Novelists highlight the structural conditions that produce illness. Written immediately before World War I, *The Ragged Trousered Philanthropists* took an egalitarian stance toward programs for workers’ health. Its Irish author Robert Tressell described the working and living conditions of several residential construction workers: house painters, decorators, carpenters, plumbers, plasterers, bricklayers. Laboring in southern England, these men faced long working hours and low wages followed by lengthy periods of unemployment. Poverty, starvation, unhealthy worksites, and dilapidated, crowded, damp residential housing caused sickness, disease, and premature death. A house painter himself, Tressell died at age 40 of tuberculosis. The novel’s hero Frank Owen suffered from lung disease. Yet he had the energy to proclaim egalitarian socialist ideals to his workmates, most of whom failed to view the world through a working-class consciousness. Unlike Owen, they accepted the dominant fatalist, hierarchical, and individualist worldviews. Holding fatalistic values, several perceived their world as unchangeable. God and evil human nature, not structural conditions, brought sickness, poverty, and joblessness. This fatalism bred self-contempt and low personal efficacy. Other workers assumed a hierarchical view, accepted the status quo, and deferred to their ‘betters’. Influenced by the capitalist media, the individualists blamed illness on personal vices: laziness, alcoholism, thriftlessness, and other unhealthy habits. Countering all these views, Owen argued that sickness and disease stemmed from the capitalist system: competition for low wages, unsafe working conditions, residential slums, unemployment, poverty, malnutrition, economic inequality, and private monopolistic ownership of the means of production. Making an analogy between housing conditions and health, Owen explained to his skeptical workmates:
Suppose they were always ill, and suppose that the house was badly built, the walls so constructed that they drew and retained moisture, the roof broken and leaky, the drains defective, the doors and windows ill-fitting, and the rooms badly shaped and draughty. If you were asked to name, in a word, the cause of the ill-health of the people who lived there you would say — the house. All the tinkering in the world would not make that house fit to live in; the only thing to do with it would be to pull it down and build another.¹

As an egalitarian socialist, Owen sought to replace the 'Money System' with a cooperative commonwealth based on production for use, not profit. From his perspective, policies in this new system would secure jobs for all, short working hours, high wages, income equality, comfortable housing, and healthy working conditions. Unions and a socialist party would deconstruct reactionary worldviews and overcome the employer exploitation and working class apathy that maintained economic misery. By changing structural conditions, Owen expected to construct a new house — a system free from the 'disease called poverty'.

Thirty years later the British novelist A. J. Cronin made similar assumptions about the structural conditions causing ill health. In The Citadel the physician Andrew Manson linked lung disease to Welsh miners' working environment. Examining the coal miners, he discovered that older anthracite workers suffered the most from pulmonary tuberculosis, which derived from the lengthy exposure to silica dust. Indifferent to this problem, corporate executives, mineowners, and even other physicians refused to support scientific studies that would uncover the causal connections between occupational stratification and lung disease. Policymakers took few steps to enact legislation that would regulate working conditions in the coal mines. Even if not a socialist like Frank Owen, Dr. Manson still supported public programs for upgrading the workers' environment — policies such as expanded education, improved public health services, better sanitary facilities, and safer working conditions.²

Chapter 6 compares three structural theories — pluralism, institutionalism, Marxism — that explain the variations in health policies across the eight industrialized nations. It analyzes these questions: First, who wields the dominant influence over the health policy process? Which groups, organizations, and institutions shape the key decisions? Pluralists like Paul Sabatier, who focuses on advocacy coalitions, see an interdependence among social groups,