Inpatient Care	Any period of incapacity from a condition requiring inpatient care including recovery from the condition	Hospitalization Post surgery examinations
Incapacity for more than 3 consecutive days, including work and non work days that includes:	A condition requiring 2 or more treatments by a health care provider or an ongoing regimen or treatment	Examination to evaluate a condition plus a course of treatment such as antibiotics or physical therapy
	Period treatment for a condition that may cause episodic incapacity	Asthma Diabetes
Conditions that are chronic, long-term or require multiple treatment	Incapacity due to a condition which is not curable but which requires medical supervision	Terminal illness Multiple sclerosis
	Absences to receive treatment for a chronic condition	Kidney Dialysis
Prenatal treatment and pregnancy	Any period of incapacity due to pregnancy or for prenatal care	Prenatal doctors visits Absences due to morning sickness Post partum recovery

Country Length of Leave % of Pay

United States 12 weeks, incl. maternity Unpaid	
South Korea 8 weeks maternity Unpaid	
Australia 1 year parental Unpaid	
Norway 42 weeks, incl. maternity 100%	
Netherlands, Austria, & Spain 16 weeks maternity	
Luxembourg, Poland, France, & Germany	
Mexico & New Zealand 12 weeks maternity 100%	
Portugal 6 weeks maternity 100%	
Denmark 18 weeks maternity 90%	
United Kingdom 6 weeks maternity	
Sweden 18 months maternity 80%	
Japan 14 weeks 60%	
Canada 17 weeks maternity 55%	

The Clearinghouse on International Developments in Child, Youth and Family Policies at Columbia University - http://www.childpolicyintl.org/issuebrief/issuebrief5table1.pdf

For family care leave definitions and information on reciprocal beneficiaries, turn to page 7

