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Social Role and the Division of Labor

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All of the many ways in which the work of human beings is studied lead back at some point to the obvious, yet infinitely subtle, fact of the division of labor. What is a job description if not a statement of what one worker, rather than another, does or is supposed to do? Similar reference to division of labor lies implicitly in study of the number and migrations of the labor force, of motive and effort, of basic capacities and the learning of skills, and in analysis of the price of labor, services and goods.

The division of labor, in its turn, implies interaction; for it consists not in the sheer difference of one man's kind of work from that of another, but in the fact that the different tasks and accomplishments are parts of a whole whose product all, in some degree, contribute to. And wholes, in the human social realm as in the rest of the biological and in the physical realm, have their essence in interaction. Work as social interaction is the central theme of sociological and social psychological study of work.

Social role, the other term in my title, is useful only to the extent that it facilitates analysis of the parts played by individuals in the interaction makes up some sort of social whole. I am not sure that I would put up much of an argument against the objection that it is not a very useful term, provided the objector has a better one to refer to the same complex of phenomena. I would argue vociferously, however, if the objector implied either that social interaction is not an ever-present and crucial feature of human work, or that the social-psychological description of a division of labor implied by the term social role is of less importance than a description in terms of techniques. I would mention to the objector that even those who work in solitude are often interacting with a built-in father or with God himself, who is known to be worse and that those who toil upward in the night while their companions sleep may quite simply be seeking access to an as yet unknown, but more admired set of companions or colleagues.

Social Role and Kinds of Work.—I will not define or further belabor these terms, social role and the division of labor, but rather illustrate some of their dimensions from those kinds of work which consist in doing something for, or to, people. I say for or to people intentionally, but not cynically. Any child in any school will sometimes believe that something is being done to him rather than for him; the boy in a reform school nearly always thinks so. The patient in mental hospital is often convinced that things are being done to him for someone else; although it may be in the nature of his illness so to believe, he may nevertheless often be right. Even the person suffering from tuberculosis, although he knows he is ill and willingly undergoes treatment, considers that many of the rules of society and of the hospital, and even some parts of the treatment are done to him, rather than for his benefit. Even in short-term illnesses, the patient may view as indignities some of the things allegedly done for his recovery. At the least, he may think they are done for the convenience of those who work in the hospital rather than for his comfort. These are but some of the simpler ambiguities in those kinds of work called personal or professional services. Perhaps it is well to recall that the opposite of service is disservice, and that the line between them is thin, obscure and shifting.

In many of the things which people do for one another, the for can be changed to to by a slight over-doing or by a shift of mood. The discipline necessary to that degree of order and quiet which will allow study in a class-room can easily turn into something perceived by the children as perverse and cruel; their perceptions may be truer than the teacher's own self-perception. Wherever a modicum of power to discipline by tongue or force is essential to one's assigned task, the temptation to over-use it and even to get pleasure from it may be present,

no matter whether one be a teacher, an attendant in a mental hospital, or a prison guard. The danger of major distortion of relationship and function within the framework of a formal office lurks wherever people go or are sent for help or correction: the school-room, the clinic, the operating room, the confessional booth, the undertaking parlor all share this characteristic. Whatever terms we eventually may use to describe social interaction at work must be such that they will allow these subtle distortions of role or function to be brought to light and related to whatever are their significant correlates in personalities or situations.

Another feature of the kinds of work in question lies in the peculiar ambiguities with respect to what is seen as honorable, respectable, clean and prestigegiving as against what is less honorable or respectable, and what is mean or dirty. The term profession in its earlier and more restricted usage referred to a very few occupations of high learning and prestige, whose practitioners things for others. Law and medicine are the prototypes. Yet both of them have always required some sort of alliance, or, at least, some sort of terms with the lowliest and most despised of human occupations. It is not merely in Dickens' novels that lawyers have truck with process-servers, informants, spies and thugs. What the learned lawyers argue before an Appellate Court (and I hear that the cases for textbooks used in law schools are almost all from Appellate Courts) is but a purified distillate of some human mess. A lawyer may be asked whether he and his client come into court with clean hands; when he answers, "yes," it may mean that someone else's hands are of necessity a bit grubby. For not only are some quarrels more respectable, more clean, than others; but also some of the kinds of work involved in the whole system (gathering evidence, getting clients, bringing people to court, enforcing judgments, making the compromises that keep cases out of court) are more respected and more removed from temptation and suspicion others. In fact, the division of labor among lawyers is as much one of respectability (hence of self concept and role) as of specialized knowledge and skills. One might even call it a moral

division of labor, if one keeps in mind that the term means not simply that some lawyers, or people in the various branches of law work, are more moral than others; but that the very demand for higher scrupulous and respectable lawyers depends in various ways upon the availability of less scrupulous people to attend to the less respectable legal problems of even the best people. I do not mean that the good lawyers all consciously delegate their dirty work to others (although many do). It is rather a game of living and let live; a game, mind you, hence interaction, even though it be a game of keeping greater than chance distances.

Work and the Unclean.—As the system of which the lawyer's work is reaches down into the nether regions of the unrespectable and outward to the limbo of guile and force, which people may think necessary but do not admire, so the physician's work touches the world of the morally and ritually, but more especially of the physically unclean. Where his work leaves off, that of the undertaker begins; in some cultures and epochs they have shared the monopoly of certain functions and certain occult arts. The physician has always had also to have some connection (even though it be again the connection of competition or of studied avoidance) with the abortionist, with the "quacks" who deal with obscure and "social" diseases, as well as with the lesser occupations which also treat physical and mental troubles: the midwife, who has in certain places and times been suspected of being willing to do her work a bit prematurely; the blood-letter, who has at times been also the lowly barber; the bonesetter, who in medieval Italy was also the smith; and the masseur and keeper of baths, who is often suspected of enjoying his work too much. If the physician has high prestige, -and he has had it at various times in history, although perhaps never more so than now-it is not so much sui generis, as by virtue of his place in the particular pattern of the medical division of labor at the time. Two features of that division of labor at present are (1) that the level of public confidence in the technical competence and good faith of the medical system is very high and (2) that nearly all of the medical functions have been drawn into a great system of interlocking institutions over which physicians have an enormous measure of control. (Only abortion remains outside, and even that can be said only with some qualification.)

It is also a division of labor notorious for its rigid hierarchy. The ranking has something to do with the relative cleanness of functions performed. The nurses, as they successfully rise to professional standing, are delegating the more lowly of their traditional tasks to aides and maids. No one is so lowly in the hospital as those who handle soiled linen; none so low in the mental hospital as the attendant, whose work combines some tasks that are not clean with potential use of force. But if there is no system in which the theme of uncleanliness is so strong, likewise there is none in which it is so strongly compensated for. Physical cleanliness of the human organism depends upon balances easily upset; the physician and his coworkers operate at the margins where these balances are, in fact, often upset. To bring back health (which is cleanliness) is the great miracle. Those who work the miracle are more than absolved from the potential uncleanliness of their tasks; but those who perform the lowly tasks without being recognized as among the miracle-workers fare badly in the prestige rating. And this gives us a good case for rubbing in the point that the division of labor is more than a technical phenomenon; that there are infinite socialpsychological nuances in it.

Actually, in the medical world there are two contrary trends operating simultaneously. As medical technology develops and changes, particular tasks are constantly down-graded; that is, they are delegated by the physician to the nurse. The nurse in turn passes them on to the maid. But occupations and people are being up-graded, within certain limits. The nurse moves up nearer the doctor in techniques and devotes more of her time to supervision of other workers. The practical nurse is getting more training, and is beginning to insist on the prerogatives which she believes should go with the tasks she performs. New workers come in at the bottom of the hierarchy to take over the tasks abandoned by those occupations which are ascending the mobility ladder. Others come in outside the hierarchy as new

kinds of technology (photography, electronics, physics) find a place in the medical effort. Satisfactory definitions of role for these new people are notoriously lacking, and that in a system in which rigidly defined roles and ranks are the rule. Here we have indeed a good case for illustrating the point that a role definition of a division of labor is necessary to complement any technical description of it. And the question arises of the effect of changes in technical division upon the roles involved. Sometimes a desired change of role is validated by a change in technical tasks (the nurses are an excellent example). Sometimes a change in technical division creates a role problem, or a series of them. I think we may go further and say that when changes of either kind get under way the repercussions will be felt beyound the positions immediately affected. and may indeed touch every position in the system. Some roles in a division of labor may be more sensitive to changes in technique than are others. It seems probable, for instance, that some aspects of the basic relationships of nurse, physician and patient will not be greatly altered by the shifting of technical tasks from one to the other and from both of them to other people in the medical system. (I purposely included the patient, for he has a part in the medical division of labor, too.)

There will probably always be in this system, as in others, some one whose role it is to make ultimate decisions, with all the risks that go with them and with all the protections necessary. This is the role of the physician. He has and jealously guards more authority than he can, in many cases, actually assume. There will probably always be in the system. complementary to this position, another of the right-hand man order; a position which defers to the first but which, informally, often must exceed its authority in order to protect the interests of all concerned. The nurse occupies this position. When the doctor isn't there, she may do some necessary thing which requires his approval,—and get the approval when he comes back. She is the righthand man of the physician, even and perhaps especially when he isn't there. The nurse also sometimes fires furnaces and mends the plumbing, i.e., she does tasks of people below her or outside the role hierarchy of medicine. It hurts her, but she does it. Her place in the divisoin of labor is essentially that of doing in a responsible way whatever necessary things are in danger of not being done at all. The nurse would not like this definition, but she ordinarily in practice rises to it. I believe that, if we were to take a number of systems of work in which things are done for people we could dig out a series of roles or positions which could be described in some such way, and could see the consequences for the roles of changes in technique and in other roles in the system. And I would defend the term role as a fair starting term in such an enterprise; for it suggests a part in a whole act involving other people playing, well or badly, their expected parts.

Work and the Social Matrix.-I have been saying, in various rather indirect ways, that no line of work can be fully understood outside the social matrix in which it occurs or the social system of which it is a part. The system includes, in most and perhaps in all cases, not merely the recognized institutional complex but reaches out and down into human life and society. As in the case of law and even in medicine, there are usually some connections which we cannot easily or do not willingly follow out. There are also ambiguities and apparent contradictions in the combinations of duties of any one occupation or position in an occupational system.

One of the commoner failures in study of work is to overlook part of the interactional system. We speak of the physician and patient as a social system (as did the late Dr. L. J. Henderson in an article by that name), or at most include the nurse; or we speak of teacher and pupil, lawyer and client, and the like. Certainly in some occupations there is some basic relation such as these; a relation which is partly reality, stereotype, partly ideal nostalgically attributed to a better past or sought after in a better future. Perhaps the commonest complaint of people in the professions which perform a service for others, is that they are somehow prevented from doing their work as it should be done. Someone interferes with this basic relation. The teacher could teach better were it not for parents who fail in their duty or school boards who interfere. Psychi-

atrists would do better if it were not for families, stupid public officials, and illtrained attendants. Nurses would do more nursing if it were not for administrative duties, and the carelessness of aides and maintenance people. Part of the complained-of interference is merely institutional. The institutional matrix in which things are done for people is certainly becoming more complex in most professional fields; there are more and more kinds of workers in a division of labor ever changing in its boundaries between one person's work and another's. But it is not so much the numbers of people who intervene that seems to bother the professional most; it is rather the differing conceptions of what the work really is or should be, of what mandate has been given by the public, of what it is possible to accomplish and by means; as well as of the particular part to be played by those in each position, their proper responsibilities and rewards. Compared to the restrictions, residences and distortions of purpose, assignments, and efforts in a school, a mental hospital, a social agency or a prison, the much studied restriction of production in a factory is simplicity itself. In the factory, there is at least fair consensus about what the object produced shall be. There is often no such consensus institutions where things are done for or to people.

Every one, or nearly every one, of the many important services given people by professionals in our times is given in a complex institutional setting. The professional must work with a host of nonprofessionals (and the professionals ordinarily are short-sighted enough to use that pejorative term ad nauseam). These other workers bring into the institutional complex their own conceptions of what the problem is, their own conceptions of their rights and privileges, and of their careers and life-fate. The philosophy -of illness, crime, reform, mental health, or whatever—which they bring in is often that of another class or element of the population than that to which the professional belongs or asspires. Like most humans, they do not completely accept the role-definitions handed down from above, but in communication among their own kind and in interaction with the people served, treated, or handled, work out their own

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definition. They build up an ethos, and a system of rationalizations for the behavior they consider proper given the hazards and contingencies of their own positions. The proper study of the division of labor will include a look at any system of work from the points of view of all the kinds of people involved in it, whether their position be high or low, whether they are at the center or near the periphery of the system. And those

who seek to raise standards of practice (and their own status) in the occupations and institutions which do things for people would do well to study, in every case, what changes in the other positions or roles in the system will be wrought by changes in their own, and what prob-lems will be created for other people by every new solution of one of their own problems.

Science and Prediction

by Roy G. Francis University of Minnesota

A concern for the future has long been evidenced in human behavior. Indeed, one could, without too much difficulty, argue that any act involves some assumption as to the nature of the future. Clearly, such an orientation must acknowledge that most of the concern for the future has been implicit. Whether one accepts or rejects that position, however, we can observe isolated instances of relatively systematic concern for the future; of particular interest is the attempt to arrive at some notion as to what the future will be like.

A variety of discernibly different activities involves estimations of the future: certain practices in magic, religion, and science result in statements as to the nature of some future state of affairs. Distinctions between the various types of estimating the future may be made in terms of the degree of certainty, or whether it is prophecy rather than prediction. While a great deal of significance can be attached to these distinctions, a certain difficulty obtains in an alalysis of that sort.

One difficulty resides in assessing predictive acts as isolated instances of behavior. Properly considered, we may observe attempts at predictions and pose the problem to discern the conditions

under which predictions are attempted. Indeed, some have asserted that the very goal of science is to predict. We do not find it necessary to accept that as a postulate of science.

Our immediate problem is the relation of prediction to science and the consequences of that relationship to the activity known as prediction. If it develops that our analysis leads to a rejection of traditional propositions regarding prediction, we shall accept that rejection. In such a case, it will, presumably, be necessary to assert methodological propositions implied by, or consistent with, the conclusions of our analysis.

The prediction problem, Horst¹ serts, is to "ascertain the personal and situational elements which are associated with successful performance of an activity, so that these may be used to estimate the degree of success of a given individual prior to his engaging in the activity."

Content of the Predictive Statement.-While we may disagree with some important parts of this definition of the predictive problem,2 it is sufficiently general to point out elements which are common to any predictive activity. Whatever else one may claim about prediction, it is noted that (a) the predictive

¹ Horst, P., et al. The Prediction of Personal Adjustment. New York: SSRC Bulletin, 48,

^{1941,} p. 19.

Particularly, we may assert as problematic prediction only for class members rather than "given individuals." Horst here comes perilously close to revealing a bias in favor of the technical decision involved in prediction. That is, prediction as an estimation of the future is often motivated by problems in policy formation where individual behavior is of central concern. In a sense, that sort of decision is scientific where the adjective form means "like science," rather than "belonging to science"; the distinction between the noun "science" and its adjective form must be kept in mind.