Cost of Darkness: Healthcare Sector

By Crystani Freeman

Black people in America have the worst health care, status, and outcomes of any minority group in the country.Quality and accessibility to doctors vary by zip code, and ‘poor people’ cannot start a savings account without somehow impacting their [social security](https://pocketsense.com/can-receive-ssi-social-security-8247348.html) checks. Systematic oppression causes low-income folks to either rely on government assistance or not have it at all.

“The standard histories and the best-known accounts of the black condition [during slavery] provide little more than anecdotal information on black health and black mortality,” notes Lee and Lee [in a 1977 report](https://ajph.aphapublications.org/doi/10.2105/AJPH.2019.305290). From [sickle cell disease](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2593958/) that harms black communities at alarming rates, to campaigns against the [improvement of black health](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2637749/), the marginalization continues.

Over the years, scientists, physicians, and philosophers have created and perpetuated [racial inferiority mythology](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2593958/) to segregate African-Americans and the poor in health care to discourage them from ever going to the hospital. Black men are the least likely to seek medical treatment and are expected to [live](https://www.nytimes.com/2020/01/13/upshot/race-and-medicine-the-harm-that-comes-from-mistrust.html) three years less than the lifespan of white men.

Other [groups of color](https://www.nytimes.com/2020/01/13/upshot/race-and-medicine-the-harm-that-comes-from-mistrust.html) have also had an unpleasant history with health care. One-third of Puerto Rican women, considered ‘of child-bearing age,’ were forced into sterilization between the 1930s and ‘70s. Non-consenting Native American women were also sterilized between the 1960s and ‘70s, as a result of the California eugenics law. Although there were [some changes made in the 60s and 70s](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2637749/), to protect and ensure black health, quality has plummeted even further since then.

The Institute of Medicine reported on *Unequal Treatment* in 2002. They found that minorities [were less likely to receive](https://ajph.aphapublications.org/doi/10.2105/AJPH.2019.305290) kidney dialysis, transplants, and appropriate cardiac medications for surgery compared white patients.

In the report, *Black-White Disparities in Health Care,* the American Medical Association’s (AMA) Council on Ethical and Judicial Affairs examined the inequitable provision of medical coverage. Though the AMA has excluded the entry of African American physicians for over 100 years, they acknowledge that there is an ethical problem. [Less than seven percent](https://www.nytimes.com/2020/01/13/upshot/race-and-medicine-the-harm-that-comes-from-mistrust.html) of recent medical school graduates, and four percent of current physicians are black. This has influenced a recent push for [black physician leadership](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2637749/) in previous decades.

The United States has made progress and attempts to provide coverage, like Medi-cal and Medicaid, to low-income people. But the *Cost of Darkness* documentary depicts how people of color still encounter challenges in both obtaining and using health care.