

Unions are not only good for workers, they're good for communities and for democracy

High unionization levels are associated with positive outcomes across multiple indicators of economic, personal, and democratic well-being

Report • By [Asha Banerjee](#), [Margaret Poydock](#), [Celine McNicholas](#), [Ihna Mangundayao](#), and [Ali Sait](#) • December 15, 2021

We know that unions promote economic equality and build worker power, helping workers to win increases in pay, better benefits, and safer working conditions.

But that's not all unions do. Unions also have powerful effects on workers' lives outside of work.

In this report, we document the correlation between higher levels of unionization in states and a range of economic, personal, and democratic well-being measures. In the same way unions give workers a voice at work, with a direct impact on wages and working conditions, the data suggest that unions also give workers a voice in shaping their communities. Where workers have this power, states have more equitable economic structures, social structures, and democracies.

Income and economic protections

We find that, on average, the 17 U.S. states with the highest union densities:

- have state minimum wages that are on average 19% higher than the national average and 40% higher than those in low-union-density states
- have median annual incomes \$6,000 higher than the national average
- have higher-than-average unemployment insurance reciprocity rates (that is, a higher share of those who are unemployed actually receive unemployment insurance)

Health and personal well-being

We find that the states with the highest union densities:

- have an uninsured (without health insurance) population 4.5 percentage points lower, on average, than that of low-union-density states
- have all elected to expand Medicaid under the Affordable Care Act, protecting their residents from falling into the “coverage gap”
- are more likely to have passed paid sick leave laws and paid family and medical leave laws than states with lower union densities

Democracy

We find that:

- Significantly fewer restrictive voting laws have been passed in the 17 highest-union-density states than in the middle 17 states (including D.C.) and the 17 lowest-union-density states.
- Over 70% of low-union-density states passed at least one voter suppression law between 2011 and 2019.

Background

A wealth of scholarship documents the positive effects unions have for workers, both those who are unionized and those who are not. We summarize these below.

Higher wages and decreased income inequality. On average, a worker covered by a union contract earns 10.2% more in wages than a peer with similar education, occupation, and experience in a nonunionized workplace in the same industry (EPI 2021e). This wage advantage is known as the “union wage premium.” But unions don’t just help union workers—they help all workers (Bivens et al. 2017). When union density is high, nonunion workers benefit, too, because unions effectively set broader standards—including higher wages—which nonunion employers must meet to attract and retain the workers they need

(Rosenfeld, Denice, and Laird 2016; Mishel 2021). The combination of the direct wage effect for union members and this “spillover” effect for nonunion workers means unions are crucial to raising wages for working people and reducing income inequality (Card 1996, 2001; Card, Lemieux, and Riddell 2018).

Reduced wage gaps. Unions also help to reduce gender and racial/ethnic wage gaps. Hourly wages for women represented by a union are 4.7% higher on average than for nonunionized women with comparable characteristics (EPI 2021d), and research looking at specific cases suggests that unions reduce gender wage gaps for similar jobs within a given workplace (Gould and McNicholas 2017). For example, Biasi and Sarsons (2020) show that the expiration of teacher collective bargaining agreements led to an increase in the wage gap between men and women with similar credentials, implying that the terms of the collective bargaining agreement had previously helped to minimize such wage gaps. Unions have also historically helped and continue to help close wage gaps for Black and Hispanic workers (Farber et al. 2021). Black workers represented by a union are paid 13.1% more than their nonunionized Black peers, and Hispanic workers represented by a union are paid 18.8% more than their nonunionized Hispanic peers (EPI 2021d).

Increased government revenue and decreased government spending. Unionization has a range of positive economic impacts in addition to decreasing wage inequality and closing gender and race wage gaps. Sojourner and Pacas (2018) find that union membership yields a positive “net fiscal impact”—or, to put it simply, unionized workers have more income and therefore pay more taxes. Unions pave the way for more income and wealth-building for workers and therefore more revenue for the government.

Sojourner and Pacas (2018) also find that unionized workers use fewer public benefits. Higher incomes allow workers and their families to be less dependent on government benefits, and unions also help workers win benefits such as health insurance from their employers.

Employer-sponsored benefits including health insurance, retirement, and paid leave. Union workers are far more likely than nonunion workers to be covered by employer-provided health insurance. More than nine in 10 unionized workers have access to employer-sponsored health benefits, compared with just 68% of nonunion workers, and union employers contribute more to their employees’ health care benefits (EPI 2021d). Furthermore, union employers are more likely to offer retirement plans and to contribute more toward those plans than comparable nonunion employers. Union workers are also more likely to have paid sick days, vacation and holidays, more input into the number of hours they work, and more predictable schedules (EPI 2021d).

Strengthened health and safety. Unions also improve the health and safety of workplaces by providing health insurance and paid sick time, requiring safety equipment, and empowering workers to report unsafe conditions without fear of retaliation (Zoorob 2018; Amick et al. 2015). So-called right-to-work legislation that weakens unions has been associated with a roughly 14% increase in the rate of occupational fatalities (Zoorob 2018).

Increased civic engagement and broader community benefits. Beyond wages, benefits, and safety, recent scholarship shows the indirect effect unions have on people’s political and personal attitudes and on the broader community and economy as a whole. Frymer and Grumbach (2021) find that union membership reduces white racial resentment. Feigenbaum, Hertel-Fernandez, and Williamson (2019) analyze the relationship between unions and political advocacy, specifically on policies related to worker empowerment and economic justice. They find that weakening unions (through the enactment of “right-to-work” laws) has significant long-term political and economic effects, such as lower voter turnout, lowered organized labor contributions, less voter mobilization, fewer working-class candidates serving in state legislatures and Congress, and more conservative state policy. These political consequences undoubtedly affect not only the communities in which they take place, but also the broader economy, as the chosen candidates enact economic policies.

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Our analysis in this report supports this existing scholarship on unions. The strong relationship between union density and a range of economic, personal well-being, and democratic outcomes is consistent with the idea that unions focus the political power of workers and result in the advancement and defense of policies that benefit the broad interests of workers, their families, and their communities.

The data we analyze across a wide range of indicators support the notion that through advocating for higher wages and better benefits for members and, more generally, by mobilizing and building grassroots coalitions and acting as one of the main countervailing forces against rising corporate concentration, unions act as a channel for producing and cementing positive economic, health, and democratic outcomes in the communities in which they are active.

Methodology: How we measure union density

First, a brief note on how we measure union density at the state level. In this report, we categorize union density as the share of workers in a state who are members of a union or covered by a collective bargaining agreement. Union density data are averaged across states from 2015 to 2019 to give a more accurate estimate of state unionization rates and avoiding temporary single-year changes. We end at 2019 to avoid any potential distortions related to the 2020–2021 COVID-19 pandemic and ensuing recession. We draw our data from the Economic Policy Institute extracts¹ of the Current Population Survey (CPS) Outgoing Rotation Group (ORG), a nationally representative monthly survey of U.S. households conducted by the Census Bureau on behalf of the Bureau of Labor Statistics.

For the purposes of this analysis, we divide the 50 U.S. states, plus the District of Columbia, into three groups based on their level of union density. These groupings are

Table 1

Share of workers represented by a union ranges from 3.2% in South Carolina to 24.7% in New York

Union density of the 50 U.S. states plus D.C., in descending order and grouped into high-, medium-, and low-union-density states

High union density		Medium union density		Low union density	
NY	24.7%	PA	13.3%	WY	7.7%
HI	23.0%	VT	12.6%	MS	7.5%
AK	19.9%	MD	12.2%	OK	7.3%
WA	19.5%	WV	12.1%	FL	7.3%
CT	17.3%	KY	11.8%	ND	6.9%
RI	17.3%	NH	11.7%	SD	6.8%
NJ	16.8%	DC	11.2%	ID	6.3%
CA	16.7%	DE	11.2%	TN	6.2%
MI	15.8%	MO	10.7%	AZ	6.1%
OR	15.6%	CO	10.6%	VA	5.9%
NV	15.5%	IN	10.3%	LA	5.8%
IL	15.3%	KS	10.3%	AR	5.8%
MN	15.2%	AL	9.6%	UT	5.6%
ME	13.9%	IA	9.6%	TX	5.5%
OH	13.7%	WI	9.0%	GA	5.1%
MA	13.6%	NE	8.8%	NC	3.9%
MT	13.5%	NM	8.3%	SC	3.2%

Notes: Union density is defined as the share of workers in the state who are represented by a union, including union members and other workers who are covered by a union contract, based on the variable “union” from EPI extracts of CPS-ORG microdata.

Source: EPI analysis of 2015–2019 Current Population Survey Outgoing Rotation Group (CPS-ORG) microdata for all workers ages 16 and older.

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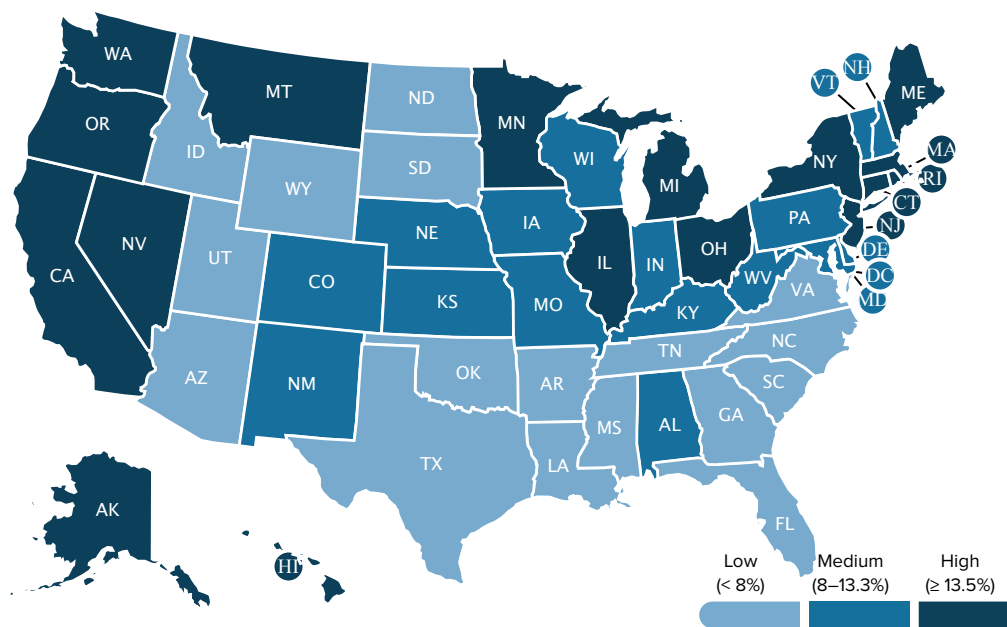
shown in **Table 1**: The 17 states with the highest union densities are “high-union-density” states (with 13.5%–24.7% of workers covered); the next 17 states (including D.C.) are “medium-union-density” states (with 8.3%–13.3% of workers covered); and the remaining 17 are “low-union-density” states (with 3.2%–7.7% of workers covered).

Figure A depicts the data from Table 1 in map form. While there are some regional clusters within the density groups, unionization rates vary nationwide. (An interactive version of Figure A is viewable in the online version of this report at www.epi.org/236748.)

Figure A

Unionization varies widely by state

Union density by state, 2015–2019 average



Notes: Union density is defined as the share of workers in the state who are represented by a union, including union members and other workers who are covered by a union contract, based on the variable “union” from EPI extracts of CPS-ORG microdata.

Source: EPI analysis of 2015–2019 Current Population Survey Outgoing Rotation Group (CPS-ORG) data for all workers ages 16 and older.

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Economic well-being

The first category of well-being we examine is economic well-being, broadly defined as working people having the means to support themselves. We look at the relationship between union density and three indicators related to economic security and stability: the minimum wage, median income, and the unemployment insurance (UI) reciprocity rate. We find that states with higher union density have consistently higher minimum wages, incomes, and UI reciprocity rates than states with lower union density.

Minimum wage

For most people, salary and wages are the main source of income used to cover cost of living. State minimum wages establish a wage floor for the minimum hourly wage employers must pay workers in that state. More than half of U.S. states have passed laws raising their minimum wage above the federal minimum (EPI 2021b). Laws that increase a state’s minimum wage directly boost the pay of the lowest-paid workers—who too often have little bargaining power—by effectively shifting the wage negotiation from one

Figure C

Average state minimum wage is 40% higher in high-union-density states than in low-union-density states

Average minimum wages in high-, medium-, and low-union-density states



Notes: Minimum wage data are current as of 2021. Union density is defined as the share of workers in the state who are represented by a union, including union members and other workers who are covered by a union contract, based on the variable “union” from EPI extracts of CPS-ORG microdata. Low-union-density states are the 17 states with the lowest average union densities from 2015–2019 (all less than 8%). Medium-union-density states are the 17 states (including D.C.) in the middle of the union-density rankings (with union densities ranging from 8.3% to 13.3%). High-union-density states are the 17 states with the highest average union densities from 2015–2019 (greater than or equal to 13.5%). See Table 1 for more detail about these groupings.

Sources: EPI analysis of 2015–2019 Current Population Survey Outgoing Rotation Group (CPS-ORG) microdata for all workers ages 16 and older; [EPI Minimum Wage Tracker](#), updated August 2021.

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between an employer and an individual worker to one between employers and the broader community. Since relative pay plays an important role in wage setting, minimum wages also have an indirect effect on wages above the minimum, by raising the base of comparison for higher earners (Spriggs and Klein 1994). The “ripple effect,” in which employers give nonmandated raises to maintain a similar wage structure after a change in the wage floor (through minimum wage legislation, for example), also has an outsized impact on workers (Wicks-Lim 2006).

While worker productivity has risen over the years, growth of real wages and incomes has been slow or stagnant for most working people for most of the last four decades (EPI 2021c). In the four decades through 2019, low-wage workers (those at the 10th percentile of the wage distribution, that is, those who make less than 90% of all workers) saw their wages rise only 3.3% in inflation-adjusted terms, compared with a rise of 15.1% for the median worker (right in the middle of all wage earners) and 63.2% for high-wage workers (those at the 90th percentile, who make more than 90% of all workers) (Gould 2020a). Workers being paid the federal minimum wage, currently \$7.25 per hour, have actually seen a 30% *fall* in their inflation-adjusted earnings over the last 50 years (Shierholz 2021).

(**Figure B**, an interactive map depicting the geographic variation of union density and 2021

state minimum wages, is viewable in the online version of this report at www.epi.org/236748.)

Unions have played a central role in organizing and mobilizing campaigns to increase state and local minimum wages. The Service Employees International Union (SEIU), for example, has had a crucial role in the successful national Fight for \$15 campaign (Greenhouse 2015). A recent report by the National Employment Law Project estimated that since 2012, Fight for \$15 has helped raise wages for nearly 26 million workers, winning over \$150 billion in additional income (Lathrop, Lester, and Wilson 2021).

As **Figure C** shows, the high-union-density states (listed in Table 1) have a higher average state minimum wage (\$11.40) than the medium- and low-union-density states (at \$9.22 and \$8.10, respectively). The average minimum wage in the high-union-density states is \$3.31 higher—or more than 40% higher—than in the low-union-density states.

Black, Hispanic, and Asian American/Pacific Islander women—along with Black and brown workers as a whole, who have long been overrepresented in low-wage service sectors—have benefited disproportionately from these efforts (Banks 2019). Historically, expansions of the minimum wage have also contributed to closing racial wage gaps (Derenoncourt and Montialoux 2021). In the present, minimum wage campaigns, which are strongly backed by unions, have played a significant role in raising incomes and lowering wage disparities for workers of color (Lathrop, Lester, and Wilson 2021).

Median household income

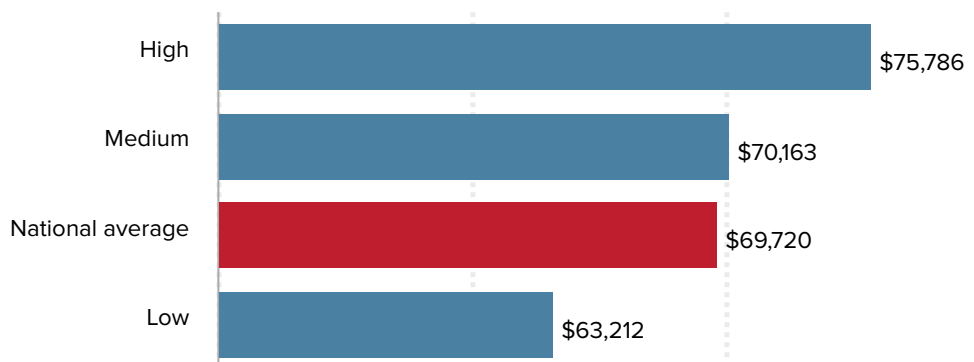
Another key related economic well-being indicator is annual median household income. Income is useful to examine alongside minimum wages because it gives us a picture of what the typical working household actually earns over the course of a year, not just the minimum employers are required to pay an individual worker.

We observe a clear, positive relationship between unionization and median household income across states. The national median income was \$69,720 in 2019. As **Figure D** shows, high-union-density states had an average median income about \$6,000 *higher* than the national average. In comparison, the low-union-density states had an average median income about \$6,500 *lower* than the national average. It is also worth noting that the high-union-density states had an average annual median income over \$10,000 higher than low-union-density states. These results are consistent with the evidence that unions directly raise wages of union workers and, when union density is high enough, also raise the wages of nonunion workers. These wage increases then translate into higher annual incomes.

Figure D

Median household incomes in high-union-density states are more than \$12,000 higher, on average, than median incomes in low-union-density states

Average median household income (2019) in high-, medium-, and low-union-density states



Notes: Union density is defined as the share of workers in the state who are represented by a union, including union members and other workers who are covered by a union contract, based on the variable “union” from EPI extracts of CPS-ORG microdata. Low-union-density states are the 17 states with the lowest average union densities from 2015–2019 (all less than 8%). Medium-union-density states are the 17 states (including D.C.) in the middle of the union-density rankings (with union densities ranging from 8.3% to 13.3%). High-union-density states are the 17 states with the highest average union densities from 2015–2019 (greater than or equal to 13.5%). See Table 1 for more detail about these groupings. Median incomes are by household.

Sources: EPI analysis of 2015–2019 Current Population Survey Outgoing Rotation Group (CPS-ORG) microdata for all workers ages 16 and older; U.S. Census Bureau, “[Historical Income Tables: Households](#),” Table H-8, accessed August 2021.

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Unemployment insurance

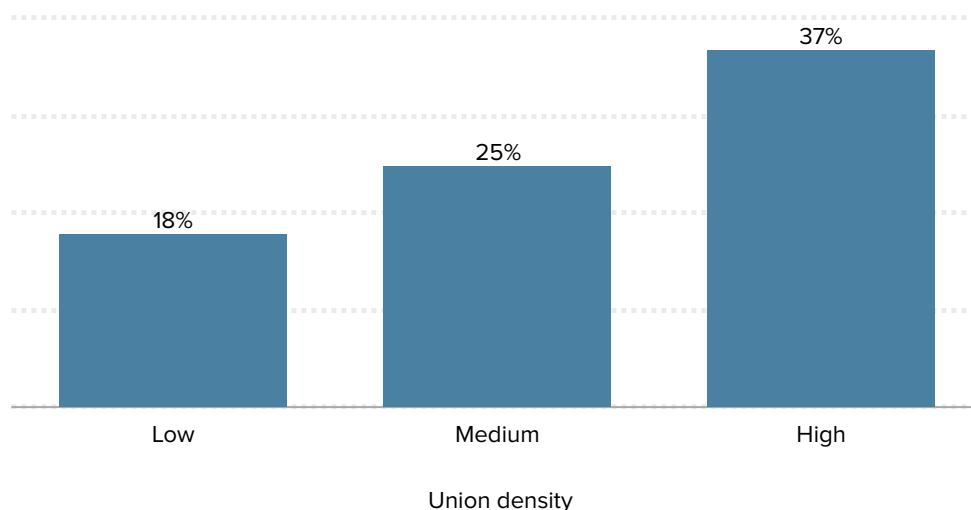
The final measure of economic well-being we examine is the unemployment insurance (UI) reciprocity rate. When a worker is laid off from a job and their household income falls, unemployment insurance helps the worker support themselves and their family until they find another job. The UI reciprocity rate, reported by the Department of Labor, represents the “insured unemployed” as a percentage of the total unemployed—i.e., the share of unemployed workers who actually receive UI benefits. (Note that we are intentionally analyzing only 2019 data to avoid distortions due to the pandemic economy and legislative changes, most notably the creation of several temporary, pandemic-related federal enhancements to the UI system. The 2020 federal emergency programs plugged several key gaps in the state systems and minimized, though did not eliminate, drastic state differences in benefits. The 2019 data represent UI benefits from the states’ regular UI programs only.)

Figure E highlights the positive relationship between unionization and UI reciprocity rates.

Figure E

Unemployed workers are twice as likely to receive unemployment benefits if they live in high-union-density states than if they live in low-union-density states

Average UI recipiency rate (2019) in high-, medium-, and low-union-density states



Notes: The UI recipiency rate in each state is the share of unemployed workers who are receiving unemployment insurance benefits through the state's regular UI program (i.e., not through federal emergency programs such as Pandemic Unemployment Assistance). We use a simple average of UI recipiency rates within the high-, medium-, and low-union-density state groupings. Union density is defined as the share of workers in the state who are represented by a union, including union members and other workers who are covered by a union contract, based on the variable "union" from EPI extracts of CPS-ORG microdata. Low-union-density states are the 17 states with the lowest average union densities from 2015–2019 (all less than 8%). Medium-union-density states are the 17 states (including D.C.) in the middle of the union-density rankings (with union densities ranging from 8.3% to 13.3%). High-union-density states are the 17 states with the highest average union densities from 2015–2019 (greater than or equal to 13.5%). See Table 1 for more detail about these groupings.

Sources: EPI analysis of 2015–2019 Current Population Survey Outgoing Rotation Group (CPS-ORG) microdata for all workers ages 16 and older; Department of Labor Employment & Training Administration, [Unemployment Insurance Data Chartbook](#).

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The high-union-density states had an average UI recipiency rate of 37% in 2019, roughly double the average UI recipiency rate of the lowest-density third of states (18%). In low-union-density states, fewer than one in five workers who applied for UI benefits received them, compared with nearly two in five in high-density states.

The large differences in the UI recipiency rates across states are not based on any particular economic logic. These differences largely reflect the wide scope states have to determine specific features of eligibility criteria, the application process, benefit amounts, and duration of benefits. Many states have made the application and eligibility process difficult in order to cut costs by reducing the number of successful claims (Badger and

Parlapiano 2020; Stewart 2020; Wamsley 2020).

Unions use their influence to increase UI eligibility, ease of access, benefit levels, and benefit duration, to the benefit of all workers, union and nonunion (Hertel-Fernandez and Gould-Werth 2020). In their role as intermediary institutions that can act as a complement to legislated benefits and protections, unions also inform and educate the workers they represent about the unemployment insurance system and guide them through the application process (Walters and Mishel 2003). Recent research has found that unionized workers are 19 percentage points more likely to apply for and receive benefits than nonunionized workers after accounting for worker, job, and state characteristics (Hertel-Fernandez and Gould-Werth 2020). The same research finds that unions can help close large racial gaps in accessing UI.

Summary of economic well-being indicators

Across the states, unionization is consistently associated with higher levels of economic well-being as measured by the level of a state's minimum wage, median annual income, and access to unemployment insurance benefits. In each case, there are clear channels through which unions can—and do—influence these critical economic outcomes.

Personal well-being

The second category of well-being we examine is personal well-being, which we define as an individual's physical and mental health. Within the category of personal well-being, we look at three indicators: health care coverage, Medicaid expansion, and access to paid family and sick leave. As we demonstrate below, states with higher union density are more likely to have higher levels of all three personal well-being metrics.

Access to health insurance

The first marker of personal well-being we examine is access to health insurance. Almost all union workers (94%) have access to health insurance, compared with just 67% of nonunion workers (Gould 2020b). Economic research has documented that unionized workers also face lower direct costs for health care coverage than their nonunionized peers (Buchmueller and DiNardo 2001). Unions are an important channel workers use to secure high-quality health insurance, and when union members gain these benefits, nonunion employers are more likely to offer better compensation, including health care benefits, in order to remain competitive (Mishel 2021).

There are a variety of ways people can access health insurance, whether privately through employer-based programs or direct purchase; through a public program such as Medicaid, Medicare, and the Veterans Administration; or some combination. In 2019 in the U.S., about two-thirds of the population had health insurance coverage through private sources,

including employer-based (Keisler-Starkey and Bunch 2020, Table HIC-4_ACS). Unfortunately, many people fall through the cracks and are unable to access any private or public health insurance programs, either because their employer does not offer a health care plan or because they earn too much or too little to qualify for one of the public programs. This “coverage gap” ensnares over 2 million people each year (Lukens and Sharer 2021). In this section, we examine how the uninsured rate—i.e., the share of a state’s residents who fall into this coverage gap—intersects with union density levels.

Figure F shows a clear negative relationship between state unionization rates and the uninsured rate: States with high union densities have an uninsured population 4.5 percentage points lower, on average, than that of low-union-density states. Put another way, people in low-union-density states are nearly 1.7 times as likely to lack any form of health insurance as their peers in high-union-density states. Unions directly impact health care coverage by bargaining for employer-sponsored health care coverage for employees and their dependents. Having not only access to health insurance, but also some or all of the costs covered by the employer—which unions have successfully negotiated for—greatly improves job quality.

Unionization and health and economic outcomes are deeply intertwined. Access to high-quality health insurance, including health care for dependents, improves household and individual financial security. Investment in health care and health care access has also been linked to other positive economic outcomes, such as boosted income (Raghupathi and Raghupathi 2020). Access to health care also leads to clear positive health outcomes, including a lower rate of chronic illness and a higher likelihood of receiving preventative care for critical health conditions (Tolbert, Orgera, and Damico 2020; Washington 2001). In our analysis, we see the same pattern for personal well-being as for economic well-being: States with high unionization not only have higher minimum wages and higher median household incomes, but they also have higher health insurance coverage rates than states with low unionization.

Medicaid expansion

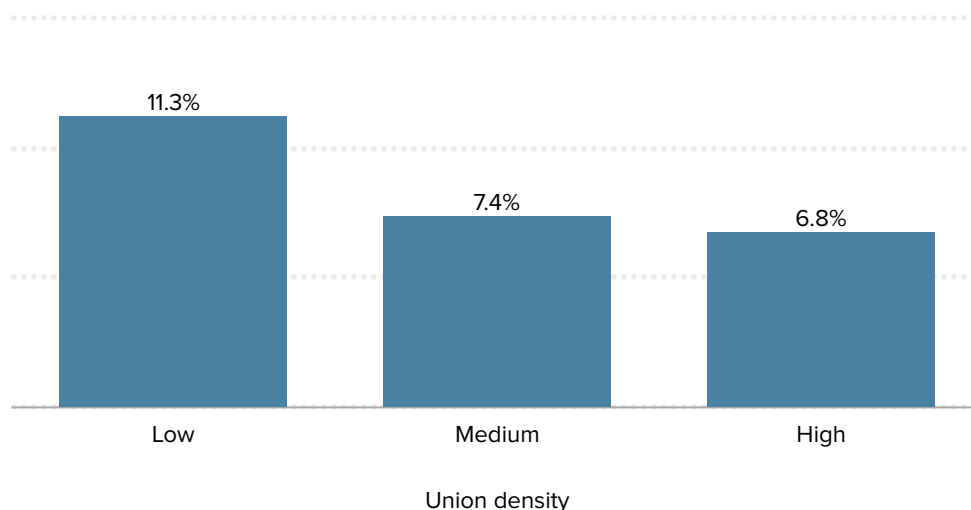
To fully understand how unions intersect with health care coverage, we examine—alongside the uninsured rate—whether a state has expanded Medicaid under the Affordable Care Act (ACA) to broaden eligibility to more low-income people. The Medicaid public insurance program provides critical health coverage to families and individuals with low incomes. As with the unemployment insurance system, the Medicaid program has broad federal guidelines but is administered by states, with a 2012 Supreme Court decision ruling that Medicaid eligibility and expansion could be decided by states. As a result, eligibility, benefits, and coverage differ greatly by state.

In the states that did not expand their Medicaid programs, eligibility is limited to an annual income of just under \$9,000 for a family of three (41% of the poverty line). By contrast, states that have adopted Medicaid expansion have extended eligibility to people with incomes up to \$17,609 for an individual (138% of the poverty line) (Garfield, Orgera, and

Figure F

Residents of high-union-density states are more likely to have health insurance

Average uninsured rate (2019) in high-, medium-, and low-union-density states, 2019



Notes: Union density is defined as the share of workers in the state who are represented by a union, including union members and other workers who are covered by a union contract, based on the variable “union” from EPI extracts of CPS-ORG microdata. We average union density data across 2015 to 2019 for each state to give a more accurate estimate of states’ typical unionization rates over time. Low-union-density states are the 17 states with the lowest average union densities from 2015–2019 (all less than 8%). Medium-union-density states are the 17 states (including D.C.) in the middle of the union-density rankings (with union densities ranging from 8.3% to 13.3%). High-union-density states are the 17 states with the highest average union densities from 2015–2019 (greater than or equal to 13.5%). See Table 1 for more detail about these groupings.

Sources: EPI analysis of 2015–2019 Current Population Survey Outgoing Rotation Group (CPS-ORG) microdata for all workers ages 16 and older; Keisler-Starkey and Bunch, “[Health Insurance Coverage in the United States](#),” U.S. Census Bureau, September 2020.

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Damico 2021). Expanding Medicaid would help to close the “coverage gap” and provide health insurance to the estimated 2 million people who do not qualify for Medicaid and who do not earn enough to be eligible for other subsidized plans under the ACA (Simmons-Duffin 2021). Research has found that Medicaid expansion has improved access to health care; improved health outcomes, including fewer premature deaths; lowered uncompensated costs; bolstered financial security; boosted economic mobility; and more (CBPP 2020).

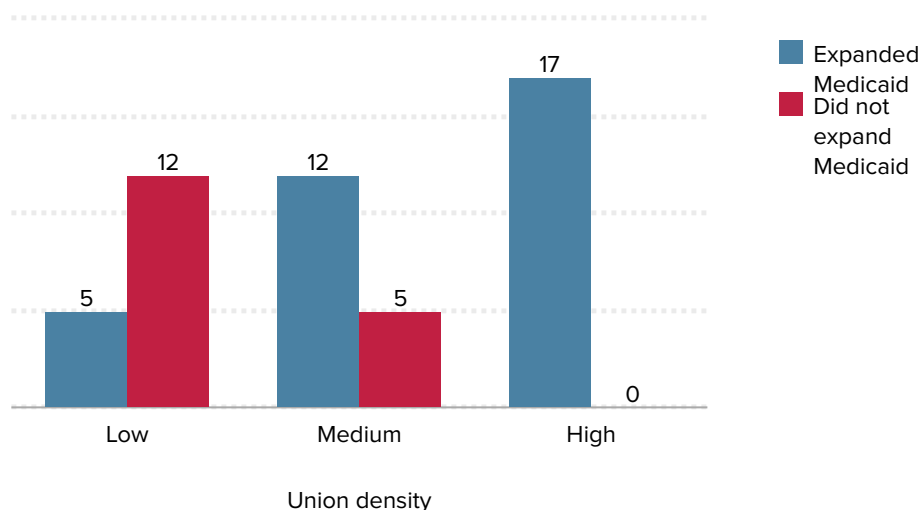
As **Figure G** shows, there is a clear difference between high- and low-union-density states in terms of Medicaid expansion. By 2019, all 17 high-union-density states had expanded Medicaid, compared with just five of the low-union-density states. Over 70% of the low-union-density states have not expanded Medicaid.

(The interactive map in **Figure H**, viewable in the online version of this report at

Figure G

The 17 highest-union-density states have all adopted the Affordable Care Act’s Medicaid expansion

Number of high-, medium-, and low-union-density states that had adopted the Medicaid expansion as of 2019



Notes: Union density is defined as the share of workers in the state who are represented by a union, including union members and other workers who are covered by a union contract, based on the variable “union” from EPI extracts of CPS-ORG microdata. Low-union-density states are the 17 states with the lowest average union densities from 2015–2019 (all less than 8%). Medium-union-density states are the 17 states (including D.C.) in the middle of the union-density rankings (with union densities ranging from 8.3% to 13.3%). High-union-density states are the 17 states with the highest average union densities from 2015–2019 (greater than or equal to 13.5%). See Table 1 for more detail about these groupings.

Sources: EPI analysis of 2015–2019 Current Population Survey Outgoing Rotation Group (CPS-ORG) microdata for all workers ages 16 and older; Kaiser Family Fund, “[Status of State Medicaid Expansion Decisions](#),” September 8, 2021.

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www.epi.org/236748, shows specifically which states had and had not expanded Medicaid by 2019, along with each state’s union density.)

Unions have long been central in supporting grassroots campaigns and coalitions to expand Medicaid. Broad union political support for Medicaid can pave the way for more and more states—even low-union-density states—to follow suit with successful Medicaid ballot initiatives. For example, the Fairness Project, funded by the SEIU United Healthcare Workers West in California, was instrumental in getting Medicaid expansion initiatives on ballots in Idaho, Utah, and Nebraska in 2018; all three initiatives passed (Kodjak 2018). Recently, union-backed ballot initiatives have also met with success in other low- and medium-union-density states such as Kentucky, Missouri, Arkansas, and Oklahoma (Kliff 2020; Levey 2018).

It is worth noting that the data underlying Figures G and H also underscore an important connection between unionization rates, health outcomes, economic security, and racial disparities: Many of the low- and medium-density-states that have the highest shares of

uninsured residents, and many of the states that have not expanded Medicaid, also have relatively high concentrations of Black workers.

For example, out of the 17 low-union-density states we categorize, 10, or about 59%, had a share of Black workers in the labor force higher than the national average in 2020 (BLS 2021). This relative concentration persists within the subcategories we examine as well; for example, of the 12 low-union-density states that had *not* expanded Medicaid as of 2019, about two-thirds have a Black working population above the national average in 2020 (the national Black labor force share was about 12.6%). Given the ugly racist origins of “right-to-work” anti-union laws, it is not surprising that these states with relatively large Black populations have continued to suppress unions and worker collective action (Ros n.d.).

Conversely, the surprising victory of Medicaid expansion in low-union-density, high-Black-population states such as Louisiana and Virginia suggests that when unions advocate for popular issues across the nation, the momentum can spread, and further victories can contribute to lowering racial and economic disparities despite the odds and even in states with a low union presence.

Union-supported Medicaid expansions are one more example of a “spillover effect” and channel through which unionization benefits not only union members, but also members of the broader community.

Paid sick and family leave

The final personal well-being metric we examine is access to paid sick leave and paid family and medical leave. Specifically, we look at which states have passed laws to ensure that workers have access to these important benefits. Paid sick leave allows workers to take time off when they are sick without worry over loss of income, while paid family and medical leave allows workers to take extended time off to address a serious health condition, to care for a new child, or to care for an ill family member (Gould 2018). Paid sick and family leave is necessary not only for physical health, but for mental health as well—mitigating the stress of illness or family change by providing economic and job security during extended time off work. Significant research has shown, for example, that paid parental leave significantly improves maternal mental health by allowing recovery and adjustment time (Romig and Bryant 2021).

Thanks to unions’ collective bargaining successes, union workers have greater access to paid sick days than nonunion workers: More than nine in 10 workers—93%—covered by a union contract have access to paid sick days, compared with only 75% of nonunion workers (BLS 2020). This means that 25% of nonunion workers do not have access to even a single day of paid sick leave. Moreover, access to paid sick time is vastly unequal—94% of the highest-wage workers have access to paid sick days while only 31% of the lowest-paid workers do. Many states and localities are beginning to address this inequity by passing laws requiring employers to provide paid sick leave.

The situation is even bleaker for workers who need family and medical leave—whether

unionized or not. Only 20% of all workers have access to paid family and medical leave, meaning that nearly 80% of workers do not (BLS 2020 Table 31). This presents workers with a choice between their careers and their caregiving responsibilities precisely when they need their paychecks the most, such as following the birth of a child or when they or a loved one falls ill. To ensure workers do not have to make that difficult choice, we need a national paid family leave program. However, in the absence of such a program, several states have enacted paid family leave laws.

Unions have played an integral role in coalition campaigns to pass paid sick day and family leave laws at the state and local levels, making paid leave a key policy plank alongside higher wages (Brown 2013; MacGillvary and Jacobs 2018; Salsberg 2018; Thoet 2016).

Figure I shows that nearly half of high-union-density states have passed both paid sick and family leave; in contrast, none of the low-union-density states have. While the majority of U.S. states still, unfortunately, do not have either paid sick or family leave laws, the tangible impact that unions have had in their advocacy for such laws is evident in the pattern of progress so far.

Democratic well-being

The final category we examine is democratic well-being, specifically the right to vote. Recent sustained attacks on this fundamental right threaten to undermine democratic stability. We look at legislation restricting voting and find that there is a strong correlation between voting restrictions and low union density.

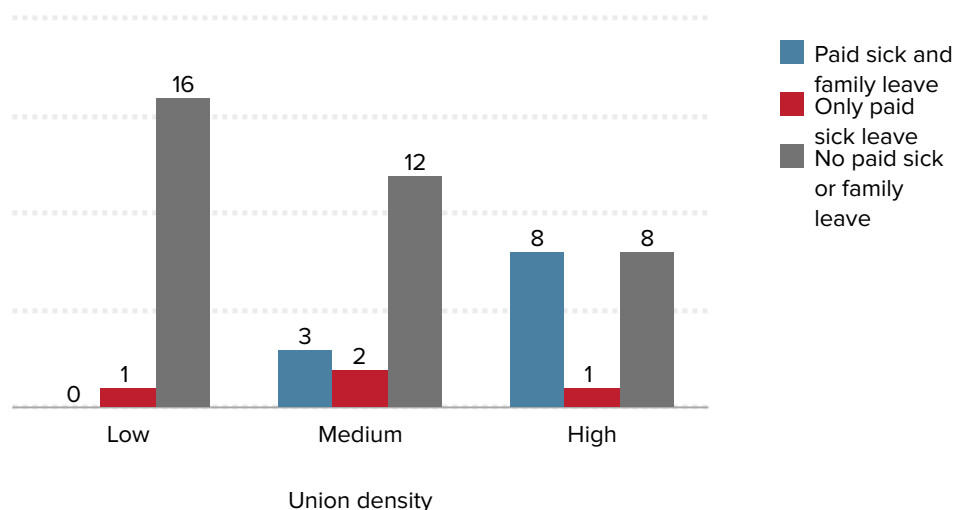
The right to vote is a core tenet of our democracy, won and enshrined after years of sustained protest and activism. Yet many states continue to take actions that disproportionately disenfranchise people of color (Johnson and Feldman 2020). The number of voter suppression laws enacted across the country is high and rising, and the voting rights of all citizens—especially the voting rights of people of color—are under attack. States have passed restrictions on when and where early voting can take place, when and how people can register to vote, who can vote by mail, and what types of identification are required to vote, among other forms of voter suppression. These barriers to voting have disproportionately impacted racial minorities, poor people, and young and old voters, all of whom are less likely to have the accepted voter ID (Brennan Center n.d.).

Figure J shows the relationship between union density and voter suppression legislation in the 50 states. (Note that D.C.—which is part of the medium-union-density group in other charts—is not included in the voter restrictions data.) A majority of low- and medium-union-density states have passed at least one voter restriction bill, while the vast majority of high-union-density states have passed none. Among high-union-density states, 13 out of 17 did not pass any voter restrictions between 2011 and 2019, while only seven of the medium-union-density states and five of the low-union-density states can claim this distinction. Nine medium-union-density states and 12 low-union-density states passed

Figure 1

High-union-density states are more likely to have passed paid leave laws

Number of high-, medium-, and low-union-density states with paid leave laws, 2019



Notes: Union density is defined as the share of workers in the state who are represented by a union, including union members and other workers who are covered by a union contract, based on the variable “union” from EPI extracts of CPS-ORG microdata. We average union density data across 2015 to 2019 for each state to give a more accurate estimate of states’ typical unionization rates over time. Low-union-density states are the 17 states with the lowest average union densities from 2015–2019 (all less than 8%). Medium-union-density states are the 17 states (including D.C.) in the middle of the union-density rankings (with union densities ranging from 8.3% to 13.3%). High-union-density states are the 17 states with the highest average union densities from 2015–2019 (greater than or equal to 13.5%). See Table 1 for more detail about these groupings.

Sources: EPI analysis of 2015–2019 Current Population Survey Outgoing Rotation Group (CPS-ORG) microdata for all workers ages 16 and older; Bipartisan Policy Center, *State Paid Family Leave Laws Across the U.S.*, February 10, 2020; A Better Balance, *Overview of Paid Sick Time Laws in the United States*, updated October 18, 2021.

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voting restrictions. A total of 26 voter suppression laws were passed among the 17 low-union-density states between 2011 and 2019.

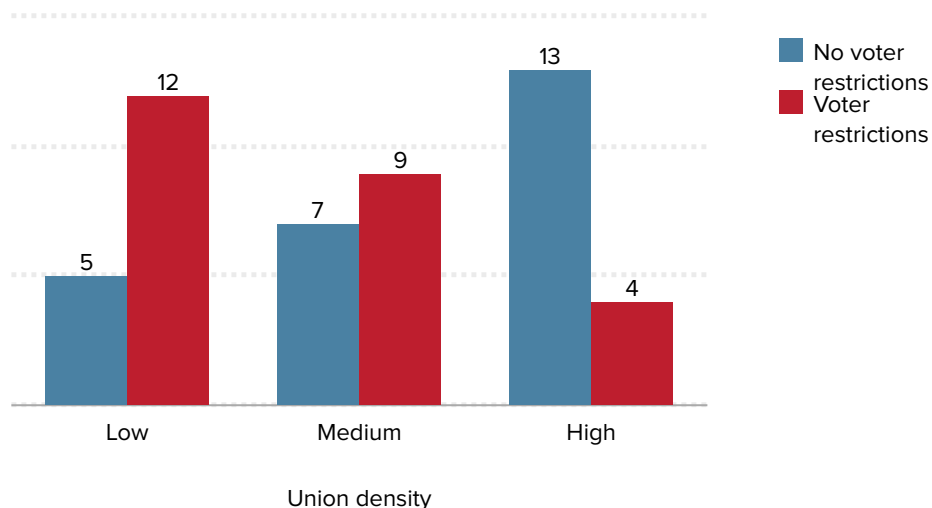
Unions have, both historically and in the present, been central to the fight to protect voting rights. Historically, labor and workers’ rights were a central focus of the civil rights movement and went hand in hand with voting rights (Moore 2021). A. Philip Randolph, one of the leaders of the March on Washington in 1963, was also a leader of the Brotherhood of Sleeping Car Porters (BSCP), one of the most influential all-Black labor unions. In the 1960s, the AFL-CIO lobbied and offered testimony for the Civil Rights Act of 1964 and the Voting Rights Act of 1965. In March 2021, after Georgia passed voter suppression bill SB 202, AFL-CIO President Richard Trumka wrote that voter suppression laws were “aimed at silencing working people of color across the state” (AFL-CIO 2021).

Through long-standing advocacy and work to protect the vote, unions have linked voting

Figure J

Voter restriction bills are more likely to pass in low-union-density states than in high-union-density states

Number of high-, medium-, and low-union-density states that have passed restrictive voting laws, 2011–2019



Notes: Union density is defined as the share of workers in the state who are represented by a union, including union members and other workers who are covered by a union contract, based on the variable “union” from EPI extracts of CPS-ORG microdata. Low-union-density states are the 17 states with the lowest average union densities from 2015–2019 (all less than 8%). Medium-union-density states are the 16 states (D.C. is not included in this chart) in the middle of the union-density rankings (with union densities ranging from 8.3% to 13.3%). High-union-density states are the 17 states with the highest average union densities from 2015–2019 (greater than or equal to 13.5%). See Table 1 for more detail about these groupings.

Sources: EPI analysis of 2015–2019 Current Population Survey Outgoing Rotation Group (CPS-ORG) microdata for all workers ages 16 and older; Brennan Center for Justice, “[State Voting Bills Tracker 2021](#),” last updated May 28, 2021.

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rights to workers’ rights. To this day, unions continue to mobilize workers to vote. Union voter mobilization has broad effects, including helping to determine which political leaders are elected and what occupational backgrounds they come from. Sojourner (2012) finds that unions promote election of people from working- and middle-class jobs into political leadership.

Conclusion

In this report, we have sought to demonstrate that the benefits of unionization extend far beyond the workplace. High union density is consistently associated with a much broader set of positive spillover effects across multiple dimensions. Not only do unions directly benefit the workers they represent, but their political advocacy helps to drive an array of

strongly positive outcomes more broadly, especially in states where unions represent a sizeable share of the workforce. These positive outcomes include wage increases, better health benefits, easier access to unemployment insurance, access to paid sick leave, access to paid family and medical leave, and unrestricted voting opportunities.

However, union density levels across the country are not as high as they could be. While nearly half of all nonunion workers say they want a union in their workplace, only 12% of all workers are covered by a union contract (Brenan 2021; EPI 2021d). Current law places too many obstacles in the way of workers trying to organize and gives employers too much power to interfere with workers' free choice (Mishel, Rhinehart, and Windham 2020). It is therefore critical that policymakers enact reforms that restore a meaningful right to organize and collectively bargain. One simple way to help accomplish this would be to pass the Protecting the Right to Organize (PRO) Act, which will help restore the right to organize and give workers access to a union and the well-being it promotes.

Unionization can be a key driving force as we continue to build an equitable recovery and invest in the creation of jobs with good wages and access to benefits (Hersh 2021). Building union density is not just a worker or workplace issue, but it is also a mechanism to uplift families and communities. The relationship we have demonstrated between high union density and higher household incomes, access to health care and paid leave, and fewer voting restrictions highlights the importance of protecting the right of workers to organize. This right could be a fundamental component in strengthening economic security, quality of life, civil and voting rights, and racial justice in our communities.

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Note

1. The extracts are publicly available. See EPI 2021a.

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