

Geronimus, A. (2023) *Weathering. The Extraordinary Stress of Ordinary Life in an Unjust Society.* Little Brown.

Review by Jamie Daniel

This complicated book is a provocative contribution to the field of social justice-focused public health. It intends to counter the pernicious narratives about lack of individual responsibility and a supposed collective pathology in minoritized communities that have dominated our public discourse and public policy, usually to the detriment of those communities.

Geronimus is a public health faculty member and researcher at the University of Michigan. Her primary area of focus for some 30 years has been the health issues faced by racialized constituencies, especially African Americans, and developing research-based counternarratives to those that pathologize their communities and thereby blame them for their health challenges.

The dominant narrative promoted by “experts” was that poor health outcomes and especially chronic conditions such as diabetes, heart trouble, and hypertension in Black communities were due to either genetics, i.e., factors they couldn’t control, or “bad behaviors” that they could. We may recall the numerous “black family pathology” stories of the 1980s and 1990s that claimed that Black communities brought these sorts of chronic health problems on themselves because of poor eating habits, too many teen pregnancies and unwed mothers, fathers not in the home, “welfare queens,” etc.

Geronimus began building her case against these assumptions in 1992, when she first published her research on Black teen mothers. She took on the myth that these young parents, who were sometimes referred to in the media and in Congress as a Black urban “reproductive underclass” or as “babies having babies,” represented a “crisis” that required state intervention, what she refers to as “the harsh branding of teen mothers as a new class of social deviant.”

What she found instead was that these young Black mothers were hardly deviants, and that they more often experienced better health outcomes than Black women who had borne children in their 20s and 30s. Why, she wondered?

The older Black women, she asserted, were more likely to have had their overall health already negatively impacted by what she termed “weathering” in response to the chronic stress caused by racism. This stress is not merely the sort of everyday stress we all might experience because of financial or family problems, but rather a deep, persistent “biopsychosocial” pressure exerted on the bodies and psyches of those who experience it by the racism that is structured into American political, legal, and cultural institutions, including our medical institutions.

She argues throughout the book via more recent examples that this pressure, which she defined in an interview as “general health vulnerability” caused by factors over which an individual has little

if any control, increases the longer a person has to experience it, and thus results in earlier deaths, and higher rates of chronic illness in Black communities. And, importantly, she found that this vulnerability existed regardless of class, in that being or becoming middle class did not prevent negative chronic impacts in Black communities, especially as they age. Of course, these usually have greater access to health care, but the discrepancies between them and comparable White communities persist.

One of the recent studies she discusses is especially interesting in light of our recent struggles to defend affirmative action mandates for students of color. Geronimus observes that one of the chronic social stressors that contribute to weathering is “a fear of seeming to confirm a negative stereotype” and the self-muting or silencing that can result, as well as the assumption that however one presents oneself in a public situation will reflect on the whole of a racialized group. I would expect that many of us who teach have experienced this in our classrooms, especially when the majority of students are white and the issue of “race” comes up. Too often, as one of my Black graduate students put it, she felt the pressure of what she called “white out” that prevented her from feeling she could respond in the discussion as an individual without the other students thinking she was speaking for all Black people. So, she often stayed silent in these discussions.

Geronimus conducted research on what she calls “the weathering effect of integration” among Black college students, and found that students who studied at majority Black institutions (HBCUs) experienced fewer health issues (i.e., less “weathering”) and were also more likely to complete their degree programs because they didn’t have the added pressure of “white out”—they were less likely “to be subjected to the biopsychosocial stress arousal response that triggers weathering” when able to “spend time only with members of their own group.” After also discussing the troubling health challenges faced by several Black students at majority-white Princeton, she concludes that “racialized social identity ... becomes central to students of color when they attend a PWI [predominantly white institution]...A strong argument could be made that *in the current racialized environment*, high-achieving Black students should give serious consideration to attending an HBCU even if they have access to a top PWI like Princeton.” (my emphasis) Here again, students from middle-class backgrounds are not spared from the mental and physical health consequences of structural racism.

This is a provocative and likely controversial assertion, of course, but it is typical of the author’s willingness to challenge common assumptions, even those cherished by progressives. Her initial claims about Black teen mothers in 1992 were initially met with derision, but her concept of weathering, and the physiological impact of structural racism, are increasingly taken seriously by public health professionals.

One can only hope they will someday be taken seriously by policy makers, given that so many of the policies enacted over the last decades to “end welfare as we know it” or fight the “war on poverty” have only exacerbated and reinforced weathering trends. Geronimus devotes a fiercely angry section on “Social Policy and the Assault on Black Family Life” to the catastrophic impact of policies like the 1996 “Personal Responsibility and Work Opportunity Reconciliation Act.” This policy, which claimed that “urban decay was the result of the moral decay of Black families,” making Black poverty inevitable. All of the stereotypes of teen motherhood and absent fathers first popularized by Daniel Patrick Moynihan’s 1965 “The Negro Family: The Case for National

Action” were dragged out again, as they were with Hillary Clinton’s crack about “super predators” and Barack Obama’s embrace of the absent-Black-father-as-a-problem. As the poet Crystal Williams put it in her fine poem, “Year after Year We Visited Alabama,” “the past has long legs, and is heavy.”

There is much to admire in this book. There are also some structural problems that could have been avoided. As other reviewers have also noted, Geronimus too often undercuts the impact of her solid research data by following it with anecdotal references to individual health situations that only “might,” “could possibly,” or “maybe” illustrate the conclusions of her data. These merely speculative examples jar the reader away from the continuity of the research findings. But they don’t negate the social value of those findings.

Reviewer Bio

Jamie Owen Daniel, a former assistant professor of English at the University of Illinois-Chicago, is also a retired union organizer and contract negotiator for the American Association of University Professors (AAUP). She recently taught a Working-Class Studies undergraduate course at Roosevelt University.