Black Deaths Matter: A Conceptual Framework for Understanding Racial Disparities in Relationship Loss and Health

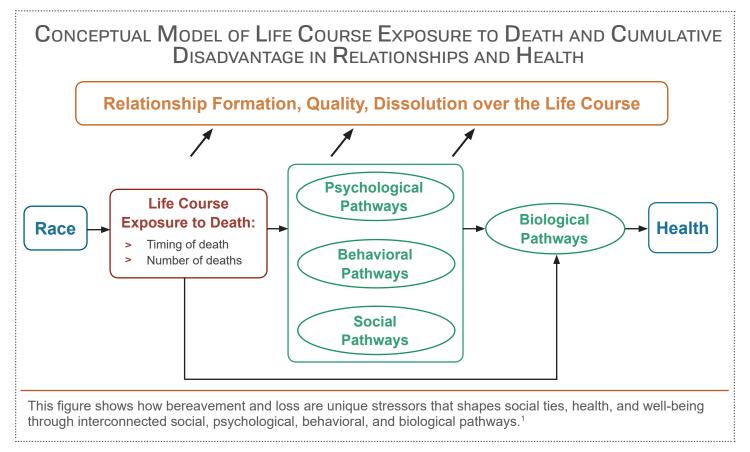
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INTRODUCTION

Black Americans are more likely than white Americans to experience the premature death of mothers, fathers, siblings, children, and other relatives and friends. These disparities begin in childhood and are repeated throughout life in ways that likely contribute to lifelong disadvantage in social ties as well as adverse effects on health and well-being.

Close relationships, or social ties, benefit mental health, physical health, and longevity. Yet, strained and conflicted social ties undermine health and well-being, and the loss of close relationships, particularly through death, can be devastating. In this brief, the author demonstrates that while social ties are a resource for health and well-being, this resource is unequally distributed in the population: black Americans suffer more loss and disruption to social ties than white Americans.

Racial disparities in exposure to the deaths of friends and loved ones is a unique type of stress for black Americans that destroys important social connections. This type of stress launches a lifelong cascade of psychological, social, behavioral, and biological consequences that undermine other relationships, as well as health, over the life course (see figure). A life course perspective broadens the focus on racial disparities in life expectancy in the United States to include the impact of such disparities on surviving children, adults, and families.



CONCEPTUAL MODEL, EXPLAINED

Exposure to death and relationship loss may undermine health and well-being through a complex interplay of psychological, behavioral, social, and biological pathways.

Psychological Pathways. The death of a significant other is associated with increased psychological distress and anxiety which erode a number of life outcomes. For example, distress may make it more difficult for bereaved children to focus in class or to attend school and this can have negative effects on long-term educational outcomes. Lower educational attainment, in turn, is strongly associated with poorer health and shorter life expectancy. Distress and anxiety also strain close social relationships.

Behavioral Pathways. Loss may affect health behaviors in several ways. First, to deal with emotional upset and distress, people may self-medicate with drugs or alcohol or self-comfort with overeating. Second, bereaved individuals may take behavioral risks (for example, reckless driving, risky sexual behavior) because they care less about their own well-being and survival after losing someone they care about. Third, the trauma of loss disrupts some behaviors that people have little control over, such as sleep patterns. Self-medication and risky behaviors also strain social relationships.

Social Pathways. Exposure to death can undermine health through the loss of socioeconomic status and lead to other social stressors. For example, the death of a parent may cause a family to lose wages, to move to a less expensive and less desirable neighborhood, or to shift responsibilities and require older siblings to care for younger siblings. As a result, decreased socioeconomic success, increased neighborhood stress, and other chronic strains impose stress on relationships and erode health and well-being.

Biological Pathways. Stressful events and chronic stress activate a physiologic response that, if prolonged, leads to dysregulated cardiovascular, immune, and endocrine functioning. Exposure to prolonged stress also leads to cumulative wear and tear on physiological systems that then accelerates biological aging and undermines health.

Social Ties. A central premise of the conceptual model is that death exposures weaken the potential for social connection during one's life. This is indicated by the arrows across the top of the figure. The interconnected pathways described above undermine health in part by contributing to strain in surviving social relationships, interfering with the formation of close social ties, increasing social isolation, increasing the risk of relationship dissolution, and diminishing opportunities for supportive social ties.

An example of interconnected social and behavioral pathways would be self-medication and risk-taking behaviors that impose strain on relationships with parents, intimate partners, and children. This strain could potentially lead to additional relationship losses through divorce, breakups, and loss of contact. Behavioral and social pathways intersect again when the loss of significant others means the loss of positive social influences that might prevent health-compromising behaviors and promote health-enhancing behaviors.

In sum, early and repeated exposure to loss activate multiple and intersecting life course pathways that add to disadvantage in social connections and health throughout the life course. This disadvantage is disproportionately experienced by black Americans, beginning in childhood.

POLICY IMPLICATIONS

Basic research and policies that address racial and ethnic disparities in loss, along with social and political action, have the power to disrupt a vicious loop of life course stress and loss that likely undermine social connections, health, and well-being across generations.

Research. Documentation of racial disparities in loss and the consequences of loss require large, representative data sets with substantial numbers of men and women from diverse racial-ethnic groups. In addition to black Americans, other populations are likely to be at increased risk for relationship loss. Indeed, the life expectancy gap between native American and white populations is even greater than the black-white gap in life expectancy. Understanding the pathways through which loss affects health and well-being also requires data sets with sophisticated measures of psychological, behavioral, social, and biological processes.

Policy. Scholarship on this topic should result in the translation of research into concrete strategies for policymakers, politicians, and practitioners who will work to reduce racial disparities caused by premature deaths of loved ones.

REFERENCE

¹Umberson, D. (2017). Black deaths matter: Race, relationship loss, and effects on survivors. *Journal of Health and Social Behavior*: 1-16.

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