



## HIERARCHY AND ROOT CAUSES

*“For every effect there is a root cause. Find and address the root cause rather than try to fix the effect, as there is no end to the latter.” - James Baldwin*

### Connection to the Lens

The Equity & Empowerment Lens (E & E Lens) embodies principles of social and racial justice. According to Krieger (2001) this framing “explicitly analyzes who benefits from - and who is harmed by - economic exploitation, oppression, discrimination, inequality and degradation of natural resources” (p.55). In order to eliminate the root causes of inequity, organizations must identify and eliminate oppression and discrimination in policies, practices, processes, structures, and relationships between colleagues, and between their structures and community members. Values and beliefs shape discrimination; the decision to create a more just society is, at heart, a choice about values. Values that support social justice and equity include honesty, inclusion, innovation, solidarity and humility. Using this Lens will help your organization address root causes, and specifically, how they relate to racial and ethnic inequities, how they contribute to maintaining the unjust effects of hierarchy, and how best to level the playing field for all residents of Multnomah County.

In line with national equity efforts that define the three main drivers of inequities – racism, class oppression, and gender inequity – the general version of the Lens (see *Lens At A Glance, page 28*) will focus specifically on how to identify policies, procedures, and practices that contribute to institutional racism, classism, and sexism. Below we will briefly review the definition and role of hierarchy in maintaining systems of oppression and reinforcing existing root causes.

### Background and Basics

Hierarchy is the categorization of a group of people according to ability or economic, social, or professional status. The negative effects of hierarchy manifest when there is an established dominant group that tends to enjoy a disproportionate share of assets, resources, and other areas of positive social value (Pratto, Sidanius & Levin, 2006). (See *Concept Paper on Social Determinants of Health and Health Inequity for more information*). As a population in terms

of race/ethnicity, Whites/Caucasians comprise the dominant culture and possess the most direct access to the power and resources of society. As a result, the paradigms present in our institutions often reflect and empower the normative cultural values of the dominant group, and simultaneously disempower non-dominant groups who may not share these normative characteristics. Denying the value of non-dominant characteristics reinforces hierarchy. The consequence of hierarchy is an inequitable distribution of access to the resources necessary to thrive and meaningful inclusion and participation of all community members (Burke & Eichler, 2006).

Wallerstein argues that being powerless, or lacking “control over one’s destiny,” is a core social determinant of health and success (as cited in Symes, 1988).

Living in an environment of physical and social disadvantage - being poor, low in the hierarchy, under poor working conditions or being unemployed, subject to discrimination, living in a neighborhood of concentrated disadvantage, lacking social capital, and at relative inequity to others - is a major risk factor for poor health (p.73).

Root causes of inequities stem from institutionalized practices shaped by dominant culture values, attitudes, and beliefs. These values and beliefs influence perspectives about the nature of problems and solutions, thus directly affecting decision-making and planning. Therefore, it is vital to integrate non-dominant culture perspectives to ensure more robust policy and decision-making processes based on equity and empowerment (Burke & Eichler, 2006). In order to achieve consistent, fair, and just decision-making, it is vital to focus on shifting cultural norms and strengthening organizational capacity to embody the values of inclusion, fairness, honesty, and empowerment within organizations. (See Concept Paper on *Empowerment Theory and Practice* for more information).

The labels that we place on people – black, white, poor, rich, gay, straight, old, young, disabled, etc. – can prevent people from being valued fairly and from receiving equal treatment. Treating someone differently, unfairly, and unjustly because of their actual or perceived identity is an “ism.” The “isms” can be broadly defined as conduct, words or practices which advantage or disadvantage people because of their relationship to dominant culture (Burke and Eichler, 2006). The practice is just as damaging in less obvious and subtle forms as it is in obvious forms, and is still called an “ism” whether it is intentional or unintentional (DeAngelis, 2009). Some of the most common “isms” are racism, classism, sexism, ageism, heterosexism and disablism.

The E & E Lens is designed to help organizations identify and eliminate root causes, including institutional racism (also known as structural racism or systemic racism). Institutional racism is “the network of institutional structures, policies, and practices that create advantages for White people and discrimination, oppression, and disadvantage for racialized people [communities of color, immigrants, and refugees]” (Lopes and Thomas, 2006, p.270). Such racial discrimination

can occur by governments, corporations, religions, educational institutions or other large organizations with the power to influence the lives of many individuals. The following research studies highlight the racist impact of practices, whether directly or indirectly driven by institutional policies. In a 2004 study, researchers Bertrand and Mullainathan discovered widespread discrimination in the workplace against job applicants whose names were perceived as “sounding black.” These applicants were 50% less likely than candidates perceived as having “white-sounding names” to receive callbacks for interviews. In another study, a sociologist at Princeton University sent matched pairs of applicants to apply for jobs in Milwaukee and New York City, and found that black applicants received callbacks or job offers at half the rate of equally qualified whites (Bonikowski, Pager, & Western, 2009). In both examples, the negative influence of hierarchy manifests in the categorization of job applicants who were perceived to be a member of a non-dominant group. The result was decreased employment opportunities for this group and thus the perpetuation of inequities.

As organizations work to identify and eliminate policies and practices that support racism, classism, disablism and other forms of discrimination, it is also vital to identify factors that contribute to keeping them in place. Not only does hierarchy play a significant role in the perpetuation of racist policies and practices in organizations, but the experience being a member of a non-dominant group can also decrease positive mental health (See Concept Paper on *Positive Mental Health & Equity*). In a surprising learning, researchers in the famous Whitehall Study discovered that social standing within an institution was connected to health risk factors. While the researchers had originally assumed that executives at the top of the hierarchy experienced increased health risks as a result of high stress, what they discovered instead was the opposite. With each employment grade level decrease, the risk factors increased. Sir Michael Marmot, who was featured in the health equity PBS documentary series *Unnatural Causes*, and has done extensive research on the influence of social standing on health outcomes, described the results more specifically in an interview for the film:

The higher the grade, the better the health. The lower the grade, the higher the mortality rate and the shorter the life expectancy, in this remarkably graded phenomenon. So if you were second from the top, you had worse health than if you were at the top; if you were third from the top, you had worse than if you were second from the top – all the way from top to bottom (*Unnatural Causes*, p.2).

Not only did this study reveal the negative health effects of social stratification, but also established hierarchy as a critical determinant and root cause. Although none of the participants lived in poverty (another potential health risk factor), simply experiencing lower levels of social and professional status within a workplace hierarchy significantly impacted health outcomes. Marmot explained that people at lower levels of the hierarchy experienced less autonomy, control and empowerment, also associated with decreased health. These findings align with research reviewed for the Concept Paper on *Empowerment Theory and Practice* and

a comprehensive study of major world economies that revealed societies with higher rates of homicide, infant mortality, obesity, teen pregnancy, depression and incarceration also tend to have greater social inequality (Hofrichter, 2006).

Hierarchy can have direct, insidious effects on the health and well being of our communities. As institutions we must recognize the existence of hierarchies and construct policies, practices, and procedures that mitigate the negative impacts on people. The *In Wealth and In Sickness* section of *Unnatural Causes* describes how society is constructed very much like a ladder. Some natural stratification occurs in society. However, we can decrease the space between the rungs by making positive changes to our structures, policies, and environments. Creating and maintaining empowering spaces that recognize, celebrate, and utilize multiple cultural ways of being is essential. Not only does this intentional practice embody the spirit of equity and inclusion, but it can also reduce the harmful results of social stratification and hierarchy.

It is also important to understand that one's place in the hierarchy shifts by time and place; we all find ourselves in different levels within hierarchies by gender, class, age, ability, religion, language, ethnic background and sexual orientation, to name just a few. We must recognize the existence of multiple and shifting identities within communities and ourselves. We must recognize that the experiences of women of color are different from those of men of color based on sexism, and are also different from the experiences of White women based on racism. Finally, we must recognize that hierarchies can exist within hierarchies. Within the gender hierarchy, some groups of men can have more dominance over other men based on income and race/ethnicity. Within the race/ethnic hierarchy, heterosexual men and women of color can be dominant over individuals who do not fall into normative definitions of sexual identity.

### ***What keeps hierarchy in place?***

#### **The tie between hierarchy and the five faces of oppression**

Hierarchy is a key characteristic of organizational structure and functioning. When hierarchical structures are oppressive, however, the gap between health and success of those at lower social status levels compared to their counterparts at higher levels is significant.

Organizations and decision-making bodies have the power to either create the opportunities or reify the constraints that can lead to population success or decline. Systemic limitations and everyday practices can inhibit the ability of individuals and groups to develop and exercise their capacities, and express their needs, thoughts, and feelings. (Young, 2011)

In this extended structural sense oppression refers to the vast and deep injustices some groups suffer as a consequence of often unconscious assumptions and reactions of well-meaning people in ordinary interactions, media and cultural stereotypes, and structural features of bureaucratic hierarchies and market mechanisms-- in short, the normal processes of everyday life. (p.41)

When applying a Lens, it is critical to become familiar with *how* people are negatively affected and oppressed within structures. Young's framework (2011) outlining the five faces of oppression is a great way for Lens participants to understand *how* populations are affected by the root causes of inequities, and how to facilitate improved systemic solutions that dismantle existing oppression and lead to greater equity and racial justice. Young states that no singular oppression is more fundamental than any other. The areas below simply function as a tool for determining how individuals and groups experience oppression, and do not comprise a full theory of oppression.

- **Exploitation:** This occurs when institutional conditions hinder the capacity of employees to develop themselves and support the development of others. When populations are being exploited, larger gaps exist between workers and employees who can accumulate more, and those who suffer from poverty, material deprivation, and a loss of control. For example, when an organization lacks focus on ensuring greater representation of communities of color in leadership roles, compared to seeing and accepting such representation only in lower levels of the organization, it contributes to exploitation. As noted by Sandra Hinson (2008), "the wage and wealth gap between the wealthy owners and managers, on the one hand, and the masses of working people, on the other, is an indication of the degree of exploitation that exists in society."
- **Marginalization:** Young (2011) suggests this form of oppression is perhaps the most dangerous. People who are marginalized are those who the system of labor cannot or will not employ. In addition to material deprivation, marginalized populations experience exclusion "from useful participation in social life" (Young, p.50) and then are often demonized and for their lack of participation. So much of society's recognized activities occur via social coordination and cooperation. Social structures and processes that exclude people from participating are unjust, and can lead to deprivation of the cultural conditions necessary to thrive. By not engaging communities most affected by inequities in planning and decision-making, and those specifically often excluded in labor (people living with disabilities, for instance), an organization exhibits marginalization.
- **Powerlessness:** Powerlessness is experienced when people in societies do not regularly and meaningfully participate in making decisions that affect their working, social, and political lives -- their daily lives. (*National Association for City and County Health Officials*) In a workplace, those who experience powerlessness have little or no autonomy around work tasks, cannot exercise their creativity or judgment fully, and overall do not command respect compared to others (Young, 2011). Structures and policies that contribute to powerlessness can further prohibit individuals from attaining higher positions and create poor working and living conditions (that can lead to decreased spiritual, mental, physical health) (See Concept Paper on *Relational Worldview*).

- **Cultural imperialism:** Cultural imperialism is the manifestation of negative hierarchy. When policies, processes, and structures value a dominant group's (the group that as a population has the most power and control over decision-making and processes affecting others) experience and culture, and establish it as the norm, cultural imperialism takes place. People who experience this form of oppression are made invisible, and labeled by stereotypes, affecting their capacity to thrive and actively participate in political and social decision-making. Organizational structures and practices that fail to recognize, hold up, and utilize a variety of perspectives (such as cyclical, relational, systemic, feminist, holistic, to name a few) in addition to dominant perspectives perpetuate cultural imperialism and oppression.
- **Violence:** Systematic violence manifests when certain groups "live with the knowledge that they must fear random, unprovoked attacks on their persons or property, which have no motive but to damage, humiliate, or destroy the person" (Young, p.61). For groups living with such fear, they share the daily knowledge with their group members that they are more susceptible to violation based solely on their group identity. While the particular acts of violence are horrible to encounter or witness; what makes this violence also a form of oppression is the social context that normalizes these acts. Organizational structures, communications, policies and practices condoning such violence (and it is critical to mention that 'violence' is comprised of both acts on the physical as well as mental and emotional) must reform via analysis, new recommendation-setting, and actual change. To combat violence, major changes in social and cultural norms, stereotypes, and policies supporting violence must happen.

Exploitation, marginalization, powerlessness, cultural imperialism, and violence manifest in different ways, visible and invisible, direct and indirect, intentional and not intentional. However, we must understand that when any of these conditions are present within our organization we are perpetuating long-standing oppression. Moving toward equity and racial justice requires that we recognize how our policies, procedures and practices play into each of these conditions and take active steps to dismantle structures that do not promote the well being of all people. Different groups and individuals within those groups can experience combinations of these five oppressions in varying ways. As Hinson (2008) states:

Most, if not all, working people experience exploitation. Racism runs through each of these kinds of oppression, intensifying the experience of exploitation, powerlessness, cultural dominance and everyday violence. Gay men as a group experience cultural dominance [imperialism] and the threat of violence, but they may not necessarily experience other forms of oppression based on their class and occupational status. White professional women experience cultural dominance [imperialism], fear of sexual violence, and a degree of powerlessness-- especially if they constantly have to prove themselves worthy of their status. (p.85)

The Equity & Empowerment Lens (E & E Lens) asks users to take a passionate stance to promote equity and social justice. To that end, the Lens asks us to reflect deeply and honestly about who is affected by a particular policy or program, and how. (See the *Lens At A Glance, Questions #3 and 4, p.30*) Young's framework on the five faces of oppression provides a robust framework for articulating the detrimental impact of root causes as they appear in institutional structures and practices. As presented in the E & E Lens, the five faces of oppression is also a tool for organizations to initiate conversations, strategic planning, and decision-making that truly reflects a vision for equity and racial justice. Lens solutions call for immense transformation and challenge organizations to eliminate the negative impacts of hierarchy and other root causes of inequity.

## Recommendations for Lens Implementation and application from an Empowerment Perspective

- **Acknowledge the existence of institutional hierarchy.** Change does not happen amidst denial. We know that the further down the hierarchy an individual or group exists the more they experience stress.
- **Make a commitment to examining how institutional hierarchy functions,** and mitigate the negative impacts.
- **Recognize when viewpoints from the dominant paradigm are privileged** and/or more readily adopted than viewpoints from non-dominant paradigms. Using a racial justice focus, integrate non-white paradigms into the work.
- **Intentionally include perspectives from multiple paradigms** in every discussion and decision-making process.
- **Adapt your structure and timeline** to integrate communities who value greater collaboration and deeper dialogue processes.
- **Examine where and how multiple areas of oppression exist in relation to the experiences of people affected (the existence of intersectionality).** When looking at the impact of a program on racial and ethnic populations, think also about how the program is affecting women and children of color, immigrants and refugees. Ask yourself how are people who identify as LGBTIQ who are also members of communities of color, immigrant, and refugee populations being affected?
- **Engage and value the perspectives of employees** from all levels or professional classes, top to bottom.

## Individual Reflections Questions

- Communities most affected by health inequities are most often from non-dominant cultures. What can you or your colleagues do to improve inclusion of non-dominant cultures' viewpoints in goal setting, implementing, and evaluating your work?
  - In relation to racial justice, how can communities of color, immigrants, and refugees be further included into all aspects of the work?

- What is your organizational structure? What hierarchies exist within that organizational structure, and how do they play out in the daily interactions between workers of different levels?
- How do you, specifically, and your organization, generally, perpetuate negative hierarchies? Think about specific examples, and explore how you could shift policies, practices, or procedures to increase the empowerment of all people.
- What types of stressors might your staff be experiencing? What can you do to mitigate the external stressors in your workplace? Are responsibilities assigned inequitably? If so, can responsibilities be redistributed to allow for more equity within your group?