

# DPAC April 2026 Newsletter



## Health and Wellness

By Mary Nyangweso, PhD

Welcome everyone to the April 2026 DPAC Newsletter. This month, I would like to focus our attention on health and wellness, as well as the challenges that people of African descent face daily. When we talk about empowerment, we must consider the varied experiences that we have daily. Health and wellness are a significant part of that. Below, I highlight some of the challenges the black community faces and how we can work together to address them.

The health status of Black people in the diaspora is defined by significant health inequities. It is characterized by lower life expectancies and disproportionately high rates of chronic conditions like heart disease, diabetes, and maternal mortality. These disparities are primarily driven by systemic racism, socioeconomic barriers, and environmental stress.<sup>1</sup> African immigrants are also affected.<sup>2</sup>

### 1. Key Health Disparities & Conditions

Black populations globally face a higher burden of several acute and chronic conditions.

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<https://ajph.aphapublications.org/doi/full/10.2105/AJPH.H.2015.302676>

**Cardiovascular Disease:** Hypertension (high blood pressure) and stroke rates are remarkably high. Heart disease is the leading cause of death for Black Americans, often striking earlier in life.

**Maternal and Infant Health:** Black women face significantly higher maternal mortality rates compared to their white counterparts. Black infant mortality rates also remain notoriously high.

**Diabetes & Kidney Disease:** Black individuals are disproportionately affected by Type 2 diabetes and its severe complications, including end-stage renal disease.

**Cancer:** While incidence rates for some cancers may be like those of other groups, survival rates are lower, often due to delayed diagnoses and barriers to care.

**Infectious Diseases:** Black communities in the diaspora bear a disproportionate burden of HIV/AIDS and were heavily impacted by the morbidity and mortality of the COVID-19 pandemic. This video reinforces the argument I just made.

Health Disparities in Black Communities  
Video: <https://youtu.be/Mdpl8wpl8Tc>

### 2. Root Causes

DPAC cares about health and wellness because health status in the black

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<https://www.sciencedirect.com/science/article/pii/S266623523000521>

community is not primarily a result of inherent genetic failures. It is the manifestation of structural and environmental factors known as the *Social Determinants of Health (SDoH)*. In other words, the history and environments the black community has been exposed to contribute to their status.

**Structural Racism & Bias:** Historical and present-day discrimination impacts access to housing, employment, and quality education. Furthermore, implicit bias within the medical system often results in under-treatment and misdiagnosis.

**Socioeconomic Status (SES):** Disproportionate rates of poverty, underinsurance, and neighborhood segregation restrict access to preventive care, nutritious foods (often in "food deserts"), and safe environments for physical activity.

**"Weathering" and Stress:** The chronic, systemic stress of navigating racial discrimination takes a severe toll on the body's immune system and cardiovascular system, accelerating the onset of chronic diseases.

### **3. Healthcare Access & Cultural Competency**

Despite improvements in health insurance coverage, Black individuals still report higher rates of forgoing medical care due to cost. Historical medical abuses (such as the Tuskegee Syphilis

Study) have generated valid mistrust in healthcare institutions, making culturally competent care, diverse representation in the medical workforce, and community-based participatory research vital for improving health outcomes.

#### **Possible Remedies**

Addressing health disparities in the Black diaspora requires a multi-level approach that tackles systemic, structural, and cultural barriers. Solutions must focus on systemic reform, workforce diversification, and community empowerment to ensure equitable care and improved health outcomes.

#### **Core Solutions to Health Disparities**

**Systemic & Policy Reform:** We must address non-medical drivers of health (housing, income, food access, and environmental safety) to reduce systemic inequities. Dismantling structural racism and bias within medical institutions is critical.

#### **Workforce Diversification & Cultural**

**Concordance:** We must increase the representation of Black professionals in the healthcare and scientific workforce. Patient-provider racial concordance improves trust, communication, and adherence to treatment.

#### **Cultural Competency & Anti-Racism**

**Training:** We must implement mandatory training in medical schools and clinical settings to eliminate

conscious and unconscious biases in patient care.

**Community-Based Participatory Research (CBPR):** We must actively involve the Black community in the design and implementation of health research. This will ensure clinical trials and prevention programs are culturally tailored and responsive to specific community needs.

**Culturally Tailored Interventions:** We must develop health education campaigns that respect the traditional healing practices, religious influences, and lived experiences of communities across the diaspora<sup>3</sup>

#### **Local Resources and Action**

Reach out to local resources to learn how to stay on top of your health. Visit your doctor regularly to stay on top of your health. At this point, I would like to introduce a DPAC affiliate resource and initiative that is running initiatives to empower communities for health and wellness.

Visit our website, titled **Faith Empowers Healthy Lifestyle**, at <https://fehInc.org/> for lessons to help you stay on top of your health.

Thank you very much for sharing this message with others and for being part of this journey. Together, we forge ahead. Peace. Remember to visit us at [www.diasporapan-African.org](http://www.diasporapan-African.org)

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<sup>3</sup> U.S Department of Health and Human Services, "Black / African American Health,"

**Remember:** Subscribe to our email us at [dpaddmn@gmail.com](mailto:dpaddmn@gmail.com). – DPAC President.

#### References:

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