

## ***Unnatural Causes* documentary screenings**

*To schedule a screening for your group, call 250-5205 or go to [www.healthpartnerswnc.org](http://www.healthpartnerswnc.org)*

### **Episode Descriptions**

#### **In Sickness and in Wealth                      Episode 1                      56 minutes**

What are the connections between healthy bodies, healthy bank accounts and skin color? Our opening episode travels to Louisville, Kentucky, not to explore whether medical care cures us but to see why we get sick in the first place, and why patterns of health and illness reflect underlying patterns of class and racial inequities. Compared to other countries, the U.S. has the greatest income inequality – and the worst health. Economic inequality is greater than at any time since the 1920s. Solutions being pursued in Louisville and elsewhere focus not on more pills but on more equitable social policies. Louisville's new Center for Health Equity is the first of its kind: a collaboration between community members, local government, private business and health care organizations focusing on the social conditions that underlie our opportunities for health and wellbeing.

#### **When the Bough Breaks                      Episode 2                      29 minutes**

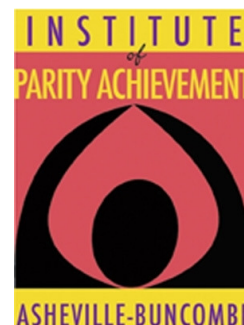
The number of infants who die before their first birthday is much higher in the U.S. than in other countries. And for African Americans the rate is nearly twice as high as for white Americans. Even well-educated Black women have birth outcomes worse than white women who haven't finished high school. Why? We know that in general health follows wealth: on average, the higher on the socioeconomic ladder you are, the lower your risk of cancer, heart disease, diabetes, infant death and preterm deliveries. For highly educated African American women like Kim, the advantages of income and status do make a difference for her health, but there's still something else at play: racism.

#### **Becoming American                      Episode 3                      29 minutes**

Recent Mexican immigrants, although poorer, tend to be healthier than the average American. They have lower rates of death, heart disease, cancer, and other illnesses, despite being less educated, earning less and having the stress of adapting to a new country and a new language. In research circles, this is the Latino paradox. But as they are here longer, their health advantage erodes. After five years or more in the U.S., they are 1.5 times more likely to have high blood pressure – and be obese – than when they arrived. Within one generation, their health is as poor as other Americans of similar income status.



[www.healthpartnerswnc.org](http://www.healthpartnerswnc.org)



**Bad Sugar****Episode 4****29 minutes**

The Pima and Tohono O’odham Indians of southern Arizona have arguably the highest diabetes rates in the world – half of all adults are afflicted. But a century ago, diabetes was virtually unknown here. What happened to the health of the Pima? During the 20th century, the diversion of river water to upstream white settlements disrupted the Pima’s agricultural economy and customary ways. Local tribes were plunged into poverty and became dependent on the U.S. government. Healthy traditional foods like tepary beans, cholla buds, and wild game were replaced by surplus commodities like white flour, lard, processed cheese and canned foods – a diabetic’s nightmare. A sense of “futurelessness” took hold, and so did diabetes.

**Place Matters****Episode 5****29 minutes**

Why is your street address such a good predictor of your health? In many communities, segregation and lack of access to jobs, nutritious foods, and safe, affordable housing have been harmful to the health of many residents. Tobacco, liquor and fast food are everywhere, but fresh produce isn’t. Quality affordable housing is hard to find, and so are safe places to play and exercise. In the Pacific Northwest, a neighborhood that was once in distress is emerging as a promising alternative. Community members, local government and developers took a radical approach in rebuilding this neighborhood – using federal funding to create a mixed-income community with health as its focus.

**Collateral Damage****Episode 6****29 minutes**

The rate of both chronic and infectious diseases in the Marshall Islands has significantly increased since the country established a close relationship with the US. The lives and health of Marshall Islanders in the equatorial Pacific were disrupted in a unique fashion when the United States occupied their nation and used their outer islands for extensive nuclear testing after World War II. Today, around 10,000 Marshall Islanders, seeking a better future, have ended up in the unlikely place of Springdale, Arkansas. A special treaty allows Marshallese citizens to live and work in the U.S. freely without a visa. Drawn by plentiful jobs in the food processing industry and a low cost of living, most are happy to have better educational opportunities and healthier options. But even though the Marshallese can leave the impoverished conditions of their homeland behind, they can’t escape the effects of having lived in poverty.

**Not Just a Paycheck****Episode 7****30 minutes**

In the winter of 2006, the Electrolux Corporation closed the largest refrigerator factory in the U.S. and moved it to Juarez, Mexico, for cheaper labor. The move turned the lives of nearly 3,000 workers in Greenville, Michigan, upside down. As personal finances spiral downward, health follows. And the lay-offs not only affect workers but their families and the entire community as well. As middle-class Americans find their health and way of life increasingly threatened by globalization and corporate profit-seeking, those in the top income brackets are reaping the spoils of our winner-take-all society. In other countries, the situation is vastly different.