Health Disparities in the Black Community
EPL 843
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Overview

Historically, black people have held a disadvantaged position in American society. Even today, while the gap is closing, there are still disparities that put African Americans at a disadvantage - whether it is education, access to health care or life expectancy. The following pages will outline health disparities experienced by black Americans. There are several aspects of this topic that are factored into determination of disparity – this includes not only disease processes, but morbidity and mortality rates. On the other side of the same coin are positive indicators of health care, which will be discussed in a following paragraph. This is not meant to be an exhaustive list or reference concerning the topic, but a beginning point for further research. The activities also focus not only on health and wellness, but on some of the causes that may lead to health disparities in a more general sense.

Heart disease is the number one leading cause of death in the United States, and is at the top of the list for both White Non-Hispanics and Black Non-Hispanics alike (Braithwaite, Taylor, and Treadwell, 2009). Unfortunately, coronary heart disease, a type of heart disease affecting the coronary arteries of the heart, is more fatal in black men than it is in white women, black women or white men (Braithwaite, Taylor, and Treadwell, 2009).

While cancer is the second leading cause for both non-Hispanic blacks and for non-Hispanic whites, there is a higher incidence per 100,000 in the black community than in the white community. Moreover, it is more fatal in black men than in any other race or gender
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(Braithwaite, Taylor, and Treadwell, 2009). The same is true of strokes. (Centers for Disease Control & Prevention (CDC), 2005), which are the third leading cause of death in the United States (Braithwaite, Taylor, and Treadwell, 2009). Blacks are twice as likely to suffer a stroke than their white counterparts. Black men have a higher prevalence of stroke than white men, and black women are more likely to experience a second stroke than white women (Braithwaite, Taylor, and Treadwell, 2009).

Diabetes is also extremely prevalent in the black community, and recently has been seen more frequently at a younger age. It is suspected that diabetes is undiagnosed in a number of African American individuals – for every one diagnosed case; there is one who goes undiagnosed (Blackhealthcare.com (BHC.com), n.d.). There are three types of Diabetes – Type I (formerly known as insulin dependent), Type II (formerly known as non insulin dependent) and Gestational Diabetes, which is seen only in pregnant women. There are three sets of risk factors that increase one’s likelihood for development of Type II Diabetes Mellitus (DM) – genetics, lifestyle and medical history (BHC.com, n.d.). Type II Diabetes, for the most part, is preventable. Unfortunately, diabetes has a number of potential complications, including kidney failure, ocular problems, neuropathy, decreased sensation and impaired circulation.

HIV/AIDS is also disproportionately high in the black community. It is most frequently spread through sex with someone who is already infected. Another method of transmission is through the sharing of infected needles. It is possible to go for a rather long
time with no symptoms of HIV (BHC.com, n.d.). According to the Center for Disease Control and Prevention, blacks accounted for 51% of the new HIV/AIDS cases in 34 states (CDC, 2009).

Hypertension, or high blood pressure is another common health problem in the black community. Simply put, blood pressure is the force your heart exerts against your arteries when it pumps blood. In essence, when your blood pressure is high, your heart has to work harder to pump blood to your body. Frequently, people go without symptoms of this serious disorder. Hence, it is termed 'the silent killer'. Possible complications of hypertension include stroke, kidney impairment, eye problems, and other heart problems (BHC.com, n.d.).

Obesity is also very common in the black community. Health care professionals typically utilize Body Mass Index (BMI) to determine whether or not a person is obese. BMI takes into account one’s height and weight, and produces a number that tells you if you are under weight, of normal weight, obese, or extremely obese. A BMI of 19-24 is considered normal (US Department of Health and Human Services (USDHHS), 2008).

There are a number of positive health indicators. Some of them include: percentage of people under the age of 65, the percentage of women who receive obstetric care in their first trimester of pregnancy, the number of adults who regularly engage in moderate
exercise, among other factors. In all of these areas, black Americans trailed white Americans (CDC, 2005).

*Improving Health in the Black Community*

If you review the risk factors for some of the abovementioned disease states, you will find that many of them have the same risk factors, and that a lot of them are preventable. There are a number of small, easy ways in which black youth and adults alike can improve their health and prevent onset of many of the abovementioned diseases. Much of disease prevention is related to diet, exercise and overall lifestyle. While lifetime change can take time, no step in the right direction is too small.

One easy change to make is to slowly incorporate exercise into one’s daily routine. Eventually, the goal is to incorporate at least 30 minutes of moderately intense activity on most, if not all, days of the week (USDHHS, 2008). Another simple change is to incorporate more vegetables into your diet. Keeping a close eye on portion control can also be helpful in managing weight.

The United States Department of Agriculture (USDA) implemented the “My Pyramid” initiative, which provides guidelines for a healthy diet. The 2010 Dietary Guidelines are still in publishing. Until those are published, the 2005 dietary guidelines should be followed. There are several components to the pyramid. The first component is vegetables. One should strive to consume a variety of vegetables, with an emphasis on green leafy vegetables, orange vegetables, and dry beans. The second component, grains, is separated into whole grains and refined grains. You should strive to consume as many whole grains as possible. This includes brown rice, oatmeal and whole-wheat flour. The third group, fruits, is fairly liberal and includes 100% fruit juice, as well as fresh, frozen,
pureed and canned fruit. Included in the milk group are milk, cheese, yogurt and other calcium-rich dairy products. The goal with this group is to consume low-fat dairy products whenever possible. The meat and beans group also incorporates fish, nuts and seeds, and like the milk group, the goal is to consume lean meat whenever possible. The oils group includes substances such as canola oil, vegetable oil, peanut oil, and many others. Typically, they are low in saturated fat and high in unsaturated fats (USDA, 2010).

While socioeconomic status can play a role in the fact that minorities receive lower quality health care than their white counterparts, one study found that even when socioeconomic and other factors are controlled for, they still receive lower quality health care (Smith, Betancourt, Wynia, Bussey-Jones, Stone & Philips, et. al, 2007). This article provides helpful insight into the role of physicians’ attitudes regarding caring for patients from different racial or ethnic backgrounds.

Conclusion

While this is a serious issue in American society, it is important to remember that five pages does not begin to scratch the surface when it comes to researching and truly understanding the problem of health disparities in the black community. It is my hope that the information presented in the above pages will help your high school students to begin to think more globally about things, such as health and healthcare, that they probably take for granted.
Activities

The purpose of these activities is to get students not only to focus on health and wellness, but also to understand *some* (not all) of the causes behind the health disparities that exist in the black community. Further, my hope is that these activities will help students to begin thinking more broadly about social justice, equality and equity, especially when it comes to health and health care.

Activity 1

The purpose of this activity is to get students to think about their food intake, and exercise habits. They will be asked to utilize the tools on Mypyramid.gov to record their food intake for a week, as well as their exercise habits. Based on the feedback and recommendations of mypyramid.gov, develop an action plan. This action plan should include changes you feel you need to make, and exactly how you will go about making them. Write a three-page analysis of your week-long log. Included in these three pages should be your thoughts on the results, as well as your plan for change.

At the end of this project will be a class discussion on nutrition, reactions to results and next steps. The intention is for the class to be able to provide support to one another.

Activity 2

Choose an aspect of health that interests you. It can be a physical disease process, a mental disorder or an environmental factor that impacts health and overall wellbeing. Compile a thorough report on the risk factors, causes and manifestations of this disorder. Included in this report should be statistics on prevalence in different groups including socioeconomic status (if applicable), region of the country, race, age and ethnicity. What did
you learn from this? Was there anything that surprised you? How can you change this for the future?

**Activity 3**

The third activity is entitled Archie Bunker’s Neighborhood. The purpose of the activity is to help students understand the presence and impact of stereotypes and biases in society. Students are broken up into groups, with each group represented by a symbol and representing a different identity (i.e. racial, ethnic, ability, sexual orientation, gender expression). Their task, once in their groups, is to build a community. Each group will have supplies to build their community (money, paper, markers, etc.). The Caucasian group is given more supplies to build their community than other groups. You will need the help of another teacher to serve as the Sheriff and county officials. There are additional rules to the game – for example, while the goal is to build a community, they cannot build anything without a building permit, and they need permission from the sheriff in order to leave their individual community.

This game will require considerable processing afterward. Some questions to ask include, how students felt while doing this activity and how those emotions and thoughts related to their identity group.

*Taken from Residentassistant.com*

**Activity 4**

Have a class discussion about ways students stay healthy. The purpose of this discussion is to get them to see a) resources they have that they take for granted and b)
how small things can make a difference in one’s ability to afford and maintain health. Start the conversation with “how do you stay healthy”? Some responses may include, “I go to the doctor” or “I go to the gym” or “I walk my dog around the block”. Follow-up questions may include, “what if you didn't have health insurance?” or “what if you lived in an unsafe neighborhood?”. The purpose is to get students to think about where some health disparities, regardless of race, may come from.

Activity 5

Walk the Line, also known as Crossing the Line is an activity about power and privilege, serves a similar purpose as Activity 4. This activity is a high challenge, high support activity. Clear the room, making sure there is plenty of space for students to move around. Establish group norms, and an atmosphere of respect. Have all students line up next to each other. The premise of the activity is that they walk to the other side of the room if the category/description you call fits them. Students should know that if any point, should they feel uncomfortable, they can exit. Also, this is a silent activity.

Some of the questions include:

1. You have been in a relationship and been hurt in the past year
2. You are Catholic
3. You are Protestant
4. You are Jewish
5. You are another religion other than the three major US religions
6. You wish you had more money
7. You have felt embarrassed about the economic class your family is in
8. You live independently from your family
9. You feel lonely
10. You feel safe in your neighborhood at night
11. Your parents expect you to go to college
12. You grew up with books in your house
13. You ever went to summer camp
14. You go on family vacations

Visit this website for specific questions, guidelines and for tips as a facilitator (http://www.freechild.org/Firestarter/CrossingTheLine.htm) and for a full list of questions. Typically, students will feel uncomfortable after this activity and will need support and to process this with the group.

Activity 6

When the Bough Breaks: Kim Anderson’s Story teaches us that black women with higher education still experience a greater incidence of premature birth than white women with the same education. Have students watch this video (http://www.youtube.com/watch?v=sdFzwPEfRhs) - it is only about 6 minutes long – and hold a discussion afterward. Ask students what surprised them about this video? How did they feel while watching it? Expect this activity to cause some level of cognitive dissonance and discomfort for students.
Works Cited
Blackhealthcare.com (BHC.com), (n.d.). Addressing the health care issues of African-Americans
Centers for Disease Control and Prevention (CDC) (2005), Retrieved from http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5401a1.htm

Additional Resources

Books

Web Resources/Digital Periodicals

Audio Visual Resources
A list of videos on Race and Racism – comments are those of University of Michigan faculty member - http://www-personal.umich.edu/~hfox/videos_on_race_and_racism.html
