A Letter from the Executive Producer

It often appears that we Americans are obsessed with health. Media outlets trumpet the latest gene and drug discoveries, dietary supplements line shelf after shelf in the supermarket and a multi-billion dollar industry of magazines, videos and spas sells healthy "lifestyles." We spend more than twice what the average rich country spends per person on medical care.

Yet we have among the worst disease outcomes of any industrialized nation – and the greatest health inequities. It’s not just the poor who are sick. Even the middle classes die, on average, almost three years sooner than the rich.

At every step down the socio-economic ladder, African Americans, Native Americans and Pacific Islanders often fare worse than their white counterparts. Interestingly, that’s not the case for most new groups of immigrants of color. Recent Latino immigrants, for example, though typically poorer than the average American, have better health. But the longer they live here, the more their health advantage erodes.

Our international health status has fallen radically in the last few decades. In 1980, we ranked 14th in life expectancy; by 2007, we had fallen to 29th. Our infant mortality rate lags behind 30 other countries. And illness now costs American business more than $1 trillion a year in lost productivity.

Healthy behaviors, molecular research, and of course, universal health care are all important. But evidence suggests they miss the most vital factor of all: how the social circumstances in which we are born, live and work can get under our skin and disrupt our biology as surely as germs and viruses.

We produced UNNATURAL CAUSES to draw attention to the root causes of health and illness and to help reframe the debate about health in America. Economic and racial inequality are not abstract concepts but hospitalize and kill even more people than cigarettes. The wages and benefits we’re paid, the neighborhoods we live in, the schools we attend, our access to resources and even our tax policies are health issues every bit as critical as diet, smoking and exercise.

The unequal distribution of these social conditions – and their health consequences – is not natural or inevitable. It is the result of choices that we as a community, as states, and as a nation have made, and can make differently. Other nations already have, and they live longer, healthier lives as a result.

We hope that the series and its companion tools will help you work towards better health by bringing into view how economic justice, racial equality, and caring communities may be the best medicines of all.

Larry Adelman
Executive Producer
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