

## How health is affected by racial inequality

By Frederick J. Ferrer

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Presidential hopeful Barack Obama's landmark speech about race and the 40th anniversary of the assassination of the Rev. Martin Luther King Jr. have renewed the conversation about racism in America this spring.

It is debated whether enough progress has been achieved in workforce diversity, housing, education, legal rights and other areas of historical inequality. But what is not being discussed enough is a less well known aspect of racial inequity: health.

Although the United States spends more per capita on health care than any other country in the world, it ranks 30th in life expectancy and 31st in infant mortality. This is in large part due to the racial inequalities.

In Santa Clara County alone, Latinos and African-Americans are twice as likely to have diabetes as whites, and Asians and Latinas are more than twice as likely to suffer from cervical cancer. Cardiovascular disease, stomach and liver cancer, and oral health problems are also more prevalent in ethnic minorities compared to whites.

Why? The reasons go beyond genetics or individual behavior. Racism itself can be a factor in health. It leads to constant, insidious stress for people of color that can cause detrimental biological changes.

We are used to thinking of health as a matter of individual control. Of course, individuals have

responsibility for making healthy choices, but the choices available for people with low incomes and less education - the majority of whom are non-white - are much narrower than their more affluent counterparts.

Some neighborhoods have many markets offering fresh produce at good prices, while others have only corner stores selling alcohol, tobacco and junk food. Some neighborhoods have clean parks and trails that encourage physical activity, while in others, families stay indoors for lack of a safe place to play.

Some workers have health insurance, others do not. Some people have easy access to health screenings and education, but for many, getting to a doctor means overcoming transportation, language, cultural and financial barriers that discourage preventive care.

The root causes of health disparities are systemic, institutionalized - and open to change. Public policy can create healthier environments.

A groundbreaking documentary series, "Unnatural Causes: Is Inequality Making Us Sick?" has been airing on PBS stations and opening viewers' eyes to the ways that discrimination and racism affect health. The facts and stories in the series increase the understanding of health inequities and could spark a widespread community dialogue that will lead to change.

The Health Trust, the Santa Clara County Public Health Department and other community organizations are partnering to continue this dialogue throughout 2008.

Copies of the documentary series can be checked out free from Santa Clara County public libraries, San Jose libraries and the Health Trust so service

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clubs, neighborhood associations, faith-based groups, PTAs, youth groups and other grass-roots organizations can see and discuss it. The trust is offering \$25,000 in mini-grants to help pay for community gatherings. (For information, go to [www.healthtrust.org](http://www.healthtrust.org) .)

Later in the year we will invite the public to a Health Disparities Summit to capture the ideas generated at these events. A plan will be created at this summit outlining how we can overcome race and socioeconomic health inequalities.

Silicon Valley has the potential to be the healthiest region in America, but all of our residents - of every race, income level and neighborhood - need the opportunity to enjoy an optimal state of wellness and vitality. Advancing health equity benefits us all and, ultimately, it's the right thing to do.

*FREDERICK J. FERRER is the chief executive officer of The Health Trust.*

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