

The Toxic Power of Racism

Recent studies document the harmful effects of discrimination on our health.

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Like many of us, I was inspired by Sen. Barack Obama's recent eloquent speech on healing racial and other divisions in this country. His words resonated with my personal experiences. In 1981, for example, when my friend and I moved to Boston to start our medical internships at Massachusetts General Hospital and the Brigham & Women's Hospital, the landlord forced us to find another place to live when he saw that she was African-American.

In his speech Senator Obama was careful to point out that access to affordable health care is a *human* issue, not one reducible to the color of our skin or the color of our states, Red or Blue. As he said, "This time we want to talk about how the lines in the emergency room are filled with whites and blacks and Hispanics who do not have health care, who don't have the power on their own to overcome the special interests in Washington, but who can take them on if we do it together."

However, a growing body of research during the past few years indicates that one of the most glaring inequalities experienced by African-Americans is the disparity in health care that they receive. This week, for example, [the New York Times reported](#) that the Department of Veterans Affairs found that black patients "tend to receive less aggressive medical care than whites" at its hospitals and clinics, in part because doctors provide them with less information and see them as "less appropriate candidates" for some types of surgery.

Statistics tell the story. A new government report found the difference in life expectancy between poor black men and affluent white women to be more than 14 years (66.9 vs. 81.1 years)! African-Americans have a higher risk of dying from chronic ailments such as coronary heart disease and high blood pressure than any other ethnic group. Only part of this disparity is explained by differences in income and access to adequate medical care. On average, the most affluent African-Americans suffer more health problems than the least affluent whites.

In the past decade more than 100 studies have been published documenting the harmful effects of racial discrimination on a variety of health measures in African-American men and women. For example, a recent [study](#) that followed nearly 60,000 African-American women for six years found that women who reported on-the-job racial discrimination had a 32 percent higher risk of breast cancer than others who did not. Women who said they faced racial discrimination on the job, in housing and from

the police were 48 percent more likely to develop breast cancer than those who reported no incidents of major discrimination. Another [study](#) of African-American women found that those who reported chronic emotional stress due to their experience of racism had more severely blocked carotid arteries (which supply blood to the brain) than those who did not. In yet another [study](#) perceived racism was associated with a significantly increased risk of uterine fibroids in black women, and this was unrelated to differences in health care utilization.

Some critics say that racism cannot be objectively measured and so does not lend itself to rigorous research. However, the latest studies show that it is the *perception* of chronic stress that determines whether or not it is harmful. For example, two people in the same job may react very differently to a boss's demands—one may perceive them as an exciting challenge and not experience them as stressful, whereas the other person may experience them as chronically stressful and have a higher likelihood of illness. While the experience of racism, like any chronic stress, is subjective, the harmful effects can be quite real. The effects can be both direct (increased blood pressure, decreased immune function) and indirect (more smoking, drinking and overeating, less exercise and social support).

This area of research is controversial for some, as it can be misused to further polarize and fan the flames of anger and blame. To me, however, awareness is the first step in transformation and healing. Chronic hostility, fear and hatred are among the most toxic forms of stress. Chronic stress due to racism affects everyone, not just African-Americans. As Senator Obama shared, "a similar anger exists within segments of the white community." Even his beloved white grandmother, who "once confessed her fear of black men who passed by her on the street, and who on more than one occasion has uttered racial or ethnic stereotypes that made me cringe ... Resentment builds over time." In another example, Arab-Americans experienced a period of increased harassment, violence and workplace discrimination in the weeks immediately following Sept. 11, 2001. A study of pregnant Arab-American women in the six months following 9/11 compared with a year earlier found a significantly elevated relative risk of poor birth outcomes.

Well then, what can we do about it? As we understand how chronic stress leads to illness, we begin to understand even more profoundly that how we treat each other, and how we talk with each other, matters—not only in our quality of life but even in our survival. "Just words" can harm or heal. We can all find many reasons to righteously justify our anger and fear, but we have more constructive choices. When we can connect the dots between what we do and how much we suffer—from both chronic stress and increased illness—then we can make different choices that are a lot more enjoyable and healthful.

When we are angry with someone, we empower the person we hate the most in that moment to make us stressed out or even sick. That's not smart. Seen from that perspective, the most "selfish" thing we can do is to be more compassionate, tolerant and forgiving. When we forgive someone, it doesn't excuse their actions; it frees us from our own chronic stress and suffering, so it's in our own self-interest.

As then-President Bill Clinton said in his address to the Nigerian parliament in 2002, "Some things you just have to forgive and let go. That's one thing I learned from my friend Nelson Mandela. I asked him, 'When you were taking your last walk for freedom, didn't you hate your oppressors again?' He said, 'I did for a while, after all. Look, they kept me for 27 years. I didn't get to see my children grow up. I felt hatred and I was afraid. I hadn't been free in so long.' And then he smiled at me and he said, 'If I still hated them when I got outside the prison gate, I would still be their prisoner.' He said, 'I wanted to be free, and so I let it go'."

In his speech Senator Obama concluded, "In the end, then, what is called for is nothing more, and nothing less, than what all the world's great religions demand: that we do unto others as we would have them do unto us. Let us be our brother's keeper, Scripture tells us. Let us be our sister's keeper. Let us find that common stake we all have in one another, and let our politics reflect that spirit as well."

All divisions are man-made. In an era in which war and terrorism—at home and abroad—are often

based on racial, religious and ethnic differences, rediscovering the wisdom of love and compassion may help us increase our survival at a time when an increasingly divided country and world so badly need it.

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