

**A qualitative study of how media neglects the mental health of  
African American women**

By

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## **ABSTRACT**

In my recent investigations, I have found that African American women have narrative upon them that neglects their mental health. The two narratives are The Angry Black Woman (ABW) and The Strong Black Woman (SBW). I bring insight on the influence of the media and society on the mental health of African American women and treatment seeking behaviors of Black women in the United States. Analyses were based on a small sample size of 100 participants, including college students, community members, and women of authority ranging in age from 16 to 65 years old. As speculated, multiple obscurities of reticent behavior were found to significantly mediate the relationship between the perceived obligation to manifest strength (a SBW characteristic) and depression. The study advances the idea that depressive symptoms are related to endorsement of the SBW or ABW narrative. These results offer evidence and clarification of the impact of the SBW and ABW harm the mental health of Black women. I provide recommendations for future research to avoid pathologizing strength and I propose potential benefits of integrating a Womanist theoretical perspective into counseling for Black women, a population that has historically underutilized mental health resource.

## INTRODUCTION

What role does media play in the mental health of African American women? "Malcom X, May 1962 stated, "The most disrespected person in America is the black woman. The most unprotected person in America is the black woman. The most neglected person in America is the black woman." This is seen daily in our society, and this will be an opportunity to educate and bring focus to the reality that black women face. Keyshawna Clark, Spring 4-2021 stated, "Studies and history have proven that Black women have experienced forms of hatred that are inhumane." My research will draw attention to the excessive trauma black women face throughout their lives. Sexual objectification, emotional abuse, physical abuse, postpartum depression, and lack of support are just a few of the problems they have in America. Stephanie Pappas, November 1, 2021, said, "...the challenges of Black women often go unmentioned—in part because Black women are often pigeonholed as strong caregivers and providers who shoulder others' burdens and do not share their own." Black women are socialized as strong and resilient, the "strong black woman" stereotype. Despite this socialization with strength, black women are suffering in silence and being ignored when they speak out. Stephanie Pappas, November 1, 2021, says, "a pattern emerged in which Black middle-class help-seekers were less likely to be offered an appointment than White middle-class help-seekers. Therapists may also fall into the trap of believing that their Black women clients are strong and resilient and thus coping better than they are, or they may fail to recognize their clients' strengths because of their own internalized biases." Women often suppress the pain they hold because their pain has been ignored whether it be physical, mental, or emotional. Often therapists and doctors misunderstand

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and misdiagnose them because they do not know how to relate to them. Keyshawna Clark, Spring 4-2021 stated, “Black women encounter racism, sexism, and discrimination not only in other communities, but within the Black community as well.” This paper will shed light on how communities could provide the help black women need to maintain a healthy lifestyle and habits. Erica Richards, September 23, 2021, “as providers, we must enhance our commitment to training a diverse workforce. We know that female and Black clinicians are historically underrepresented in the field.” My research will explore better ways to get resources and progressive methods for black women. It is imperative that these matters are considered and nurtured for the betterment of one of the biggest support systems in America.

### **Statement of Problem**

In 2020, depression (a common psychological disorder) was predicted to be the second leading mental health disorder behind anxiety and is twice as prevalent in Black women. Unfortunately, the attention to Black women's health is minuscule in our society. Even if a Black woman was to look for counseling, therapy, or things of that nature, it would be difficult to find someone who can relate to their issues.

### **Purpose of Study**

The purpose of this study is to improve our understanding of the causes and risk factors for Black women's mental health problems, supports promotion and prevention initiatives helping our women to stay well, support the development and evaluation of new forms of support . Black women's mental health research is important in both driving innovation in current mental health care and in bringing hope for the future.

### **Assumption of Study**

This study will enlighten me on the lives our Black women live. This data will be crucial to my understanding and the elevation of our society.

## **LITERATURE REVIEW**

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The duality of Black women's lives has always intrigued me. "In qualitative studies, Black women have described being overwhelmed by pressures to embody strength and be resilient for their families and communities (Abrams et al., 2014; Woods-Giscombe, 2010). Despite these feelings, many Black women also perceive pressure to refrain from inconveniencing others with their emotional issues and needs." This was one of my immediate thoughts when I decided to do this research. Black women experience immense and overbearing pressure along with having no relief valve to lessen the pressure. This also builds on the idea that Black women's mental health is not imperative.

According to Earlise Ward, "The findings of age differences showing that older participants were less psychologically open than young participants and that middle-aged participants were more open to seeking professional help than young participants indicate the importance of research examining within- group differences among African Americans relevant to gender and age group." Like most humans, Black women's perspective evolves through distinct stages of life, so it is important to know what is beneficial for each stage. Knowing what affects one's mind or their emotional state will help catapult their process of healing. "... older adults as compared to young adults were found to be less likely to use informal support and religious coping. Religious coping is quite common among older African Americans; it was identified as the most culturally accepted strategy for dealing with depression (Conner, Copeland, Grote, Rosen, et al., 2010)." With knowledge knowing religion is a common coping method for Black women in America, I would like to explore other methods of coping because religion can be used as a tool of oppression in our society

Black women are some of the hardest people to relate to because no other person experiences the trails and tribulation she does. According to Ciera Graham, "Finding the right mental health support can be especially challenging for Black women. Finding a therapist who counsels Black

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women or primarily serves individuals from historically excluded identities is beneficial. While your provider does not need to be a person of color, it is important they hold knowledge and experience about the impacts of systemic racism and sexism on Black women.” (Ciera Graham, December 5, 2022) Like Graham said, one does not have to be a person of color to treat a Black woman’s mental health, but they must have wisdom, knowledge, and understanding of the traumas that are forced on her generationally.

“The single biggest driver behind the absence of many black men is mass incarceration. A few academics have held up ratios of black men to women as a proxy for incarceration... Partners and families of the “missing men” face a host of negative social and economic consequences, such as a shortage of income and assets.”- Maciag, M. (January 22, 2019) Because of the systematic racism Black women and families are being stripped of an important support system, the Black man. Although incarceration is down, African American male incarceration is up! This doubles the load a black woman must carry. Because of this many are exhausted from nurturing the children, keeping a stable home, paying the necessary bills, along with being Black in America without any reconciliation or appeasement.

## **Media Image**

“When it comes to the male gaze, Black women have to choose between being ignored or being fetishized.” This plays hand and hand with notion that I will heavily emphasis in my research, that Black women are in a damned state. Meaning no matter what they do or how they are perceived, it is to their disadvantage. "Certain bodies are just not as protected as others, and that’s a historical thing dating back to slavery. Right now, the people that have come to the forefront of the “Me Too” movement have been cis white women in Hollywood. It ignores the

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fact that the people who are assaulted and harassed the most are women of color, and we have no recourse. Even Tarana Burke, who started the movement, did end up one of the people of the year for Time magazine, but they did not even put her on the cover. They put other white women on there." (Moreno and Prois 1)."- Matthew, A.D. (Winter 3-2018) I love the connection to history that Matthew makes. As in slavery, society "protect or glorify" certain bodies but even in "protection" they are not safe. These women are still continuously harassed and assaulted with no source of action. As our white counterparts, experience true protection and are catered to with care.

In any community, Black, White, Hispanic, social media is utilized and influences the perception of all who uses it. "It is hypothesized that social media does play a negative role in the black community, but there are ways that women overcome these issues... The social media survey portrayed how people witness Black women be degraded on social media and that it can negatively impact the Black community." (Keyshawna Clark, Spring 4-2021) Clark supports the idea that society is desensitized to the mistreating of Black women. I have always seen this as a toxic trait of the Black community, and I will be finding ways as Clark did to overcome it.

"For American women of African ancestry, the lasting effects of American slavery add a complex layer to the societal burden. Black women's attributes are traditionally rejected by mainstream beauty industries, often deemed masculine and undesirable, while European esthetics are set as America's standard of beauty." ([Banks, 2000](#)) Acknowledging that the problems of Black women's mental health are much deeper than what we see on the surface is imperative. America is based on Eurocentric standards regarding beauty, lifestyle, and behavior. Not meeting these standards often leads to demonization and being diminished, thus leading to self-esteem loss. "Even within the Black race, proximity to whiteness offers societal advantages: Lighter-complected individuals attain higher levels of educational and occupational success ([Ryabov,](#)



[2019](#)). Black women's hair is policed: Looser curls and straightened hair are celebrated ([Craig, 2006](#)), whereas Afros and traditionally Black hairstyles have resulted in academic and professional dismissals.”- Olayinka, J.T. Gohara MA, Ruffin QK (2021 Jan 9) It is very well known that colorism is a plague of the black community. African Americans with light skin are more acceptable to western society, whereas darker shades are not. In corporate America, straight hair, small nosed look is more acceptable, on the other hand, traditional deep rooted African looks are not “professionally acceptable.”

### **Solutions**

It is obvious that the healthcare system in America is structured to hinder African Americans from maximum health benefits. Finding ways to stifle these systems will be a great focus of mine. “Quite possibly, we will not fully understand treatments and interventions that are best for Black women until more research is performed. Lack of trust in clinical trials and, at times, in the entire health care system... To be clear, Black populations have been mistreated by the medical community for centuries.”- Richards, E. MD, PhD (September 23, 2021) This system has not been show trustworthy for Black women, therefore they are extremely hesitant of asking for help. This is not just a recent problem; it is rooted back to slavery 400 years old.

“Part of the challenge in getting care is the cultural belief that only people who are “crazy” or “weak” see mental health professionals. “There’s a feeling in a lot of Black communities that women have to be strong and stoic,” Richards explains. “Women are so busy taking care of everyone else — their partners, their elderly parents, and their children — they don’t take care of themselves. However, women should be reminded that attending to their own needs, whether

physical or emotional, doesn't make you weak. It makes you better able to care for your loved ones eventually.”- Richards, E. M.D., Ph.D.

I have had White professors teach me about Black theology and African American studies.

Skepticism, rightfully so, is the first reaction I had, but seeing how much time, effort, and care

was put into them wanting to gain wisdom on Black culture soothed my mind. “...it is crucial that

White therapists and therapists from other non-White populations educate themselves on the

specific needs of their Black patients. Black women “are going to be in an interracial experience

of therapy a majority of the time,” said Donna Baptiste, PhD, a counseling psychologist at The

Family Institute at Northwestern University. “The question is, now, how do we assure them that

this person they're going to work with will understand them?”- Pappas, S. (November 1, 2021)

Because, according to zippa.com, 96.1% of therapists are not Black it is critical that the

necessary out of research and experience is partaken to help Women and people of African

descent.

## **METHODS**

This study was administered in two phases. Phase 1 of the study was the management of a survey. Data obtained during Phase 1 was used to gain knowledge on the amount of trauma experienced, treated, and neglected regarding African American Women. Phase 2 of the survey was conducted as written testimonies. This was selected to get direct quotes and more specific details about their experience.

Phase 1: *Survey*

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One hundred women ages 16 to 65, their occupation, location, or lifestyle was not a factor, took part in a survey. All participants completed the survey via Qualtrics. This survey was distributed via email, Instagram, and Facebook. Out of the one hundred survey applicants, all one hundred were African American women in the United States. Participants completed an 18-item survey created by the researcher. The survey includes matrix tables, multiple choice questions, and ranking order questions.

### Phase 2: *Written Testimony*

Only 12 participants participated in the written testimony portion of the research, this action was optional. The written testimony participants all did the survey in the prior phase. Respondents were informed about the assured confidentiality and that their identities can be kept anonymous, if requested, because the discussion is considered sensitive or triggering to some. Each testimony was 3-5 sentences.

Participants were asked to answer the following questions:

1. What role did men play in your life?
2. Did it help or hurt your mental health?
3. What role did women play in your life?
4. Did it help or hurt your mental health?

This data allowed valuable insights into different perspectives.

## **RESULTS**

### Phase 1: *Survey*

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In phase one (the survey), all participants were African American women. The age demographic ranged from 16 – 65 years old; 76 participants were between 16–24, 5 participants were 25–34, and 18 participants were 35 or older with 65 being the oldest. In this study 76 participants were also single, 9 were married, 6 were divorced, 5 were widowed, 4 preferred not to answer. Next, they were asked what their occupation was, 29 participants were students, 55 were employed full or part-time, 8 were self-employed, and 8 were unemployed.

This project it was able to acquire diverse women from different regions as participants reside in:  
Boston, Massachusetts

Baltimore, Maryland

Albany, New York

Gulfport, Mississippi

Indianapolis, Indiana

Claremont, California

Jackson, Tennessee

Memphis, Tennessee

Baton Rouge, Louisiana

Contestants were then asked if they had ever received counselling for their mental health. The data showed that 41 of these women have never sought counseling, while 69 have. Later during the survey, we asked questions focusing on the trauma they have experienced. Our first category was physical trauma, 44 women said they have not been abused, while 56 have experienced this trauma. Then we asked if verbal abuse was inflicted on them, 21 women respond that they have

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not experience verbal abuse, but a staggering 79 women experienced this. Sexual assault would be the next experience presented, 35 of the women have not dealt with sexual assault, but a disturbing 65 women were sexually assaulted.

Following the experiences questioned, we then presented them with seven different coping mechanisms and asked them to select all that apply to them. The first mechanism was smoking any substance or vaping, 44 women out of the 100 used this as a coping method. The second mechanism was writing in a journal, 56 out of the 100 use this as a coping method. The third mechanism was consuming alcohol, 24 out of the 100 used this method. The fourth mechanism was religion or praying, this was the most used method with 65 out of the 100 using it. The fifth mechanism was having sexual intercourse, 21 out of the 100 use this method. The sixth mechanism was consuming pills or medication, this method had the lowest usage with only 8 out of the 100 reverting to method. The seventh and final mechanism was going to family for help, 24 out of the 100 used this method. All 100 participants selected at least 3 coping mechanisms.

### Phase 2: *Written Testimony*

Phase 2 is comprised of written testimonies from 12 out of the 100 participants where they answered these four questions: What role did men play in your life? Did it help or hurt your mental health? What role did women play in your life? Did it help or hurt your mental health?

We will be

In our results, the answer to our first question (What role did men play in your life? ) were all the same. Destiny Lewis from Laurel, MS claimed, “The men in my life, outside of my immediate family, have disappointed or hurt me...” Amariah White of Memphis, TN states, “I lost trust in men a long time ago... No matter what I do I get used or abused in some way, shape, form, or

fashion.” This was the common testimony to our first question. Our follow up question (Did it help or hurt your mental health?) was answered “Hurt” by all. The next question (What role did women play in your life?), receive mixed reviews. Makayla Evone replied, “Overall the women in my life played a pivotal role in my life because of the way they nurtured me... of course you have the jealous women or women with malintent but that’s life.” Laniya Thornwell from Indianaopolis shared similar statements saying, “I have yet to experience a life altering, human inflicted trauma from a woman, only men have done such a thing...” On the contrary, Alisa Dace’s experience is rather damning, she expressed, “I try to stay to myself as much as possible because the men and women of signific in my life have traumatize me, when I was getting ridiculed from my mother because of her past traumas she put on me, I would try to find guy friends, boyfriends, or fatherly figures to grow a relationship with and I would always get used up... I am desensitized to both men and women.” The results to our following question state that 8 participants felt women helped their mental, while 4 thought the latter.

## **DISCUSSION**

As you can see from the results of the survey and written testimonies, we need to normalize discussions about Black women's mental health. “More people, including high-profile celebrities — actors, singers and political representatives from minority communities — are opening up about their battles with depression, including, at times, thoughts of suicide. Recently, several high-profile suicides have initiated conversations about treatment options and the devastating impact of suicide on family and friends left to process their loss. Normalizing this discussion will continue to be a key factor in helping others identify when and how to seek help.” (Richards, E.

M.D., Ph.D.) Although there is a necessity for normalizing this, we, as a society, must sever the degrading language used when one seeks help like “weak” or “crazy”.

## FUTURE DIRECTIONS

What should we, society, and health professionals, do to support Black women’s mental health?

There are three things I want to present. First, America must address that there is a need for cultural competency (being aware of your own cultural beliefs and values and how these may be different from other cultures—including being able to learn about and honor the unfamiliar cultures of those you work or live with). Second, the mental health workforce needs to be reinforced with diversity. It is clear that Black female clinicians are underrepresented in this field. There needs to be an emphasis on recruitment and mentorship in these fields to increase the number of women in psychiatry. Lastly, we must sever the “One size fits all” notion. African Americans come from diverse backgrounds in different regions under a multitude of circumstances.

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