

NOVA



CRITICAL CONDITION

HEALTH IN BLACK AMERICA



**OUTREACH
TOOLKIT**

FILM DESCRIPTION

Critical Condition: Health in Black America



In *Critical Condition: Health in Black America*, Oscar-nominated and Emmy Award-winning filmmaker Stanley Nelson investigates the factors behind health disparities in the United States, tracing the historical roots of false beliefs in our medical system and examining the environmental and structural conditions that contribute to disproportionately poor health outcomes for Black Americans.

Black Americans are nearly twice as likely as White Americans to have high blood pressure, diabetes, and heart disease, and their life expectancy is about

five years shorter. Black women also face some of the worst maternal health outcomes in the United States and are three times more likely than White women to die during pregnancy and childbirth. *Critical Condition* investigates the causes of these dramatic health disparities in the United States, even as scientists confirm that there are no meaningful genetic differences between races. From the deep history of pseudoscientific beliefs about race that still permeate modern medicine, to the latest research on how experiencing discrimination can directly damage the body's DNA and biology, *Critical Condition* reveals the factors behind the health crises facing Black Americans, including the impacts of social and environmental forces that undermine Black people's health before they even visit a doctor.

When Machines Prescribe

Doctors rely on medical algorithms to make decisions about diagnoses and treatment. These computer programs are designed to take into account factors like symptoms, medical history, and test results to achieve the best possible outcomes for patients. But what if some of the data fed into the computer are based on old pseudoscience about racial differences? NOVA investigates common medical algorithms in which the patient's race drives clinical decision-making—and how their continued use has harmed the health of Black patients.



GOALS FOR COMMUNITY SCREENINGS

Educating the public

Racial health disparities have existed across generations of Black Americans, who have been more vulnerable to chronic illnesses and experienced higher death rates from cancer, heart attacks, and strokes at younger ages. *Critical Condition* examines the sources of these disparities across the spectrum of healthcare from the quality of care in clinical settings to the social, economic, and environmental conditions that shape health. The film examines the origins of false, unscientific beliefs about Black Americans and traces how these ideas have historically informed medical care and continue to influence how medical care is administered to Black patients today.

Discussing impacts

Critical Condition screenings invite attendees to consider the impacts of social and environmental factors on health as well as the role of the fields of science and medicine in both eroding and building trust with Black Americans and other communities facing health disparities.



Screening of *Critical Condition* at Emory University in Atlanta (photo by DeSitaa Lipscomb)

Brainstorming community solutions

Community screenings provide an opportunity for attendees to discuss solutions for improving outcomes for Black Americans, including community-based strategies to increase access to food, clean air, and healthcare, as well as changes to medical education to help a new generation of doctors understand the connections between social conditions and health outcomes.

SIGN UP TO HOST A COMMUNITY SCREENING

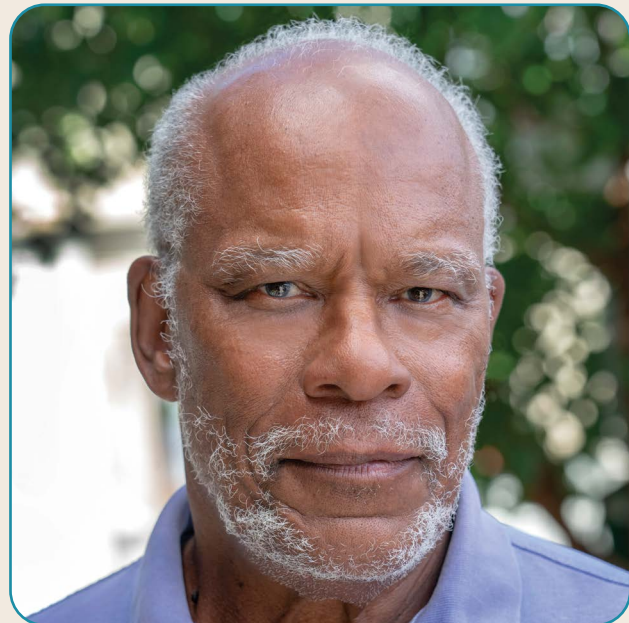
If you would like to host a community screening of *Critical Condition: Health in Black America*, please visit the [Critical Condition outreach page](#) on the NOVA website and complete the community screening request form.

Questions? Contact NOVA Education at novaeducation@wgbh.org.

LETTER FROM THE DIRECTOR

As a filmmaker who has dedicated his career to documenting the lives, histories, and cultures of communities of color in the United States, particularly Black Americans, it was an honor to collaborate with NOVA on my first science documentary. While members of the production team and I were keenly aware of the unique and disparate health outcomes that African Americans experience as compared to our counterparts, making this film revealed to us just how deeply entrenched false and inaccurate ideas about Black people are in scientific culture.

I want to emphasize that particular phrase, “scientific culture,” here. This film reveals that science really is an aspect of culture. Because scientific advancement is a human endeavor, it is subject to the same implicit and explicit biases as any other. But because science is rightfully seen as one of the highest forms of human achievement, thanks to the rigor of the scientific process, when biased ideas make their way into science education and guidelines, their effect is immediate, dangerous, and difficult to correct. This film reveals and debunks many myths and falsehoods that dominated early scientific understanding and teaching, including many that are still part of medical practice and belief today, but new myths and falsehoods continue today and proliferate quickly through social media.



Stanley Nelson

I made this film for anyone who interacts with science and medicine—which is to say, everyone. Science education benefits not only future doctors and scientists but also anyone who uses our healthcare system, experiences the natural environment, and uses rapidly evolving technologies. The better one understands these matters, the better one can speak up for oneself, whether as a patient, community member, or student. I hope you’ll watch and enjoy this film with the spirit of scientific inquiry that inspired me to make it.

Stanley Nelson

Filmmaker and Cofounder, Firelight Films

FILM CHAPTER SUMMARIES

Critical Condition: Health in Black America

COVID and the national conversation on racial health disparities

The film begins in New Orleans in February 2020 during Mardi Gras as the coronavirus pandemic spreads among members of the predominantly Black carnival organization, the Zulu Club. Over the course of several months, it is revealed that across the United States, Black Americans are facing higher death rates from the virus, in part because of all the underlying conditions that made them more vulnerable to COVID-19. People of color across the board in the United States have been negatively impacted by health disparities that leave them vulnerable to chronic illness and disease. Black Americans in particular have higher death rates for cancers and higher death rates at younger ages for heart attacks, strokes, and other chronic conditions.

African Americans had death rates from COVID-19 that were at least twice as high to 2.6 times higher than that of Whites. All Americans were in the same storm; we were not in the same boats. And the boats of people of color were just not able to weather the storm.

David Williams, PhD
Harvard T.H. Chan
School of Public Health

The U.S. history of race in science and medicine



A group of Black men receiving intravenous treatment in a Georgia venereal disease clinic in 1937 (photograph retrieved from the Library of Congress)

The film then broadens to examine the history of race in science and medicine in the United States, highlighting how early concepts of race were developed to justify the supposed biological inferiority of Black people and other non-White groups. The contributions to this field from White scientists and scholars like Louis Agassiz, Samuel Cartwright, and J. Marion Sims are examined as well as the work of Black doctors and scholars like James McCune Smith, W. E. B. Du Bois, and John S. Rock, who challenged these racist beliefs by examining the social and physical conditions that were impacting the health of Black Americans.

CRITICAL CONDITION

Impact of biological beliefs about race in medicine

The next sequence investigates the persistence of pseudoscientific beliefs about biological differences in race in current medical practices and training—sourced from a study about medical residents’ and students’ beliefs about biological differences between Black and White patients. In addition, the impact of these beliefs is examined through the issue of Black maternal health—Black American women face some of the worst health outcomes in the United States during pregnancy and childbirth. They are three times more likely than White women to die during pregnancy or childbirth and experience pregnancy-related complications at disproportionately high rates. The history of maternal care and women’s health in the United States is explored as well as the legacy of the

Tuskegee syphilis study and the creation and current use of clinical algorithms that use race correction in ways that can harm the health outcomes of Black patients.

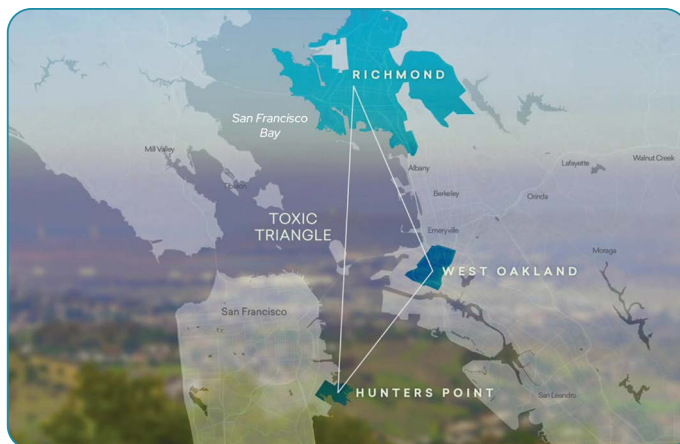
Among White medical students and residents who endorsed more of these false beliefs, they thought that the Black patient would feel less pain than the White patient, and they were less accurate in their treatment recommendations for the Black compared to the White patient.

Kelly Hoffman, PhD
Social psychologist

Social and environmental determinants of health

The film’s focus then turns to the impact of social and environmental factors that can undermine Black people’s health before they engage with the healthcare system. Residential segregation deepens the unequal and poor conditions that exist in many segregated Black American communities today by impacting the quality and options of foods available, the exposure to environmental pollutants, and access to healthcare services. In Chicago, we encounter the impact of food deserts that make access to healthy foods scarce in certain communities. In West Oakland, we learn about the Toxic Triangle—a community bound by shipyards, oil refineries, and a matrix of freeways that contribute to high rates of asthma and lowered life expectancy for that community’s

Black residents compared to those of White residents in a more affluent community a few miles away. In South Los Angeles, we visit a community that is missing almost 1,500 physicians and resorting to the use of hospital emergency rooms as the primary source of care.



The Toxic Triangle in San Francisco Bay

Weathering and solutions

The final sequences explore solutions to a more equitable healthcare system in the United States—focusing on improved training of healthcare workers to emphasize the impact of social conditions on health and addressing racial bias in healthcare delivery. We learn about the impact of the Human Genome Project, which provides definitive evidence that there are no meaningful biological differences among what we call races—debunking the idea that there are innate biological differences across races that contribute to poor health outcomes. The concept of *weathering* is introduced, in which the constant stress from living with

poverty and discrimination damages the body at the cellular level and leads to chronic health problems over time.

At the end of the story, it's racism, it's not race. Racism is a systemic way of ignoring the lived experiences of various people in this country. And for many of us, it's racism that is really harming our lives, and our health.

Evelynn Hammonds, PhD
Harvard University

When Machines Prescribe

Produced by award-winning filmmakers and longtime NOVA collaborators Llewellyn M. Smith and Kelly Thomson, *When Machines Prescribe* investigates medical algorithms in which the patient's race drives clinical decision-making—and how their continued use has harmed the health of Black patients.

The film follows the story of Gregory Mumford, a Black man who is diagnosed with kidney disease and placed on a kidney transplant waitlist. As he and his family wrestle with the implications of the diagnosis, the story follows Dr. Amaka Eneanya and Dr. Darshali Vyas as they investigate the algorithm used to measure kidney health, which was developed in 1999 with a corrective race factor. They find that the formula makes broad assumptions about biological differences across races that are not supported by scientific evidence; the result of these “corrections” is the life-threatening demotion of Black patients like Gregory down the kidney transplant list.

The kidney disease case prompts the researchers to examine other clinical algorithms that correct for race with no scientific basis. They find other clinical algorithms—used to guide treatment decisions for everything from hypertension to osteoporosis to childbirth—that are also making assumptions about the baseline health of patients based on old pseudoscience about racial differences.

But the story ends on a high note. Thanks in part to research conducted by Dr. Eneanya and Dr. Vyas, kidney transplant programs recently switched to a new race-neutral algorithm. As a result, more than 14,000 Black American kidney patients saw their waiting time modified. Gregory, who had been looking at a three or four-year wait, received his new kidney after just a few months. And as awareness of the harms of other racially based clinical algorithms spreads, the impact of this work will only grow.

DISCUSSION QUESTIONS

Critical Condition: Health in Black America

General reflections

- Was there a moment in the film that resonated with you on a personal level?
- Did any of the stories remind you of experiences that you, your family, or your community have had with the healthcare system?
- How did the film challenge or confirm what you already knew about racial health disparities?
- What surprised you the most?
- The film explores how the health outcomes of Black Americans are shaped by the history of medicine in the United States. How does understanding this history change the way we think about present-day healthcare outcomes?

Trust in healthcare

- The film discusses historical medical racism, such as forced experimentation on Black people. How do you think this history might affect the way Black communities today engage with the U.S. healthcare system?
- Have you or someone you know ever experienced medical dismissal or an incident of racial bias in a healthcare setting? How does sharing these stories help bring awareness to these issues?
- Some people in the film expressed mistrust in the medical system, while others are working within it to create change. What are ways to continue conversations about medical racism while addressing potential skepticism about the causes of racial health disparities?

Environment, access, & community solutions

- The film highlights how where you live affects your health, from access to doctors to exposure to pollution to availability of fresh food. What examples of these disparities stood out to you?
- Have you noticed similar patterns in your own city or community?

- The documentary shows examples of communities taking health into their own hands, from food access to midwifery. How could these efforts impact your community?
- How can people better develop community-led solutions to health disparities without shifting responsibility away from civic and healthcare institutions?

Maternal health & generational impact

- Black women in the United States are three times more likely to die from pregnancy-related causes than White women, regardless of income or education level. How do you think this statistic impacts the way in which Black women experience pregnancy and childbirth?
- What role can partners, family members, and communities play in addressing the disparity in the quality of maternal care that Black women receive?
- Many Black Americans have heard stories from their parents or grandparents about the way they were treated in healthcare settings. What are some of the messages about healthcare that have been passed down in your family? How do those messages still influence health decisions today?

Continuing the conversation

- If you were to share one key takeaway from the film with a friend or family member, what would it be?
- What steps can healthcare institutions take to address the impact of racial bias in how care is administered to patients? What can be done during healthcare worker training and continuing education to address racial bias?
- How might understanding the social, environmental, and economic considerations that impact health change your community's approach to addressing health disparities and their causes?

DISCUSSION QUESTIONS

When Machines Prescribe

- What steps can patients take to better understand how medical algorithms are being used in healthcare settings?
- Why is it important to understand the source of the original scientific research that was used to develop a medical algorithm?
- How can medical and nursing schools educate healthcare workers to understand the use of race in medical algorithms frequently used in clinical settings? What role can medical professional organizations play in assessing the use of race in algorithms used in their field?

EVENT FORMATS

We invite you to use the *Critical Condition* toolkit to organize screenings and community discussions about racial health disparities and the impacts of social and environmental factors on health. These events can engage scientists, medical institutions, public officials, and other community partners in conversations that explore impacts and solutions.

There are a variety of ways to format an event. Consider whether you prefer an in-person or virtual event, your target audience, and the intended goals of the event. Take into account the baseline content knowledge that the audience possesses about racial health disparities, learning goals for event attendees, and the logistics for hosting an event.

Virtual events

Here are some best practices for **virtual events**

- **Timing:** Now that many people are participating in events from the comfort of their homes, events do not need to be reserved for nights or weekends. Survey your audience to determine the days and times that are most convenient and when they are most likely to attend. Virtual events should last between 30 and 60 minutes to maintain audience engagement throughout the entire session.
- **Tools:** Virtual events can be hosted with any device that has a strong Internet connection, a webcam, and a microphone. A pair of headphones with a microphone is also recommended to improve sound quality for hosts and guests. Zoom is a free platform that can be used to host virtual events and to livestream to Facebook or YouTube to reach a larger audience. Host and promote your events on the platforms that your community is most likely to use. Have a colleague help monitor the audience comments/questions on the platforms you're streaming to.
- **Setup:** Hosts and guests should set up in a quiet space where they are not likely to be interrupted. When possible, use headphones that have a microphone to further eliminate background noise and increase sound quality. Make sure that the webcam is at eye level and the background isn't too distracting (move mirrors and clutter). Position light sources to be in front of the speaker to avoid backlighting or shadows.
- **Rehearsal:** Rehearsals are much more important with virtual events, as people may run into a variety of Internet, audio, or video issues. Try to schedule a rehearsal a week in advance to check everyone's connection and setup. When that's not possible, ask guests to log in 30 to 60 minutes before the scheduled event to do a quick tech check and run-through before going live.

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There are a variety of ways to format a virtual event. These suggestions include links to examples:

- **Virtual field trip:** What organizations are addressing this issue in your community? Reach out to local colleges and universities or community organizations to arrange a virtual field trip that your audience wouldn't normally have access to visit. Virtual field trips allow audiences to engage directly with experts via a tour or a live demonstration. To see an example of a virtual field trip, watch NOVA Education's virtual field trip to the [Sierra Space inflatable space habitat](#).
- **Clip screening with panel discussion:** Identify a theme/topic for your screening event and choose relevant clips from *Critical Condition*. After screening two or three selected clips, moderate a panel discussion among local scientists, doctors, or community groups to discuss the issues that are relevant to your community. To see an example of a clip screening with a panel discussion, watch [NOVA Secrets in Our DNA Screening and Panel Discussion](#).
- **Expert Q&A:** People have a lot of questions and personal experiences about the topic of racial health disparities, and inviting an expert to talk about their work and answer audience questions is a simple way to foster community discussions. Make it clear to your guest beforehand that audience questions will drive the content of the conversation. If there are topics that your guest doesn't feel comfortable addressing, make sure you know what they are ahead of time. Always have backup questions in case the audience doesn't immediately engage. To see an example of an expert Q&A, watch NOVA Education's [Analyzing Ancient DNA with Dr. Beth Shapiro](#).



Dr. Darshali Vyas speaks at Harvard Medical School screening of *When Machines Prescribe* with Dr. Michelle Morse and filmmaker Llew Smith (photo by Stefanie Belnavis)

In-Person events

Are you thinking of hosting an **in-person event**?

There are several ways to format your event.

Here are some suggestions:

- **Resource fair and film screening:** Invite community members to attend a resource fair featuring booths staffed by local researchers and community groups. During the event, screen either the full documentary or specific excerpts and encourage attendees to discuss themes informally with each other and the participating organizations.
- **Film screening and panel discussion:** After screening selected clips from the film, moderate a panel discussion among local researchers and stakeholders to discuss how topics from the film might impact your community and potential solutions. Check out our discussion questions in this guide for examples of how to guide the conversation.

EVENT TIMELINE AND TO-DO LIST

Organizing a community event can be overwhelming, so we recommend giving yourself at least six weeks to plan. Follow the checklist below to make sure that you cover all the bases before and after your event. Not all of these steps will be applicable for each event: pick and choose which are right for your event objectives and platform.

Six weeks before

- Identify your audience and goals
- Reach out to possible partners
- (In-person events) Reserve the venue and set the date and time
- Make sure the space and audio/visual equipment are adequate and available
- Calculate any costs (venue fees, materials, rentals, software licenses, etc.)
- (Virtual events) Confirm the event platform and technology needs
 - ___ Download any required software and purchase required AV equipment

Four weeks before

- Create a Facebook, Eventbrite, or Zoom registration page to publicize the event and collect attendee information
 - ___ Ask guests and partner organizations to invite their members
 - ___ Link to the *Critical Condition* program page: <https://www.pbs.org/wgbh/nova/video/critical-condition-health-in-black-america/>
- Promote the event
 - ___ Connect with social media influencers and journalists in your community who are invested in the topic
 - ___ Contact community calendars and media with the event listing

Two weeks before

- Email news organizations, government officials, and community organizers
 - ___ Explain details and goals of the event
 - ___ Include contact information and ways to register

Three to seven days before

- Send out final reminders via email and social media
- Finalize the program schedule
- (In-person events) Print out event materials and gather supplies (name tags, programs, etc.)
- (Virtual events) Set up simulcasts on Facebook, YouTube, etc.

Day of the event

In-person events

- Go to the venue early to set up seating, refreshments, materials, microphones, etc.
- Collect attendees' names and contact information for future events
- Assign a photographer/videographer to capture the event for social media and websites

Virtual events

- Log in early to set up software and simulcasts
- Conduct an audio, video, and Internet connection check with guest speakers
- Assign a colleague to screen audience questions and monitor the event

After the event

- Encourage attendees to connect with NOVA Education on Facebook, Twitter, and Instagram via @NOVAEducation
- At the end of the event, include a slide with a QR code that links to our [post-event survey](#) so we can record audience feedback
- (Virtual events) Send a follow-up email with a recording of the event and any resources that were discussed during the event as well as a link to the [post-event survey](#)

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ADDITIONAL RESOURCES

Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care

- National Academies

<https://nap.nationalacademies.org/catalog/12875/unequal-treatment-confronting-racial-and-ethnic-disparities-in-health-care>

Ending Unequal Treatment: Strategies to Achieve Equitable Health Care and Optimal Health for All - National Academies

<https://nap.nationalacademies.org/catalog/27820/ending-unequal-treatment-strategies-to-achieve-equitable-health-care-and>

Structural Racism In Historical And Modern US Health Care Policy - Health Affairs

<https://www.healthaffairs.org/doi/epdf/10.1377/hlthaff.2021.01466>

"A Terrible Price": The Deadly Racial Disparities of COVID-19 in America - New York Times

<https://www.nytimes.com/2020/04/29/magazine/racial-disparities-covid-19.html>

Implicit Racial/Ethnic Bias Among Health Care Professionals and Its Influence on Health Care Outcomes: A Systematic Review

- American Journal of Public Health

<https://pmc.ncbi.nlm.nih.gov/articles/PMC4638275/#abstract1>

Racial bias in pain assessment and treatment recommendations, and false beliefs about biological differences between blacks and whites - Proceedings of the National Academies of Sciences

<https://www.pnas.org/doi/10.1073/pnas.1516047113>

Disparities in air pollution attributable mortality in the US population by race/ethnicity and sociodemographic factors

- *Nature Medicine*

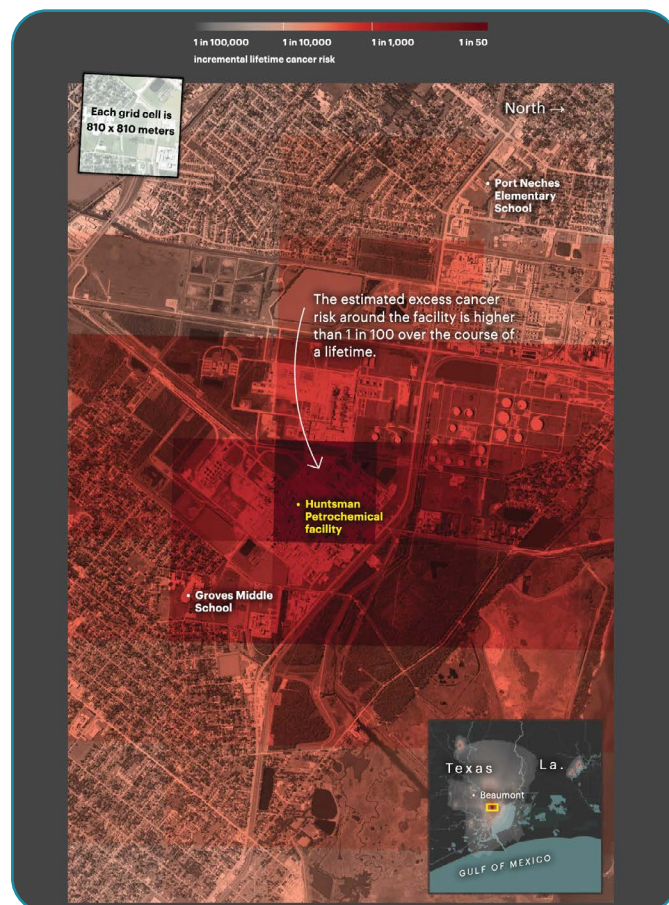
<https://www.nature.com/articles/s41591-024-03117-0>

Poison in the Air - ProPublica

<https://www.propublica.org/article/toxmap-poison-in-the-air>

The Weathering Hypothesis as an Explanation for Racial Disparities in Health: A Systematic Review - Annals of Epidemiology

<https://pmc.ncbi.nlm.nih.gov/articles/PMC10676285/>



The ProPublica "Poison in the Air" report includes interactive maps featuring the estimated excess cancer risk from industrial pollution across the country

GLOSSARY OF TERMS

cortisol

a steroid hormone produced by the adrenal glands that helps regulate the body's response to stress

eGFR (estimated glomerular filtration rate)

a blood test that estimates how well the kidneys are working to filter waste from the blood and a key indicator of kidney function for assessing kidney disease

food desert

geographic areas where residents' access to affordable, healthy food options (especially fresh fruits and vegetables) is restricted or nonexistent due to the absence of grocery stores within convenient traveling distance

health disparity

a difference in which disadvantaged social groups such as the poor, racial/ethnic minorities, women, and other groups who have persistently experienced social disadvantage or discrimination systematically experience worse health or greater health risks than more advantaged social groups

medical algorithm

a set of rules or a computation, often based on mathematical models, that helps healthcare professionals make decisions about patient care, including diagnosis, treatment, and risk prediction

preeclampsia

a complication of pregnancy characterized by high blood pressure, high levels of protein in urine that indicate kidney damage, or other signs of organ damage

racial health disparity

the increased presence and severity of certain diseases, poorer health outcomes, and greater difficulty in obtaining healthcare services for a particular race

racism

a system of structuring opportunity and assigning value based on the social interpretation of how one looks, that unfairly disadvantages some individuals and communities, unfairly advantages other individuals and communities, and saps the strength of the whole society through the waste of human resources

residential segregation

the separation of people by socially constructed racial or ethnic identities in places of residence

Superfund sites

locations designated by the U.S. Environmental Protection Agency that are contaminated with hazardous waste that pose significant risks to human health and the environment

telomere

protective caps at the end of chromosomes consisting of repetitive DNA sequences that protect the ends of chromosomes from becoming frayed or tangled

weathering

the chronic exposure to social and economic disadvantage that leads to the acceleration of normal aging and earlier onset of unfavorable physical health conditions among disadvantaged (versus advantaged) persons of similar age

SOCIAL MEDIA GUIDE

Critical Condition: Health in Black America

Suggested Facebook post

Black Americans are nearly twice as likely to suffer from chronic diseases than Whites. Why? From false beliefs that permeate modern medicine to life experiences that can damage human cells, uncover the underlying causes of racial health disparities.

Stream “Critical Condition” on @NOVAPBS:
<https://to.pbs.org/4cUD3bK>

Suggested Instagram post

Black Americans are nearly twice as likely to suffer from chronic diseases than Whites. Why? From false beliefs that permeate modern medicine to life experiences that can damage human cells, uncover the underlying causes of racial health disparities.

Stream “Critical Condition” on @NOVAPBS:
<https://to.pbs.org/4cUD3bK>
(link in bio)

Suggested X and Threads post

Uncover the underlying causes of racial health disparities in America, from false beliefs that permeate modern medicine to life experiences that can damage human cells.

Stream “Critical Condition” on @NOVAPBS:
<https://to.pbs.org/4cUD3bK>



Visit our outreach page for links to additional social and promotional content

When Machines Prescribe

Suggested Facebook post

Doctors rely on computer programs to make decisions about diagnosis and treatment. Designed to weigh factors like symptoms, medical history, and test results to achieve the best possible outcomes for patients, some common medical algorithms were built using data based on old pseudoscience about racial differences. Investigate how their continued use has harmed the health of Black patients.

Stream “When Machines Prescribe” here:
<https://to.pbs.org/3YfoysN>

Suggested Instagram post

Doctors rely on computer programs to make decisions about diagnosis and treatment. Designed to weigh factors like symptoms, medical history, and test results to achieve the best possible outcomes for patients, some common medical algorithms were built using data based on old pseudoscience about racial differences. Investigate how their continued use has harmed the health of Black patients.

Watch “When Machines Prescribe” at the link in our bio.

Suggested X and Threads post

Investigate medical algorithms in which the patient’s race drives clinical decisions and how this has harmed the health of Black patients.

Watch “When Machines Prescribe” here:
<https://to.pbs.org/3YfoysN>

CREDITS

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Critical Condition: Health in Black America is a NOVA production by Firelight Films for GBH. Written, produced, and directed by Stanley Nelson. Produced by Cyndee Readdean and Valerie Scoon. Co-produced by Lynneisha Ray. Narrated by Tamara Tunie. Executive Producers for Firelight Films are Keith Brown and Marcia Smith.

When Machines Prescribe is a NOVA production by BlueSpark Collaborative LLC for GBH. Produced by Llewellyn M. Smith and Kelly Thomson.

Executive Producers for NOVA are Julia Cort and Chris Schmidt. Co-produced by Ralph Bouquet. NOVA is a production of GBH.

About NOVA

NOVA is the most popular primetime science series on American television, demystifying the scientific and technological concepts that shape and define our lives, our planet, and our universe. The PBS series is also one of the most widely distributed science programs around the world and is a multimedia, multiplatform brand reaching more than 55 million Americans every year on TV and online. NOVA's important and inspiring stories of human ingenuity, exploration, and the quest for knowledge are regularly recognized with the industry's most prestigious awards. As part of its mission to make the scientific enterprise accessible to all, NOVA is committed to diversity, equity, inclusion, and accessibility in all its work, from the production process to the range of stories we tell and the voices we amplify. In addition, science educators across the country rely on NOVA for resources used in the classroom as well as in museums, libraries, and after-school programs. **NOVA** is a production of GBH; more information can be found at pbs.org/nova or by following NOVA on [Facebook](#), [YouTube](#), [Instagram](#), and [TikTok](#).

About Firelight Films

Co-founded by acclaimed filmmaker Stanley Nelson, [Firelight Films](#) productions have garnered multiple Primetime Emmy, Peabody, IDA, and Sundance awards. Among them, the Academy Award-nominated *Attica*, for Showtime; *Sound of the Police* for ABC News Studios/Hulu; *Tulsa Burning: The 1921 Race Massacre* for the History Channel; *Crack: Cocaine, Corruption & Conspiracy* for Netflix; *Miles Davis: Birth of the Cool*; *The Black Panthers: Vanguard of the Revolution*; and *Freedom Riders*; *Becoming Frederick Douglass* and *Harriet Tubman: Visions of Freedom* for Maryland Public Television/PBS. Recent projects include *WE WANT THE FUNK!* for Independent Lens and *Critical Condition: Health in Black America* for NOVA, both premiering on PBS in April 2025.

About PBS

PBS, with more than 330 member stations, offers all Americans the opportunity to explore new ideas and new worlds through television and digital content. Each month, PBS reaches over 120 million people through television and 26 million people online, inviting them to experience the worlds of science, history, nature, and public affairs; to hear diverse viewpoints; and to take front row seats to world-class drama and performances. PBS's broad array of programs has been consistently honored by the industry's most coveted award competitions. Teachers of children from pre-K through 12th grade turn to PBS for digital content and services that help bring classroom lessons to life. Decades of research confirms that PBS's premier children's media service, PBS KIDS, helps children build critical literacy, math, and social-emotional skills, enabling them to find success in school and life. Delivered through member stations, PBS KIDS offers high-quality educational content on TV—including a 24/7 channel—online at pbskids.org, via an array of mobile apps, and in communities across America. More information about PBS is available at PBS.org, one of the leading dot-org websites on the Internet, or by following [PBS on Twitter](#), [Facebook](#) or through our [apps for mobile and connected devices](#). Specific program information and updates for press are available at pbs.org/pressroom or by following PBS Communications on Twitter.



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George D. Smith Fund, Inc.

PDB Foundation

Wilemal Fund

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