

A movement designed by The Health Gap to engage and empower African American women across the socioeconomic spectrum of in Greater Cincinnati to live healthier lives -- body and mind.

what we did

- A national, state and local research and literature review was conducted examining women's, African American women's health issues/initiatives, prevalent health diseases, socioeconomic impacts on health, and habits and practices relating to body and mind health.
- Qualitative and quantitative research among 114 Black women in Cincinnati, across socioeconomic factors within 27 neighborhoods and municipalities.

The following is a compilation of the literature review and primarily research.

what we learned

Black women want to live healthier lives.

Most of the women in our research know or assume there are health disparities between African American and Caucasians Americans but talking about disparities is not a source of motivation.

- Socioeconomics divide, but Black women know they face the same issues despite income and education levels.
- The women in our research know they should and need to "do better" but admit eating as usual (less healthy) is the default.
- There is an attitude of *I deserve this* with food. Food is a reward, in addition to being a source of replenishment.
- National research studies in 2011 and 2015 found:
 - More than 60% of African American adults do not meet recommendations for moderate physical activity.
 - △ 67% agree exercising is important
 - △ 56% agree overweight increases disease risks
 - 4 85% agree on necessity of exercise and health
 - A Reported barriers are similar to local barriers: time, motivation, fatigue, not being sure how much activity is enough, and hair (ruining style).

"We tend to want to do better, we just don't know how [to start, to find the time, to be consistent, to not let other things get in the way]." - Karen, 29



"Black women die of preventable diseases every year because we refuse to recognize that convenience and unhealthy foods ruins our body and ultimately shortens our lifespan."

Donna, age 47

Black Women Avoiding Exercise To Maintain Hairstyles: Study

2. For the majority of the women we talked to, physical health is measured by the absence or how well maior diseases are managed (high blood pressure, high cholesterol, diabetes, etc.).



- Feeling healthy and the ability to function without hinderance = healthy.
- o Nationally, 51% of adult African Americans agree it is possible to be overweight and healthy (41% don't).
- The most concerning health issues that emerged during our research are in line with the top national health issues and disparities. In order of importance:

















- All agreed that all women overall face a multitude of life stressors that affect their health; and they believe that stress is a major health issue and risk for Black women.
 - Being marginalized, dealing with racial, gender
 microaggressions and instances of overt racism negatively
 impact self-esteem and causes significant stress overtime.



"Racism is a part of life. I try not to let discourage it me. It won't stop me." - Paula, age 61

"I hate having to think about if it's racism or just rudeness. I have to check with my family – am I tripping or is this real?" - Kelly, age 34

The women noted a common tendency across generations to have a "lack of regard for self" due to trying to balance the responsibilities within their many social roles. Often leading to:



- acceptance of poor personal relationships
- constantly striving to be the "strong one" in the family who takes care of everyone
- discomfort with ethnicity /racial identity
- a sense of being overwhelmed by life demands.
- lack of resources to adequately take care of personal and family responsibilities
- poor self-concept

- The stigma of mental health in the Black community is prevalent but getting better.
 - Many believe mental health counseling has merit and would recommend it for others, but it's not necessarily for herself. "I will figure it out."

- African Americans (AAs) are 20% more likely to experience serious mental health problems than the general population

 Most low-income AA who suffer from mental health issues only access treatment when they are incarnated, hospitalized or homeless.

"I wish we could make it more acceptable to talk about this and seek help and care." - BST, age 32

Across age groups and socioeconomic factors, help is needed to navigate healthcare barriers. Many report:

- Feeling disconnected, not listened to or/and dismissed at doctor's offices.
- Wishing for relevant information from trusted, communityverified sources.
- Knowing they need to own their healthcare; it is sometimes difficult to balance being direct and avoiding the perception of 'the angry Black woman' stereotype.
- Faces of color are often preferred, but culturally competent practitioners are more than sufficient.

"I have a good OB/GYN female doctor (white, young) that I like. I would prefer to have a black female OB/GYN, but they are hard to find and get into, especially with my insurance." – Mila, 46

"I know I represent all of us in their eyes. So, I try not be that person or make that stigma a reality." - Jaime, 37

7. Focusing on Black women is focusing on African American families.

 Healthcare, homecare, food shopping and preparation, childcare are typically the responsibility of mother in both single and twoparent families.







what we are doing

Starting a movement! The research led to the development of four focus areas that will:

- Meet people where they are
- Be inclusive across socioeconomic spectrum, generations, life stages
- Offer relevant programming supported by community partners
- Utilize Evidence-Based best practices and seek expert input
- Measure and track outcomes

BWHM FOCUS AREAS

with examples based on research





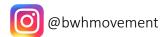




the movement

By joining the movement: Women will have resources that are designed by and for them. Organizations will improve their reach and make their message more impactful. Businesses will share their expertise. Everyone has a place/purpose within one or more of the focus areas.





Join the Movement at closingthehealthgap.org/what-we-do/bwhm/

research sources

- Attitudes and Beliefs Associated with Leisure-Time Physical Activity among African American Adults, 2011. National Center for Biotechnology Information, U.S. National Library of Medicine; https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3074974/
- Black Women's Health Initiative Qualitative Research among 82 participants; conducted The Center for Closing the Health Gap; October 2018
- Black Women's Health Initiative Quantitative Research among # participants; The Center for Closing the Health Gap; March 2019
- African-American Women's Eating Habits and Intention to Change: a Pilot Study; 282 women in Florida; June 2014. National Center for Biotechnology Information, U.S. National Library of Medicine:
- Barriers to Physical Activity Among African American Women: An Integrative Review of the Literature; National Center for Biotechnology Information, U.S. National Library of Medicine; https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4516615/; April 2015
- Center for Disease Control CDC; US Office of Minority Health Mental Health. Mental Health and African Americans Database; September 2018
- City of Cincinnati Health Profile Executive Summary Cincinnati Health Department 2016
- Cancer in Ohio 2016. Ohio The Ohio Department of Health and The Ohio State University Comprehensive Cancer Center; https://odh.ohio.gov/wps/wcm/connect/gov/669a04bb-4ff8-410c-9279-94828a9dbb2b/Cancer+in+Ohio+2016.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0J000Q09DDDM3000-669a04bb-4ff8-410c-9279-94828a9dbb2b-
- All-In Cincinnati: Equity Is the Path to Inclusive Prosperity; Policy Link, supported by Interact for Health, United Way of Cincinnati, and Greater. Cincinnati Foundation; October 2018
- American Cancer Assocition; Heart Disease in African-American Women; https://www.goredforwomen.org/en/about-heart-disease-in-women/facts/heart-disease-in-african-american-women

