

# Winning Rights

The Path to Empowering  
Care Workers Worldwide



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# INTRODUCTION

From the people who take care of older people in our lives, the staff that help us heal at hospitals, to those who ensure the health of our communities, care workers play a crucial role in our societies, providing essential services. However, the care sector faces significant challenges that need urgent action. Our care systems will fail unless we improve workers compensation, staffing levels, and health and safety protocols. The sector will be woefully unprepared to provide decent care for the growing elderly population or face a future pandemic.

That's why UNI Global Union is advocating for country-tailored strategies that improve working conditions for care workers, ensuring their right to form and join unions, receive fair compensation, work in safe staffing environments, and obtain proper training. Our goal is to enhance the quality-of-care services, promote gender equality, and combat inequality and poverty.

We are dedicated to addressing human rights violations in the care sector, focusing on upholding Universal Declaration of Human Rights Article 23, the Right to Work, which includes the right to fair and favorable work conditions and equal pay for equal work.

For care workers, particularly those in home-based and community health settings, it is crucial to recognize their status as workers and formalize their employment. Training and professional development, along with unionization, form the cornerstone of safeguarding and advancing their human rights. Additionally, providing safe staffing levels at care institutions is imperative for ensuring both decent work conditions and the provision of high-quality care.

For care workers, it is crucial to:

1. Recognize their status as workers and formalize their employment particularly those in home-based and community health settings.
2. Provide adequate training and professional development.
3. Ensure safe staffing levels at care institutions to secure decent work and high-quality care.
4. Guarantee their right to freedom of association and collective bargaining as the cornerstone to safeguard and advance their human rights.



*"It's vital for our society to recognize and appreciate the significant contributions of care workers and to support efforts to improve our working conditions."*

**Jacquelyn Deborah Tetteh-Ashong**

*Member of the Health Service Workers Union of Ghana*

# THE PATH TO FORMALIZATION

Promoting integrated systems where care workers' rights are respected is essential to build the care economy our societies need. [A recent survey of 6523 personal household workers](#), service users and user employers by UNI Europa, EFFAT, EFFE, and EFSI, co-funded by the European Commission found that over half of personal and household services workers surveyed do not believe their job is sustainable until retirement age and 57 per cent said they have considered leaving the sectors in the past three years, primarily due to poor working conditions. This survey highlights the urgent need for building and reforming homecare systems that provide formal jobs, with collective bargaining to ensure decent working conditions and quality care.



The most efficient and direct way to ensure formal and consolidated employment, in home care, is a single employment structure, where care workers and caregivers are employed either directly by the government where they provide services or through a regulated private employer and where working conditions are negotiated collectively.

This employment structure ensures greater public accountability over the use of funds, eliminates speculation that can occur without proper regulation, and allows local control to drive systems change

consistently across a broad population. Additionally, care workers and caregivers will have access to social security and other social welfare programmes. Finally, this employment structure allows people with disabilities or older adults to choose their own caregiver, including hiring family members, by simply enrolling their chosen caregiver in the programme, allowing their chosen caregiver or family member to access training, professionalization, and support programmes that they would not otherwise have.

## Fighting for recognition and benefits

*The health authorities of Nepal's second most populous province, the Bagmati Province, granted a special financial reward of 5,000 Nepalese Rupees for every FCHV worker last December 2023. This special award builds upon the Bagmati provincial government's previous commitment to cover half of the cost of the contributory Family Health Insurance Scheme. All this thanks to the efforts of HEVON, the Union of Community Health Workers of Nepal.*





Community health workers (CHW) must also be recognized as part of the labour structure as they are often defined as volunteers who provide primary health care services to rural and marginalized communities. In Asia, our CHW affiliates in Sri Lanka and Pakistan have salaries and wages, but social protection and other aspects of decent work have yet to be addressed. We are organizing community health workers (CHW) so that they can have the collective strength to win formalized work contracts reflecting internationally agreed labour standards.

The Lady Health Workers of Pakistan formed associations and unions, and worked collectively to demand higher wages for the services they perform. [Their success inspired](#) Nepal's female community health volunteers (FCHV) to fight to be recognized as workers and demand improvements to the benefits they receive. These efforts are further bolstered by [strengthening social dialogue](#) among health care workers, government officials, and employers, such as the forum on "[Safe and Dignified Health Sector: Working Together](#)" that opened up opportunities for stakeholders to discuss the use of employment contracts, getting workers' representation involved in the development of health and workplace policies, eliminating

violence and harassment at work, and addressing the shortage of nurses to improve the health worker-to-patient ratio.

In India, Anganwadi (community care) workers and Poshan Sakhi (nutrition) workers also [won a commitment from the State of Jarkhand](#) to address the need for augmented central share funding, timely salary disbursements with the clearance of arrears, and revised pay scales inclusive of comprehensive benefits, as well as the reinstatement of retrenched workers.

Meanwhile, in the Philippines, a Magna Carta of Barangay Health Workers (BHWs), has [entered its first reading in the Senate of the Republic](#), that is expected to provide a package of benefits, such as hazard allowances, transportation allowances, subsistence allowances, one-time retirement cash incentives, health benefits, insurance coverage, vacation and maternity leave benefits, cash bonuses, disability pay, and conferring Civil Service Eligibility for BHWs who have rendered at least five years of continued service. Having a Magna Carta is a big step forward, but like many CHWs, there is more work to be done, including winning recognition as workers with formal labour contracts.



*"As BHWs we play a crucial role in the community. They say we are volunteers and this is what we chose, but we sometimes go hungry with just biscuits and water. We want equal wages, job security, access to social security, healthcare and other benefits, starting with passing the Magna Carta to ensure quality conditions for us BHWs in service to our country."*

**Myrna Gaite**

*President of the BHW National Capital Regional Federation*

# DELIVERING TRAINING

Strong regulations focused on care worker training and good quality care ensure cost-effectiveness and fair administration of services while providing opportunities for upward social mobility through career ladders in the sector.

For a publicly funded programme to provide cost-effective and fair administration of services to the elderly and people with disabilities, there must be an independent evaluation entity to determine eligibility for services based on functional need.

To ensure quality care and efficient support for care workers, a standardized pre-service orientation, training, and certification requirement should be mandatory for all care workers. All caregivers, to provide safe care, should receive home health and safety training; and training in universal precautions; first aid and CPR; abuse, and negligence; activities of daily living and instrumental activities of daily living; nutrition; aging and mental health.

Better training leads to greater job satisfaction and commitment, which leads to improvements in the quality of care. Training also prepares workers for the developments in the sector such as advances in treatments or the introduction of new technology.



## **Training and certification are essential for care workers**

*Homecare workers members of SEIU775 in Washington, U.S., won funding to provide multiple basic learning skills, occupational health and safety, and continuing education courses in their collective bargaining while giving gaining access to health benefits and secure retirement benefits. Additionally, certified individuals can be listed in a public registry, which facilitates the connection between those seeking services and eligible caregivers.*



In Argentina, for example, the national healthcare workers federation, FATSA, [offers a training programme focused on geriatric care](#), which includes modules on infectious disease protocols amongst others. This training was key during the pandemic to provide up-to-date information on COVID 19 protocols and safety measures.

A UNI affiliate in the Dominican Republic, Federación Nacional de Mujeres Trabajadoras (FENAMUTRA), recently [signed an agreement](#) with the government agency dealing with elderly care, CONAPE, to provide training to participants of the “Familias de Cariño” programme. In March this year, FENAMUTRA, began its year-long training series to standardize and improve professional capacities of care workers.

The training, funded by USAID, The Ford Foundation and the Care Fund under [Together We Care: Partnerships for Equitable Health Systems](#), also includes awareness and response to occupational safety and health issues, gender-based violence and harassment, and stigma.

To promote transparency and boost accountability, successful publicly funded home care programmes around the world often have a formal advisory board that not only include unions but also people with disabilities, elder advocates, and women’s rights organizations supporting the government on the development of the programme, giving a voice to those who use the service and those who share the objectives of gender equality and reducing inequality.



*“We have to make visible to society the precariousness in which many caregivers perform their work, they carry out an indispensable task and should have rights like other workers.”*

**Ruth Diaz**

*President of FENAMUTRA Dominican Republic*



# WINNING THROUGH GLOBAL AGREEMENTS



To effectively advocate for care workers across borders, unions often need to assert their influence against multinational corporations to safeguard workers' rights. One powerful tool at their disposal is the use of global agreements. These agreements are essential in helping to protect the rights to organize and collectively bargain without fear of employer retaliation or interference. They become particularly crucial in regions where local management and governments regularly disregard these rights, and in environments that are predominantly anti-union. Global agreements serve as a critical safeguard, ensuring that care workers' rights are respected and upheld internationally.

In April 2022, following several years of campaigning, [UNI Global Union signed a global agreement with Eimis \(formerly Orpea\)](#), the largest private nursing home operator worldwide. The OPZZ union in Poland, active in an Eimis-owned facility, had initiated their campaign for union recognition back in 2018. Their persistent efforts have recently culminated in tripling their membership, achieving recognition, and they are now negotiating their inaugural agreement.

Before the agreement was signed, OPZZ's union leader was fired in 2019, but has since been reinstated and now has an agreement with the company for half time union leave. [A campaign for improvements in working conditions and higher quality care for all care homes](#) in Poland launched this year, potentially benefiting more than 55,000 care workers in this sector. Other multinational corporations [refuse to negotiate a global agreement](#) even when [labour violations](#) and [evasion of responsibility to workers](#) in health care clinics have been exposed.

## **First union agreement with largest Czech nursing home operator**

*In April 2022, UZO ALICE became the first union to sign a collective bargaining agreement with the Czech Republic's largest nursing home operator. This landmark agreement, achieved after two years of unionization efforts that began at the height of the Covid-19 pandemic, guaranteed freedom of association and the right to collective bargaining. It included a 7.5 per cent wage increase, benefiting more than 900 employees. This agreement marked a significant step forward in labour rights within the Czech nursing home sector.*



# FIGHTING FOR SAFE STAFFING

Ensuring safe and sustainable staffing levels is a cornerstone of high-quality care. Extensive research over the years has consistently demonstrated that higher numbers of nurses and carers lead to better care quality, more lives saved, and fewer medical complications. Moreover, unsafe staffing levels contribute to increased illness and injury among nurses and carers, fueling a destructive cycle of high turnover within the sector. This has prompted numerous UNI affiliates to advocate vigorously for mandated safe staffing minimums.

In reaction to prominent union campaigns and an acknowledgment of the correlation between safe staffing levels, reduced worker turnover, and improved care quality, several governments have taken legislative action. The U.S., Canada, and [Australia](#) have recently moved to establish minimum care hours or staff-to-patient ratios in aged care facilities.

After several years of advocacy led by SEIU, the Centers for Medicare and Medicaid Services issued a final ruling in April

2024. [This ruling](#) mandates a total [nurse staffing standard](#) of 3.48 hours per resident per day in nursing homes. The new standard includes at least 0.55 hours of direct care per resident per day by a registered nurse and 2.45 hours by a nurse aide. This significant regulatory change aims to improve the quality of care in nursing facilities nationwide.

In Canada, the UNI affiliate [UNIFOR](#) successfully campaigned for several years to improve staffing ratios in long-term care homes. Their campaign, which started in 2017, highlighted that personal support workers in Ontario had only six minutes to prepare residents for breakfast. This effort prompted a commitment from the Ontario government to address and improve staffing ratios in these facilities, aiming to enhance the quality of care for residents. Since the current government in Ontario took office in 2018, cuts to long-term care funding and other anti-worker measures have reversed those gains. UNIFOR is working with other unions and community allies to pressure the current government to fix the staffing crisis.



*“Putting more money toward home care and nursing home workforces will expand access to quality care and ensure that public dollars fund it. The combination of measures helps lay the groundwork for transforming long-term care jobs into good union jobs with wages that reflect the value of this essential work. They will help workers build careers and help the care industry retain and attract the caregivers we need to stabilize this workforce.”*

**April Verrett**

SEIU International President, USA



A recent win by another UNI affiliate USW Local 4-200, also [includes improvements to staffing ratios](#) in addition to improvements in wages and lowering of health insurance costs.

In Argentina, FATSa [negotiated essential staffing guidelines](#) for geriatric assistants in social care residences. According to the agreement, geriatric assistants are assigned to a maximum of twenty-four beds during daytime hours and thirty-five beds during nighttime hours. If a geriatric assistant is required to attend to more than these limits—*twenty-four beds by day and thirty-five by night*—they will receive a 5 per cent salary increase for each additional person they care for. Fatsa is working to ensure that all social care residences implement this agreement.

Japan, Finland, and Northern Ireland have also such ratios in place for some

time. These countries are leading the way in setting standards that prioritize both patient and caregiver well-being.

In Europe, UNI Europa's [RETAIN Project](#) also advocates for significant changes to make long-term care work more appealing to job seekers by addressing its precarious nature. The project recommends decreasing administrative burdens, reducing travel times between clients, enhancing worker autonomy, and improving staff-to-resident ratios. It stresses that conditions tied to public funding should mandate respect for workers' rights, including enforcing collective bargaining agreements and imposing sanctions on those who violate these standards.

Additionally, the RETAIN Project calls for the ratification of ILO Convention No. 189, which promotes decent work for domestic workers, to further strengthen labour protections in the care sector.

## Confronting Gender-Based Violence and Harassment

*In 2018, the UA Zensen Japan Nursing Care Craft Union conducted a survey revealing that 74.2 per cent of care workers experienced some form of harassment, including 40.1 per cent who faced sexual harassment. A staggering 94.2 per cent reported power harassment. These alarming findings prompted Japan's Ministry of Health, Labour and Welfare to commission its own survey through the Mitsubishi Research Institute in March 2019, which confirmed the original survey's results. In response, the Ministry developed a "Manual for Countermeasures against Harassment in Nursing Care Workplaces" and announced plans to establish consultation desks for nursing care workers in each prefecture to address these serious issues.*

# ADVOCATING FOR MIGRANT CARE WORKERS

Increasingly, since the pandemic, many countries have turned to migrant care workers to help address local care and support worker shortages. As a result, many sender countries are suffering significant health and care workers drain themselves. UNI Affiliate MPAWUZ (Zimbabwe) estimates it has lost about 50 per cent of its healthcare membership to migration, while our affiliates in receiving countries have seen an increasing number of [cases akin to modern slavery](#) amongst migrant care workers.

In Ghana, the HSWU launched a campaign this year to organize outsourced public sector hospital workers and private hospitals. The goal of this campaign is to raise the standards for the rapidly growing private care sector. By improving labour standards in sender countries, unions can reduce the economic pressures driving workers to migrate.

When care workers do migrate, they must have their rights guaranteed. Consolidation of labour structures must extend to migrant care workers who [require supportive policies](#) that include the recognition of foreign qualifications, access to language training, and upskilling and reskilling opportunities. Community, residential and home care should admit migrants under general work permit schemes, while work permit renewals should be of reasonable duration, allow a period of unemployment, followed by pathways to settlement and obtaining long-term resident status.

Incentives for the regularization of undeclared work, including simplifying the administrative procedures, providing fiscal incentives to households, tax and social security exemptions, among other measures, should be considered. Migrant care workers should also have freedom of association, access to union membership, and be required to receive local labour rights education.





# ENGAGING INVESTORS TO STRENGTHEN CARE



Care unions are leading the fight for responsible investment in care by fostering productive relationships with key institutional investors in the sector that has led to expectations of reducing risks to the human rights of residents and workers. As of April 2024, the Investor Initiative for Responsible Care (IIRC), now has 168 investors with USD\$4.3 trillion in assets under management.

The group engages with both nursing home operators and Real Estate Investment Trusts (REITs), that own the property on which long-term care homes are built. The IIRC have set out their [expectations](#) of companies in a public statement, focusing on safe staffing levels, occupational health and safety, wages and contracts, freedom of association and collective bargaining, and ensuring high quality of care. Investment of any kind – public or private – [should be held accountable](#) to ensure that the care jobs it creates are jobs with dignity.

Greater transparency is needed among operators in long-term care homes to appropriately assess whether [expectations](#)

[set out in the IIRC](#) are being met, thus providing greater clarity on risks to human rights of residents and workers, as shown in this update since the investors continue to engage with publicly listed companies to encourage increased disclosure on these topics.

Additionally, the [IIRC contributed significantly to the policy consultations related to human rights](#) and corporate accountability in the nursing home sector that favorably reflected the need to improve workers' rights fulfillment, focusing on the need to address labour turnover, improved staffing levels, and ensure freedom of association and the right to collective bargaining.

The three policy consultations include: the EU Care Strategy consultation; US 'Disclosures of Ownership and Additional Disclosable Parties Information for Skilled Nursing Facilities and Nursing Facilities' consultation; and the US Center for Medicare & Medicaid Services (CMS) 'Minimum Staffing Standards for Long-Term Care Facilities and Medicaid Institutional Transparency Reporting' consultation.



# THE UNION DIFFERENCE

In order to professionalize the care sector by strengthening a life-centered approach to care that puts the wellbeing of patients and workers at the centre, we must ensure workers' rights to form and to join trade unions are respected and promoted. The right to unionize and the right to bargain collectively at both enterprise and sectoral levels, are key to securing sustainability and resilience of health and care systems, especially under conditions of war and pandemics. From better pay to training to safe staffing, the ability for care workers to join together in a union is essential to improve our care systems.

For many health and care workers, unions are their only voice, where both government responses and the employer responses are highly inadequate.

In New Zealand's nursing home sector, collaboration between unions and patient advocates has made care facilities safer for patients and workers alike. Unions built valuable alliances beyond the workplace that brought pressure to bear and changed policies. Early in the Covid-19

crisis, supplies of and access to personal protective equipment (PPE) were limited in many countries, putting workers at risk of infection. In New Zealand, the government initially failed to include home care workers in public health orders designed to ensure that PPE was available to all healthcare workers. Dr. Garth Bennie of the Disability Support Network told the government's Epidemic Response Committee that care workers had been stopped in the streets and questioned by police and confronted at supermarkets when they tried to use priority queues because they were not recognized as essential workers. Many had to purchase their own PPE. Without adequate protection, home care workers risked spreading the virus to highly vulnerable clients and their families, and some clients cancelled home care visits to avoid those risks. With fewer client visits, the home care workers lost a significant portion of their pre-pandemic pay and clients did not receive the care they needed. In an added insult, these workers were left out of employment insurance and government programmes put in place for workers who experienced the early impact of the pandemic.





E tū and PSA, the home care workers' unions in New Zealand, contacted members to gather information about the scope of the problem. Union members connected with elder advocacy groups to strategize about addressing the carers' working conditions because of the obvious connection between carers' health and the health of their patients. The unions and these community allies successfully lobbied at the local and national level to change policies, guaranteeing access to PPE for home care workers. Vulnerable clients in need of care felt safer, and they stopped cancelling appointments.

The alliance remained active, and in 2021 won more improvements for care workers, including fully paid travel time and paid sick leave. In the wake of its successes, E tū and PSA have become well known as a leader in the home care industry, thus attracting more workers in care to join the union.

In Argentina, with inflation reaching over 210 per cent by the end of 2023, the purchasing power of healthcare workers was eroding rapidly. Faced with employer intransigence, the national federation of health care workers, FATSA, led a strike of more than 300,000 workers in February, 2024, which resulted in an agreement to increase wages.

In Italy, FISASCAT-CISL and FIL-CAMS-CGIL bargain at the sectoral level for homecare workers nationally. [Through this sectoral agreement](#) they have reduced the use of informal pay arrangements and provided a framework for these workers to have access to social benefits. This agreement has led to significant improvements in living standards for this predominantly migrant female workforce.

### **Mobilizing for care workers' rights**

*In Brazil, a minimum wage law passed in 2022 covering nurses, nursing technicians, nursing assistants, and midwives has never been implemented. By organizing nationally, a coalition of healthcare unions is mobilizing for implementation of the minimum wage law demonstrating the value of unions' sustained engagement for the fulfillment of workers' rights, even after legislative victories.*



The [Mongolian Health Workers Union](#) (MHWU), won concessions from the government to better compensate the health care sector workers for their important contribution during the pandemic. Ariunaa Kharkhuu, President of MHWU, reported that with the help of determined members, the union's campaign succeeded in moving the government to allocate a one-time compensation of 45 billion Mongolian Tugrik (USD 15.7 million) to 34,000 doctors and employees in the healthcare sector. This effort also helped create a working group including the relevant government ministries and the MHWU to improve healthcare workers' wages.

Recently, in the UK, UNI affiliate, the GMB union won statutory sick pay for 19,000 care workers at HC-One, the UK's largest care home provider. Announced on 22 March 2024, this new agreement guarantees pay from the first day of absence and addresses the issue of care workers forced to work when unwell, risking the spread of infections among the older adult residents they serve.

The Australian Fair Work Commission (FWC) acknowledged that "the work of aged care sector employees has historically been undervalued, because of assumptions based on gender." This acknowledgment is rooted in the gender-based presumptions that influenced the establishment of wage benchmarks in past awards, many of which have been perpetuated in the modern awards system.

In this landmark decision hailed as a major victory for aged care workers in Australia, the FWC has approved wage

increases of up to 28.5 per cent across the sector. The resolution follows a legal battle over several years initiated by the Health Services Union (HSU) in November 2020 alongside United Workers Union (UWU), advocating for a 25 per cent wage uplift for all employees within the domain, citing the complex and historically undervalued nature of their work, often due to gender-based assumptions.

During and following the pandemic the KHMU in Korea fought hard to protect and advance the rights of healthcare workers as employers and governments sought to roll back funding and working conditions. By mobilizing tens of thousands of members they won several groundbreaking agreements covering over a million healthcare workers. The union first won an [agreement](#) in 2021 with the government to address the deteriorating working conditions faced by healthcare workers amid the Covid-19 pandemic. It was followed by another [landmark sectoral agreement](#) covering nearly 80 medical institutions nationwide in August 2022 that included, reducing violence and harassment in the workplace by ensuring perpetrators are subject to disciplinary action regardless of position or rank, converting irregular contracts to permanent status, ensuring minimum staffing of two workers when performing hazardous tasks, and introducing a living wage system.

Then in December, [following a hunger strike](#), KHMU won over 100 billion won in funding for public hospitals. KHMU is [calling on the government to create a comprehensive plan to address imbalances in the health care sector](#), which is currently facing doctor shortages and overburdened nurses.



*"We saved people's lives during the Covid-19 pandemic. But when Covid-19 ended, we were torn apart."*

**Na Sun-Ja**

*President of the Korean Health and Medical Workers Union*

# CONCLUSION

To strengthen the care sector, it's essential to uphold the rights of care workers to form unions and engage in collective bargaining. Union initiatives across the globe have demonstrated that respecting these fundamental rights, and recognizing and formalizing care work leads to stronger, more resilient care systems. To achieve this, governments and employers need to commit to the following actions:

1. Formalize all care workers to ensure their rights and protections are recognized.
2. Provide comprehensive training and opportunities for professional development to elevate the quality of care.
3. Ensure safe staffing ratios to prevent burnout and maintain high standards of care.
4. Guarantee that all care workers have the right to join unions and engage in collective bargaining to advocate for their interests and improve working conditions.

Continued efforts to enhance training programs and establish formal employment structures are crucial. Success stories from various countries illustrate how collective bargaining and union involvement are instrumental in advancing care workers' rights.

Global agreements and supportive local laws have proven effective in shaping policies that bolster care workers' conditions. Policymakers, union leaders, and other stakeholders must persist in advocating for reforms that address the ongoing challenges in the care sector.

By working towards professionalizing and formalizing care work, providing necessary training, ensuring safe staffing, and protecting the right to unionize and bargain collectively, we can not only improve working conditions for care workers but also ensure higher quality care for communities.

Ensuring the rights of care workers is not just an ethical imperative; it is the cornerstone of building resilient and effective health systems worldwide.



*UNI Global Union extends its heartfelt gratitude to all contributors who have played a pivotal role in achieving our successes.*

*This includes our dedicated affiliates, who have run organizing campaigns and supported the Organizing Fund, and our invaluable SSO partners and other donors such as Care Fund, Ford Foundation, USAID, among other generous donors. Their collective commitment has made our success possible.*

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