

# First Adventist Hospital Unionization

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**Something which our hospital administrators always feared is finally coming to Adventism: labor unionization.**

**On Tuesday, September 22, 1998, the registered nurses at Ukiah Valley Medical Center (UVMC) filed a petition for union representation by the California Nurses Association (CNA).**

"Tired of what they say are excessive work loads, low pay and inadequate staffing, registered nurses at Ukiah Valley Medical Center are attempting to unionize."—*Ukiah Nurses File for Union, Ukiah Daily Journal, September 23, 1998.*

Hospital administrators, and their superiors at Adventist Health Systems/West, were understandably shocked.

"The hospital administration expressed disappointment that some of the nurses are seeking union representation since the hospital has 'attempted to maintain open lines of communication, community competitive wages, and positive employee relationships,' according to ValGen Devin, president and CEO of UVMC."—*Ukiah Valley Medical Center RNs File for Union Representation, Ukiah Valley Medical Center Health Scene, Fall 1998.*

Apparently more than "some" of the nurses signed the petition.

"The registered nurses collected signatures from nearly 75 percent of their colleagues, and Tuesday [September 22] filed a petition with the National Labor Relation's Board to affiliate with the California Nurses Association, the state's largest labor and professional organization of RNs."—*Ukiah Daily Journal, September 23, 1998.*

A hearing to determine the date and parameters of the potential union election began on Thursday, October 8. Later this fall, a secret ballot election, supervised by the National Labor Relation's Board (NLRB) was expected. A hearing was scheduled September 30, to discuss the rules of the election.

The nurses say they are making less than nurses in other North Coast hospitals. According to Bonnie Castillo, an organizer for the labor union, CNA headquartered in San Francisco, the salary scale is terrible.

"Castillo estimates the nurses at UVMC are working for wages in the range of \$14.88 to \$19.88 an hour, . . . with new nurses earning an hourly wage closer to \$13.75."—*Ibid.*

The UVMC administration sees it differently:

"Depending on the length of service and shift worked, licensed RNs presently make between \$15.18 and \$23.72 per hour."—*UVMC News, Fall 1998.*

The administrators say they want to raise the nurses' salaries; but, for several reasons, they have presently been hard-hit by a serious reduction in hospital revenues. As soon as they are able to do so, they say they intend to raise RN wages.

**Do not underestimate this activity in a little-known Adventist hospital. If successful, it will mark the first time that any workers in an Adventist hospital have been unionized.**

It is common knowledge that this will be the first Adventist hospital penetrated by the unions.

"Should the union effort succeed at UVMC, it will be the first successful unionization of an Adventist hospital."—*Ukiah Daily Journal, September 23, 1998.*

It is true that there is already another Adventist hospital which has union representation, but that hospital had it when AHS/West bought the facility.

"Redbud, another hospital in the same Adventist Health chain which owns UVMC, has an employee bargaining association which was in place when Adventist [Health Systems/West] bought the property."—*Ibid.*

"CNA has made no secret of its goal to use UVMC to gain entry into other Adventist Health facilities."—*UVMC News, Fall 1998.*

**Devitt, head of UVMC, admits that it is likely the nurses will win the forthcoming election.**

"Devitt said it appears obvious that the nurses have the strength in numbers to demand a union.

"Castillo agrees. She says she's confident the nurses will successfully vote to unionize, and that [this] would be an important step, unionizing an Adventist Health facility.

"'It would be our first. It is significant,' she said. 'We have received other calls from Adventist hospitals; but, when we visited Ukiah, it was obvious they were ready to organize.'"—*Ukiah Nurses, Ukiah Daily Journal, September 23, 1998.*

**It was noted that, if it is unionized, a sizeable number of nurses at UVMC will quit and move away. At this time, we have no final report on the outcome, but unionization appears inevitable. Strikes will follow.**

# AIDS Update: Fall 1998

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**AIDS continues to be a terrible killer—and it appears the medical establishment and the governments of the world cannot find a way to stop it.**

We continually hear news about new attempts to combat AIDS. New drugs have been produced, and better treatments have been developed.

**But, in reality, medical science is getting nowhere in its attempts to stamp out AIDS. At best, all they have done is slow down a little how fast some people die from the disease.**

The world is not winning the war against AIDS.

According to a new report from the United Nations AIDS Office (UNAIDS), **on a global basis a staggering 30 million people are now living with HIV. Nearly 6 million contracted the virus last year alone.** That equals 16,000 people a day! Of course, these statistics are based on reported cases.

Because 90 percent of all infected people live in the developing countries of Asia and sub-Saharan Africa, where even bandages are a luxury, few there will see a protease inhibitor, so lives can be lengthened by a few years.

Throughout the world, aside from the few who are either wealthy (or are able to drain government funds) to pay for special drugs,—**most of those who have HIV will die within a decade. By that time, they will have infected still more people.**

Add to this the fact that most of those in third world nations do not know they are infected, and so continue to pass the virus on.

Add to this the fact that many of those in Western nations do not care—and continue to share HIV with others anyway.

**But are not protease inhibitors a great new breakthrough? Not at all, for two reasons: (1) They cost massive amounts of money per year, and one must keep taking 15-20 pills a day in order to prolong life awhile. (2) Those whose lives are prolonged still have AIDS—and it is now known that they continue to transmit HIV to oth-**

**ers, even when they themselves may not for a time show symptoms! So all the protease inhibitors accomplish, at great expense (over \$30,000 a year per person!), is to lengthen people's lives—so they have more time to infect more people.**

There is no good news about AIDS; and, in the providence of God, there never will be.

In some nations, such as Zimbabwe and Botswana, one in four adults is already HIV-positive. We have already passed the point of no return on this rampant infection.

More than 30 million people are now infected with HIV. Here are some of the breakdowns:

**At the present time, the highest percentage of the population having it** are nations in central and southern Africa.

Nations which have it moderately are the United States, Central America, South America, Spain, Portugal, India, and southern Asia. All other nations have it in lesser ratios.

**Now let us consider those nations where HIV is spreading the most rapidly:** The worst are Venezuela, Peru, Nicaragua, Russia, Belarus, Ukraine, Turkey, India, southern Asia nations, China, southern Africa.

Where HIV is spreading at a somewhat slower pace (but still a lot): Columbia, Chile, Argentina, Guyana, Guatemala, Costa Rica, Haiti, Dominican Republic, Portugal, France, Poland, Japan, central Africa.

In all other nations, not listed above, HIV is spreading more slowly.

**Here is the latest data on the primary methods by which HIV is being transmitted in five nations:**

*United States:* Homosexual sex 52% / IV drug use 33% / Heterosexual sex 13% / Blood transfusion 2%.

*Brazil:* Homosexual 34% / Heterosexual 34% / IV drug use 25% / Blood transfusion 4% / Mother to child 4%.

*Russia:* Homosexual 64% / Heterosexual 32% / Blood transfusion 2% / Mother to child 2% / IV drug use 1%.

*South Africa:* Heterosexual 79% / Mother to child 13% / Homosexual 7% / Blood transfusion 1%.

*China:* IV drug use 59% / Blood transfusion 20% / Heterosexual 17% / Homosexual 5%.

**The 12th International AIDS Conference was held in Geneva this summer (1998)—and confirmed the most terrible news.**

The scientific community had been pinning its hopes on the development of vaccines and drugs which could withstand the HIV virus.

**First, they were told that the successful development of vaccines is years away. A key problem is that the mutation rate of certain factors in the virus are so rapid—that scientists have not come across anything like it before.**

It was also disclosed that, if a usable vaccine is ever found, it will either be *safe enough* that it will not protect many people or it will have be *strong enough* that it will cause infection in some!

Governments may have to decide whether flawed vaccines are better than no vaccines, and manufacturers will face ethical dilemmas about testing and marketing the products.

**Second, the scientists at the AIDS Conference were told that there is an ominous new, drug-resistant HIV strain spreading among the population.**

This strain of HIV virus is resistant to protease inhibitors. San Francisco physicians reported that they had seen infections with this highly resistant virus. Another team, working in Switzerland, said they had seen several more. No one knows how these strains are spreading.

**Viruses impervious to AZT and other, old AIDS medicines have long circulated. But now people are beginning to catch viruses which are resistant to protease inhibitors as well.**

As you may know, protease inhibitors have been the pivotal ingredients in combination drugs, given to enable AIDS patients to live longer.

**One researcher complained that this development put AIDS research back into the early 1980s, when they had no therapy at all.**

As so often happens with the antibiotics, the patients who developed special resistance were those who were not taking the medications regularly, but only sporadically. They, in turn, transmitted the fully resistant virus to yet others.

**This special virus is resistant to four differ-**

**ent protease inhibitors as well as the drugs AZT and 3TC.**

The Swiss researchers reported that following the regimen means taking 15 to 20 pills a day on a precise schedule, and missing even a few doses allows mutant viruses resistant to protease inhibitors to emerge.

*Here are more facts about the AIDS epidemic:*

- **Physicians in the United States are seeing more women with HIV than ever before.** In many AIDS clinics in San Francisco and New York City, women comprise 30% to 50% of all new patients! Approximately one-half were infected through heterosexual contacts. Some are highly educated; some are illiterate or nearly so.

- **AIDS is now in every state in America. It is spreading unchecked among young people,** regardless of where they live or their economic status.

- States with the most AIDS patients and HIV-positive persons are California, New York, Texas, New Jersey, Florida, and Puerto Rico.

- **Over half of teenagers who are tested for HIV—never return to find out whether they have it.** Either they do not care or are afraid to know.

- The polio virus was treated with vaccines because it had no sugar in its outer coat. The same was true for flu. But HIV has sugar molecules on its surface. For this reason, both the body's defenses and the vaccines of the scientists cannot locate and eradicate it. The HIV virus is remarkably well-protected! Both the sugar and protein on its coat keeps changing. Even natural immune factors within the body do not bother with HIV; for, when they find the sugar coating, they pass on—assuming it is safe and belongs in the body.

- **Delegates were told that health-care costs will soon exceed the ability of mankind to deal with them.** More and more people are contracting the disease, and the cost of treating just one person till his death is over \$150,000!

Few governments or agencies really want to stop the spread of AIDS. If they did, they would trumpet the only effective way to do so. But this is not what the people want. They want to continue on in their sins. Retribution follows.

**Determining to remain in rebellion against the laws of Heaven, the world flouts obedience to the ten commandments. Great misery follows, as it always will.**

**AIDS will soon become the greatest epidemic in the history of mankind, a powerful evidence that Christ's coming is near.**

# 4 Crisis in Ethiopia

Waymarks

*As it always does, higher echelons in the church always side with lower-level leaders, even when they are in the wrong. We have learned that Adventist believers in the entire nation of Ethiopia are split over the crisis existing there.*

*Half of the 100,000 Adventists in the Ethiopian Union want their leadership ousted, yet it continues to have the backing of the Eastern Africa Division and the General Conference.*

About half of the Adventists in this east African nation refuse to recognize the president of the Ethiopia Union, who, in a disputed 1996 election, claimed to be the winner.

When, in the winter of 1996-1997, Robert Folkenberg visited the area, in an attempt to smooth over the problem, it only had the effect of emboldening Tinsae Tollosa and his associates in the Union office.

Declaring that Folkenberg had assured him of higher-level church backing, President Tollosa began to “persecute” believers who had spoken against him. **On April 19, 1997, a group of Ethiopian Adventists in the U.S. filed a protest with the General Conference, detailing this persecution.**

Subsequently, Folkenberg spoke with police officials, and gained assurance from Tollosa that everything was all right.

However, it is said that Tollosa connived to have 78 Adventist pastors and lay leaders arrested. **Many have been illegally imprisoned without charges having been brought against them. In some manner, Tollosa has influence with the government; it is said through the use of bribes from tithe funds.**

In addition, Tollosa handpicked the Union leaders who would serve with him in the Union office, and then fired 74 church employees in January and February. At the time of the rigged “election,” several of those elected were under local church discipline because of various charges.

Since foreign missionaries were beginning to spread damaging reports, in letters to families back home and to higher-level church leaders, **Tollosa expelled from the country ten foreign missionaries and their families.** Among these was Colin Richardson, ADRA director for Ethiopia operations.

That put a stop to nationwide relief work for a time.

Veslemay Hogganvik, a second-generation missionary from Norway, was deeply upset by Tollosa’s tactics,—but when she complained a little too loudly, Tollosa arranged to have her arrested. After being briefly imprisoned, she was deported. Since she had been in Ethiopia all her life and the people valued her so much, this was but another tragedy.

**Tollosa’s opponents accuse him of embezzlement of church funds, bigamy, public use of alcohol, and sexual immorality. They also accuse the newly re-elected Union treasurer of having fathered two illegitimate children.**

It is of interest that the opponents are not a little clique, but include all major ethnic groups in Ethiopia. On May 10, 1977, a large number of opponents gathered at the main (Filwoha) church in the capital city of Addis Ababa. Angry, Tollosa called the police, who broke up the meeting.

**The following week, Union leaders met with the police and arranged for 28 believers to be arrested when they came to church on Sabbath to worship. They were hauled off to prison. The following week, more believers were arrested.**

Opponents soon learned that Tollosa had assured civil authorities that the Adventist Church is not a democracy; members have no right to speak against what he does, and he is simply doing that which the Division and General Conference tell him to do. It is believed that Tollosa used bribery to help convince the police.

After Folkenberg’s visit, in which he clearly backed Union leadership, a group of Ethiopian believers wrote him: **“From your message we understand that believers have no right to oppose the bad behavior of church leaders.”** Church members in America have, for years, encountered the same problem, when they opposed new theology pastors.

Worku Negash, an Ethiopian-born American resident, commented: **“These men have treated the church as their private business.** Like dictators in many parts of the developing world—or corrupt bosses in American cities—they have built mansions for themselves, demanding free labor from church members.”