UNNATURAL CAUSES
...is inequality making us sick?

and other films on health and social justice

Films from California Newsreel
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Unnatural Causes, for the first time on film, investigates the sources of our alarming socio-economic and racial inequalities in health—and searches for solutions. The four-hour, seven-part series sifts through the evidence suggesting that there’s more to our health than bad habits, health care, or unlucky genes. The economic and social environments in which we are born, live and work profoundly affect our well-being and longevity.

Conceived in association with leading public health, policy and community-based organizations, Unnatural Causes is helping reframe the national debate about what we as a society can—and should—do to address our glaring health inequities.

The U.S. spends $2 trillion a year on health care, more than twice per person than the average rich nation. Yet American life expectancy ranks 29th in the world. Infant mortality? Cyprus, Slovenia and Malta do better. One third of Americans are obese. Chronic illness now costs American businesses more than $1 trillion a year in lost productivity.

Further, Unnatural Causes reveals a gradient to health. At each step down the class ladder - from the rich to the middle class to the poor—people tend to be sicker and die sooner. It’s not CEOs who are dropping dead from heart attacks, but their subordinates. Poorer smokers are more likely to get sick than rich smokers.

Yet at every socio-economic level, African Americans are worse off than their white counterparts. For many diseases so are other communities of color. And the mortality gap has been growing. But why? How do socio-economic status and racism get under the skin and become embedded in our bodies? Through what channels might inequities in housing, wealth, jobs, and education, along with a lack of power and control over one’s life, translate into bad health? What is it about poor neighborhoods, especially poor neighborhoods of color, that is so deadly? How are the choices we make (e.g. diet and exercise) constrained by the choices we have?

Unnatural Causes crosses the country investigating the findings that are shaking up conventional understanding of what really makes us healthy—or sick. As Harvard sociologist David Williams points out, investing in our schools, improving housing, integrating neighborhoods, better jobs and wages, giving people more control over their work - these are as much health issues as diet, smoking, and exercise.

In Sickness and In Wealth: 56 min.

The opening episode travels to Louisville, Kentucky to set out the series’ main theme: that health and longevity correlate with class status, that people of color face an additional health burden, and that our health and well-being are tied to policies that promote economic and social justice. Solutions, the show suggests, lie not in more pills but in better social policies and more equality.

When the Dough Breaks: 28 min.

Why are African American infant mortality rates still more than twice that of whites? African American women with graduate degrees face an even greater risk of delivering pre-term, low birth-weight babies than white women who didn’t finish high school. In this medical detective story, researchers hone in on how the burden of racism through the life-course can be an added risk-factor.

Collateral Damage: 28 min.

Patterns of uneven development mark the Pacific Islands. Diabetes, cardiovascular and kidney diseases, even tuberculosis, are taking a growing toll. In the Marshall Islands and in the unlikely spot of Springfield, Arkansas we can see how U.S. occupation, military policy and globalization impact people’s health—often in unanticipated ways.

Not Just a Paycheck: 28 min.

How does employment policy and job insecurity affect our health? Residents of western Michigan struggle against depression, alcoholism, and an uptick in chronic diseases when the largest refrigerator factory in the U.S. moves to Juarez, Mexico. Hardly a ripple was felt when the same company shut down one of its Swedish plants where national social policies based on an ethos of shared responsibility protect workers from the impact of globalization.

In Sickness and In Wealth: 56 min.

Why is your street address such a good predictor of your health? Recent Southeast Asian immigrants, along with Latinos, are moving moving into what have been neglected black urban neighborhoods—and now their health is being eroded too. What policies and investment decisions foster neighborhood environments that can harm—or promote—the health of residents? And what local actions can make a difference?

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Are the world’s largest drug companies actually major obstacles to making a healthier world?

The film focuses on the practices of Big Pharma, the ten largest pharmaceutical makers, who account for $500 billion dollars of world health spending a year. Their pre-tax profits were greater than the profits of all the other Fortune 500 Companies combined.

Officials from all sides debate the impact of companies’ patenting, pricing, and new product development strategies on global public health. These policies, according to Nobel Prize winning economist, Joseph Stiglitz, “are condemning billions of the world’s poorest citizens to death.”

The key to the power of Big Pharma over the world drug market is the TRIPS agreement (Trade Related Aspects of Intellectual Property Rights), negotiated within the World Trade Organization (WTO). TRIPS requires member states to grant pharmaceutical companies patents for the exclusive manufacture of new drugs for at least 20 years, enabling them to maximize profits through monopoly pricing, unaffordable to all but the world’s most affluent citizens in developed nations.

Heath for Sale exposes how drug companies often hold hundreds of patents on the same drug and - in a process called “ever-greening” - obtain extended patents upon inventing a new use for a drug, however small its therapeutic value. An industry spokesman rationalizes charging consumers as much as 100 times the manufacturing cost of a drug as necessary to recoup research and development costs. Yet during the decade of the 1990s, drug companies made a 25% profit on sales, while spending only 12.5% on research.

While 85% of all people die from just five diseases, many specific to the poor countries of the Global South, only 11% of drug company spending is on these plagues. During the last quarter of the 20th century, 1,500 major new drugs were approved, but only thirteen of them were used to treat tropical diseases. The reason is clear: the money and the market for drugs is in the Global North not the Global South.

A visit to an AIDS clinic in South Africa graphically reveals the priorities of drug companies. 29 million people are living with AIDS in sub-Saharan Africa. While Big Pharma spends millions to develop new drug “cocktails” to treat HIV+ patients in the Northern hemisphere, they invest almost nothing in appropriate, affordable drugs and diagnostic tools needed to treat patients in the global South.

Yet Big Pharma’s hunger for profits also distorts the economies of the Global North. One reason is that Big Pharma not only treats diseases, it creates them in a process the industry calls “astro-turfing.” They invest millions of dollars to persuade doctors to recognize new diseases requiring more medication. For example, hyperactivity in children has been reclassified as Attention Deficit Disorder (ADD) so that, today, 15% of school children are on Ritalin. These expensive, often unnecessary, prescriptions squander billions of dollars.

In 2004, a British parliamentary report concluded that “The interests of public health are not in the health industry’s interest.” A spokeswoman for the international relief organization, Médecins sans Frontières, is urging governments to use their regulatory powers so that the public health sector can set the priorities for drug companies’ pricing and product development. Health for Sale, through a close examination of one essential industry, calls into question whether global markets and corporations can be trusted to serve the interests of a majority of the earth’s population.

“By visually anchoring the obscure set of real world legal and policy linkages to the health and well-being of the nations experiencing the realities of the operation of the international patent system, Health for Sale greatly facilitates comprehension of the issues.”

—Philip Bereano, University of Washington and co-founder Washington Biotechnology Action Council

Producer: Ilaria Malagutti
Directors: Michele Mellara and Alessandro Rossi
53 minutes, Italy, 2007
The Beloved Community tells the story of a city reeling from health and environmental degradation caused by petrochemical companies. It highlights the conundrum facing many communities: how to safeguard the health and well-being of its citizens while maintaining the economic base necessary for their livelihoods.

In the summer of 2004, Canadian health researchers made a startling discovery in the Aamjiwnaang (Chippewa) birth records for the city of Sarnia, an hour north of Detroit. For the past decade, female babies had been outnumbering males at a rate of 2 to 1. Further investigation revealed a large number of miscarriages, a cluster of reproductive cancers in young women, and overwhelming evidence that the goods they buy are produced. This film makes those connections shockingly clear, following the process of textile production in India.

The journey begins with the harvesting of the cotton in Punjab, a process that uses heavy pesticides produced by Western corporations but long banned in the West. The film then moves to Panipat, a textile producing center. The filmmaker finds workers standing in tanks of fuming chlorine gas, banned in Europe for twenty years and used as a poison gas in World War I.

The filmmaker shares the footage with buyers from some of the chains purchasing from these plants. Some claim they will investigate immediately, while others refuse to respond. A Killer Bargain makes it clear that consumers must hold companies accountable for the conditions under which their products are produced.

“See this film: A Killer Bargain is powerful, disturbing, and instructive. Consumers need to understand: we are complicit in poisoning the people who make what we buy. Understand, and act.”

—Joshua Cohen, Stanford University

“A Killer Bargain illuminates thoroughly and convincingly the dark side of globalization, one in which desperately needed jobs in the Third World cause the shortening of lives of many working poor.”

—Michelene Ishay, Director International Human Rights Program, University of Denver

Facilitator’s guide available at www.newsreel.org

A film by Pamela Calvert / Plain Speech; Produced in association with Detroit Public Television; Executive Producer: Jeff Forster; 56 minutes, U.S., 2006, English

Closed captioned

A KILLER BARGAIN

The killer bargain referred to by this documentary’s title is the availability of cheap consumer goods whose prices don’t reflect the human and environmental costs of their production. Western consumers remain largely unaware of the conditions under which the goods they buy are produced. This film makes those connections shockingly clear, following the process of textile production in India.

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MAQUILAPOLIS

Maquilapolis tells one of the many stories of workers confronting multinational corporations across the globe that exploit their labor, damage their health and destroy the environment. Today Tijuana, otherwise known as maquilapolis, or city of factories, is home to more than 4,000 plants employing 1,000,000 workers.

The filmmakers provided several women maquiladora workers with video cameras, enabling them to document their daily lives, creating a film in the tone of a video diary. We meet Lourdes Lujan, who lives in a barrio bisected by a stream that flows from a bluff occupied by nearly 200 plants, expelling hazardous wastes. Among these is an abandoned battery recycling factory whose U.S. owner relocated to San Diego to avoid paying fines and clean-up costs. Chilpancingo residents downstream and downwind of the Metales site began to suffer skin and respiratory problems, as well as an abnormally high rate of birth defects.

Along with the backing of the San Diego Environmental Health Coalition, Lourdes and her neighbors mounted a campaign to resist. Maquilapolis demonstrates that, while globalization gives corporations the freedom to cross borders in search of cheaper labor, determined individuals can organize themselves into powerful movements that can successfully demand that laws be enforced.

Facilitator’s guide available at www.newsreel.org

“Maquilapolis succeeds in crossing borders and peering around corners to capture how the women caught in the contradictions of global capital understand their own positions. A key case study for anyone interested in transnational realities.”

—B. Ruby Rich, University of California, Santa Cruz

“Maquilapolis is a compelling look at the high, hidden costs of the global economy. It puts human beings front and center. This film is a must see!”

—Harley Shaiken, University of California, Berkeley

“A portrait of the perils of globalization that admirably seeks new forms of expression…A stirring work that provoke genuine outrage.”

—The New York Times

Producers/Directors: Vicky Funari and Sergio De La Torre

68 minutes, United States, 2006

In Spanish with English with bi-lingual subtitles

Closed captioned English language only
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