The Decline of American Unions Is a Threat to Public Health

Empowerment is critical for public health. The empowerment of women translates to health for all members of society. Community empowerment enables access to affordable health care, decent housing, and public safety. Unions are the organizations through which workers collectively become empowered. But today unions are under attack and in decline. Two articles in this issue of AJPH demonstrate why this is a threat to public health.

Hagedorn et al. examined 16 binding union contracts with employers in the Pacific Northwest, showing how the contracts improved the lives and promoted the health of union members. They found that the contracts raised earnings, provided retirement benefits, included employer-paid health insurance, promoted occupational safety and health, and protected workers from discrimination and unfair treatment. All are important determinants of health.

The article by Tsao et al. indirectly shows why union efforts to increase earnings are especially important. The authors modeled an increase in New York City’s minimum wage to $15, and found that it could have prevented 2800 to 5500 premature deaths between 2008 and 2012. Of course, wage increases for members are usually at the top of union collective bargaining agendas, especially for newly organized low-wage workers. Unions also are at the forefront of efforts to increase the minimum wage for all workers.

UNION CONTRACTS

The 16 contracts included in the study by Hagedorn et al. are a tiny fraction of the tens of thousands of labor agreements covering 14.8 million workers in the United States. But the provisions noted by the authors are common to almost every union contract. Many go further. In the area of occupational safety and health, for example, the United Auto Workers (UAW) and the major automobile companies have established large, jointly run training centers funded by corporate payments. The United Steelworkers (USW) and other unions have agreements with major employers providing for full-time, company-paid but union-chosen safety representatives. Under USW contracts with the oil industry, union safety representatives work to mitigate the risk of catastrophic accidents, thus helping to protect the surrounding community.

Many union contracts give workers the right to refuse unsafe work without fear of retaliation or loss of income. That right also is guaranteed by the US Occupational Safety and Health Administration and the Mine Safety and Health Administration, but enforcing it is cumbersome and uncertain, depending as it does on the federal courts. The union grievance procedure provides a swifter and surer remedy.

The benefits of a union contract extend far beyond union members. Most union-negotiated health insurance covers families as well. Paid vacations and holidays, as well as limits on involuntary overtime, make meaningful family life and community participation possible. Nonunion workers in partially unionized industries also profit, as employers are forced to raise wages and improve benefits to stave off union organizing drives.

Unions have traditionally played an important role in the delivery of health care. Beginning in 1946, the United Mine Workers Welfare and Retirement Fund established eight hospitals and dozens of clinics in the Appalachian coalfields. On the West Coast, union support was important to the early success of what became the Kaiser Permanente system. In recent years, nurses unions have fought hard for improvements in patient care.

ABOUT THE AUTHOR

Michael Wright is the Director of Health, Safety and Environment for the United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industrial and Service Workers International Union (USW), Pittsburgh, PA. Correspondence should be sent to Michael Wright, USW Health, Safety and Environment Department, 60 Boulevard of the Allies, Pittsburgh PA 15228, (e-mail: mwright@usw.org). Reprints can be ordered at http://www.ajph.org by clicking the “Reprints” link.

This editorial was accepted March 30, 2016.

Note. The views expressed by the author are his own, and not necessarily those of the USW. doi: 10.2105/AJPH.2016.303217
environment and jobs; it is both, or neither. The statement also identified climate change as the greatest environmental threat to future generations.

UNION DECLINE
Despite this record—or more likely because of it—unions are under sustained attack. Most Republican politicians are openly hostile to unions; many Democrats are indifferent. Teachers unions are blamed for the fallout from ill-funded schools. Governors and mayors, eager to cut taxes on the wealthy, blame the resulting budget shortfalls on union-negotiated public employee pensions and seek to eliminate the right of public employees to bargain collectively. In “right-to-work” states, unions are obligated to spend resources defending workers who pay no union dues. Employers bitterly resist union organization. A 2009 study by the Economic Policy Institute found that a majority of employers responded to an organizing drive by threatening to close the plant or cut wages and benefits; more than a third discharged workers sympathetic to the union. These tactics are illegal, but there are no meaningful penalties. An employer found to have unlawfully discharged a worker is obligated only for reinstatement and back pay, and can drag out the adjudication process for years, by which time the organizing campaign is history.

As a result, the power of unions is declining. In 1953, 35.7% of private sector workers belonged to unions. By 2015, that number was 6.7%. Some of this decline has been mitigated by public-sector unionization, but even with the public sector, overall union membership is at 11.3%. Meanwhile, inequality has soared to levels not seen since the 1920s. In 1978 the top 1% of Americans garnered 8.9% of all US income; by 2007, their share had risen to 23.5%. If inequality is a threat to public health, the decline of American unions is as well.

Some of the seeds of the current decline were the fault of unions themselves. A generation of young activists in the 1950s and 60s, dismayed by union red-baiting and AFL-CIO support for the Vietnam War, turned away from unions. African-Americans and women concluded that their advancement did not lie with unions dominated by white male leaders. Unions have worked hard to reverse these trends, and have largely done so, but some of their legacy remains.

Economic factors also have led to a decline in union membership. The offshoring of manufacturing jobs has cut union strength in the sector where unions were traditionally the strongest. Unions have struggled to organize low-wage service workers, although recent successes with carwash workers in Los Angeles, California, warehouse workers in New York City, and janitors across the country show that such organizing is possible. The key factor in all these campaigns was community support.

The very structure of unions puts them at a disadvantage compared with other progressive organizations. Individuals can freely join organizations devoted to human rights, environmental protection, and other causes. But the only ways to join most unions is to go to work for an employer who happens to be unionized, enroll in a specific craft apprenticeship program, or undertake the daunting task of organizing your own workplace. Some unions have established associate member programs; the AFL-CIO’s Working America, designed for nonunion workers, has 3.2 million members. However, the traditional unions remain the primary defenders of economic prosperity and employment rights for American workers. There is as yet no broadly based movement for worker rights outside of unions, open to all, with strength comparable to the women’s movement or the movements for minority rights.

JOINING FORCES
Hagedorn, et al. suggest that public health practitioners have not typically viewed unions as partners in promoting public health. The inverse also is true. A few union staffers are American Public Health Association (APHA) members, and participate in the Association’s Occupational Health and Safety Section. At the national level, unions have lobbied for improvements in health care; the APHA has supported improved Occupational Safety and Health Administration standards. However, such collaboration is sporadic at best. At the local level it hardly exists.

Promoting the health and prosperity of American workers and their families will take a much closer relationship between unions and public health practitioners. It will take a sustained effort to increase the size and strength of unions, and to build a powerful movement aimed at reversing economic inequality and providing safe, secure jobs with adequate compensation and benefits for all. The APHA can play a key role in that movement, as can other progressive organizations. The unions are central to the struggle. But they cannot do it alone.

Michael J. Wright, MS

REFERENCES