
ECONOMICS, LABOR, & BUSINESS

graduates enter the job market. During the 1970s, one-third of these recent graduates had to accept jobs below the normal professional-managerial level. Levitan expects the mismatch to continue.

Workers whose spouses are also holding down jobs, who are relatively independent financially, highly educated, and have children are likely to ask for two things: more flexibility in their working hours and more paid leisure time. Employers will probably go along. But that is no revolution. After all, Levitan concludes, those are things that workers have always sought and won in increments.

A Left Turn By Big Labor

"Labor's Bad Bargain: The AFL-CIO Lurches Left" by Max Green, in *Policy Review* (Fall 1984), Heritage Foundation, 214 Massachusetts Ave. N.E., Washington, D.C. 20002.

Leftists have long criticized the American labor movement for its political conservatism. Now, says Green, a former labor union official, they have less room for complaint.

He contends that the American Federation of Labor and Congress of Industrial Organizations (AFL-CIO), which includes 96 labor unions representing 13.7 million workers, is veering sharply to the left.

There was some truth in the radicals' old complaints. Under the leadership of Samuel Gompers (1850–1924), who founded the American Federation of Labor in 1886, the U.S. labor movement aimed not to overthrow the capitalist system (as Marxists urged), or even to seek gains through politics, but to win better wages and working conditions for unionized workers through collective bargaining. Labor's political involvement grew during the New Deal, but it still kept partisan politics at arm's length. As an AFL-CIO official once said of George Meany (AFL-CIO president, 1955–79): "Where he agreed with the liberals he was *with* them, but he was not *part* of the liberal movement. He was the leader of the labor movement, a broad spectrum from far left liberals to far right conservatives."

By the late 1970s, Meany was beginning to change his tune. The key reason, in Green's view, was Big Labor's ebbing strength. In 1955, the AFL-CIO represented about 30 percent of the nation's nonfarm workers; 20 years later, only some 15 percent.

Meany decided that protectionist trade legislation and revised federal labor laws were needed to stem the membership decline. But Big Labor lacked the political muscle to push such measures through Congress on its own. Meany and his successor, Lane Kirkland, therefore forged a political alliance with "liberal-left" groups. Because of these new friendships, Green contends, "Labor is no longer free to speak its own mind."

To court civil-rights groups, the AFL-CIO has endorsed racial hiring quotas, which it long opposed. To curry favor with feminist organizations, it supports "comparable worth"—the principle that people with different but "comparable" jobs (e.g., a secretary and a truck driver) re-

ECONOMICS, LABOR, & BUSINESS

ceive the same wage—even though this would limit a union's freedom to negotiate wages. And the AFL-CIO's fervent anticommunism is largely a thing of the past. It opposes military aid to the government of El Salvador, besieged by Marxist-Leninist guerrillas, and only mildly condemns Nicaragua's Sandinista regime.

"What has labor got for all its compromising of principle?" Green asks. Nothing. Nor, he predicts, is it likely to gain much more while a majority of Americans, and a majority of union members, oppose so many of the causes it has embraced.

SOCIETY*Controlling U.S.
Medical Costs*

"Public Attitudes about Health-Care Costs: A Lesson in National Schizophrenia" by Robert J. Blendon and Drew E. Altman, in *The New England Journal of Medicine* (Aug. 30, 1984), 1440 Main St., P.O. Box 9140, Waltham, Mass. 02254.

Faced with a hefty and fast-growing national bill for medical care, Americans are telling public-opinion pollsters that they would welcome an overhaul of the U.S. health-care system—as long as no one asks them to make any sacrifices.

In 1982, total U.S. health-care outlays (including government and private spending) reached \$322 billion—about 11 percent of the gross national product (GNP). By the year 2000, report Blendon and Altman, both analysts at the Robert Wood Johnson Foundation, the annual cost could reach \$1.9 trillion, or 14 percent of GNP. At \$1,550 per person per year, U.S. expenditures already far exceed those of Great Britain (\$400), France (\$800), and West Germany (\$900).

Fifteen public-opinion surveys conducted since 1981 have consistently picked up "schizophrenic" attitudes toward cost containment, the authors say. Majorities regularly inform pollsters that rising costs are the health-care industry's Number One problem *and* that the United States spends too little on health services. Two out of three Americans think that federal health-care spending should be increased; 59 percent favor a national health-insurance program, even if a tax hike is needed to pay for it.

Underlying these seemingly contradictory views are two others—"widespread discontent with the nation's health-care system and pervasive satisfaction with personal medical care."

In sum, Americans remain very attached to "Doc," the trusted family physician. Two-thirds of those polled accuse doctors of being money grubbers, but 72 percent find no such fault with their own physicians. Most Americans balk at the idea of using health-maintenance organizations or medical clinics, though they offer cheaper service than doctors in private practice. On the other hand, 66 percent would gladly require