

Medical Sociology

Health Issues in the Black Community, edited by **Ronald L. Braithwaite** and **Sandra E. Taylor**. San Francisco: Jossey-Bass, 1992. 371 pp. \$39.95. ISBN: 1-55542-477-5.

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Health Issues in the Black Community is a comprehensive examination of a broad range of health concerns that disproportionately affect the African-American (or black) community. Twenty-five chapters cover traditional issues such as heart disease, cancer, diabetes, AIDS, hypertension, and substance abuse, but they also address violence, homicide, homelessness, and reproductive rights as major public health issues.

In an introductory overview, the editors claim that the book is a call to action that rejects the usual disease model for a more contextual approach. The volume delivers on this promise. The theme of the book—that the health of the black community is intertwined with the socioeconomic, political, and cultural conditions of that population—is well illustrated in the chapter on chemical dependency. Watson shows that in addition to individual and interpersonal influences, drug abuse is affected by societal influences that include “the cost of alcohol and other drugs, federal laws concerning alcohol and illegal drugs, the minimum purchase age for alcohol, the marketing of alcohol, and the portrayal of alcohol, tobacco and other drugs on television and in movies” (p. 71). Similarly, Avery’s discussion of drug use among black women emphasizes that it must be understood within the context of the struggle to make ends meet, to find meaning in one’s life, and to cope with alienation and loneliness.

This comprehensive approach is evident in

the proposed solutions. Health-education initiatives typically use an individual approach that pays scant attention to the larger social context. However, Warren’s chapter on health education indicates that in order to be effective, health education “must address issues of education, employment, housing, income, and racism, as well as health status” (p. 251).

However, the breadth of coverage leads to some losses in depth of analysis. In addition, the research reviewed is, at times, somewhat dated, with the obvious omission of important recent work. For example, the chapter on mental health notes the limitations of treatment data but concludes that blacks have lower levels of mental health than whites. The Epidemiologic Catchment Area (ECA) Study data are the best currently available to address the question of racial differences in psychiatric disorders. Some findings from the ECA are cited, but the central finding about race is omitted. The ECA data clearly indicate that, with the possible exception of some anxiety disorders, blacks do not have higher rates of psychiatric disorders than whites.

Similarly, Ladner and Gourdine, in their discussion of adolescent pregnancy, indicate that “medical problems associated with teenage pregnancy are intrinsically linked” (p. 212), neglecting the work of Arline Geronimus, which convincingly demonstrates that, on the basis of the associated medical risks, the late teen years are optimal for childbearing for black and Puerto Rican females (but not for Mexican Americans and whites).

Health Issues in the Black Community does an excellent job of highlighting the joint contribution of biological and social influences to health status and appropriately calls for more research attention to the contribution of the social environment. Jenkins’s chapter on AIDS, for example, indicates that there was evidence as early as 1982 that blacks had a greater risk of AIDS than whites. He shows, though, that this was not due to any differences in biological susceptibility between the races, but to variations in the distribution of risk behaviors, coexisting conditions, and inadequate access to early diagnosis and treatment. Similarly, Harper’s chapter on the black elderly states that “poverty, ignorance, social isolation, and racism are as deleterious to the aging process

In *Contemporary Sociology*, 1993 22(5),

and the quality of life for the black elderly as are biological impairments" (p. 227).

The volume is sensitive to issues of race not only in understanding the causes of particular health problems but also for treatment approaches to them. It calls for improvements in the quality of medical care, outlines a broad range of strategies to increase the pool of black health-care providers, and highlights the potential contribution of indigenous health workers, but it also stresses that medicine alone cannot solve the health problems of the black community. For example, in her discussion of the persistent infant mortality gap between blacks and whites, Floyd indicates that solutions based on the medical model alone are inherently flawed: "A truly comprehensive approach is required. To fail to address the effects of poverty, unemployment, lack of educational opportunities, and racism on the overall infant mortality rate is to doom proposed solutions to failure" (p. 171).

In rejecting the medical model, this volume questions much of the conventional wisdom on black health, but this healthy skepticism was not applied to official statistics and data. Although the problem of the census undercount is noted, census data (unadjusted for undercount) and morbidity and mortality rates that use census data as denominators were unquestioningly used. Net census undercount for middle-aged black males ranges from 15%–19%, and rates that use census data as denominators are overestimated by the same percentage as the undercount. Unadjusted census data can distort the demographic and health profile of the black population.

There are also some glaring omissions in the book. Although Avery's chapter on the health problems of black women discusses exercise and nutritional problems, it does not address obesity, which is arguably one of the most critical health problems among African-American females. Black females are twice as likely to be obese as their white counterparts, and this high level of obesity is an important factor in the higher rates of diabetes, hypertension, and other chronic illnesses.

However, the most disappointing failure of the volume is in not addressing systematically the role of racism and racial discrimination in health. Almost every chapter asserts that "racism," "racial bias," or "racial discrimination" is an important determinant of the

health of the black population. Little direct evidence is provided, and there is no discussion of the mechanisms by which racism affects health. Arguably, one of the most important issues in future research on the relationship between race and health is the development of theoretically informed measures of racism and discrimination and the empirical assessment of their effects on health. More generally, the inadequate attention given to racism illustrates that although *Health Issues in the Black Community* does an admirable job of summarizing our knowledge of the nature and extent of health problems among African Americans, it is less successful in raising the often-difficult, but promising, questions needed to guide future research.