

# Young African American men deserve better from health care, according to researchers

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Healthcare spending is at an all-time high in the U.S., yet young African-American men see little benefit, according to Boston Medical Center (BMC) researchers' Viewpoint commentary published in the current issue of the [\*Journal of the American Medical Association \(JAMA\)\*](#).

The researchers note that black men have a life expectancy nearly five years less than [white men](#). While heart disease and cancer contribute to this decreased [life expectancy](#), homicide also plays a large role. From ages 1 to 14, homicide is either the second or third leading cause of death for African-American men, and from ages 15 to 34, it is the leading cause of death. A frightening fact cited by researchers: Black men are safer in prison. Data shows that [black men](#) are half as likely to die if they are in prison than if they aren't incarcerated, whereas white men can die at a higher rate if they are incarcerated.

There have been calls from the public health sector to address the health of young African-American men, but the [medical field](#) has been relatively quiet, according to corresponding author Stephen Martin, MD, EdM, of the department of family medicine at BMC and the Boston University School of Medicine.

"Boston Medical Center has many programs and partnerships designed to help individuals cope with violence, find meaningful supports, and make improvements toward living a longer, healthier and happier life. A clear example is providing prescriptions for the hospital's Preventive Food Pantry," Martin said. "But largely, we in the medical field are not

meeting young African-American men where they are to address their medical needs - cardiovascular disease, diabetes management, HIV, mental health and much more."

The authors call for improved funding and other support for social and public health programs to address the disparities in healthcare, particularly as they impact young African-American men. Effectively addressing social determinants of health - conditions in which people are born, grow, live, work and age - has the greatest impact on health disparities and requires interventions beyond just [medical care](#), Martin said. The authors also point out that U.S. public health programs and activities receive only three cents of the healthcare dollar to support efforts to improve the health and wellbeing of our most vulnerable populations. A breakdown of the U.S. healthcare dollar in calendar year 2013, the most recent year for which statistics are available, can be found [here](#).

For medical care itself to improve, they call for proactive engagement and partnerships, effective lifestyle support such as the YMCA's Diabetes Prevention Programs, creating trusted spaces for men to feel comfortable and safe, and the use of newer technologies such as texting and virtual care team members to communicate with patients.

Martin and his colleagues also stressed the importance of programs such as the National Healthy Start Association, which bases its fatherhood programs on first addressing survival needs to ensure family involvement. Over the years, Healthy Start has developed programs that involve fathers, helping them to have bigger roles in their children's lives and promote the importance of responsible fatherhood, thereby adding value and strengthening family resilience.

"There is still much to be done to meet men on their own terms and provide them with the survival, behavioral, and medical care they need,"

said Brian Jack, MD, chair of the department of family medicine at Boston Medical Center and Boston University School of Medicine.

"Traditional medical care generally isn't built to do this well. But we are learning better approaches and ways to join efforts with others to truly and effectively meet the needs of young African-American men."

"There are many shadows that young African-American men in this country walk with every day of their lives; shadows that impede their ability to access a myriad of needed services," said co-author Kenn Harris, president-elect of the National Healthy Start Association.

"Indeed we need services that meet them where they are, but this calls for us to understand the communities in which they live. Our male involvement/fatherhood programs build off of the community-driven approaches demonstrated in the federal Healthy Start programs, which have proven to be an effective strategy. As providers begin to move out of their systems to engage community partners, there's greater potential for the needs of young African American [men](#) to be met."

Provided by Boston University Medical Center

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