How health inequities outlive historical social injustices

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Timothy M. Smith
Senior News Writer

“People are trapped in history, and history is trapped in them,” James Baldwin once wrote.

During a recent two-part “Ethics Talk” videocast from the AMA Journal of Ethics® (@JournalofEthics), Nancy Krieger, PhD, professor of social epidemiology at the Harvard T.H. Chan School of Public Health, talked about how experiences of injustice can become “embodied” in individuals and populations, producing negative health effects that last a lifetime.

Policy has to account for history

“People who were born in 1950, for example, they were in their teens when Jim Crow was abolished,” Krieger said. “What were [their] life experiences? That gets completely lost from a very ahistorical approach that doesn't think about what those impacts are.”

Dr. Krieger said her research has shown that being born under Jim Crow laws has had lasting negative effects on infant mortality, premature mortality and even breast cancer rates among Black Americans. It also has shown the durable effects of redlining—the institutional practice of limiting investment in low-income neighborhoods beginning in the 1930s.

Redlining set some populations back for generations because housing “is one of the main ways in which people in the U.S.” can build wealth, Krieger said. “And if you don't have access to housing, you don't have access to wealth.”

COVID-19 rings the bell

The pandemic has exposed this phenomenon, Krieger noted.
“Our bodies don’t decide that this is a housing problem one day, this is a transportation problem another day, this is a workplace problem still another day,” she said. “Because we live it all simultaneously. We’re always integrating. That’s the theme of embodiment.”

Social epidemiology can contribute valuable insights to health policy, Krieger said, but the domain has long been handcuffed by a lack of research funding.

“There’s a time-disgraced tradition of basically trying to have ‘no data, no problem,’” Krieger said. At the same time, the idea that people carry their histories in their bodies isn’t very well grasped by policymakers.

“If you suddenly abolished—100%—all racial inequality in this country, and you evened out all income, and everybody was living in equally great homes … but you kept everybody in the same bodies that they had, would you expect health inequities to disappear overnight?” Krieger asked rhetorically. “The answer is no.”

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