THE IMPORTANCE OF WORK IN FUNDAMENTAL CAUSE THEORY

B R U C E L I N K
U N I V E R S I T Y O F C A L I F O R N I A R I V E R S I D E
POSE AND REFLECT ON TWO QUESTIONS

• What can a focus on work do for fundamental cause theory?

• What can fundamental cause theory do for a program of research on work?
WORK STRUCTURES MAJOR HEALTH RELEVANT ASPECTS OF OUR LIVES

• Exposures – repetitive movements, chemicals, dangerous activities, nasty bosses, stress, shift work etc.

• Income, prestige/honor, authority, power, access to health care, social networks, a sense of meaning and value.

• It’s one important place where discrimination takes place, sexual harassment occurs, implicit biases find subtle expression and where one needs to be vigilant in avoiding or coping with these things.

• Additionally so many quotidian aspects of life are organized around work -- how we get there, who we interact with, what’s for lunch, where the water comes from.

• Interdisciplinary

• FCT as one Lense
FUNDAMENTAL CAUSE THEORY

• Fundamental Cause Theory seeks to explain the persistence of health inequalities in different places and at different times.

• We identify socioeconomic status and racism as fundamental causes
  • Each is important for multiple disease outcomes
  • Through multiple replaceable mechanisms
  • Mechanisms are replaced in different places and at different times so as to reproduce the fundamental relationship.

“Fundamental Cause” (FC) and “Replaceable Mechanisms” (RM)

If a mechanism linking a fundamental cause to an outcome is blocked, the fundamental cause will find expression through another mechanism thereby preserving the fundamental relationship.
THE THEORY PROPOSES A DIFFERENT TYPE OF CAUSE

• Not just input → output.

• The theory predicts a system of relationships – multiple risk and protective factors and multiple disease outcomes.

• And at its essence a fundamental cause is not a cause of outcomes but a cause of causal relationships. Something that leads to the replacement of causes.
MAGIC? HOW DOES THIS HAPPEN?

- **SES**
  - People use flexible SES-related resources of knowledge, money, power, prestige, and beneficial social connections to scramble individually and collectively to obtain health advantageous circumstances for themselves and those in their circle of caring.

- **Racism**
  - People seeking to maintain their privileged positions in racial hierarchies deploy racism to maintain their advantage thereby harming the health of those who are the target of the racism.
• If fundamental cause theory is correct agentic action of those higher up reliably creates a spread in health fortunes across places and times.

• Now that could sound a bit abstract -- let me make it more concrete by moving no further than within my own circumstances.

Wife Co-Author Jo Phelan

Daughter
MY DAY

- Safe walk in well kept park, 20 mins on elliptical, fiber.
- House – quiet, safe, not too polluted, police are friendly.
- Seat belt, tires high quality anti-lock brakes, reliable
DAY TIME

• Lot 50, work 3rd floor, choice of stairs or elevator
• Sedentary all day but in an ergonomic chair
• Place of work negotiates my health care package – it is comprehensive.
• No toxic fumes, dangerous machines, bookshelves are battened down and I have a nice boss
EVENING

• Relatively healthy dinner.

• Spousal support

• Comfortable, quite place to sleep
• Wife knows about my family history of stroke and so has stroke symptoms fastened to refrigerator.
• Heart Attack? – take an uncoated aspirin.
• Untoward health event – is there expertise in your network for information and the best referral?
Health relevant circumstances embedded in multiple aspects of our lives – a massive multiplicity perhaps. We are often unaware
- Not immediately consequential for health
- We think about them in terms other than health
- Only important in rare circumstances

This massive multiplicity is shaped by our resources – knowledge, money, power, prestige and beneficial social connections.

And then either through these resources or independently major societal fault lines of “us them” – fault lines supported by racism and stigmatization also shape this massive multiplicity of health relevant circumstances.
Social Shaping

- Resources, racism and stigmatization shape access to health-relevant circumstances like a magnet shapes patterns of filings:

- We expect patterns of health and mortality to result.
“FLEXIBLE” RESOURCES – KNOWLEDGE, MONEY, POWER, PRESTIGE, BENEFICIAL SOCIAL CONNECTIONS

• Flexible – because they are broadly useful across times and places.

• When a new risk emerges, or a new protective factor is discovered, the use of flexible resources shapes who benefits and who is harmed.

• Mechanisms are replaced.
When people hear “fundamental cause” they often think the cause furthest to the left in a causal diagram or at the top of some multi-leveled model.

But the key concept in FCT is “flexible” broadly useful resources. What people actually use to gain a health advantage.

But these flexible resources come from somewhere.
CENTRALITY OF WORK

- Where these flexible resources come from is complex.
- But a major source/context is work.
- Knowledge, money, power, prestige and beneficial connections.
- Also where discrimination occurs -- the restricting of people’s freedom to pursue ends they desire.
WHAT WORK DOES FOR FCT

- So if you buy or partially buy FCT and you want to address the processes it directs attention to then addressing work makes sense.
- Work is such an important source of the resources the theory suggests are essential.
- So what an emphasis on work does for FCT is to specify a context where the distribution of flexible resources can be altered by intervention or policy.
WHAT CAN FCT DO FOR A PROGRAM OF RESEARCH ON WORK?

• First, the lens idea – if you think of work from a FCT perspective you will be reminded of the importance of flexible resources and the impact of racism and stigmatization.
• Second, if you are concerned about the reproduction of health inequalities in the work context, FCT gives you a way of thinking about how to address persistence.
• Third, it can help you avoid an excessive burrowing into the mechanistic linkages involved in more proximal causes to the exclusion of inequality generating processes.

• Whac-a-Mole
CAN FLEXIBLE RESOURCES IN THE WORK CONTEXT BE ALTERED?

• Distribution of flexible resources have been dramatically altered over time.

• Relevant to health disparities flexible resources are distributed unequally in work settings.

• Plausible evidence links inequalities in the distribution of flexible resources to discrimination.
MONEY
COMPENSATION/INCOME SHARE OVER TIME
Worker Pay Has Not Kept Pace With Productivity Since the 1970s

U.S. productivity and average hourly compensation growth, 1948–2018

Source: Economic Policy Institute
The Richest Americans Have Had the Fastest Income Growth

Growth in U.S. before-tax income, 1979-2016

Source: Congressional Budget Office
DISTRIBUTION OF FLEXIBLE RESOURCES OF POWER AND PRESTIGE
Women Are Scarce at the Top and Overrepresented at the Bottom

U.S. men and women as a share of minimum wage workers and Fortune 500 CEOs, 2016

Sources: U.S. Department of Labor and Fortune
People of Color Are Scarce at Top and Overrepresented at Bottom

U.S. Black and Latino representation, 2018

- Fortune 500 CEOs
- Workers who would directly benefit from a minimum wage increase to $15
- U.S. population

Sources: Census Bureau, Economic Policy Institute, Fortune, Black Enterprise, and Al Día News
UNEQUAL DISTRIBUTION OF FLEXIBLE RESOURCE BY GENDER AND RACE ETHNICITY
Black Unemployment Runs About Twice as High as for Whites

U.S. unemployment rate by race, last month of the year, 2010-2019

Source: Bureau of Labor Statistics
FIGURE 1.
Women's Median Annual Earnings as a Percentage of Men's Median Annual Earnings for Full-Time, Year-Round Workers, 1960–2015

Source: AAUW analysis of data from Proctor et al., U.S. Census Bureau, Income and Poverty in the United States: 2015
FIGURE 3.
Median Annual Earnings, by Race/Ethnicity and Gender, 2015

<table>
<thead>
<tr>
<th>Race/Ethnicity and Gender</th>
<th>Women</th>
<th>Men</th>
<th>% Women's earnings as a percentage of men's earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic or Latina/o</td>
<td>$29,949</td>
<td>$32,493</td>
<td>92%</td>
</tr>
<tr>
<td>African American</td>
<td>$34,426</td>
<td>$38,243</td>
<td>90%</td>
</tr>
<tr>
<td>White (non-Hispanic)</td>
<td>$42,026</td>
<td>$55,166</td>
<td>76%</td>
</tr>
<tr>
<td>Asian</td>
<td>$49,628</td>
<td>$60,897</td>
<td>81%</td>
</tr>
<tr>
<td>Native Hawaiian and Other Pacific Islander</td>
<td>$33,091</td>
<td>$39,510</td>
<td>84%</td>
</tr>
<tr>
<td>American Indian and Alaska Native</td>
<td>$31,610</td>
<td>$36,465</td>
<td>87%</td>
</tr>
</tbody>
</table>
DISCRIMINATION AS A SOURCE OF UNEQUAL DISTRIBUTION OF FLEXIBLE RESOURCES
• Correll notes that there is a large wage and occupational prestige gap between men and women in many countries.
• Correll et al. propose that a motherhood penalty may be a partial explanation.
• Women are penalized for being a parent – men are not.
• In a laboratory experiment equally qualified women who are randomly assigned to identification as a mother are seen as less competent and assigned lower recommended salaries than women without children.
• In an audit study of actual job openings mothers receive significantly fewer call backs than women without children.

META ANALYSIS OF AUDIT STUDIES OF RACE ETHIC DISCRIMINATION IN HIRING
MODEST DECLINE IN DISCRIMINATION FOR LATINOS?: META-ANALYSIS OF AUDIT STUDIES

QUILLIAN ET AL. (PNAS 2017 114: 10870-75.)
NO DECLINE IN DISCRIMINATION FOR AFRICAN AMERICANS: META-ANALYSIS OF AUDIT STUDIES

QUILLIAN ET AL. (PNAS 2017 114: 10870-75.)
SUMMARY

• Fundamental cause theory seeks to account for the persistence of health inequalities across time and place.
• Use of flexible resources in different places and times is how the theory seeks to explain the persistence.
• Work is a critical context in which flexible resources – knowledge, money, power, prestige and beneficial social connections -- are allocated.
• This allocation process is malleable.
• At the current time it is also unequal and unfair due to discrimination.
• A program of research focused on work must focus on the complexity of the work experience.
• However, if blocking the persistence of health inequalities is a goal inequalities in the distribution of flexible resources must be addressed.
• Otherwise you will end up in a lifelong, nightmare inspired game of Whac-a-mole.