

The Type A City: Coronary Heart Disease and the Pace of Life

**Robert V. Levine,¹ Karen Lynch,¹ Kunitate Miyake,¹
and Marty Lucia¹**

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The relationship between the pace of life and coronary heart disease (CHD) was examined in a total of 36 small, medium, and large metropolitan areas across the United States. Four indicators of pace were observed: walking speed, articulation rate (talking speed), bank teller speed (work speed), and the proportion of individuals wearing watches (concern with clock time). Pace of life was strongly related to death rates from coronary heart disease both across cities and across regions of the country. This provides support, on a sociological level, for Wright's (1988) contention that time urgency is a toxic element of the Type A behavior pattern. It is proposed that individuals living in fast-paced cities may be more prone to unhealthy behaviors (e.g., cigarette smoking), which place them at a greater risk for CHD. The relationship among cities' temporal norms, Type A time urgency, and coronary heart disease is also discussed.

KEY WORDS: coronary disease; pace of life; Type A pattern.

INTRODUCTION

The relationship of time urgency to coronary heart disease (CHD) has come under recent debate. The original concept of the Type A personality proposed a global pattern of behaviors which predispose individuals to coronary heart disease. The core elements of this Type A pattern include extremes of aggressiveness, easily aroused hostility, competitive achievement striving, and a chronic sense of time urgency—the perpetual struggle to

¹Department of Psychology, California State University, Fresno, California 93740.

achieve a great many goals in a short period of time (e.g., Friedman and Rosenman, 1974).

A number of recent researchers, however, have presented evidence that "hostility-anger" may be the single toxic element of the global Type A pattern. They propose that the other Type A behaviors, including time urgency, are unrelated to coronary heart disease [e.g., Smith and Rhodewalt (1986) and reviews by Booth-Kewley and Friedman (1987) and Matthews (1988)].

Others, though, have argued that hostility/anger may not be the only toxic Type A element. Wright (1988) has presented evidence that time urgency and the related characteristic of chronic activation—the tendency to remain chronically active or "keyed up"—also predict coronary heart disease. Also, Haynes (1989), after reexamining a number of previous studies, concludes that there is, in fact, evidence for a global Type A-CHD relationship. A meta-analysis of angiography studies, for example, found that overall Type A scores were related to atherosclerosis when the findings of all studies were examined together. Similarly, her multivariate analysis of the Framingham data indicated that overall Type A scores added significantly to prediction of CHD, even after hostility/anger and the other traditional CHD risk factors were taken into account.

Virtually all Type A/CHD studies have measured time urgency by individual self-reports, with either questionnaires or structured interviews. The present study was designed to test the relationship between time urgency and CHD from a somewhat different approach. Taking a more sociological perspective, we examined the relationship of the overall pace of life of cities to their rate of death from CHD.

The Pace of Life

The pace of life has been defined as the rate (Lauer, 1981), speed (Amato, 1983), or "relative rapidity or density of experiences, meanings, perceptions and activities" (Werner *et al.*, p. 14). Conceptually, it is the slow-fast dimension, on which time urgency represents a case of the latter extreme.

There is empirical support for the existence of an "overall pace of life" of cities. For one thing, a number of studies have demonstrated strong and consistent differences in the overall pace of life of cities both within and between countries (e.g., Amato, 1983; Bornstein, 1979; Bornstein and Bornstein, 1976; Levine and Bartlett, 1984; Levine *et al.*, 1980; Lowin *et al.*, 1971; Wright, 1961). Further, there is evidence that a city's pace of life is relatively stable across measures. Levine and Bartlett (1984), for example, found correlations ranging from .52 to .82 across 12 cities from six different countries between three diverse measures of the pace of life—walking speed, work speed among postal clerks, and accuracy of bank clocks.