

# Cancer trials: a social class and racial division in health



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## I. Introduction

Individuals of African and Hispanic descent in the United States are not given a fair chance at life due to the inequality of race and social class division within health care institutions. I will demonstrate that there is a class conflict between lower class minorities and upper-class Caucasians within the United States health care system. This will be accomplished by comparing race and class conflict issues with Marxist class conflict theory and W. E. B DuBois racial theory.

## II. Explanation of Cancer Trials and Minorities

In the New York Times article termed, " In Cancer Trials, Minorities Face Extra Hurdles," Denise Grady illustrates how minorities are institutionally discriminated against. Grady gives several reasons why cancer trials are disproportionately made up of white individuals, how researchers are aware of this inequality, and how they are trying to correct the problem. One of the biggest concerns of researchers is that many individuals of a lower class status are less educated. In addition, these individuals of a lower class status are sometimes illiterate, do not speak or understand English, suffer from underlying health issues such as obesity or diabetes, or do not have access to resources that those of middle class Caucasian individuals are privy to. Moreover, this creates issues of inequality because some doctors assume that the individuals that are of a lower class and are minorities do not have ability to manage the obstacles that come with the cancer trial study. Some of these obstacles include, child care, financial burdens for traveling, and taking time off of work for extended periods. However, Dr. Elise Cook stated,

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“ One of the biggest barriers is doctors not asking patients to join clinical trials because they assume they would not be candidates,” furthermore, she claims that many “ would participate if they were asked.” Dr. Cook also acknowledges that these cancer study trials have advantages that regular treatments do not have, such as frequent visits with doctors and nurses, free trial drugs, and more frequent testing. Additionally, Dr. Margaret Kemeny, an oncologist at Mount Sinai School of Medicine also claims that all patients should have access to research studies and that doctors and researchers should educate their patients so that they have the chance to participate in a study. Furthermore, not educating these patients is a discriminatory action on the part of the caretaker/doctor. Furthermore, the chief medical officer at the American Cancer Society claims that attributing less health care to minorities creates a higher death rate that could have been prevented by adequate treatment and care by professionals.

### III. Conflict Comparison

The lack of minorities who are not included in cancer trials reveal a conflicting issue between race and social class. The greatest factor within the health care between social and racial divides is that of a socioeconomic status. The rich are given more opportunities and advantages than the poor, this is a common theme in the American institutional system. Racial and ethnic minorities make up the majority of lower-class society due to oppression and lack of opportunities that can be used to gain upward social mobility. The elite and upper-class are more readily available to gain information and education concerning current medical trials that show progression in health issues. The elite are educated and they have monetary

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strengths that allow them advantages that the lower-class lack. While there are other integrated factors, such as underlying health issues and racial disparities the main issue is socioeconomic status. Marxist theory recognizes victims of low-social class as victims of capitalist exploitations. This can be seen in cancer studies as suffering under capitalism, the underprivileged do not have the means to acquire the economic gains in order to receive certain treatments. The rich are given more advanced and adequate options for health care. In contrast, the lower-class are given less options and ill-informed information for resources if any information at all. Similarly, W. E. B. DuBois would attribute these acts as a color line theory. According to DuBois, in America the color line is the division of black and white individuals into two separate unequal parts. Building off of Marxist theory, DuBois focused on the inequality of racial and gender differences. DuBois stated, “While together they could have offered a formidable challenge to structures of economic inequality, racial ideology divided the working classes.” (Ritzer, Stepnisky 69) The lower-social class is mostly those of racial and ethnic minority backgrounds and therefore this division in social class is also a racial class separation.

## V. Conclusion

Minorities in the United States are unfairly treated in the health care institutions. They are less likely to be considered for trials that could potentially save or extend their lives. This is due to the lack of education that the doctors and health care facilities do not provide to patients that are of lower class minorities. Many doctors will automatically assume that due to the economic status of these individuals that they are not eligible to

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participate in these cancer trial treatments. By not educating and pushing patients to seek alternative treatments due to social class and racial differences, this creates a conflict for equal health care.

## References

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