

Back to Class and Status: Or Why a Sociological View of Social Inequality Should Be Reasserted

De vuelta a la clase y el estatus: por qué debe reivindicarse una perspectiva sociológica de la desigualdad social

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Key words

Social inequality • Social class • Social status • Social mobility • Economists • Epidemiologists

Palabras clave

Desigualdad social • Clase social • Estatus social • Movilidad social • Economistas • Epidemiólogos

Abstract

Of late, issues of social inequality have assumed a new political centrality in many western societies. However, in much discussion of these issues, sociological approaches to the analysis of social inequality have been disregarded, especially in the work of economists and epidemiologists. The main features of the sociological approach are the emphasis given to inequality in a relational rather than a merely attributional sense, and to the distinction between social class and social status as two qualitatively different forms of social stratification. Two cases serve to illustrate the limitations and dangers that result from neglecting the conceptual and empirical work undertaken by sociologists: the study of intergenerational social mobility by economists and the study of the consequences of social inequality for health and related social problems by epidemiologists.

Resumen

Las cuestiones relativas a la desigualdad social han adquirido recientemente una nueva centralidad política en muchas sociedades occidentales. Sin embargo, las aproximaciones a la desigualdad social que han realizado los sociólogos han sido ignoradas, especialmente en el trabajo de economistas y epidemiólogos. Los principales rasgos del enfoque sociológico son el énfasis en la desigualdad entendida en un sentido relacional más que simplemente atributivo y la distinción entre la clase social y el estatus social como dos formas cualitativamente diferentes de estratificación. Se presentan dos casos para ilustrar las limitaciones y los peligros que resultan de ignorar el trabajo empírico y conceptual de los sociólogos: el estudio de los economistas sobre la movilidad social intergeneracional y el estudio de los epidemiólogos acerca de las consecuencias de la desigualdad social para la salud y otros problemas sociales relacionados.

INTRODUCTION

During the period of the 'long boom', from the end of the Second World War through to the 1970s, it was widely believed that social inequalities, of both condition and opportunity, were in long-term decline. From the side

of economics, the 'Kuznets curve' was taken to show that income inequality widened in the 'take-off' into industrialism but then narrowed as economic growth continued (Kuznets, 1955). And it further appeared that, in more advanced societies, the transmission of economic advantage and disadvantage from

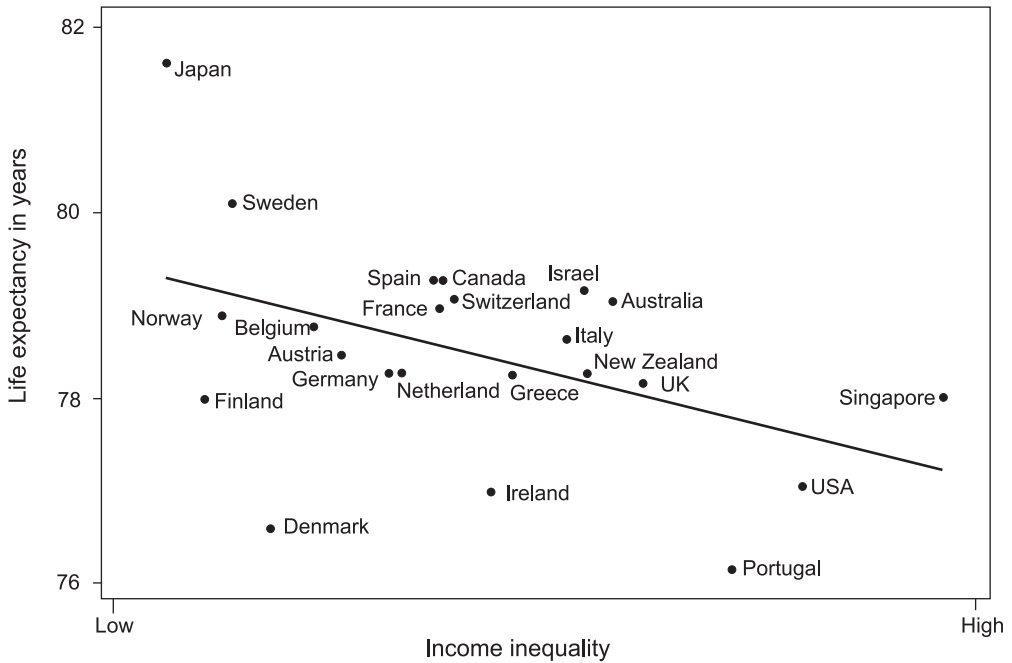
one generation to the next had greatly weakened, as indicated by the quite low correlation existing between parents' incomes and the incomes of their children (e.g. Becker and Tomes, 1979). Crucial factors in these developments, it was argued, were the increasing importance in economic growth of human capital relative to physical capital and the expansion and reform of educational systems. From the side of sociology, analogous claims were put forward by theorists of industrialism and post-industrialism. It was envisaged that older, more rigid, forms of social stratification were giving way to a rather amorphous 'socio-economic' hierarchy, within which individuals' positions were determined far less by 'ascription' than by their own educational and occupational 'achievement' (e.g. Parsons, 1967, 1971; Treiman, 1970).

From the 1980s onwards, such meliorist views became more contested among economists and sociologists alike as evidence emerged that social inequalities showed in many respects a strong persistence if not a tendency to increase. And, as evidence of this kind has continued to accumulate, issues of inequality have in more recent times assumed a new political centrality in many western societies. However, while sociologists have for the most part still focussed their attention on relatively long-term trends in inequality, economists' interests have shown a much sharper shift towards the present-day - with the result that their concerns have often come to have a greater resonance with those prevailing outside of academia.

The new interest in inequality among economists has in fact been prompted in several different ways. First of all, the most widely apparent increase in inequality in the recent past has been in the distribution of incomes. While some significant cross-national variation exists in this respect, it is at all events clear enough that the Kuznets curve no longer holds (Atkinson, 2008). Further, technical improvements in the study of intergenerational income mobility have led to results showing that this

is a good deal more restricted than was previously believed. Correlations between parents' and children's incomes, which were once thought to be as low as 0.2, are now generally estimated at 0.4 or even higher (Bowles, Gintis and Osborne Groves, eds., 2005; Björklund and Jäntti, 2009). At the same time, evidence of increasing income inequality and a more realistic view of income mobility have encouraged new thinking about the *consequences* of economic inequality. It was once widely supposed that a 'trade-off' had to be made between greater equality, on the one hand, and economic efficiency and growth, on the other (e.g. Okun, 1975). But economists have now become more prepared to consider the possibility that inequality may itself have adverse effects on efficiency and growth (see e.g. Aghion, Caroli and García-Peñalosa, 1999) as well as on various aspects of individual welfare and, in particular, on health.

In this latter regard, an interesting engagement has of late developed between economists and epidemiologists. There is general agreement that economically more advantaged people have on average better health than those less advantaged. But disagreement tends to arise over whether, over and above such effects at the individual level, there are also population effects of inequality - or, one could say, *contextual* effects: that is, effects that mean that in more equal societies individuals at all economic levels have better health than do their counterparts in less equal societies. Some epidemiologists, such as Michael Marmot (2004) and Richard Wilkinson (1996, 2005; Wilkinson and Pickett, 2009), would claim that for the economically advanced societies of today such contextual effects are in fact well-established. Their position is exemplified by graphs such as that of Figure 1 which relates income inequality to life expectancy in 23 advanced societies. As can be seen, there is a tendency across these societies for life expectancy to fall as income inequality increases. If such analyses are accepted, one implication would then be that in

FIGURE 1. *Income Inequality and Life Expectancy*

Source: Wilkinson and Pickett (2009).

highly unequal societies, such as the US or Portugal, the health of well-off people may be no better than, or even worse than, the health of poorer people in more equal societies, such as Japan or Sweden.

However, most economists would be sceptical of the Marmot-Wilkinson position. They would argue that correlations such as those reflected in Figure 1 are not statistically robust. They may depend on the particular selection of countries made; they can disappear when further variables, such as education or ethnicity, are introduced into the analysis; and, most seriously perhaps, they often fail to show up if a dynamic, over-time perspective is taken (see e.g. Mellor and Milyo, 2001; Deaton, 2002; Leigh, Jencks and Smeeding, 2009).¹

Now, this engagement is, in itself, very much to be welcomed. It is good that in economics the study of inequality has, in the words of Tony Atkinson (1997), been 'brought in from the cold'; and it is good that the forays of epidemiologists into the social sciences should be viewed seriously, albeit critically. But what, *for sociologists*, must be disturbing in all of this is the way in which their distinctive - and, I wish to maintain, highly relevant - contributions to the study of social inequality are almost entirely disregarded.

This is the result in part, as I have suggested, of sociologists not participating as actively as they might have done in debates about inequality today as opposed to deba-

¹ It should be added that a number of other epidemiologists would also take issue with Marmot and Wilkinson on whether a population effect of social inequality on

health is invariably present in advanced societies. See e.g. Lynch *et al.* (2000, 2004).

tes about long-run tendencies. But it is also the result, I believe, of both economists and epidemiologists remaining remarkably fixed within their disciplinary paradigms, and thus being either unaware of, or uncomfortable with, sociological concepts, and with related empirical enquiry that has a very direct bearing on current debates.

In consequence, I would argue, a good deal of recent research on inequality by economists and epidemiologists has been, at best, unduly limited and, at worst, flawed. In what follows, I develop this argument by drawing on a range of recent conceptual, theoretical and empirical contributions by sociologists with two aims in mind: first, to bring out what is chiefly distinctive about the sociological approach to inequality; and, second, to show, on the basis of two particular examples, how the disregard of this approach, by economists and by epidemiologists respectively, has led to serious difficulties.

The sociological approach to social inequality

In discussing inequality, economists concentrate their attention on income and wealth, and may also refer to inequalities in educational attainment which, via human capital theory, they treat as a major determinant of income. In these respects, they are concerned with inequality in what might be called an *attributional* sense. Income, wealth, education are attributes of individuals, of which they have more or less. In contrast, sociologists tend to discuss inequality in terms of social class or social status, and thus to treat inequality in a *relational* sense: i.e. in terms of social relationships within which individuals are more or less advantaged or disadvantaged.

Thus, in what is, I believe, becoming an increasingly common view, class is taken to be defined by social relations within labour markets and productive units (Erikson and

Goldthorpe, 1992, ch. 2; Goldthorpe, 2007, vol. 2, ch. 5; McGovern *et al.*, 2007, ch. 3). Initial distinctions therefore arise between employers, self-employed workers and employees; and then, among employees, further distinctions are made according to the form of their relations with employers, as embodied in the terms of their employment contracts (implicit as well as explicit). For example, a crucial distinction here is that between salaried employees, on the one hand, and, on the other hand, wage-workers who are employed on some kind of piece- or time-rate basis. Such an approach to class can now be made operational for purposes of empirical research through classifications well-established in the sociological literature - and in some cases adopted by national statistical offices, and including now a prototype European Union Socio-economic Classification (Rose and Harrison, eds., 2009).

Economists may say that they are primarily interested in economic, rather than wider social inequality. But there are good grounds for maintaining that the concept of class, understood in the way indicated, does in fact lead to a more comprehensive view of economic inequality than does a focus on income, and especially on current income, alone. It can be shown that individuals in different class positions differ systematically not only in their levels of income but in at least three further ways (Goldthorpe and McKnight, 2006; Chan and Goldthorpe, 2007): first, in their degree of *income security*; second, in their *short-term income stability*; and, third, in their *longer-term income prospects*. Thus, members of the professional and managerial salariat, as well as having generally higher incomes than wage-workers, have lower risks of loss of income as a result of unemployment, have incomes less dependent on variable rates of pay, and, perhaps most importantly, have incomes that continue to rise for far longer over the course of their working lives on account of incremental salary scales

and relatively well-defined promotion and career opportunities.²

An emphasis on the relational, rather than simply the attributional, aspects of inequality is, then, one way in which the sociological approach is distinctive. A second way lies in recognition of the fact that the structuring of inequality - or social stratification - is more than one-dimensional. At least since the time of Max Weber (1922/1968), sociologists have thought about inequality not only in terms of class but also in terms of another relational concept, that of status.

The status order - or hierarchy - is one formed by social relations of superiority, equality and inferiority that reflect prevailing evaluations of social honour or worth. In earlier societies, status typically attached to ascribed characteristics - in particular, to 'birth' or 'descent'. In present-day societies status more often attaches to social positions - in particular, occupations - although still also to ascribed characteristics such as race and ethnicity (Laumann, 1966). The most immediate way in which the status order is expressed is in patterns of intimate association, such as close friendship and marriage (or cohabitation). Status equals are those who eat together and sleep together. But differences in status are also expressed in lifestyles of differing 'distinction' that are seen as appropriate to different status levels.

Just as there are now good instruments available for the measurement of class, so too there are good instruments available for the measurement of status as understood as above, and especially as based on occupation (see e.g. Chan, 2010).³ And what can

then be shown is that while, as one might expect, the positions that individuals hold within class structures and status hierarchies are correlated, the correlation tends to be only moderate. Class and status 'inconsistencies' clearly arise. In other words, class and status have to be regarded as two qualitatively different forms of social stratification.

It is then in this connection that a sociological approach to inequality differs most sharply from that typically found in epidemiology. Epidemiologists have been greatly concerned with social inequalities - or what they call 'social gradients' - in mortality, morbidity and other aspects of health. But while they show great care and sophistication in the measurement of these dependent variables of their analyses, epidemiologists' measurement of social inequality is for the most part remarkably casual and *ad hoc*. The underlying assumption seems to be that inequality is essentially one-dimensional: there is a single social hierarchy and individuals' positions in this hierarchy can be determined by a range of indicators that are more or less *interchangeable*: for example, income, education or occupational level as determined by various different criteria.

However, this assumption of unidimensionality is unwarranted. Although, as noted at the outset, some sociologists have drifted away from a Weberian position to envisage social stratification in terms of a single 'socio-economic' hierarchy, a wide-ranging literature does in fact exist to show the continuing importance of distinguishing between class and status. To provide just one illustration, Table I reveals how, in Britain, class and status relate to socio-political attitudes as mea-

² Members of classes intermediate between the professional and managerial salariat and the working class can be shown also to be in various ways intermediate as regards income security, stability and prospects (Goldthorpe and McKnight, 2006; McGovern *et al.*, 2007: ch. 3 esp.)

³ Note that these scales based on the occupational structuring of patterns of intimate association, such as

close friendship or marriage, are to be distinguished both from scales of occupational prestige and from scales of 'socio-economic status', based typically on data on occupational earnings and education. See further Bukodi, Dex and Goldthorpe (2011).

TABLE 1. *Determinants of political attitudes on Right-Left and Authoritarian-Libertarian scales, OLS regression, British Social Attitudes Survey, 2002 (boldface coefficients are significant at 1% level, two-tailed tests)*

	Right-Left β	Authoritarian-Libertarian β
Age	0.005	0.030
Gender (male ref.)		
Female	0.605	0.136
Income (<£10k ref.)		
£10-23k	0.257	0.297
£23-44k	0.958	0.209
>£44k	2.153	-0.111
Qualifications (none ref.)		
CSE	0.472	0.193
O-levels	1.039	-0.261
A-levels	1.090	-0.726
Sub-degree	1.089	-0.822
Degree	0.153	-3.223
Class (I, Prof. and manag., higher, ref.)		
II Prof. and manag., lower	-0.873	0.020
III Routine nonmanual	-1.233	-0.004
IV Small proprietors	0.021	-0.138
V Technicians and supervisors	-1.553	0.082
VI Skilled manual	-1.551	-0.340
VII Nonskilled manual	-1.732	-0.130
Status	0.684	-1.381
Constant	11.711	21.363
N	2.421	2.441
R ²	0.130	0.170

Source: Adapted from Chan and Goldthorpe (2007: Table 7)..

sured by two well-established scales: one capturing individuals' positions on a Right-Left dimension, the other their positions on an Authoritarian-Libertarian dimension (Evans, Heath and Lalljee, 1996).

As regards the Right-Left scale, it can be seen that class, and also income, are the important differentiating factors and on a pattern that would be expected - i.e. working-class and low income individuals are the most left-wing - while the effect of status is

not significant.⁴ In contrast, with the Authoritarian-Libertarian scale, it is status, and also education, that count - authoritarianism declines with status and higher education - while class and income are of little consequence.

⁴ Education also has significant effects but on a curvilinear pattern. As can be seen, individuals with the highest and lowest levels of educational qualification are most left-wing, while those with intermediate levels are most right-wing.

Taking a one-dimensional view of social stratification would then simply obscure these rather important findings.

Having set out what I take to be the essentials of the sociological approach to social inequality, I now turn to cases which, I believe, illustrate the dangers that arise as a result of economists and epidemiologists largely neglecting the conceptual basis of this approach and the research findings that have followed from it. In regard to the work of economists, the case I wish to take is that of social mobility.

Economists and social mobility

In recent years, social mobility has in several countries become a central political issue. It is, moreover, one that is now attracting the attention of international organisations, in particular the OECD. However, what is remarkable about the reports that the OECD has produced (e.g. Causa, Dantan and Johansson, 2009; OECD, 2010: ch. 5) is that they are written entirely by economists, who never move beyond the limits of their own disciplinary paradigm and make little or no reference to the very substantial body of work previously done in this field by sociologists. Social mobility is simply equated with income or earnings mobility, and without any attempt at explanation or justification. I will aim to show why this is unfortunate by considering aspects of a debate which I and several others have been carrying on with economists concerning social mobility in Britain.

The economists involved, chiefly Jo Blanden and her colleagues, investigated income mobility using data from two birth-cohort studies covering all children born in Britain in one week in 1958 and in one week in 1970. They related the earnings of these children, when they were in their early 30s, to the incomes of their families when they were in their adolescence. They then claim to show a much stronger association between family income and children's later earnings for the 1970 cohort than for the 1958 cohort: i.e. the-

re is less income mobility in the later cohort than in the earlier one (Blanden *et al.*, 2004). This research has had an enormous impact in media and political circles. It has led to a widespread belief that social mobility in Britain is in sharp decline. All three leading political parties have published reports dealing with the - supposed - problem, and the present coalition government has followed the previous New Labour government in making increased social mobility one of its major objectives.

However, Michelle Jackson, and I (Goldthorpe and Jackson, 2007) have used the same birth cohort data as the economists in order to investigate intergenerational *class* mobility and, at the same time, to distinguish between *absolute* and *relative* rates of mobility: that is, between mobility rates as measured in simple percentage terms and mobility rates as measured by odds ratios showing the degree of association existing between parental class and child's class when considered *net* of all class structural change (on this distinction, see further Erikson and Goldthorpe, 1992: 54-9; Breen, 2004). So far as relative mobility rates - or what may be called social fluidity - are concerned, we find, in contrast to the economists, *no* significant change between the 1958 and 1970 cohorts.⁵ Moreover, together with Colin Mills, I have

⁵ Until recently, economists appear to have treated questions of mobility in innocence of the distinction between absolute and relative rates. Where income is analysed in terms of movement between income quantiles, the analysis is of course 'relativised' from the start. But where mobility is assessed in terms of 'elasticities' - i.e. through the regression of children's income on parents' income - effects of the net association existing between these variables and of differences in their distributions will tend to be confounded. Björklund and Jäntti, two economists working in this field with an unusually good knowledge of the sociological literature, have recently proposed (2009) using correlations rather than elasticities where the focus of interest is on change in mobility over time or on variation across societies. In fact, Blanden *et al.* (2004) use all of the above methods and in each case alike find a decline in mobility across the two cohorts they study.

analysed data from 13 national sample surveys, carried out between 1972 and 2005, which give a far better basis than do the cohort studies for assessing population trends in mobility (Goldthorpe and Mills, 2008). On this basis, the Goldthorpe-Jackson finding is supported in that only very slight, and quite trendless, fluctuations in relative rates of class mobility show up over the entire period covered.

Now there is, of course, no reason why studies of income mobility and of class mobility should show the same results. But it is at the same time of interest to look further into how it is that they differ. So in yet another paper, Robert Erikson and I (Erikson and Gol-

dthorpe, 2010) have returned to the birth-cohort data and have carried out further analyses using *only* those members of the two cohorts who could be included in both the economists' analysis and in the Goldthorpe-Jackson analysis: i.e. those individuals for whom we have data on both income and class mobility.

In Table II I show some results from a log-linear modelling exercise relating to mobility tables for these individuals based on income quintiles and on five social classes. Note, first of all, that all previous findings are fully confirmed. For class mobility, the constant social fluidity (CSF) model gives an acceptable fit for both men and women, on which the UNI-

TABLE 2. Results of fitting independence, constant social fluidity (CSF) and uniform difference (UNIDIFF) models^a to income quintile and five class mobility tables for 1958 and 1970 British birth cohorts

Table	Model ^a	G ²	P ^b	DI
men (N = 3415)				
Income quintile	Indep.	248.7	0.00	10.2
	CSF	19.6	0.24	3.1
	UNIDIFF	9.5	0.85	1.9 β (1970) = 1.54
Five class ^c	Indep.	410.0	0.00	13.2
	CSF	12.7	0.70	2.3
	UNIDIFF	12.5	0.64	2.3 β (1970) n.s.
women (N= 3009)				
Income quintile	Indep.	192.0	0.00	9.4
	CSF	31.8	0.01	4.1
	UNIDIFF	21.0	0.13	3.5 β (1970) = 1.70
Five class ^c	Indep.	291.8	0.00	12.2
	CSF	23.9	0.09	2.8
	UNIDIFF	22.6	0.09	2.6 β (1970) n.s.

^a Independence: $\log F_{ijk} = i + \mu_i^O + \lambda_j^D + \lambda_k^C + \lambda_{ik}^{OC} + \lambda_{jk}^{DC}$
 CSF: $\log F_{ijk} = i + \mu_i^O + \lambda_j^D + \lambda_k^C + \lambda_{ik}^{OC} + \lambda_{jk}^{DC} + \lambda_{ij}^{OD}$
 UNIDIFF: $\log F_{ijk} = i + \mu_i^O + \lambda_j^D + \lambda_k^C + \lambda_{ik}^{OC} + \lambda_{jk}^{DC} + \beta_k X_{ij}$
 (O = origin, D = destination, C = cohort)

^b Degrees of freedom are: Independence model, 32; CSF model 16, UNIDIFF model, 15.

^c 1: Higher professionals and managers; 2: Lower professionals and managers; 3: Higher routine nonmanual and technicians; 4: Skilled manual; 5: Lower routine nonmanual and nonskilled manual.

Source: Adapted from Erikson and Goldthorpe (2010: Tables II and III).

TABLE 3. Averages of log odds ratios obtained from 2 x 2 partitioning of quintile income and five class mobility tables

Averages		Men		Women	
		Income	Classes	Income	Class
Unweighted	1958	0.60	1.17	0.48	0.84
	1970	0.97	1.03	0.79	1.00
Weighted	1958	0.58	1.12	0.46	0.84
	1970	0.94	1.02	0.80	0.99

Source: Adapted from Erikson and Goldthorpe (2010: Table IV).

DIFF model, proposing some uniform change in the level of the log-odds ratios defining relative mobility, does not improve. But for income mobility the UNIDIFF model does improve significantly on the CSF model for both men and women; and the β parameters returned for the 1970 cohort are in both cases positive, indicating lower fluidity for this cohort than for the 1958 cohort, just as the economists found. Specifically, the model implies that all log-odds ratios underlying the income mobility tables increase by a factor of 1.54 for men and 1.70 for women.

However, one should further note the G^2 statistics returned under the independence model. For men and women alike, these are much higher for class mobility than for income mobility - suggesting, that is, that a stronger intergenerational association prevails in the case of class than in the case of income. To test this possibility more directly, Erikson and I calculate the global log-odds ratios that result from partitioning the 5 x 5 income and class mobility tables into successive 2 x 2 tables, and we then average these ratios. The results are shown in Table III.

It can be seen that in all cases, with both the unweighted and weighted⁶ averages, the

odds ratios are higher - i.e. there is a stronger intergenerational association - in the case of class than in the case of income. This difference is very marked - and highly statistically significant - in the 1958 cohort, while diminishing in the 1970 cohort, especially in the case of men (see further Cox, Jackson and Lu, 2009).

In our paper, Erikson and I argue that there are in fact major problems with the income data that the economists use, which in themselves make the finding of declining mobility between the two cohorts a questionable one. However, for present purposes this issue can be left aside. The main point to be made here is that even if there were such a decline in income mobility, it was one that took place within a class mobility regime that shows *both* less fluidity overall *and* greater stability over time. In other words, it is the class mobility regime that would appear more fully and reliably to capture the continuity in economic advantage and disadvantage that persists across generations - as might indeed be expected given the relationship between class and income that was previously described. Studies that are based on income mobility alone - such as those of the OECD - would seem therefore to run a serious risk of underestimating the propensities for economic immobility.

In this connection, it is relevant to add that Erikson and I further investigate the rela-

⁶ The weights used are the inverted variances of the log-odds ratios.

tionship in the two British birth cohorts between children's educational attainment and both family income and parental social class. The results we obtain are on much the same lines as those shown for mobility in Tables 2 and 3. The association between children's educational attainment and family income does strengthen across the two cohorts - as the economists have in fact reported (Blenden and Machin, 2004; Blenden, Gregg and Machin, 2005) - while the association between children's educational attainment and parental class shows no significant change. But, in both cohorts alike, the association of educational attainment with class is stronger than the association with family income (Erikson and Goldthorpe, 2010: Tables VII and VIII). Again, therefore, a focus simply on income rather than on class would seem likely to lead to an underestimation of the impact of social background on children's life-chances. Relational inequality is more consequential than attributional inequality.

I move on now to the case I want to consider in regard to epidemiologists, which concerns the consequences of social inequality.

Epidemiologists and the consequences of social inequality

I earlier showed, in Figure 1, a graph taken from the work of Wilkinson and Pickett (2009) relating income inequality to life expectancy in a number of advanced societies. Figure 2 shows another graph taken from the same work that similarly relates income inequality to a more general index of health and various social problems.

It is evident that the cross-societal pattern in Figure 2 is essentially the same as that in Figure 1. As income inequality increases, health and social problems get worse.

However, what is important to note is that Wilkinson and Pickett do not believe that it is the direct - that is, the material - consequences of income inequality that are here revealed.

Rather, they make the assumption I earlier referred to that the structure of social inequality is essentially one-dimensional, and they thus take income inequality as being a good indicator of what for them is the crucial causal factor underlying their graph, namely, *status* inequality. It is status inequality - and the insecurity and anxiety, the damaged self-esteem and lack of trust that it generates - that impact on health and on individual and social well-being more generally. The psychological stress created by status inequality exerts its negative effects in two ways: most immediately, on health, through various neuroendocrine mechanisms but also, more pervasively, through inducing harmful behaviour in the form of smoking, over-eating, sexual promiscuity or violence.

This view of the effects of status inequality is in itself controversial.⁷ But the problem I wish to bring out here is one that lies further back in Wilkinson and Pickett's argument: that is, with the assumption that social stratification is one-dimensional and that the degree of status inequality in a society can therefore be reliably *inferred from* the degree of income inequality. As I have already noted, the available evidence indicates that the status and class positions of individuals are only moderately correlated, and the same is true of their status positions and their income levels (Chan, 2010). It would therefore be dangerous to suppose that any different situation exists at the societal level, and there is in fact one case in particular that underlines this point - that of Japan.

⁷ The same epidemiologists referred to in n.1 above who doubt if a population effect of inequality on health is always present would also believe (Lynch *et al.*, 2000, 2004) that, where such an effect is present, it operates less through the psychological effects of status inequality than through more direct material effects, although not those of income inequality alone. Societies that have low income inequality, it is argued, also tend to have more health-supportive infrastructures in the form of health services, occupational health and safety regulation, environmental controls, unemployment benefits and back-to-work programmes etc.

FIGURE 2. *Income Inequality and Health and Social Problems*

Note: Health and social problems are closely related to inequality among rich countries.

As can be seen from Figure 2, Japan is at the extreme 'good' end of Wilkinson and Pickett's graph. Japan has comparatively low income inequality - largely in fact on account of low earnings inequality - and Japan also scores very well on the health and social problems index. However, among students of comparative social stratification, Japan is noted for having a very strongly defined status hierarchy, and one that is to an unusual degree formalised and embodied in language through the extensive use of honorifics. To quote a leading expert, Harold Kerbo (2003: 479-80): 'the Japanese seem obsessed with ranking and hierarchy'; in everyday life it is only 'once status relevant markers ... have been established ... that the business of eating, talking, drinking, or whatever can proceed in an orderly manner

that is unlikely to offend someone who expects greater status deference.' And Kerbo in fact goes on to suggest (2003: 509-12) that for individuals in high-level positions, as, say, in the corporate world, high status is itself a reward that helps to compensate for their - relatively - low material rewards. The Japanese case does, therefore, create serious difficulties for Wilkinson and Pickett - of which they seem largely unaware - and, more generally, underlines the need for epidemiologists to move towards a more sophisticated, sociological way of thinking about social inequality.⁸

⁸ There are in fact some welcome indications that a move in this direction is beginning. See e.g. Geyer *et al.* (2006) and especially Galobardes *et al.* (2006).

TABLE 4. Results of bivariate and multivariate Cox regressions of relative risk of death on class, status, income and education, Swedish men and women aged 35-59 in 1990 (boldface coefficients are significant at 5% level)

	Bivariate		Multivariate	
	men	women	men	women
<i>Class^a</i>				
1	1	1	1	1
2	1.17	0.98	1.01	0.94
3	1.37	1.18	1.07	1.01
4	1.61	1.18	1.09	0.90
5	1.87	1.36	1.18	1.03
<i>Status^b</i>				
Quintile 1	1	1	1	1
Quintile 2	1.19	1.05	1.04	1.02
Quintile 3	1.36	1.23	1.03	1.11
Quintile 4	1.69	1.27	1.04	1.09
Quintile 5	1.80	1.49	1.09	1.28
<i>Income (from work, average 1981-1989)</i>				
Quintile 1	1	1	1	1
Quintile 2	1.18	1.14	1.07	0.99
Quintile 3	1.38	1.12	1.14	0.95
Quintile 4	1.55	1.07	1.23	0.89
Quintile 5	2.29	1.14	1.81	0.92
<i>Education</i>				
Higher tertiary	1	1	1	1
Lower tertiary	1.14	1.04	1.06	1.06
Higher secondary	1.26	1.23	1.13	1.17
Lower secondary	1.67	1.34	1.28	1.24
Compulsory only	1.76	1.48	1.27	1.30

^a 1: Higher professionals and managers; 2: Lower professionals and managers; 3: Higher routine nonmanual and technicians; 4: Skilled manual; 5: Lower routine nonmanual and nonskilled manual.

^b Scale based on occupational homogamy/heterogamy.

Source: Adapted from Torssander and Erikson (2010: Table 4).

Finally, to make this same point more positively, I would note recent research by two sociologists, Jenny Torssander and Robert Erikson (2010), who have trespassed on epidemiologists' territory largely in reaction against their one-dimensional view of stratification. Torssander and Erikson use registration data, covering the entire Swedish population, to investigate inequalities in the risk of mortality by class and status, as 'relational' variables, and also by income and education, as 'attributional' variables.

Table IV shows some of the results they obtain.

When the four explanatory variables are taken separately, as in the left-hand panel of the table, each reveals a 'gradient' in the risks of death of the kind one might expect, with the one exception of income in the case of women. So, one might think, these measures of social inequality are, more or less, interchangeable. However, when - with no problems of collinearity - all four variables are brought into the analysis together, as in the

right-hand panel of the table, a different picture emerges. Education remains a major factor in risks of death for men and women alike. But while status has still some importance for women, it has little for men; and while class and income still matter for men, neither now matters for women. In other words, any one-dimensional approach to social stratification would, on this evidence, quite fail to bring out the complexity that apparently exists in the social generation of the risks of death.

This claim is indeed nicely supported by further results that Torssander and Erikson (2009) have obtained when they consider spouse (or partner) effects on risk of death. These results could be summed up as follows. For a woman who wants a long life - at least in Sweden - the best thing for her to do is to get together with a high class man with a large income; but for a man who wants a long life, the best thing for him to do is to get together with a high status woman with a good education.⁹

CONCLUSIONS

In this paper, I have aimed to reassert the importance of a sociological approach to the understanding of social inequality. At a conceptual level, I have noted, first, the emphasis that sociologists, in contrast to most economists, would give to the relational as distinct from the simply attributional aspects of inequality; and, second, sociologists' awareness, in contrast to most epidemiologists, of the multidimensional nature of the structuring of social inequality and in particular of class and status as two qualitatively different forms

⁹ Torssander and Erikson (2009) also broach the question of possible relationships between different aspects and forms of social inequality and the risks of death from different causes. Further investigation of this question might help in resolving current disagreements among epidemiologist (see n. 7 above) about the relative importance of the impact on health of the 'psychological' and 'material' implications of inequality.

of social stratification. I have then further sought to show how, in two specific areas, sociological research has revealed difficulties in work by economists and epidemiologists, respectively, in which these conceptual insights have been disregarded.

I believe that in the years ahead - in consequence of the present economic crisis and indeed of the form of neo-liberal political economy from which the crisis stems - the general tendency will be for social inequality, in all its forms, to widen yet further. In turn, public and political concern with the issues that arise can be expected to become more pressing. Recent contributions of economists and epidemiologists have been of great value in helping to refocus social scientific research on these issues of inequality. But it is now urgent that sociologists should engage more fully and more forcefully than hitherto in relevant empirical inquiry and analysis, and seek explicitly to demonstrate the distinctive advantages that their approach can provide.

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