Perceptions of barriers that inhibit African American women and adolescent girls from participation in physical activity

Sonya Daniels Walker

University of Nevada, Las Vegas, walke243@unlv.nevada.edu
PERCEPTIONS OF BARRIERS THAT INHIBIT AFRICAN AMERICAN WOMEN AND ADOLESCENT GIRLS FROM PARTICIPATION IN PHYSICAL ACTIVITY

By

Sonya Daniels Walker

Bachelor of Arts in English
Spelman College
1995

Master of Arts in Education
Pepperdine University
1999

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Sonya Daniels Walker

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Department of Sports Education Leadership

Doris Watson, Committee Chair

Monica Lounsbery, Committee Member

Shiri Ayvazo, Committee Member

Gita Taasoobshirazi, Graduate College Representative

Ronald Smith, Ph. D., Vice President for Research and Graduate Studies and Dean of the Graduate College

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ABSTRACT

This study examined the barriers to leisure time physical activity for African American women and their adolescent daughters. Six mother-daughter dyads were interviewed who have access to physical activity opportunity. Three of the dyads participated in a follow-up focus group. A qualitative research design that utilized a grounded theory approach identified two themes for the women and two themes for the girls. Themes for the women include influence of culture and low physical activity IQ. Sub-themes of influence of culture are (a) hair and (b) body image. Sub-themes of low physical activity IQ are (a) mommy guilt, (b) perception of time and (c) weather. Themes for the adolescent girls are stereotypes and lifestyle influences. Sub-themes of stereotypes are (a) sexuality stereotypes and (b) racial stereotype. Sub-themes of lifestyle influences are (a) social influences, (b) parental influences, and (c) school influences. Results found that a lack of physical activity history provides a huge barrier to physical activity for the women, and peer pressure is a barrier to physical activity for their daughters. Theories relevant to the findings in this study include (a) the theory of planned behavior, (b) Black feminist thought, and (c) Marcia’s identity status.

This study aimed to contribute to further theory development and to inform future research of the most effective ways to increase leisure time physical activity in African American women and girls. Recommendations included culture and gender specific physical activity and nutrition interventions, physical activity role models, and future research on the role mother/daughter dynamics plays in physical activity.
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Dedicated to Pearline Jamison Daniels and Frenchye Harper Latham
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CHAPTER I

BACKGROUND

Introduction

The United States is currently obsessed with food, exercise, and body weight. An increase in sedentary behaviors and an unhealthy love/hate relationship with food contributes to the current obesity epidemic. The National Institutes of Health (2010) estimates that:

Over the next few decades, life expectancy for the average American could decline by as much as 5 years unless aggressive efforts are made to slow rising rates of obesity, according to a team of scientists supported in part by the National Institute on Aging (NIA), a component of the National Institutes of Health (NIH) of the Department of Health and Human Services (DHHS). The U.S. could be facing its first sustained drop in life expectancy in the modern era, the researchers say, but this decline is not inevitable if Americans — particularly younger ones — trim their waistlines or if other improvements outweigh the impact of obesity.

It is well known that childhood overweight and obesity are serious health concerns for children and adolescents. Results from the 2007-2008 National Health and Nutrition Examination Survey (NHANES), indicate that an estimated 17 % of children and adolescents ages 2-19 years are obese. Among adolescents aged 12-19, obesity increased from 5 to 18.1% between 1976-1980 and 2007-2008. Obese children and adolescents are at risk for preventable health problems during their youth and as adults. The Centers for Disease Control state that obese children and adolescents are more likely to have risk factors associated with cardiovascular disease, such as high blood pressure, high cholesterol, and Type 2 diabetes, than are other children and adolescents. Behavioral factors such as physical

1
activity and sedentary lifestyles greatly impact the health of adolescents. Sociological factors of inactivity include having recreational facilities available, having a safe place to be active, and having time to be active (Wilbur, Chandler & McDevitt, 2003).

“Don’t you want to be a member of the clean plate club?” “Make sure you finish all of your food…” “Don’t leave anything on your plate…” Most Americans have memories of either being encouraged to belong to the clean plate club or encouraging others to belong. The concept of eating everything on your plate, regardless of portion size has been around for many decades. Although it is somewhat unclear as to where the concept began, it is believed to have originated during World War I when the U.S. government was trying to reduce domestic food waste (Pelican & Heede, 2005). Unfortunately, although our portion sizes have expanded over the years, we have held onto the concept of the clean plate club, and our expanding portion sizes have correlated to expanding waist sizes. Much of the increase in portion sizing has grown out of the food industry’s desire to increase prices while creating the concept of value. Marketplace food portions have increased in size and now exceed federal standards. Portion sizes began to grow in the 1970s, rose sharply in the 1980s, and have continued in parallel with increasing body weights (Young & Nestle, 2002).

Unfortunately, in addition to expanding portion sizes, many in the United States have decreased the amount of time they spend moving. Lack of physical activity and exercise in combination with the increasing portion sizes has led to an obesity epidemic. This obesity epidemic has become a part of our American culture, yet certain demographics are hit much harder by overweight and obesity. Women of color are suffering from obesity related health problems at a much greater rate than the majority population. A combination of poor diets
and sedentary behaviors are starting in childhood and adolescence and continuing into adulthood, leading to a poor quality of life and decreased life expectancy (CDC, 2010).

**Background of the Problem**

The United States is an amalgamation of unique individuals. Though we are a country that thrives on individuality, we are greatly influenced by our gender, race, ethnicity, socioeconomic and geographic boundaries. The ways we speak, dress, eat, and socialize are just a few things that are influenced by our micro-culture. It is not uncommon to guess where a person is from based on their vernacular or style of dress. It is also not uncommon to judge our own physical appearance based on our cultural, socioeconomic and geographic norms. For many women of color, a larger body size is associated with physical attractiveness and prosperity (Allan, 1993). As a result, one’s culture often determines how they approach their health and wellness, their nutrition and their physical activity.

Women of color have the highest rate of physical inactivity and sedentary lifestyles (Keller et al., 2004) regardless of outside factors, such as socioeconomics. Physical inactivity can lead to overweight and obesity, both which have been linked to several health problems including cardiovascular disease, hypertension, and diabetes. Women of color suffer obesity related problems at a rate significantly higher than non-Hispanic white women. These health disparities could be reduced with proper education; but many women find it difficult to make lifestyle changes as adults. Women of color have demonstrated the largest increase in obesity from early childhood to young adults (Melnyk & Weinstein, 1994). Therefore, it is imperative to address the decrease in physical activity that occurs with adolescent girls of color to prevent them from continuing physical inactivity into adulthood. The decrease in physical activity generally begins with the transition from elementary to
middle school and continues into adulthood. Patterns established during middle school years are important in the development of adult health-related habits. Though patterns established early often transition into adulthood, there are also socio-cultural implications regarding issues of overweight and obesity in communities of color that need to be addressed.

**Statement of the Problem**

Regardless of socio-economic status, African American women have the greatest risk of obesity as a result of a sedentary lifestyle (Hawkins, 2007) and African American girls are more likely to be overweight than any other group (Johnson et al., 2007). While physical activity declines from 6th grade to 8th grade in all girls, the rate of decline tends to be larger in African American girls (Whitt-Glover et al., 2009). This research will address the perceptions of the barriers that inhibit urban African American women and their daughters from participation in regular physical activity, and any soci-emotional and/or cultural factors that contribute to those sedentary behaviors.

**Purpose of the Study**

The purpose of this study was to replicate in part, Gordon-Larsen, et al.’s, (2004), investigation of perceptions of barriers to physical activity using mother-daughter dyads. Gordon-Larsen, et al. (2004) collected data on household and physical environment barriers to physical activity to develop intervention strategies for obesity prevention in high-risk pre-adolescents. As in the Gordon-Larsen, et al. (2004) study of African American caregiver-daughter dyads, semistructured interviews and focus groups of caregiver-daughter dyads were constructed to identify perceived barriers to physical activity and a grounded theory was developed from a construct-oriented approach. For the purposes of this study, grounded
theory is defined as theory generated from data systematically obtained and analyzed through the constant comparative method (Conrad, 1978, pp. 334-335).

**Research Question**

The primary purpose of this study was to present a grounded theory that is based upon research guided by the one major research question: What are the perceptions of barriers that inhibit African American women and girls from participating in regular physical activity? This study also addressed the following research sub-question:

1. What are the related socio-emotional factors that may contribute to sedentary behaviors?

**Significance of the Study**

African American women, report the lowest levels of physical activity than any other subpopulation in the United States. Nationally, about 60% of white adolescent females engage in regular vigorous physical activity as compared with 50% of Hispanic and 47% of black adolescent females (Saxena, Borzekowski & Rickert, 2002). Limited research has been done that focuses on the investigation of the barriers that inhibit urban girls of color from participation in regular physical activity. Studying these barriers would allow for possible solutions to be generated given that a lack of physical activity has been shown to contribute to the health disparities observed between white females and non-white females (Saxena et al, 2002). More specifically, it would assist in the development of culturally relevant interventions to address physical inactivity and overweight in communities of color.

**Definition of Terms**

*Grounded theory*. The inductive analytical method of theory building from data

*Person of color.* The term people of color was adopted to refer in a positive way to all people who are not considered "white" by "white people." In American "racial" terms, it refers to anyone who claims other than European ancestry on either side of their family. It is a proud heritage representing 80% of the world population (but only 20% of the U.S. American population) (SOAW, 2010).

*Physical activity.* Movement that enhances health. Used synonymously with exercise.

*Overweight and Obese.* For adults, overweight and obesity ranges are determined by using weight and height to calculate a number called the "body mass index" (BMI). BMI is used because, for most people, it correlates with their amount of body fat.

- An adult who has a BMI between 25 and 29.9 is considered overweight.
- An adult who has a BMI of 30 or higher is considered obese.

*Childhood overweight and obese.* For children and adolescents (aged 2–19 years), overweight is defined as a BMI at or above the 85th percentile and lower than the 95th percentile. Obesity is defined as a BMI at or above the 95th percentile for children of the same age and sex.

*Epidemic.* A rapid spread or increase in the occurrence of something.

*Urban:* densely developed territory, encompassing residential, commercial, and other non-residential land uses in which social and economic interactions occur.

*Built/physical environment:* All buildings, spaces and products that are created, or modified, by people. It includes homes, schools, workplaces, parks/recreation areas, greenways, business areas and transportation systems.
Health disparity: A difference in the quality of healthcare provided to a person because of their race or culture.

Limitations

One limitation of this study pertains to the sample size. The researcher enrolled a total of twelve participants. Another limitation of this study is that all of the participants resided in the same demographic area and are members of the same organization limiting the generalizability of the study. It is not the intent of this research to deny, ignore, or minimize the opportunities of others. Given the nature of qualitative research, a small sample will be used. Qualitative research relies on in-depth interviewing and enables participants to speak to their own experience.

Nature of the Study

Qualitative research includes the voices of participants, the reflexivity of the researcher, and a complex description and interpretation of the problem. When necessary, qualitative research signals a call for action (Creswell, 2007). A qualitative research design was used to conduct in-depth, tape-recorded interviews for data collection. Grounded theory techniques were utilized to explore and analyze the data. According to Creswell (2007), the intent of a grounded theory study is to move beyond description and to generate or discover a theory, an abstract analytical schema of a process. As such, this study explores perceptions of what prevents African American women and adolescent girls from participating in regular physical activity. The inquiry into the phenomena of African American women and girls being overwhelmingly sedentary was designed to give voice to the experiences of a select group of women and their daughters. Although this study utilized a grounded theory approach of constant comparative analysis, it is necessary to stress the influence or “inspiration” of a
philosophical phenomenological orientation rooted in van Manen. Phenomenological inquiry
draws on a variety of sources of meaning including everyday life experiences, language, and
social sciences. All of these were intertwined to reflect upon and interpret and give meaning
to the experiences of the participants in this study.
CHAPTER II
REVIEW OF RELATED LITERATURE

Introduction

Conversations regarding the health of the United States are a part of our daily lives. Though there is an abundance of literature and research identifying obesity as an epidemic, particularly among certain demographics, there is limited research available on physical activity among urban adolescent girls of color and urban women of color. This chapter will review available studies directly and indirectly relating to the physical activity habits of women and girls of color in urban environments.

Constant bombardment by the media regarding the obesity epidemic in the United States maintains our awareness and alert that obesity is indeed an issue in the U.S. Add first lady, Michelle Obama’s, Let’s Move initiative and President Obama’s Task Force on Childhood Obesity and it is obvious that body weight is a major focus in society at this time in history. The National Institutes of Health and other organizations have gone so far to hold workshops on predictors of obesity, weight gain, diet, and physical activity (NHLB, 2009). As a society, we are constantly talking about the impact this epidemic has on our lives, yet we seem unable to address it in a meaningful way.

Throughout the past twenty years, there has been a remarkable increase in overweight and obesity in the United States. In fact, the United States is considered the fattest country among wealthy Western industrialized nations (OECD, 2010). In 2009, only one state, Colorado, and the District of Colombia had obesity rates less than 20%. Thirty-three states had obesity prevalence equal to or greater than 25%. Nine states, Alabama, Arkansas, Kentucky, Louisiana, Mississippi, Missouri, Oklahoma, Tennessee, and West Virginia all
had an obesity prevalence equal to or greater than 30% (CDC, 2010). Within ten years, three out of four people are predicted to be overweight or obese (OECD, 2010).

There are several causes for the overweight/obesity epidemic we are seeing, the most obvious being lack of energy balance and inactive lifestyles. Most people understand the general concept of calories in versus calories out and realize that physical activity and exercise are valuable components of weight management; however there are other factors that can contribute to significant weight gain. Environment, genes and family history, health conditions, medicines, emotional factors, age, lack of sleep, and demographics are all factors that can contribute to the type of weight gain that leads to obesity. While a great deal of research is being done on overweight and obesity, no single theory has sufficiently explained all of the factors contributing to overweight and obesity (Booth, K., Pinksyon, M., & Poston, W, 2005).

Regardless of the reason for a person carrying excessive weight, the end results are potentially damaging. Health consequences, economic consequences, and according to some, national security threats can all result from overweight and obesity. Obesity related health problems can include coronary heart disease, type 2 diabetes, cancers (endometrial, breast, and colon), hypertension (high blood pressure), dyslipidemia (for example, high total cholesterol or high levels of triglycerides), stroke, liver and gallbladder disease, sleep apnea and respiratory problems, osteoarthritis (a degeneration of cartilage and its underlying bone within a joint), and gynecological problems (abnormal menses, infertility), not to mention, death (CDC, 2010).

The economic consequences of overweight/obesity are only starting to surface. Researchers are beginning to address issues of annual medical costs and lifetime medical
costs which can cost taxpayers money to finance obesity-related medical expenditures among Medicare and Medicaid recipients (Finklestein, Ruhm, & Kosa, 2005). Nonmedical expenditures (such as high absenteeism from work), and occupational choice and wages (obese women are often excluded from higher paying jobs) can hurt obese individuals on an individual level (Finklestein, Ruhm, & Kosa, 2005). So, not only do the economic consequences affect individuals, they can also have an impact on the greater society.

During this time of war, it may seem that terrorists threats are the greatest risks to national security; however a new report, Too Fat to Fight (Christeson, Taggart, & Messner-Zidell, 2010) states that being overweight or obese turns out to be the leading medical reason why applicants fail to qualify for military service. Today, otherwise excellent recruit prospects, some of them with generations of sterling military service in their family history, are being turned away because they are just too overweight. Since 1995, the proportion of recruits who failed their physical exams because they were overweight has risen by nearly 70 percent (Christeson, Taggart, & Messner-Zidell, 2010).

It is quite apparent that overweight and obesity are playing a major role in the health and wellness of the overall nation and that African American women have the highest rate of physical inactivity and sedentary lifestyles (Keller et al., 2004). Heller and Gore (1998) revealed that African American women are less likely to practice health promoting behaviors, perceive themselves as being overweight, be on weight reduction programs and participate in physical activity, and evaluate sedentary lifestyles as harmful behavior. The trend for low physical activity among African American women begins in childhood and early adolescence (Whitt-Glover et al., 2009) and contributes to overweight and obesity later in life.
Childhood Obesity

The rate of overweight and obesity in the United States has drastically increased over the past several years. From 1963-1970 to 1999-2002, the prevalence of overweight among children aged 6 to 11 years quadrupled from approximately 4% to 16%. During the same time, overweight among adolescents aged 12 to 19 years increased from 5% to 16% (CDC, 2010). Overweight adolescents have a 70 percent chance of becoming overweight or obese adults, which increases to 80 percent if one or more parent is overweight or obese (HHS, 2010).

Health professionals are beginning to see health problems in children that were previously reserved for adults (Caprio et al., 2008). During their youth, for example, they are more likely to exhibit risk factors for cardiovascular disease (CVD) including high blood pressure, high cholesterol, dyslipidemia, and type 2 diabetes compared with normal weight individuals. Additional health complications associated with overweight children include sleep apnea, asthma, and liver damage (Bellows & Roach, 2009).

Children are also much more sedentary than in the past. The increase in technology allows children and adolescents more access to television, video games, and computers. Increase in technology usage (Wang & Zhang, 2006) and a decrease in school based physical activity, as a result of reduction in physical education and recess, also contribute to a lack of physical activity. Sedentary behavior, and specifically television viewing, may replace time children spend in physical activities, contribute to increased calorie consumption through excessive snacking and eating meals in front of the television, influence children to choose
high-calorie, low-nutrient foods through exposure to food advertisements, and decrease children’s metabolic rate (USDA, 2010).

Genetics, behavior, and family environment also play a role in childhood obesity. It has been shown that overweight tends to run in families suggesting a genetic link. There is an inherited component to childhood overweight that causes some children to become overweight. There are a number of single gene mutations ("genetic alterations") that are capable of causing severe childhood overweight, though these are rare. Parental obesity may also reflect a family environment that promotes excess eating and insufficient activity (The Obesity Society fact sheet, 2010). Environmental factors affect an individual’s inherent risk for obesity, which is determined by the effects of multiple genetic factors (Ichihara & Yamada, 2008). Family, twin and adoption studies indicate a strong genetic basis with heritability estimates for BMI ranging between 40% and 70% in both adults and children (Bottcher, Korner, Kovacs, & Kiess, 2012). “There is no doubt that genetic determinants together with or modified by an unhealthy ‘obesogenic’ lifestyle in civilized societies lead to different individual susceptibility for obesity (Bottcher, Korner, Kovacs, & Kiess, p. 35, 2012).

**Demographics and Obesity**

Demographic factors can greatly influence childhood and adult onset overweight and obesity. Certain ethnic minority and socioeconomic populations have increased rates of childhood obesity. For example, there is evidence that African-American and Hispanic children 6 to 11 years old are more likely to be overweight than are non-Hispanic white children of the same age. Asian and Pacific Islander children of the same age were slightly less likely to be overweight (The Obesity Society fact sheet, 2010). Furthermore, the
increase is particularly evident among non-Hispanic black and Mexican American adolescents (Caprio et al., 2008) and most notable among non-Hispanic black girls, Native American, and Mexican American girls (NHANES, 2010).

In greater numbers than ever, parents and their children are making poor nutrition choices. Schools and homes are filled with high calorie low nutrient foods that are leading children to establish bad eating habits at a young age. Lower-cost diets tend to be energy-dense but nutrient-poor. In contrast, the more nutrient-dense diets cost more (Andrieu, Darwmon, and Drewnowski, 2006). An increase in availability and consumption of high-calorie convenience foods and beverages, more meals eaten away from home, fewer family meals, and greater portion sizes all may contribute to childhood overweight (Bellows & Roach, 2009).

“Knowing the child’s place of residence can provide additional insight into the complex relationships between social and economic resources and obesity prevalence” (Caprio et al., 2008, p. 2213). In low socioeconomic neighborhoods, it has been found that higher television viewing and higher physical inactivity levels are independently associated with higher obesity prevalence (Singh, van Dyke, & Sjahpush, p. 683, 2008). Television-viewing has become a targeted health behavior because of its relationship to obesity. It is believed that television-viewing is a behavior that either prompts eating and/or displaces physical activity, thus causing obesity (McGuire, Hannan, Neumark-Sztainer, Cossrow, & Story, 2002). Regardless, of socioeconomic status, African American girls report the highest levels of television time (McGuire et al., 2002) increasing the odds of mindless eating and limiting time for physical activity.
Relative to the poverty of time, the increasing number of women in the workplace has been associated with a shift in family eating habits. In 1965, married women who did not work spent over two hours per day cooking and cleaning up from meals. Today, there is not only an increase in married women who work, but an increase in working single mothers. When it comes to food selection, the common trade-off is between time and money (Caprio et al., 2008). Since the 1960s, there has been a revolution in the mass preparation of food that is roughly comparable to the mass production revolution in manufactured goods that happened a century ago. Technological innovations, including vacuum packing, improved preservatives, deep freezing, artificial flavors, and microwaves, have enabled food manufacturers to cook food centrally and ship it to consumers for rapid consumption. The switch from individual to mass preparation lowered the time price of food consumption and led to increased quantity and variety of foods consumed (Cutler, Glaeser, & Shapiro, 2003).

**The Intersection of Obesity, Culture and Gender**

The United States has a unique history. She is an extremely diverse country that relishes in its diversity, yet her history is not one without some amount of shame as we are all aware that the United States has a history of slavery and racism. DuBois’ (1903) prolific statement, “…for the problem of the twentieth century is the problem of the color line” continues to remain relevant into the 21st Century. Although there has been tremendous growth, there has also been a cycle of poverty that has stemmed from its racially prejudiced beginnings. This socioeconomic impact has influenced everything from education to job opportunities as well as health. As a result, there continues to be an imbalance in many lifestyle choices which may lead to health disparities between people of color and the majority population.
Though obesity is increasing in all ethnic and racial groups, its prevalence is higher in nonwhite populations (Caprio et al., 2008) particularly among women (Azzarito & Solomon, 2005). Healthy People 2010 (USDHHS, 2000) reports that African American and Hispanics are generally less active than European Americans, and that the number of African American women who are obese is 80% higher than the percentage of men. Non-Hispanic blacks have the greatest prevalence of obesity, followed by Hispanics and non-Hispanic whites (CDC, 2010).

While there is paucity of research as to why women of color are not participating in health maintaining physical activity, there are at least three reasons that might account for the discrepancies. First, racial/ethnic populations differ in behaviors that contribute to weight gain. Next, differences exist in attitudes and cultural norms regarding body weight. Finally, certain populations have less access to affordable, healthful foods and safe locations for physical activity (CDC, 2010).

Several different factors may play a role in ethnic contributors to weight gain. First, compared with non-Hispanic whites, non-Hispanic blacks are less likely to engage in regular (non-occupational) physical activity (CDC, 2010). Among African American women, the routine of physical activity is commonly accomplished as a result of work-related responsibilities (Nies, Vollman, & Cook, 1999). As a result, many women include the physical nature of their jobs as physical activity and a leisure time physical activity becomes less of a priority.

In addition to a lack of physical activity, many ethnicities use food as part of their cultural expression. In the African American tradition, meal preparation and family gatherings have been important part of their custom. Generations of women hand down cultural traditions
through the selection and preparation of food. Strong cultural attitudes about where and with whom food is eaten have emerged as being of at least equivalent importance as attitudes about specific foods (Airhihenbuwa, Kumanyika, Agurs, Lowe & Saunders et al., 1996).

Current Centers for Disease Control research (2010) regarding body weight and image is consistent with the research of Harrell and Gore (1998), which revealed African American women to be less likely to perceive themselves as being overweight. African American women and girls have broader acceptance regarding body size, thus greater tendency to be heavier before they consider themselves overweight (Allen, 1993). These images of “big” and “beautiful” in African American women and girls stem from the African concept that a big body equals health and prosperity. In many countries, a rounded body is highly sought after and considered the epitome of beauty. As a result, African American women and girls have broader acceptance regarding body size, thus greater tendency to be heavier before they consider themselves overweight (Allen, 1993).

Another contributor to weight gain includes sociological factors. Sociological factors of inactivity involve environmental issues such as having a place to be physically active, having a safe place to engage in physical activity, and having the time to be physically active (Wilbur et al., 2003). Discussions of physical activity promotion among women have historically been aimed at white upper middle class women (Azzarito & Solomon, 2005) thus limiting the amount of research available on the topic of physical activity and women of color.

**Urban Adolescent African American Girls**

Physical activity is thought to be influenced by the behavioral setting in which it occurs. Investigations into physical activity habits have also shown that physical activity declines
with age and pubertal development among girls and that overweight parents create obesigenic households. Pubertal maturation is known to impact obesity development and because African American girls undergo pubertal maturation earlier on average than white girls, differences in pubertal maturation stage might account for some racial differences in adolescent obesity (Caprio et al., 2008). Cunnane argues that obesigenic households result from diet and lifestyle patterns that are initiated during early childhood (as cited in Gordon-Larsen et al., 2004, p. 218) and parental attitudes toward physical activity are associated with childhood physical activity, particularly in relation to race/ethnicity and gender (McGuire, Hannan, Neumark-Sztainer, Cossrow, & Story, 2002). Parental attitudes, but not necessarily their behavior, may positively influence adolescent’s physical activity and sedentary behaviors (McGuire, Hannan, Neumark-Sztainer, Cossrow, & Story, 2002).

Several studies have concluded that only a small percentage of urban girls of color participate in physical activity and they participate at lower levels than non-Hispanic white girls in similar age groups. Nationally, about 60% of white adolescent females engage in regular vigorous physical activity compared with 50% of Hispanic and 47% of black adolescent females (Saxena & Rickert, 2002). With declining levels of physical activity, declining participation in sports programs, and low fitness, adolescent girls are at risk for facing future physical inactivity–related health consequences (Phillips & Young, 2009).

Moreover, overweight adolescents suffer from lower grades and test scores and increased absenteeism.

Story, Kaphingst, and French (2006) state:

Research has also recently begun to elucidate the relationship between physical activity and student performance at school. Among the findings are that physical activity
programs help school-aged children develop social skills, improve mental health, and reduce risk-taking behaviors. Evidence also suggests that short-term cognitive benefits of physical activity during the school day adequately compensate for time spent away from other academic areas. (p. 111)

In schools; exclusion, lack of role models, safety, and even laziness inhibit the participation of urban girls in physical activity (Saxena, Borzekowski & Rickert, 2002). Saxena et al. (2002) used the Youth Risk Behavior Survey (YRSB) to quantify the amount of physical activity 305 12-21 year old (mean age 17) female subjects engaged in each week. Using the Centers for Disease Control’s definition of vigorous exercise, Saxena et al. (2002) found that 30.5% (n = 93) of female inner-city adolescents reported engaging in regular vigorous exercise in the week preceding the survey, 23% (n = 70) reported some vigorous exercise, and 46.6% (n = 142) did not engage in any physical activity that required sweating and breathing hard for at least 20 minutes during the 7 days preceding the survey.

Taylor, Yancey, Leslie, Murray, Cummings, et al. (1999) and Gordon-Larsen et al.’s (2004) use of qualitative interviews and focus groups found that only a small percentage of urban girls of color participate in physical activity and they participate at significantly lower levels than non-Hispanic white girls in similar age groups. Taylor et al. (1999) utilized one-hour focus groups with core questions and probes related to physical activity, physical education, and healthy habits. Core questions that targeted relevant areas about physical activity among girls of color were developed from literature reviews and interviews with coaches, teachers, parents, and scientists. The core questions were open-ended, and subsequent probes were designed to target specific topics. Thirty-four girls participated in six focus groups in two different sites. In the Texas site (n = 13), there were three focus
groups; the girls’ mean age was 13.6 years (range, 12-15); 12 were African Americans and 1 was Latino. In California (n = 21), there were also three focus groups; the girls’ mean age was 12.3 years (range, 11 to 14); 16 were African Americans and 5 were Latinos. All girls in the focus groups were fully capable of participating in physical activity. Focus group findings were that adolescent African American and Latino girls perceive consistent activity barriers and facilitators across sites. Six consistent themes emerged across both sites. Three themes were related to barriers to physical activity and three themes were related to motivators and facilitators of physical activity. The barriers to physical activity included attitudes and experience related to physical education classes. They saw physical education as an inequitable and unpleasant experience. Additionally, activity, appearance, and self-image, as well as lack of opportunity and accessibility were considered barriers. Facilitators and motivators of physical activity included fun and activity preferences, social support, and body image and health effects.

Gordon-Larsen et al. (2004) conducted 51 semi-structured in-depth interviews with 11 female caregiver-daughter dyads, consisting of up to three interviews per respondent. Interviews focused on physical activity, neighborhood characteristics, and caregiver-daughter shared activities. Data analyzed over the course of one year identified six major categories related to physical activity and three important themes. The six categories were shared activity, barriers to activity, knowledge of health-promoting effects of activity, need for change in activity, facilitators to activity and control of behaviors related to activity by caregivers. The three important themes identified through the six thematic categories include: sedentary behaviors, barriers to physical activity, and potential intervention strategies.
Sedentary behavior findings indicate that television watching was high among the girls and that TV filled an important role as “baby-sitter”. Perceived lack of recreation-related neighborhood and household facilities and equipment was an issue. Caregivers reported that their neighborhoods were nonconductive to an active lifestyle; safety and cost being major factors. Caregivers and daughters identified sedentary activities (e.g., television watching and eating) when asked what activities they could do together. Girls and caregivers were encouraged to go on walks together on walking trails, in shopping malls, and other avenues where poor sidewalks and traffic issues were not barriers.

Lack of physical activity is ruining the quality of life and shortening the life spans of children at alarming rates. “Although rates of childhood obesity among the general population are alarmingly high, they are higher still in ethnic minority and low-income communities. The disparities pose a major challenge for policymakers and practitioners planning strategies for obesity prevention” (Kumanyika & Grier, 2006). The research clearly shows that cultural and socioeconomic issues need to be addressed in communities and schools regarding these disparities and their implications for the future.

Although research is limited, a repetitive theme emerges in regards to inhibitors of physical activity. Lack of transportation, dangerous neighborhoods, poorly maintained facilities and expensive programs are themes that have come out of several studies. Therefore, neighborhood interventions to increase safety and reduce disorder may increase physical activity, thereby reducing the risk of overweight and related issues (Molnar, Gortmaker, Bull, & Buka, 2004).

Results of Felton, Dowda, Ward, Dishman, & Trost et al. (2002) indicate that African American girls were less active than White girls, for both vigorous and moderate-to-vigorous
physical activity in both urban and rural environments. In addition, African American girls watched more television than White girls and had higher BMIs and greater prevalence of overweight. Somewhat contradictorily, African American girls reported greater enjoyment of physical education, while White girls reported higher self-efficacy, subjective norms, and intentions to be physically active. However, both groups rated physical education as only “somewhat enjoyable”. Family environmental factors indicated that African American girls reported a higher frequency of family members participating in physical activity or sports with them, and of family members telling them that physical activity was good for them, than White girls did. The African American girls in both the rural and urban settings perceived their neighborhoods as unsafe for walking or jogging alone. Most of the differences found in the factors examined (physical, behavioral, psychosocial, and environmental) were attributed to race rather than to location of residence (Felton, Dowda, Ward, Dishman, & Trost et al., p. 255, 2002).

Physical Activity Opportunities in Urban Areas

Out-of-school. Out-of-school extracurricular activity participation is a formalized opportunity for youth to experience non-classroom based, prosocial programming (Brown & Evans, 2005) while outdoor physical activity and recreational facility use can reduce the risk of obesity in adolescents (Gomez et al., 2004). It has been found that environmental factors greatly influence the use of recreational facilities. There are several dimensions of the environment that impact facility use, including physical, social, organizational, and economic (Ries, Gittelison, Voorhees, Roche, Clifton, & Astone, 2008).

In terms of the physical environment, qualitative inquiry has found that most
recreational facilities in urban areas are designed for younger children (Ries et al., 2008) rather than adolescents and teens. Forty-eight African American adolescents (aged 14-18) were interviewed and observed to investigate environmental factors influencing the use of recreational facilities for physical activity. Ries et al. (2008) found that adolescents and teenagers are more interested in athletic facilities, swimming, fitness, clean bathrooms and functioning water fountains within walking distance of their homes. Distance to recreational facilities also significantly impacts use (Ries et al., 2008). Of the facilities that are available in urban areas, many are poorly maintained and considered unsafe (Molnar et al., 2004).

With regard to the social environment the literature has consistently supported that gender differences influence facility use. While boys tend to use outdoor facilities for competition and camaraderie; girls tend to feel uncomfortable using outdoor facilities. Many girls view recreational facilities in urban areas as places of discomfort where harassment, sexual assault, and even kidnapping occurs (Ries et al, 2008). Ideally, girls would like to go to places where they know people, feel safe, and have age-appropriate opportunities for physical activity (Ries et al., 2008). Teenage girls report being uncomfortable in outdoor facilities that are dominated by young men and appear to have little interest in competitive unstructured sports (Ries et al., 2008). Indoor facilities, such as the YMCA are popular with adolescent girls for the social opportunities. Overall, age-appropriate activities, hours of operation, safety and cost are major determinants of facility use (Ries et al., 2008).

**School-based.** Other than neighborhood recreational opportunities, schools are the other likely place for girls to experience physical activity in the form of physical education. The Trust for America’s Health (2010) has found that although every state has some form of physical education requirement for schools, these requirements are often limited, not
enforced or do not meet adequate quality standards. Unfortunately, with the testing demands of No Child Left Behind, time allotted for physical activity in many urban low performing schools has drastically decreased to make more time for math, reading, and science. As a result, children may be spending less time engaged in physical activity during school. According to the Youth Risk Behavior Surveillance (2005) daily participation in school physical education among adolescents dropped 14 percentage points over the last several years — from 42% in 1991 to 28% in 2003. In addition, less than one-third (28%) of high school students meet currently recommended levels of physical activity.

Richmond, Hayward, Gahagan, Field, and Heisler (2006) performed a cross-sectional analysis of 17,007 teens in the National Longitudinal Study of Adolescent Health. Using multivariate linear regression, they examined the association between adolescent self-reported physical activity and individual race/ethnicity stratified by gender, controlling for a wide range of sociodemographic, attitudinal, behavioral, and health factors. They used multilevel analyses to determine if the relationship between race/ethnicity and physical activity varied by the school attended. Their goal was to determine if racial/ethnic disparities in adolescent boys’ and girls’ physical activity participation exist and persist once the school attended is considered. Even as rates of physical activity among urban adolescent girls of color continue to decrease, there is some indication that the socioeconomics of schools influence physical activity levels. Richmond et al. (2006) found that black, white, and Hispanic adolescent girls attending the same schools have very similar levels of physical activity, but black and Hispanic female students were much more likely to attend poorer schools that are attended primarily by minority youth with overall lower levels of physical
activity. These findings suggest that disparities in adolescent physical activity may be related to environmental or social factors in schools and/or communities.

**Perceptions of African American Adolescent Girls**

Rates of obesity among the general population are alarmingly high; they are higher still in ethnic minority communities. These disparities pose a major challenge for policymakers and practitioners planning strategies for obesity prevention (Kumanyika & Grier, 2006) and suggest disparities in adolescent physical activity may be related to environmental or social factors in schools and/or communities.

Because African American girls were thought to be racially inferior, they were excluded from Anglo-Saxon discourses of womanhood and related practices of physical activity (Azzarito & Solomon, 2005). Much of the research on girls’ physical activity continues to rely on theories of girls’ oppression that are universal narratives, exclusive of minority women (Azzarito & Solomon, 2005). Physical activity for women was originally promoted as a means for white upper middle class women to become ‘maternal guardians of virtue and domesticity’ (Bederman, 1995 as cited by Azzarito & Solomon, 2005). Issues of gender, race, and social class differences have been not an important consideration (Azzarito & Solomon, 2005), therefore future research is needed.

**Review Summary**

Sedentary lifestyle choices of girls and women of color are leading to life threatening health disparities between women of color and non-Hispanic white women. Rates of obesity are alarmingly high in ethnic minority communities (Kumanyiak & Grier, 2006), particularly among adolescent girls. Much of the obesity disparity in ethnic minority communities is because physical activity levels decline, particularly dramatically in girls,
as children become adolescents (Grier et al., 2006). Findings from the current research suggest disparities in adolescent physical activity may be related to environmental and socio-emotional factors.

Diet and exercise patterns are initiated during childhood and family support and encouragement are strongly and consistently associated with childhood physical activity. Data from National Health and Nutrition Examination Survey (2007-2008) identifies African American women of all ages as those with the highest prevalence of BMI at or above 30, which indicates obesity. African American women aged 20-40 years have the highest prevalence of BMI at or above 25 which indicates overweight compared to other women in that age bracket. African American adolescent girls participate in regular vigorous physical activity at much lower rates than white adolescent females (Saxena et al., 2002).

The cycle of overweight and obesity among girls and women of color is becoming a major concern, however the perceptions of barriers that inhibit these groups from participation in physical activity is largely unexplored. Much of the current research focuses on girls and women separately and does not address the relationship between mothers and daughters and the role that plays in perpetuating sedentary behaviors, as research indicates that adult role models largely influence the physical activity of youth. Research providing an understanding of the perceptions of adolescent girls and their primary female caregivers, in their own voices, will expand current knowledge.
CHAPTER III
METHODOLOGY

Introduction

This research was based, in part, on a pilot study conducted by the researcher asking the question: What are the perceptions of availability and accessibility of physical activity opportunities out of the school and within the community environments? In that study, two African American and two biracial adolescent girls, ages 13-17 years participated in individual interviews. Interviews were followed by a single focus group to identify perceptions of barriers to physical activity participation. Results from that study concluded that, racial stereotypes and financial obligations determined physical activity and sport participation.

This study examined the perceptions of the barriers African American women and girls face that inhibit them from participation in leisure time physical activity. Little is known about women and girls of color and the underlying causes of their sedentary behaviors. Therefore, this qualitative study examined the physical, emotional, and social factors that influence African American adolescent girls and their female caregivers in their physical activity choices. Parents influence the nature and amount of physical activity in which children engage. Parents have direct influence by providing an environment that nurtures physical activity in the child, and have direct influence through modeling physical activities (Hodges, 2003). In communities of color, female caregivers have high rates of sedentary behaviors as do adolescent girls. Hearing the voices of both women and girls led to a broader understanding of their perceptions of barriers that inhibit their participation in physical activity.
The research methodology incorporated a grounded theory approach seeking ways to “move beyond description and to generate a theory” (Creswell, p. 63, 2007). Grounded theory holds that theories should be “grounded” in data from the field, especially in the actions, interactions, and social processes of people (Creswell, p. 63, 2007). For the purposes of this study, grounded theory is defined as theory generated from data systematically obtained and analyzed through the constant comparative method (Conrad, 1978 as cited by Creswell, 2007). Using this approach, the study included extensive narrative describing the physical activity of women and girls of color and perceptions of barriers to physical activity. The research conclusions “construct interpretive narratives from their data and try to capture the complexity of the phenomenon under study,” as is requisite of effective qualitative researchers (Leedy & Ormrod, p. 103, 2003).

Research Design

Qualitative Methodology.

“Qualitative research begins with assumptions, a worldview, the possible use of a theoretical lens, and the study of research problems inquiring into the meaning individuals or groups ascribe to a social or human problem” (Creswell, p. 37, 2007). The individual experience is placed in strict focus in order to ascertain a specific theory of behavior or pattern of behavior (Creswell, 1998). According to Strauss and Corbin (1998), “qualitative research does not entail making statements about relationships between a dependent variable and an independent variable, as is common in quantitative studies, because its purpose is not to test hypotheses” (p. 41). Rather, qualitative research sets a research target on a particular phenomenon deemed worthy of study and identifies exactly what the researcher wants to know about this phenomenon (Strauss & Corbin, 1998). The researcher collects data, usually
narratives, and compares the data sets in order to come up with themes that emerged from some or all of the subjects. Hence, qualitative researchers are able to cull the subjective meaning of the subject’s particular life experience under his or her own terms of subjective understanding (Creswell, 1998).

This study utilized the constructivist approach to grounded theory popularized by Charmaz (2006). “Whereas in typical grounded theory practice, you follow the leads in your data, as you see them – constructivist grounded theory takes you one step further. With it, you try to make everyone’s vantage points and their implications explicit – yours as well as those of your various participants” (Charmaz, p. 183, 2006).

**Study Procedures**

**Data Collection**

There is limited research that focuses on studying the perceptions of barriers that inhibit urban girls of color from participation in physical activity. Studying these barriers is beneficial in that a lack of physical activity has been shown to contribute to the health disparities observed between white females and non-white females (Saxena et al, 2002).

Marshall and Rossman (2006) emphasize how qualitative questions and problems usually come from real-world observation -- the researcher seeks to explore the phenomena chosen for study and according to Creswell (1994), a researcher should ask one or two grand tour questions followed by no more than five to seven sub-questions. Therefore, this grounded theory study focused around the broad question: 1.) What are the perceptions of barriers that inhibit physical activity opportunities within the school and community environments?

Upon receiving approval from the UNLV Office for the Protection of Research Subjects, 12 African American adolescent girls, ages 12-17 years, and their mother/caregivers, from
the Las Vegas Chapter of Jack and Jill of America, were contacted via letter and invited to participate in the study. Jack and Jill of America is an African-American organization of mothers who nurture future leaders by strengthening children ages 2-19 through chapter programming, community service, legislative advocacy and philanthropic giving. The investigator is a member of the organization.

Six of the initial 12 girls and their mothers were purposefully selected from this convenience sample to participate in the study. Follow-up information was provided to the girls and mothers during information sessions, at the home of one of the participants.

At the time the six girls and their mothers were invited to participate in the study, a consent form was hand delivered to them. The researcher followed-up with phone calls to the mother/caregivers who did not attend the information session to further explain the study and to schedule the consent appointment and first interview. Consent forms were be collected at the individual interviews.

Following completion of one individual interview per participant, a 45-minute focus group was conducted with the participants from the daughter group and a one-hour focus group was conducted with the mother/caregiver group to elicit further details, explanations and/or discussion regarding their perceptions of barriers to physical activity participation. Six of the twelve interviewees became focus group participants. Six were excluded from the group to to scheduling conflicts. Interviews and the focus group with the girls occured after school or on a weekend day based on the participants scheduling availablity. Interviews with the mother/caregivers were be scheduled with the individual women during a time that was convenient for them. All of the individual interviews took place in the homes of the mother-
daughter dyads. The focus group meetings took place in the clubhouse of a centrally located condominium.

The investigator audio-recorded all interviews and focus groups and then transcribed the interviews. Interview transcripts were reviewed by interviewees for accuracy. The researcher made every attempt to build trust by being accessible to participants, dressing appropriately for the environment, and respecting the norms of the environment.

Adolsecent participants were be observed for 30 minutes during one social activity preceeding the interview process. The social activity was a walk-a-thon fundraiser that was attended by all of the girls in the organization. The purpose of observation is for the interviewer to identify the natural contexts for interviewing and the girls’ own speech routines (Eder & Fingerson, 2005). Notes were taken immediately following the observations. Memoing occured simulteneously with data collecting, note-taking, and coding to uncover any hidden themes (Glaser, 1992).

Data collection followed the informed consent procedures established by the University of Nevada Las Vegas Institutional Review Board.

**Reliability and Validity**

“Reliability and validity are conceptualized as trustworthiness, rigor and quality in qualitative paradigm” (Golafshani, p. 604, 2003). The study incorporated a triangulated method of observation, interviews, focus groups, and coding of data. A group of participants for the study were adolescent girls of color and their female caregivers who reside in affluent areas of Las Vegas. The recorded interviews tracked the participants’ reactions according to a detailed schematic of criteria. All interviews and focus group sessions were audio recorded and transcribed by the researcher.
Semistructured in-depth interviewing. Qualitative interviews allow the researcher to understand experiences and reconstruct events in which they did not participate (Rubin & Rubin, 2005). “The purpose of in-depth interviewing is not to get answers to questions, not to test hypothesis, and not to “evaluate” as the term is normally used. At the root of in-depth interviewing is an interest in understanding the lived experience of other people and the meaning they make of that experience” (Seidman, p. 9, 2005). Responsive interviewing techniques were utilized in this study to obtain interviewee’s interpretations of their experiences and their understanding of the world in which they live (Rubin & Rubin, 2005). Initially, open-ended questions were asked of respondents. These are particularly helpful when interviewing adolescents. If the questions are open-ended, the participants will have more opportunity to discuss topics and modes of discourse that are familiar to them (Eder & Fingerson, 2005). Semi-structured interview topics included (1) physical activity behaviors (likes and dislikes); and (2) socio-emotional components. Particular focus was placed on physical activity, neighborhood characteristics, and caregiver-daughter shared activities. Individual semi-structured interviews for the adolescent participants lasted between 20 - 45 minutes; caregiver interviews lasted between 30 minutes to one hour.

The following interview questions served as the interview guide:

1. What is your general impression about exercise?
2. What do you believe are the benefits of exercising on the regular basis?
3. Has anyone (e.g. your family or friends) influenced your beliefs about exercise? If so, who and in what ways?
4. Have you participated in an exercise program in the past? What did you enjoy about it? What did you dislike?
5. What kinds of physical activity do you like to participate in? How important is it for you?

6. Do you prefer to exercise alone or in a group? How important is this for you?

7. What do you think are the major barriers or problems that would keep women like yourself from exercising on a regular basis?

8. How important to you are options to exercise (e.g., different types of activities, classes tailored to individual needs/abilities, choice to exercise by yourself or with others)?

9. How important is the location where you exercise (e.g., in a gym, indoors/outdoors)?

The primary purpose of this study was to present a grounded theory that is based upon research guided by the major research question: 1.) What are the perceptions of barriers that inhibit African American women and girls from participation in physical activity? Theory was developed from the data gathered during the research process.

**Focus Groups.** Individual interviews were followed up with one focus group for the daughters and one for the caregivers. Following individual interviews with focus groups allowed the researcher to explore issues that occurred during the analysis of the interviews (Morgan, 1997). For the purposes of this study, the hallmark of focus groups was their explicit use of group interaction to produce data and insights that would be less accessible without the interaction found in a group (Morgan, 1997). Data collected from the focus groups was added to that gathered during the individual interviews. The goal of this multimethod approach (semistructured interviews and focus groups) was to use each
method to contribute something unique to the researcher’s understanding of the emerging theory and to serve as a triangulation of data.

The researcher opened the focus group sessions with an ice-breaker question to help set the mood for the group as a whole (Morgan, 1997). The focus groups were moderated by the researcher. Focus group meeting times and location were determined by the availability of the participants. The focus group began with a general question that emphasized the participants’ perspectives (Morgan, 1997) and also addressed the question: What are the perceptions of barriers that inhibit African American women and girls from participating in regular physical activity? This focus group also address the following research sub-question: Are there related socio-emotional factors that may contribute to sedentary behaviors? Themes that emerge from the individual semi-structured interviews were also addressed during the focus group for clarification and to make further connections between ideas.

Coding. Coding means that the researcher attaches labels to segments of data that depict what each segment is about (Charmaz, 2006). Coding distills data, sorts them, and provides a handle for making comparisons with other segments of data. In focus groups, the group, not the individual, must be the fundamental unit of analysis (Morgan, 1997). Therefore, individual interviews were coded separately and compared with the codes that arise from the focus groups. All recorded and transcribed interviews were entered as text and coded using ATLAS ti. Coded text was extracted from all interviews and comparisons were made across data.

Strauss and Corbin’s (1998) six step system of coding was used to provide structure to the process. Step one required gathering information through interviews and focus groups, next organizing occurred through the writing of transcripts. Fragmenting or open coding
separated information into general categories and was followed by axial coding that related properties and categories to each other. Selective coding is the process of choosing one category to be the core category, and relating all other categories to that category. From this process a theory was generated.

Grounded theorists emphasize what is happening in the scene when they code data (Charmaz, 2006). By making and coding numerous comparisons, an analytic grasp of the data took form. Analytic categories and the relationships drawn between them provide a conceptual handle on the studied experience. Thus, levels of abstraction are built directly from the data and, subsequently, gather additional data to check and refine our emerging analytic categories. The work culminates in a ‘grounded theory’, or an abstract theoretical understanding of the studied experience (Charmaz, 2006).

**Study Limitations**

One possible limitation of the present study is the degree to which participants were complete and forthright in their comments during the in-depth interviews. In anticipation of this issue, the researcher attempted to provide an interview setting that was safe, comfortable, and nonjudgmental. When interviewing adolescents and those who traditionally lack voice, it is important that the researcher create a natural context for the interview (Eder & Fingerson, 2006). For that reason, interviews were conducted at a time and in a location that was comfortable for the participants. It is also essential, when interviewing adolescents, that the researcher begin by examining the power dynamics between adults and youth (Eder & Fingerson, 2006). Reciprocity was used as a response to power dynamics. Hopefully, adolescent respondents felt empowered and gained a greater understanding of their own life
experiences (Eder & Fingerson, 2006) and how their current behaviors could impact their future.

Additionally, a grounded theory study challenges researchers as the investigators must set aside, as much as possible, theoretical ideas or notions so that the analytic, substantive theory can emerge (Creswell, 2007). The time consuming and subjective nature of the coding can cause the analysis to sometimes become lost within the minutia of data.

Finally, Glaser & Strauss (1967) insisted that preconceived ideas should not be forced on the data by looking for evidence to support established ideas. The use of a recorded and transcripted interview process incorporated with focus groups assisted with eliminating preconceived ideas and bias.
CHAPTER IV
DATA COLLECTION AND ANALYSIS

In this chapter findings from the project are shared. The purpose of the current study was to develop a theory that explains the perceptions of barriers that inhibit African American women from participating in regular physical activity. A constructivist grounded theory methodology (Charmaz, 2006) was used in this effort to analyze interview and focus group data from six African American mothers and their adolescent daughters. Theory was constructed from data from the “lived experience” of the research participants. The study explored the reasons why African American women and girls lead sedentary lifestyles at far greater rates than all other ethnic demographics. Study results are presented as living narratives of participants’ experiences.

Research Questions

Although the interviews were designed to follow a “river and channel” design (Rubin & Rubin, 2005), allowing the conversation to flow authentically, the following nine research questions were the main questions that guided the interviews for each participant:

1. What is your general impression about exercise?
2. What do you believe are the benefits of exercising on the regular basis?
3. Has anyone (e.g. your family or friends) influenced your beliefs about exercise? If so, who and in what ways?
4. Have you participated in an exercise program in the past? What did you enjoy about it? What did you dislike?
5. What kinds of physical activity do you like to participate in? How important is it for you?

6. Do you prefer to exercise alone or in a group? How important is this for you?

7. What do you think are the major barriers or problems that would keep women like yourself from exercising on a regular basis?

8. How important to you are options to exercise (e.g., different types of activities, classes tailored to individual needs/abilities, choice to exercise by yourself or with others)?

9. How important is the location where you exercise (e.g., in a gym, indoors/outdoors)?

Each participant was first interviewed individually in their home. Individual interviews lasted between 20-45 minutes. Individual interviews were transcribed by the researcher and reviewed to provide a guide for focus groups. After interviews were reviewed by the researcher and focus group questions created, two focus groups were held – one for mothers and one for daughters. Each focus group consisted of three participants. Focus groups were held on a Saturday morning at the clubhouse of a condominium that is located in a central location for all participants. The focus group with the adult participants lasted 1 hour and 10 minutes. The adolescent girl focus group lasted 42 minutes. Focus groups were audio recorded and transcribed by the researcher. Interview transcripts were uploaded into ATLAS.ti for analysis. Line by line analysis was performed to identify reoccurring codes in the interviews. Analysis was based on
immersion in the data and repeated sorting, coding, and constant comparisons that signify the grounded theory approach.

Analysis began with open coding, which is the examination of the individual words, phrases and sentences from the transcribed interviews and focus groups. The participants’ voice guided the development of codes and categories. These codes and categories were compared and contrasted, leading to more complex and comprehensive categories. The researcher also wrote/sketched informal memos consisting of musings and speculations about the data and emerging theories, as well as reactions to participants’ narratives.

Open coding was followed by axial coding, which combined data in new ways to form more inclusive categories. Finally, categories were integrated and relationships were validated through the selective coding process. As Strauss (1987) recommends, codes and categories were (a) category’s centrality in relation to other categories, (b) frequency of a category’s occurrence to other data, (c) its inclusiveness and the ease with which it related to other categories, (d) clarity of its implications for a more general theory, (e) its movement toward theoretical power as details of the category were worked out, and (f) its allowance for maximum variation in terms of dimensions, properties, conditions, consequences, and strategies (as cited in Creswell, 2007, p. 290).

As this research is intended to give voice to the experiences of a group of African American women and their adolescent daughters, the participants were invited to be an ongoing part of the analysis process. Three of the adult participants chose to provide feedback to the researcher throughout the coding process. This feedback was ongoing informal discussion of the development of codes and categories.
A total of four themes and 10 sub-themes emerged from the researcher’s data collection and analysis. The themes were organized according to whether or not they related to the mothers or daughters. The six adult participants themes include the influence of culture and low physical activity intelligence. The sub-categories related to the influence of culture included hair and body image as it relates to race, class, and gender. The sub-themes relating to low physical activity intelligence include “mommy guilt”, the perception of time, and weather. These themes all lead to the idea that the absence of a history of physical activity yields the sedentary behaviors they currently demonstrate.

**Creditability, Dependability, and Confirmability**

While the traditional quantitative concepts of reliability and validity cannot be applied to this study, Lincoln and Guba’s (1985) concept of creditability, the qualitative parallel to internal validity, is a measure of how likely it is that the study will produce trustworthy findings. Peer debriefing, raw data verification, and member checking were used to ensure credibility of the findings. Peer debriefing was done by presenting sections of the analysis to a member of the dissertation committee throughout the analytical process. Bi-weekly meetings were held for the researcher to further explain the process of arriving at the findings as well as the meaning of the findings and discuss those findings with the committee member. Feedback was incorporated into the analysis where appropriate.

Raw data verification refers to the process of going back and comparing the theory against the raw data (Strauss & Corbin, 1998). Emerging themes were compared with the original interview transcripts to verify they reflected the data. The theory was then confirmed according to these comparisons.
Efforts to maximize dependability were to document each stage of data collection and analysis through field notes and memos in order to create an ‘audit trail’ of the research process.

Confirmability requires that the conclusions of a study are based on the participants’ experiences and the data they provide rather than the researcher and any biases she brings to the study. One method of ensuring confirmability was through the creation of the abovementioned ‘audit trail’ used for dependability. Another method used in this study, was the use of self-reflection notes along with the field notes and memos. The self-reflection documented personal feelings and insights that the researcher could review to make sure that the findings were based on the data and not her feelings and assumptions.

The purpose of this data collection and analysis process was to produce a credible framework, grounded in the data, describing the perceptions of barriers to physical activity experienced by African American women and adolescent girls.
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<th>Number of Times Mentioned</th>
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<tr>
<td>Expense</td>
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<td>15</td>
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<td>Perception of passage of time</td>
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<td>Too girly has</td>
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<td>Too hard</td>
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Key

Mothers

Daughters

Both

Table 1
Figure 1 Development of themes from initial codes for mothers

- Influence of Culture
  - Embarrassed
  - Body image
  - Hair

- Low Physical Activity IQ
  - Cost
  - Time/Mommy guilt/Perception
  - Weather
Figure 2 Development of themes from initial codes for daughters
Participant’s Profile

The following are profiles showing pertinent demographic information for each participant in the study. All study participants will be referred to by pseudonyms.

<table>
<thead>
<tr>
<th>MOTHERS</th>
<th>DAUGHTERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angela. A 50-year-old married female from Northern California. She attended undergrad at Stanford University and medical school at a University of California. Angela currently practices as a board certified OBGYN. She is the mother of one teenaged son and one teenage daughter.</td>
<td>Megan. 14-year-old 9th grade student at an exclusive private school. Played on volleyball and basketball teams, but considers soccer her main sport. At the time of the interview, not playing any sports.</td>
</tr>
<tr>
<td>Denise. A 47-year-old divorced single mother of one teenage daughter. Denise grew up in Southern California and currently works as a human resource manager. Denise participated in track and field in high school.</td>
<td>Molly. 17-year-old 12th grade student. Sprinter on her high school track team and a dancer. She has a black belt in karate, but no longer practices. Attends a public high school in an affluent area.</td>
</tr>
<tr>
<td>Laura. A 46-year-old married female from Southern California. She has an undergraduate degree from MIT and attended medical school in Southern California. Laura is a practicing board certified dermatologist. She is the mother of two teenage sons and a 12 year old daughter.</td>
<td>Melissa. 12-year-old 6th student at an exclusive private school. Currently taking dance classes. She also spent a season on a volleyball and basketball team during the fifth grade.</td>
</tr>
<tr>
<td>Shelly. The 42-year-old divorced, single mother of one adult son, one teenaged son, and a teenage daughter was raised in Southern California. A former real-estate agent, Shelly now works as a server at a high volume restaurant. Shelly was a member of her high school tennis team.</td>
<td>Sasha. 15-year-old 10th grade student attends a magnet high school. Currently a cheerleader, but has played basketball and softball in elementary school.</td>
</tr>
<tr>
<td>Tanya. A 48-year-old married mother of one teenage daughter. She was born and raised in Las Vegas and attended an HBCU. She was an all-state track and field athlete in high school, and also played volleyball, softball, and was a cheerleader. She is an executive at a national insurance company.</td>
<td>Rachel. 17-year-old 11th grade student attends a public high school in an affluent area. She has played in a soccer league for ten years.</td>
</tr>
<tr>
<td>Tasha. A 44-year-old married mother of two teenage daughters. Tasha was raised on the East Coast and attended an academically ranked HBCU. She works as a pharmacist.</td>
<td>Nicole. 13-year-old 7th grade student attends a math and science magnet school. Currently on a community volleyball team. Tried soccer, tennis, dance, gymnastics, and synchronized swimming while she was in elementary school.</td>
</tr>
</tbody>
</table>
Emergent Theory - Mothers

The emergent theory proposes that there are several interrelated experiences that contribute to the high numbers of sedentary African American women and girls. Analysis resulted in the lack of history of physical activity being the predominant reason behind the inactive lifestyles of African American women and girls. This lack of history is a result of several contributing factors including behavioral, environmental, and cultural.

Two themes, influence of culture and low physical activity intelligence emerged from the interviews with the mothers. Furthermore, the sub-themes of hair, body image, mommy guilt, the perception of time, and weather play major roles in this phenomenon.

Influence of African American Racial/Cultural Background on Body Image

The influence of being an African American woman on physical activity participation was not explicitly addressed during the interviews. The topic was allowed to emerge or not, and when it did the women were probed for additional information related to race and culture. Not all of the women brought up the influence of their background on their physical activity experience. However those that did, discussed a wide range of influences from distinct barriers such as hair type to complex social issues such as body image in relation to perceived standards of beauty.

Hair

The most common reference to racial background and its impact on exercise participation was to hair as a barrier. African American women have a long history of assimilating into main stream culture through hair, as well as emphasizing individuality through hair. Because they are unable to change many physical attributes about
themselves in order to conform to social norms, hair has become an outlet. However, to maintain many artificially straightened hairstyles requires time, financial commitment, and dry, low humidity weather. Many women feel uncomfortable embracing their natural hair texture and, in some cases, natural hair is frowned upon at their place of employment. For many, race and gender identities are formed through ideologies about hair that date back to slavery where “skin color could be tolerated by masters, but not hair; curl of hair used to justify subordination of Africans” (Banks, 2000, p. 15). Through the passage of time, black women have formed a collective consciousness about hair that is heavily influenced by the media. “The media sends the message about what is deemed feminine, and therefore women make attempts to conform to a norm they believe will yield personal and social rewards” (Banks, 2000, p. 42). This is best exemplified by Denise, who straightens her hair with a ceramic flat iron, when she states:

I don’t know cause it’s just; I mean my hair ain’t like nappy, it ain’t like so kinky that it looks like a Afro. It’s kind of curly like, but it’s not me. It’s not what I project.

The process of hair straightening utilized by Denise and many other African American women allows for their hair to appear long and straight, temporarily removing the curl. This process is time consuming and often expensive. However, it does not allow for the hair to maintain its look once it becomes wet. Humidity, rain and sweat are all foes of flat ironed or “pressed” hair.

…then if you’re black, your hair gets puffy when it gets sweaty so it’s just kind of out there and you’re like I don’t want to sweat my hair out, forget this. (Rachel)

And maybe like sometime you’ll just do your
hair and be all pretty and you need to go to
the gym and you don’t want to mess it up,
so yeah. (Shelly)

I know a lot of people, you know, they
religiously live on Saturday at the beauty
shop and they are not going to mess up
their hair. (Tanya)

I would probably say hair is a complaint
or issue. Um, so I would say hair or
maybe that’s it seems like what I hear
the most. (Shelly)

“Black women see the issue of manageability as the key factor of ‘good hair’ and
straight hair. Black women see manageability and therefore spending less time as
significant factors in wearing particular styles or having certain hair textures. They want
hair to be less of a burden or no burden at all” (Banks, 2000, p.42). As result, many
aspects of life are controlled by the “hair manageability schedule”.

Well I’d say I do different things, like
today. Maybe I’ll go for a walk tomorrow
but then like I’ll go to the gym maybe Tuesday
cause then like I’ll count like days when I know
I gotta get up in front of that group talking and
[my hair is] not all puffy. So, yeah it does.
Sometimes you feel like you’re a slave to
your hair that’s why some women have gone
totally natural, like nothing on their hair
and just let it go... (Denise)

And it’s my hair too. Black women have hair.
If I just got my hair pressed, I’m not gonna go
sweat it right out in a gym today. I gotta let it
look right cause come Monday I have a big
meeting. (Denise)

…she’s like it’s just too much work to go to
the gym; she’s another person with her hair.
(Tanya)
And I hate to keep tying things back to our hair, but Tiffani cut all her hair off and she’s one of my most fit friends. (Tanya)

Unfortunately, African American women’s obsession with hair maintenance is not something many women can take lightly. There is a corporate culture in the United States that frowns upon African American women with “kinky” or “nappy” hair wearing natural hair styles. African American women who straighten their hair are deemed more likable, agreeable, and dependable by Whites; even more employable (Talbert, 2011). Both Denise and Tanya are executives in Corporate America who feel pressure to assimilate into the culture of their companies by wearing their hair straight:

I’m thinking of the African American females in my company because there aren’t that many and I can’t think of one that has natural hair… I don’t have one lady with an Afro; we surely have no braids. (Tanya)

If I had a black woman working for me with braids, they’d be like whoa… It’s not written down, it’s just not done, you know? (Tanya)

…in Corporate America, they have connotations on that, they do. (Denise)

Um, I well part of it maybe um because of uh the hair thing. Maybe you have to look a certain way, so you know, you don’t want to mess that up… (Laura)

Body Image and Race, Class, and Gender

2000: The photo insert for Survivor, Destiny's Child third CD, shows the three African American women standing legs akimbo, holding hands, and dressed in animal skin bikinis. Selling over 15 million albums and singles worldwide, Survivor's success reflects a savvy marketing strategy that promoted the song "Independent Woman" as part of the soundtrack for the hit movie Charlie's Angels and foreshadowed the success of group member Beyoncé Knowles. Survivor's message of female power also fuels its
Counseling women to be resilient and financially independent, Destiny's Child proclaim, "I'm a survivor, I'm gonna make it." Survivor suggests sexual independence as well. In their highly popular song "Bootylicious," written by Beyoncé, they refer to their butts as "jelly" and ask, "Can you handle it?" The term bootylicious proves to be so popular that, along with hottie and roadrage, it is added to the 2002 edition of Merriam-Webster's Collegiate Dictionary.

1925: Born in a poor community in East St. Louis, Missouri, African American entertainer Josephine Baker moves to Paris. She becomes a sensation in the American production of La Revue Nègre. Performing bare-breasted in a jungle setting and clad only in a short skirt of banana leaves, Ms. Baker's rump-shaking banana dance becomes an instant hit with Parisian audiences. When asked whether she will return to the United States, Ms. Baker replies, "they would make me sing mammy songs and I cannot feel mammy songs, so I cannot sing them." Instead, in 1937 Ms. Baker becomes a French citizen and garners lifelong accolades as the "Black Venus" of France. Upon her death in 1975, she receives a twenty-one-gun salute, the only such honor given by France to an American-born woman.

1816: After several years of being exhibited in Paris and London as the "Hottentot Venus," Sarah Bartmann, a Khoi woman from what is now South Africa, dies. In the London exhibit, she is displayed caged, rocking back and forth to emphasize her supposedly wild and dangerous nature. She wears a tight-fitting dress whose brown color matches her skin tones. When ordered to do so, she leaves her cage and parades before the audience who seems fascinated with what they see as her most intriguing feature—her buttocks. Some in the audience are not content to merely look. One eyewitness recounts with horror how Bartmann endures poking and prodding, as people try to ascertain for themselves whether her buttocks are real. In the context of popular London shows that display as forms of entertainment talking pigs, animal monsters and human oddities such as the Fattest Man on Earth, midgets, giants, and similar "freaks of nature," these reactions to Bartmann's exhibition are not unusual. Upon Sarah Bartmann's death, George Cuvier, one of the fathers of modern biology, claims her body in the interests of science. Her subsequent dissection becomes one of at least seven others completed on the bodies of women of color from 1814 to 1870. Their goal—to advance the field of classical comparative anatomy (Collins, 2007, p. 25).

"Contemporary sexual politics in the United States present African American women and men with a complicated problem. From the display of Sarah Bartmann as a sexual "freak" of nature in the early nineteenth century to Josephine Baker dancing bare-breasted for Parisian society to the animal-skin bikinis worn by "bootylicious" Destiny's Child, women of African descent have been associated with an animalistic, ‘wild’
sexuality” (Collins, (2007, pp. 25-27). This image has been further characterized by the stereotype of the black woman as either the voluptuous over-sexualized “other” or the masculine and/or sexualized women who are not considered real.

Um, for African American women, I mean Typically the stereotype at least is you have a big butt, you have big thighs, you know that sort of thing, so you don’t really have to exercise to maintain that. (Laura)

…like whites would say, “oh sisters always have the butt or the booty” or, you know, all the different, you got junk in your trunk, you know, stuff like that… (Denise)

He said, “I like my woman thick you know we need to put some meat on your bones” and stuff like that. And she literally went from being like a size 2/4 to like a 10/12 like… (Shelly)

Since oppression is institutionalized in our society, targeted group members (e.g., Black women) often believe the messages and internalize the oppression, act them out, and thus perpetuate the stereotype, which then reinforces the prejudice and keeps the cycle of oppression going (Ross, 2011). This is true of the mothers in this study to an extent. They are faced with the dichotomy of being middle-class women who reject the image of black women as over-sexualized, but feel unable to physically conform to the normative standard of beauty.

I guess stereotypically, they say, you know, like we have bigger everything - bigger hips, bigger nose… (Shelly)

…cause when I do go to the gym, that’s my biggest concern, I don’t need my butt any bigger and I don’t need that - I want to lose my thighs I want to lose my hips, I could lose everything but that, so yeah it’s like you’re afraid to go to the gym and work those areas
out for fear that they get bigger again. (Tasha)

I was looking at all the other African American women and their outfits they had on. Some of its very revealing and stuff, and um, I said to my husband, I said, why is it why is it cause you know the woman looks great till she gets to the butt and the thighs and it’s so big and why is it? (Tasha)

…we also have extremes I mean sometimes we look in the magazine you know they create this standard of beauty you know that the magazine you know deems beautiful… I’m never going to be a size two you know, I’m never gonna be a four… I’m never going to be uh the way I was when I was 23. (Shelly)

Although African American women can recite the health benefits of physical activity/exercise, the women in this study appear to subconsciously relate activity directly to body image. Because Black women generally do not fit the societal standard of beauty, there is less motivation to exercise as they feel they will never be fashionably thin.

In addition to feeling unable to live up to conventional standards of beauty causing a lack of motivation, African American women are uncomfortable about their appearance around others.

Like we’re going to Cabo in July and I would like like to not just feel so much like a whale, you know? … I’m not comfortable [with my body image]. (Denise)

I did, you know, kind of a little bit of cardio but a lot of weight lifting stuff and I got really like bulky; bulkier than I wanted. I had more muscle weight like in my thighs which wasn’t bad, but not what I wanted. (Laura)

I feel like I don’t want to be bulky you know and if
you’re lifting heavy weights and doing like serious strength training as if you’re body building you know I don’t find that attractive. (Shelly)

To a lesser extent, embarrassment also plays a role in sedentary behaviors. Without a history of physical activity and/or exercise to draw from, African American women do not necessarily understand what it means to be active and how to go about the process of becoming active. Although there is a general idea of things that can be done to promote fit and healthy lifestyles, the women are uncomfortable.

I have like some maybe a slight anxiety about classes you know just the people you know the people in the room and if you’re uncoordinated if you’re not as flexible you know. (Shelly)

I tried a step aerobics class only to find out it wasn’t a beginner and I was like I’ll never come back in here anymore. (Tasha)

Every once in a while I might take a class, but the classes are very hard. (Tasha)

**Low Physical Activity Intelligence**

Today’s woman spends more time multi-tasking than any other generation in history. Thanks to modern conveniences such as smartphones, careers have become all-consuming and any free time is spent with family. With little history of physical activity integration to draw from, the subjects in this study are uncertain how to incorporate physical activity/exercise into their daily lives. For most of them, any the idea of exercising is overwhelming because they do not know what they are doing and they often believe it takes too much time.

I do um, treadmill sometimes I’ll stay on 60 minutes, and the elliptical, I’ll time it for 30 minutes. (Denise)
I don’t understand how they work and I’m afraid that I might hurt something on my body if I don’t know how to use it right. (Tasha)

Not right now. Not for me. I need some help; more so that instead of just doing cardio, I gotta do the weights. So that’s what I want. I want someone to come help me. (Denise)

Like my mom when she goes to the gym, she usually does the treadmill and like that’s usually all she does and like she does more cardio and I know cardio is better for you but like she basically does it cause she doesn’t know how to use the machines. (Nicole)

Regardless of demographics, time is often cited as the reason why a person is not active. In this study, time is a factor that has been divided into two sub-categories – lack of time available for activity due to “mommy guilt” or family obligations and the perception of how much time has passed since time was spent being active and how much time actually went into being active.

**Mommy Guilt**

*Mommy Guilt Definition: When mom's feel bad about doing anything for themselves.*

For many women, especially working mothers, there is a general belief that the happiness of others should be placed before their own needs. According to a University of Maryland study, today's mothers spend more hours focused on their children than their own mothers did 40 years ago, often imagined as the golden era of June Cleaver, television's ever-cheerful, cookie-baking mom (Washington Post, 2007). Not only do women spend more hours a day accommodating the needs of work and family, many women of color are raised to place the needs of extended family and friends above their
own. As a result, physical activity becomes a dispensable luxury in the lives of many women; including five of the six women who participated in this study.

I went last weekend. I didn’t go any this week cause I was working and I had to help, like I mentioned things that I was gonna do, I didn’t do, for me cause I was doing for others. Um, I was trying to get there at least twice a week, but I haven’t. (Denise)

I mean when my kids were really little I would feel guilty about being away because I’m always away so much anyway that I always felt that if I’m not at work I need to be with my kids. I just felt like you know I’m never home… (Angela)

…typically we feel more pressure as women to take care of a family come home cook you know if you’re working full time you go to work, you know you have a full time job at work you have a full time job at home as a mom… a lot more mental involvement I think for women um you know and it has to do with our being more nurturing overall and just the mom role. I think a lot of that plays into the time issue. You know our perception like you know we don’t necessarily make as much for ourselves because we’re devoting so much time to our careers and our children family husbands you know our homes so I think that’s kind of maybe where the time factor plays in. (Shelly)

I think I was working two jobs, going through a nasty divorce, and not having time for me. I know that sounds like an excuse, but I just didn’t have time. I worked then the days that I had Molly and then I would go from my other job to my main job… (Denise)

I always got to take someone somewhere. Uh or a girl scout meeting coming up or an activity for girls scouts or running Nicole to her volleyball games and practices. It’s just always something. Even if I say okay from this time to this time this is what you’re gonna do, something pops up right when I have to go the gym. And then you know since I’m not motivated,
it’s an easy way out. (Tasha)

Uh, when I became so busy in my profession, my exercise kind of went to the wayside. Got married, had a daughter… Whereas I used to, after work, play racquetball or do something like that, now it’s going home to be with my daughter, so… (Tanya)

**Perception of Time**

According to Foley and Matlin (2010) a time period is judged less accurately if people are performing other tasks simultaneously; time is of greater concern to different cultures and different groups within the same culture. Some of the women in this study exhibited a misperception of time elapse that influenced activity levels. They have memories of periods in their lives that were active, but did not realize how long ago those periods of activity were. For example, Denise spent a great deal of time talking about how active and fit she was when she was younger. She did not seem to be aware of the amount of time that has actually passed since those days of fitness.

You see I’ve never been heavy until like even when I moved here, cause Molly (now 18) was like 8 months old, you know these are just like old pictures, but I didn’t have to worry about weight.

My whole life I never really had to worry about my weight. Til I was like 34 (now 47), I’ve gained. People that knew me from way back, even as a young kid I never had to suffer from weight, I was always (points to picture), and now, in my later life, I’m heavy.

Angela’s perception of the passage of time was not as extreme as Denise’s, yet she was clearly surprised that a year of her life had passed so quickly.

Q: Do you have a gym membership now?

A: I *just* let it go. Yeah. About a year ago,
my partner and I broke up about a year ago and that’s kind of when my whole schedule went -- really changed bad, so then I let it go about a year ago. Or I didn’t renew it.

For the women who did not consider themselves sedentary, they too were surprised at how much time could pass being inactive. Until speaking about their lifestyles, they were convinced that they have been consistently active as adults.

Yeah, sometimes I have been off where I’m totally off and I’m eating sweets and you know just like I’ll be like oh I’ll just get back in the gym next week and then next week and next week… You know before I know it like a month has gone by… when I take my hiatus I’m usually like a month two months at the most.
(Shelly)

Tanya spent time discussing her time as a high school athlete, but admitted to changing her ways in college:

You know I’ve always been active, even as a child I was a uh, state hurdler in high school. I was on the softball team, I was on the volleyball team, I was a cheerleader. Um, I’ve always been very active; rode my bike all day long.

Q: Okay. For – when you were in college, were you an athlete? Did you do sports there, did you exercise or was just a time to…?

A: No, great question. I was a state hurdler champion in high school; I went to Prairie View, I was playing around on the practice field, I didn’t sign up cause by then when you’re in college you think you’re too cute to sweat and the coach saw me on the practice field jumping the hurdles. He said I want you on my team. But, I knew the dedication that it took and I was a freshman so there was no way. So…
Q: So you didn’t do any sports in college?
A: No.

Q: Did you exercise at all?
A: No.

Tanya also spoke as if she has spent her entire adult life full of activity, yet realized that she has been exercising off and on for about five years and has only become focused in the last year with the encouragement of her doctor.

I would say I picked it up, I picked it up again 5 years ago and then I’ve been more conscious one year ago because when I went to the doctor to see how much weight I lost he was impressed.

Weather

On average, Las Vegas has over 300 days if sunshine and only two to three months of extreme weather. Although all of the mothers in this study have at least one gym membership and many have home gyms or home equipment, weather was mentioned over twenty times as a barrier to physical activity/exercise.

See, the weather makes a difference for me… It’s so hot here. (Denise)

I mostly use the treadmill and you know it’s mainly a weather thing. I don’t like when it’s too cold or when it’s too hot. (Laura)

…the weather here in Vegas is not always conducive to outdoors… (Shelly)

The weather is so up and down you know in Vegas. I definitely don’t like it hot and I don’t like it when it’s cold you know kinda the Goldilocks syndrome. I like it just right. (Shelly)

The hotter it gets the more difficult it is. (Tanya)
I also think the climate has a lot to do with your motivation and being outdoors… And then you have to worry about the pollen. (Denise)

I don’t even have a bike anymore because like you get to ride it 1, 2 weeks out of the year, you know? Maybe 2 months… But we’re talking of 3 months of hot and then we have extreme cold for another 3 or 4 months. (Shelly)

Emergent Theory – Daughters

The daughters who participated in the study were encouraged to do so by their mothers. While the mothers struggle with being active and have passed down sedentary behaviors to their daughters, they are concerned about the lifestyle choices their daughters are making and hope to encourage them to begin the process of lifelong physical activity. The girls have been exposed to a variety of sports, some have worked with personal trainers, and all receive pressure from their mothers to be active. Yet, with a great deal of exposure to sports, exercise and physical activity, and encouragement from parents, five of the six of the girls in this study do not incorporate regular physical activity into their lives.

Like their mothers, body image and hair issues play major roles in the lack of physical activity. However, unlike their mothers, it is not lack of knowledge that limits physical activity, but peer pressure. Some of the same cultural influences that serve as barriers to physical activity for the mothers, provide barriers for the daughters over and above typical adolescent influences. As with their peers, the girls in the study deal with peer pressure in their daily lives.
Two themes, stereotypes and lifestyle influences, emerged from the interviews with the daughters. Additionally, the sub-themes of sexuality and racial stereotypes, and social, parental and school influences emerged as major influences in this phenomenon.

**Stereotypes**

**Sexual Stereotypes**

The girls emphasized hair and body type to identify traits they considered feminine. Like their mothers, the idea of “sweating out” or messing up their hair with exercise was often an inhibitor:

And maybe like sometime you’ll just do your hair and be all pretty and you need to go to the gym and you don’t want to mess it up, so yeah. (Sasha)

And then if you’re black, your hair gets puffy when it gets sweaty so it’s just kind of out there and you’re like I don’t want to sweat my hair out, forget this. (Rachel)

I know I went through this thing where when cause like I used to get my hair done professionally I guess and so like I didn’t want to do anything when I like got it done. (Sasha)

There is a relationship between what the girls consider feminine and body shape/size. Both thin and curvy body shapes are considered girly and feminine; when asked how women and girls *should* look, according to what they see and hear around them, they responded as follows:

A big butt (giggle), boobs, proportioned right… You know, hour glass, curvy. I think also fit at the same time. (Molly)

Brainwashed to think that if you’re tall,
hour glassed, nice boobs, and a big butt, 
then you’re beautiful. (Rachel)

I was actually talking to one of my guy
friends in my finance class I was like if I had
that butt that would look so weird on me.
He was like every girl would look good with
a big butt. I was like ugh, I just don’t see it
for myself. (Molly)

However too much “curviness” leads to self-conscious behaviors.

…if you’re like overweight you don’t want
to be seen wearing shorts… (Sasha)

All of these body image ideals are directly linked to the sexuality stereotypes that are
inhibiting the girls from playing sports and being more active. Not only are the girls
influenced by the concept that if they play certain sports – particularly basketball and
track and field -- or appear physically fit and strong that others will believe them to be
lesbian (which they associate with negatively), but it will also decrease their femininity.

…and then when I became about 7th grade, I
started to like, you know, be more girly and
I didn’t want to play [basketball] anymore.
(Sasha)

I think that part of the reason that I actually
quit playing basketball was because of hearing
the rumors and stuff… (Sasha)

At my school it’s very uhh, I’m not trying to
be stereotypical, but a lot of the girls on the
basketball team are gay, um but and the cheer
team, I’m not sure about that, I don’t know.
But I know that with the basketball team a lot
of people will question if they’re a lesbian. My
friend Diana, who I was telling you about earlier,
she always, people might always think that she is,
she’s like, no I’m not leave me alone about that
stuff. (Molly)
A lot of the women ones they might be more muscular looking. Like I have a friend that I’m close to um people will say oh she has a body like Venus and Serena Williams and she does and she doesn’t like being called that because she thinks her body’s too muscular… she’s a full-time track runner and also basketball. (Molly)

For me, yeah. Uh, like track and field and lot of the girls are very skinny and lean. Like I know uh a lot of girls who are on the basketball team and they’re maybe – they’re still in shape, but they’re in that muscular stage. Not as the uh – the bodybuilder type. (Molly)

Um, well when I was younger I guess I sort of did. I guess my whole family; my dad, my brother, both of my brothers like they grew up playing basketball and so I just started playing, playing basketball and it was just something that we would do and my dad signed me up and I played for about 7 years so I guess um that did -- and then when I became about 7th grade, I started to like, you know, be more girly and I didn’t want to play anymore. I started to like do sports that I thought were fun. Cause I sort of lost interest for it and I don’t know; it was just… (Sasha)

It is interesting to note that Sasha’s mother also stated concern regarding her daughter’s interest in basketball:

I know at one point I was concerned about my Daughter playing basketball and I’m embarrassed to say but yeah I did see a lot of changes as girls were transitioning into high school and it concerned me. So I did kind of pull her out of basketball at one point. (Shelly)

The girls believe that it is a reality that the majority of female basketball players are lesbian. While they made it clear that they are accepting of all sexual differences, they did not personally want to be identified as lesbian.
I think it’s a reality at my school and also like the WNBA. (Molly)

Q: So do you think then that that prevents girls who want to play basketball from actually playing?

Molly, Rachel, Sasha: Yeah.

The ideal “type” for girls in these communities appears to be what the girls in this study call the “girly girl”. The girly girl is concerned with her appearance and does not want to mess it up in any way, she is femininity personified.

For some reason here they tend to be really girly and “oh my nails” type of people, so that seems to be it…. Like the ball would get thrown at her and she’d catch it a way like she wouldn’t hurt her nails. (Rachel)

A lot of people worry more about their looks and they don’t want to, probably, get all down and dirty and stuff. (Sasha)

For the girly girl, cheerleading, soccer, volleyball and tennis are acceptable sports.

There are girls who just don’t want to get on the floor, so cheerleading, you don’t really have to do too like grimy stuff. (Rachel)

Um, I guess some sports are like cheer and volleyball and tennis, like that. (Sasha)

Q: What types of sports are the most popular for the girls?

Soccer, volleyball, and cheerleader; somewhere in there. (Rachel)

**Racial Stereotypes**

The sexuality stereotype is just one part of the equation. Racial stereotypes interplay with the sexuality stereotype making it more difficult for African American girls to feel comfortable participating in sports and activity. Basketball and track and field are sports
that are traditionally dominated by African Americans. For these upper middle class girls in predominantly Caucasian areas of Las Vegas, that continues to be the norm. This puts the girls in the position of dealing with stereotypes relating to both sexuality and race.

I think whenever, I don’t know why, but in our soccer team it’s just like that and I think it might have something to do with in their mind it’s like oh, I’m African American either track and field or basketball. But in our school it’s like weird because one of my friends, she’s really fit she plays soccer, and she has broad shoulders like really broad shoulders and she plays soccer and she gets like, she looks good, but some people still think she plays like basketball and stuff because she’s broad shouldered and looks like it. Like if you look at her, you probably think she plays basketball even though she’s not too tall, but yeah I think that might be why. Cause you don’t really associate black people with soccer. (Rachel)

…there’s like um a lot of, not a lot of like separation, but there is like a lot more like people, there’s a lot of black girls like drawn to basketball rather than like playing soccer. The soccer team is pretty much is I think all white… (Sasha)

That’s how it is at my school too. (Molly)

Like I when I went to 6th grade and did volleyball, I wasn’t like against it but I was kinda against basketball. (Megan)

Um, I know one who is in track, another in soccer; wait no, she’s not African American, basketball mostly. (Rachel)

Well, um a lot of them played basketball like that was the thing a lot of the white one plays like cheer or volleyball or something or sorta like something like that. (Sasha)
Lifestyle Influences

For adolescent youth, girls in particular, there are many outside social and family influences that impact their decisions to be active.

Social Pressures

For many, busy social lives prevent time for participation in sports or other physical activities. In particular, potentially awkward relationships with boys can prevent activity. This conversation during the focus group shows how changing dynamics in male/female relationships can halt leisure time physical activity.

Rachel: Yeah, and I think, I also think when you’re little, you play with your guy friends when you’re young and it’s not even an issue –

Molly: It isn’t. You’re not pressured into doing anything it’s just—

Rachel: You’re just like, yeah, let’s go wrestle or –

Molly: And you want to be like badder than the boys, so you know show off a little bit.

Rachel: Umhun and you get older though and it gets all awkward and you’re like what happened to us riding our bikes everywhere?

Molly: It’s also probably hormones adding to that too.

Rachel: yeah, but it’s just not the same.

Molly: It isn’t.

The girls also feel that sometimes being in a relationship with a boy puts pressure on them to not succeed athletically.

… if that girl is doing better than him then they become those very, I don’t want to go out with
you, you’re doing better than me. (Rachel)

Social media and technology are also common inhibitors to physical activity:

Um, I would definitely say like Facebook, having a social life I would say keeps them. And maybe they’re not as headstrong as I am and willing to work that hard to… (Molly)

I think girls hated going to PE… I would see some girls like they don’t take it seriously at all. They sneak their cell phones into PE and be on their phones or, I don’t know. (Molly)

**Parental Pressures**

While the parents in the study all encourage their daughters to be active, the pressure they apply is often resented by the girls. Many of the adolescent participants felt overwhelmed by the pressure their parents placed on them to participate in sports. They rebelled by quitting the sport and often becoming sedentary.

Well, for me it was like I was always like I thought I wanted to play cause I was raised thinking I wanted to play, you know. When it really got down to it, after a while, I just, it just wasn’t something that I really wanted to do, but I was still doing it and then I finally told my parents that I didn’t really want to play anymore, so we stopped. (Sasha)

I feel the same way cause my dad keeps pressuring me to play softball and he wants me to play softball, but I just, I feel like I thought it was fun when we were just having fun, but after he started pressuring me to do it, my mind just kind of shut off to it. (Rachel)

Actually, um track and field, it’s mostly my mom who actually pressures me. Like I didn’t want to do it my senior year cause I was just tired of running and I didn’t enjoy it that much, but I’d just do it to get in shape. And she’s like no you need to do it, you know, it’s your last year. (Molly)
Two adolescent participants say that they enjoyed the sports and activities suggested by their parents:

Um, she says if you just try it you may like it. And if you don’t you don’t have to do it. But everything I’ve tried that she told me to try, I’ve liked it. (Melissa)

I actually didn’t want to do basketball cause I didn’t think I’d be good at it, but my dad kinda convinced me slash kinda forced me and then I liked it so… (Megan)

Because most of the girls in the study cannot drive, sport and physical activity is also limited by time constraints of the parents:

Cause it [karate] was really done. It was done with and I was tired of it also. And then my dad’s schedule from work, it was getting messed up with my schedule for karate so it was hard to get to practices. (Molly)

Um, well right now I haven’t been going because my mom and my dad have been doing things and they haven’t been able to take me. (Nicole)

I went to intramurals, but then we had to go out of town the day of tryouts I didn’t get to try out, but yeah. (Sasha)

School Pressures

Finally, it is worth mentioning that the girls mentioned being exhausted from long school days and large quantities of homework. With early school hours, long classes, and homework, they often choose naps over sports and physical activity.

On school nights I usually don’t have a lot of homework. After that whole day of rushing, making sure I have everything, you just want to pass out. (Rachel)

Yeah, when I get home I always take a nap
cause I’m just so exhausted and stressed. My classes are longer than normal classes. (Sasha)

Um, tired or sometimes I have too much homework. And if I were to go I would stay up late doing homework. (Nicole)

Yeah, we’re on a block schedule. So just sitting there having to be in the same class for almost two hours makes you so tired…I’m so tired when I come home I nap. (Sasha)

Summary

Culture and cultural stereotypes play a major role in the choices made by African American women. For the women in this study, hair style and the inability to compete with mainstream standards of beauty encouraged sedentary behaviors. Additionally, without a history of activity to draw from, the women demonstrated low physical activity intelligence. They were therefore unable to manage their time in a way that included physical activity, they often have an inaccurate perception of how often they are active or how long it has been since they were last active, and they easily use excuses such as imperfect weather to prevent exercise/physical activity.

Because the mothers have a concept of the benefits of being physically active, they all encourage their daughters to participate in sports and lead active lifestyles. So, although the girls are not necessarily active on the daily basis, they cannot claim a lack of history as the reason for their inactivity. The adolescent girls in this study experience peer pressure which inhibits them from participation in regular physical activity.

The two themes that emerged from the data collected on the African American adolescent girls include stereotypes and lifestyle influences. The stereotypes theme includes sexuality and racial sub-themes; lifestyle influences includes social pressures,
parental pressures, and school pressures as sub-themes. The girls’ sport choice and participation was greatly influenced by what their peers deemed acceptable. For the majority of the subjects, sports such as track and field and basketball were frowned upon. Although all but one has had experience playing basketball, they all stated a discomfort with the sport based on the perception of it being a “black” sport and the perception that the majority of players were lesbian. Soccer, volleyball, and cheerleading were considered “feminine” sports, but the majority of the girls in this study do not participate in those sports, with the exception of soccer. The “girly” sports were also considered “white” sports.

Pressures from friends, parents and school also inhibited physical activity. Time spent on social media and homework took away from time that could be spent with activity. Parents contributed to sedentary behaviors by either applying too much pressure to their daughters to be active, thus causing them to rebel, or by not being available to transport them to games and activities.

The findings detailed in this chapter describe the experiences of African American women and their adolescent daughters in their own voices. In the next chapter, the researcher summarizes the study, draws conclusions, discusses the implications of the study, and offers recommendations.
**MOTHERS**

**Influence of Culture**
- hair
- body image

**Low PA Intelligence**
- mommy guilt
- perception of time
- weather

Figure 3 Themes & sub-themes for mothers

**DAUGHTERS**

**Stereotypes**
- sexuality
- racial

**Lifestyle Influences**
- social
- parental
- school

Figure 4 Themes & sub-themes for daughters
CHAPTER V

DISCUSSION AND RECOMMENDATIONS

Using qualitative research methodology, this study was guided by the question: What perception of barriers inhibit African American women and adolescent girls from participation in regular physical activity? While the literature indicates that African American women and girls have the most sedentary behavior patterns in the US (Flegal, K. M. et al., 2010; Hawkins, 2007), much of the literature is focused on women in low-income areas. However, regardless of socio-economic status, African American women are the most sedentary (Flegal, K. M. et al., 2010) and there is little focus on the reasons for these behaviors. In previous research, Bild, et al. (1993) have reported that minority women participate in less physical activity/exercise than white women and that education is associated with participation in regular physical activity (as cited in Randsall & Wells, 1998). This research endeavors to look beyond the limits that socio-economic status places on the ability to be physically active – perceived lack of recreation-related neighborhood and household facilities and equipment, safety, and cost (Gordon-Larsen, 2004); to determine why African American women, who have the means and the education, continue to remain sedentary.

The researcher sought to explore the experiences of a group of upper middle-class urban African American women and their adolescent daughters to give voice to their histories and uncover their beliefs regarding physical activity. This particular group is unique in that all of the mothers were exposed to physical activity through sport in their youth, yet they were not able to translate those skills into their adult lives. The mothers also applied pressure to their daughters to be active through sport participation or gym membership with limited success. This study utilized grounded theory to provide a
structured setting in which participants could reflect on their experiences with physical activity. The researcher created a safe environment to listen to and document the women’s experiences and those of their daughters.

The findings in this study, as presented in the previous chapter, contribute to the area of theory development, specifically understanding the reasoning behind the sedentary behaviors of African American women and their adolescent daughters. This chapter will synthesize the information gathered in this study with the theory of planned behavior, black feminist thought, and Marcia’s Identity Status. This chapter will also include a discussion of study limitations and conclude with practical implications of the study findings and directions for future research.

**Mothers**

The results of this study indicate that the sedentary behaviors of African American women in Las Vegas result largely from having no history of regular physical activity to draw from. The mothers in the study have all participated in some form of physical activity over the years, but have been unable to incorporate regular ongoing physical activity into their lives. The adult participants who had mothers who walked daily, did not see their mothers incorporate walking into their lives until their mothers became sick. These findings are consistent with findings from Gordon-Larson’s 2004 research that found “lack of modeling of an active lifestyle” as a barrier to physical activity (p. 220). Despite the knowledge of positive health benefits, the women in the Gordon-Larson et al (2004) study did not have the motivation to be physically active. This group of educated and financially stable women in the current study can also intellectualize the importance of physical activity in their daily lives, but are not quite sure *how* to implement regular physical activity/exercise. In addition to a lack of physical activity role models, African
American women have a unique relationship with their bodies that influences the decisions they make. With the constant message that beauty consists of light skin, long straight hair, and stick thin figures, these women feel that they cannot compete with the existing standard and thus, the majority of them do not try. In addition, because many African American women and girls tend to have a broader acceptance of body size, they tend to be heavier before they consider themselves overweight (Allen, 1993).

Historically, in the American context, young women with milky White skin, long blond hair, and slim figures were deemed to be the most beautiful and therefore the most feminine women. Within this interpretive context, skin color, body type, hair texture, and facial features become important dimensions of femininity. This reliance on these standards of beauty automatically render the majority of African American women at best as less beautiful, and at worst, ugly. Moreover, these standards of female beauty have no meaning without the visible presence of Black women and others who fail to measure up. Under these feminine norms, African American women can never be as beautiful as White women because they never become White (Collins, p. 197, 2007).

The inability to conform to society’s standard of beauty gives African American women an excuse not to be physically active. It is not that the women do not recognize the benefits and feel a desire to be healthy; the deterrent seems to be that the overwhelming message from the media is that physical activity equals thin and beautiful. For many African American women, exercise does not necessarily yield the thin body types that are the current standard of beauty. Results from this study suggest that the women feel that they actually get bigger when they exercise. Tasha voices a concern
mentioned by all of the participants when she said, “when I do go to the gym, that’s my biggest concern, I don’t need my butt any bigger and I don’t need that – I want to lose my thighs, I want to lose my hips; I could lose everything but that, so yeah it’s like you’re afraid to go to the gym and work those areas out for fear that they get bigger again”.

Regardless of physical activity, full hips, thighs, and buttocks will continue to be part of their physique. Mixed messages regarding body size, health, and exercise, combined with an absence of physical activity history, appeared to affect the women’s views and subsequent behavior to be physically active.

**Daughters**

The adolescent girls participating in this study have all been exposed to a variety of sports and physical activity options. Two of the girls have gym equipment in their homes and three of the girls have gym memberships, yet, not unlike other adolescent girls, they are primarily sedentary. It is well documented that physical activity declines from 6th grade to 8th grade in all girls, but the trend for low physical activity among African American women begins in childhood and early adolescence (Whitt-Glover et al., 2009). Like their mothers, the girls in this study have not been provided with an example of what a consistently active lifestyle looks like. While the mothers do work to expose their daughters to physical activity opportunities and discuss with them the importance of being active, they do not provide a model for the behavior. More importantly, culturally specific peer pressure prevents them from having the desire to be active.

The adolescent girls in this study felt pressure from their peers that related to issues of gender and/or sexuality and race. They have concerns about being perceived as feminine that influenced their decisions to be active and determine the sports with which they are willing to associate. Las Vegas is considered the entertainment capital of the world. The
economy is built upon hospitality and gaming – industries that focus on perceptions of beauty. Billboards of scantily clad thin women with long flowing hair line the streets; women in bikinis and tiny skirts serve beverages at hotels and pools around the city. For the girls in this study, these are images they cannot compete with. Like their mothers, they feel if they play certain sports, specifically basketball or track and field, their bodies will develop into overly muscular physiques and their sexual preferences will be questioned. Additionally, those same sports – basketball and track and field, have been stereotyped in their communities as “black sports” because a disproportionate number of the athletes on those teams are African American. This places the girls in a distinctive position. Although they do not admit to being ashamed of being African American, they do not want to be lumped into any “black sports” and although there are sports that are considered feminine and girly, “like cheer and volleyball and tennis” (Sasha); those are “white sports” that they are not comfortable participating in. And, although the girls made it clear they do not discriminate against any sexual orientation, they did not want to identify as lesbian. Thus, it is easier for them to follow the path of their mothers and not participate in any physical activity.

The Theory of Planned Behavior (TPB)

Theory of Planned Behavior (Ajzen, 1985) is designed to predict and explain human behavior in specific contexts. The theory of planned behavior is an extension of the theory of reasoned action that assumes people have limited control over their behavior based on their experiences. The theory of planned behavior assumes the best predictor of a behavior is behavioral intention, which in turn is determined by attitude toward the behavior, subjective norm and perceived behavioral control (Glanz, Rimer & Viswanth,
Attitude toward a behavior refers to the degree to which a person has a favorable or unfavorable evaluation of the behavior. Subjective norm refers to the perceived social pressure to perform or not perform the behavior and perceived behavioral control refers to the perceived ease or difficulty of performing the behavior and reflects past experience (Ajzen, 1991).

A central factor in the theory of planned behavior is the individual’s intention to perform a given behavior. The belief is, to the extent that a person has the required opportunities and resources, and intends to perform the behavior; she should succeed in doing so. Therefore, intentions would be expected to influence performance. However, within the constructs of the theory of planned behavior, perceived behavioral control suggests that people’s behavior is strongly influenced by their confidence in their ability to perform the behavior. A person may believe that, in general, her outcomes are determined by her own behavior, yet at the same time she may also believe her chances of success are limited based on her experiences.

The behaviors of the African American women and their daughters in this study can best be explained by the theory of planned behavior. The mothers and daughters are able to intellectualize the need for regular physical activity and have the means to be active, but their perception of behavioral control over the outcome limits their ability to act. The participants’ limited physical activity history influences their attitude towards the behavior and their ability to act. Without a background of physical activity to draw from, the women are finding it difficult to develop those behaviors. Perceived behavioral control may not be particularly realistic when a person has relatively little information about the behavior (Ajzen, 1991).
Moreover, the mothers’ fear that they will develop larger hips and buttocks, further influences their attitude and behaviors toward physical activity. Similarly, the daughters fear that they will become too muscular or be racially or sexually stereotyped influences their attitudes and, in turn, their behaviors. For both the mothers and the daughters, the theory of planned behavior explains how attitudes toward physical activity and subjective norm influence their perceived behavioral control. This perception of lack of control regarding the desired outcomes of physical activity heavily influences their attitude to the behavior. Without a history of physical activity to draw from, regular physical activity becomes an obstacle rather than a necessity. Beliefs are formed about a behavior by associating the behavior with certain attributes. In the case of attitudes toward a behavior, each belief links the behavior to a certain outcome. Since the attributes that come to be linked to the behavior are already valued positively or negatively, people automatically and simultaneously acquire an attitude toward the behavior (Ajzen, 1991).

![Diagram of Theory of Planned Behavior](https://12manage.com/)

Figure 5
Mothers and Daughters

Data from the interviews indicate both mothers and daughters all exhibit an understanding of health benefits of physical activity/exercise, but for a variety of reasons maintain a predominantly sedentary lifestyle. Current reports indicate that 1/3 of Americans are obese; in fact, in 2010, no state had a prevalence of obesity less than 20% (NHANES, 2010), which indicates that the mothers and daughters in this study are following a common trend. However, as African American women, there are additional factors related to sexuality and race that may influence lifestyle choices. For the mothers and daughters, in addition to not experiencing active role models and being subject to peer pressure, the inability to compete with mainstream standards of beauty and questions of sexuality are also major factors.

Black Feminist Thought

The health implications of sedentary behaviors are a major focus of this study, however the researcher would be remiss to exclude the role that black feminist thought play in this phenomena. African American women and girls are distinctive in that they are at once the victim of both sexism and racism. This “double jeopardy” greatly influences all aspects of their lives, including their body perception and their perceived control over their bodies as well as their lives. “Because much of the literature assumes that sexuality means heterosexuality, it ignores how racism and heterosexism influence on another” (Collins, 2007, p. 87). Feminist theory is considered exclusive to women of color and critical race theory does not address issues of sexuality, therefore black feminist thought will be discussed in relation to its impact on African American women and girls and physical activity.

African American women have long been privy to some of the most intimate
secrets of white society. This ‘outsider within’ status has provided a special standpoint on self, family, and society for these women. Black feminist thought consists of ideas produced by Black women that clarify a stand-point of and for Black women. The definition assumes that Black women possess a unique standpoint on, or perspective of, their experiences and that there will be certain commonalities of perception shared by Black women as a group. While living life as Black women may produce certain commonalities of outlook, the diversity of class, region, age, and sexual orientation shaping individual Black women's lives has resulted in different expressions of these common themes. Thus, universal themes included in the Black women's standpoint may be experienced and expressed differently by distinct groups of Afro-American women (Collins, 1986, p. S16).

The mothers and daughters in this study experience the “outsider within” status daily. They live in predominantly white neighborhoods, work in predominantly white professions, and attend predominantly white schools, however they remain outsiders. Consequently, their body image in relation to race, class, and gender must be discussed in relationship to physical activity. African American women and girls’ physical appearance does not fit within the norm around them and this adds to their discomfort. The mothers and daughters are torn between wanting to be thinner, yet feeling they will never be thin enough and being afraid to exercise for fear of adding muscle and being perceived as masculine or homosexual. “On a basic biological level, the absence of muscles and facial hair become important indicators of womanhood that distinguish
women from men, boys, and girls. All women engage an ideology that deems middle-class, heterosexual, White femininity as normative… and Black women typically are relegated to the bottom of the gender hierarchy” (Collins, 2007, p. 193). The interviews revealed that the mothers and daughters strongly desire to remain within social norms. While true for many, this is particularly complicated for African American women and girls. Hair style choices and body image are strongly determined by majority culture. African American women spend a great deal of time and money on straightening their hair often preventing them from physical activity participation. Additionally, data revealed that the women were afraid of their legs, hips, and buttocks “bulking up” from exercise. This same fear is expressed by their daughter’s unwillingness to participate in certain sports. The perception is that not only will they not achieve the thin standard of beauty, but their musculature will cause others to question their sexuality. This places the women and girls in the position of being outsiders from the White majority and questions of sexuality place them as outsiders from the African American community.

It is interesting to note that the mothers and daughters feared being stereotyped as homosexual, but did not consider themselves homophobic. This is important to mention because the African American community has a history of incorporating dominant ideas about the dangers of homosexuality which comes out of the Black Church experience. For many upwardly mobile African Americans, it is important to protect the image of the Black community (Collins, 2007). Anything perceived as negative or outside of social norms is frowned upon.
Marcia’s Identity Status

Women of color have an unusual perspective as they find themselves torn between two worlds – that of their gender and that of their race/ethnicity. For African American women, this conflict of identity influences their perception of body image and their relationship with physical activity. Marcia’s identity status postulates that a person’s identity is a combination of life experience, gender and ethnicity. Identity is determined by choices and commitments made regarding certain personal and social traits. More importantly, one’s sense of identity is determined largely by the choices and commitments made regarding certain personal and social traits. As cited by Berzonsky (2005), Marcia construed identity as being “a self-structure – an internal, self-constructed, dynamic organization of drives, abilities, beliefs, and individual history” (Marcia, p. 159, 1980). Marcia’s theory of identity achievement argues that crisis and commitment form an individual’s identity; crisis being defined as a time when one’s values and choices are being reevaluated. The end outcome of crisis leads to a commitment made to a certain role or value.

Marcia (1966), working from Erikson’s ego-analytic writings, identified two dimensions in the process of identity formation: exploration and commitment. Exploration involves the active consideration of alternative possible identity elements in a quest for a more complete sense of self, whereas commitment represents a decision to adhere to a specific set of goals, values, and beliefs, whether self-initiated or adapted from others. Based on these two dimensions, Marcia (1966) derived four identity statuses, each of which represents a juxtaposition of levels of exploration and commitment. Someone who commits to a given career, ideology, or interpersonal style
following a period of relatively intense exploration is categorized as Identity Achieved. A person who is still negotiating the exploration process, and who therefore is uncommitted, is said to be in Moratorium. An individual who has committed to a set of particular identity elements without having explored alternatives is in the Foreclosure status. Often, Foreclosure commitments are based on identification with parental or other authority figures or are based on the preferences of such individuals. Finally, a person who is without identity commitments and who is not engaged in exploration is said to be Identity Diffused (Schwartz, Mullis, Waterman & Dunham, p. 505, 2000).

An individual who has both explored and committed to one’s identity is more likely to make race important to the construction of one’s overall social identity (Yip, Sellers & Seaton, 2006). Studies have also shown a significant positive correlation of gender self-acceptance with ethnic identity, that is, women with achieved female identity also frequently possess an achieved ethnic identity (Hoffman, 2006). The mothers in this study demonstrated identity achievement. Both race/ethnicity and gender greatly influence their decisions regarding physical activity. However, racial influences seem to dominant their choice to remain sedentary. Because African American women and girls have a broader acceptance regarding body size, there is a greater tendency for them to be heavier before they consider themselves overweight (Allen, 1993). Many African American women reject the white American “ideal” of thinness perpetuated in the media. This rejection of ideal thinness is often encouraged by African American men. Although the women in this study understand the health benefits of physical activity, they also associate activity with weight loss. For them, weight loss is not necessary for acceptance in their ethnic community.
The daughters who participated in the study appear to be influenced equally by their race and gender. Like their mothers, five of the six do not feel they will fit the ideal thin body type even with physical activity. Furthermore, for these particular girls, gender identity heavily influences their decisions regarding sport participation. Because of the influence of their mothers and peers, the adolescent girls in this study are experiencing identity foreclosure.

Figure 6

Implications for the Field

Women of color have the highest rate of physical inactivity and sedentary lifestyles (Keller et al., 2004). These sedentary behaviors lead to a cycle of overweight and obesity among women and girls of color that is becoming a major concern as lack of physical activity has been shown to contribute to the health disparities observed between white
females and non-white females (Saxena et al, 2002). This research study adds several noteworthy contributions to the research regarding the physical activity/exercise behaviors of African American women and adolescent girls. This research is particularly noteworthy in that all of the participants have had experience with physical activity through sport participation, yet they were unable to translate that experience into lifelong physical activity.

Current research does not address the role the relationship between mothers and daughters plays in perpetuating sedentary behaviors. It is recommended that exercise and nutrition intervention programs assist in the development of culturally relevant interventions to address physical inactivity and overweight in communities of color. Interventions would begin by providing mothers and daughters with gender-specific wording on questionnaires to determine what the women perceive as regular physical activity. When working with the African American community, exercise and physical fitness experts need to know that African American women usually have a different perception and belief system with regard to what constitutes a healthy exercise and physical fitness regimen. Once the exercise and physical fitness experts recognize and acknowledges this slightly different orientation, then the chances of developing a culturally specific exercise and physical fitness regimen dramatically increases. African American women and girls can become more active in their exercise and physical fitness regimens by first acknowledging to themselves what they perceive as a healthy exercise and physical fitness regimen (Bailey, 2006).

These gender-specific, multi-generational programs will allow girls to see positive examples of physically active women. This may increase the physical activity
knowledge for the mothers while providing the daughters with opportunities to form lifelong habits. The mothers and daughters will be able to motivate each other as models of healthy behaviors and also provide positive examples to others in their communities.

Additional programs might show women how to use the skills they learned as high school and college athletes to implement activity into their daily lives and show their daughters how to develop lifelong physical activity habits.

Interventions may address nutrition habits, including healthy alternatives to culturally specific foods, with recipes and cooking suggestions for common “soul food” dishes. Mothers and daughters may be provided with individualized exercise programs including prescriptions for frequency, duration, and intensity. For example, Young et al. (1998) determined walking as a well-accepted physical activity among African American women. Finally, recommendations for hairstyles that support active lifestyles and physical activity choices that prevent hair problems may be made.

Another recommendation would include community centers, churches, health clubs and universities creating a forum for African American women to express themselves, particularly their insecurities, so that they may receive support, and learn how to access recreational areas and other resources needed. Areas of concern may include body image; racial and sexual stereotypes; emotional relationships with food, specifically soul food; and exercise guidelines that support high maintenance hairstyles. A separate forum may be provided for the daughters to address age-appropriate issues which may or may not be similar to those of their mothers. Moreover, seminars or forums may be offered to the staff at the facilities (community centers, churches, etc.) to educate them on issues specific to the demographic, including but not limited to explaining socio-cultural
constraints of African American women and girls in terms of hair and body image and addressing the notion of sports that are considered White or Black and/or gay or straight.

Application of the theory of planned behavior to a particular area of interest provides a host of information that is extremely helpful in an attempt to understand the behavior. In the case of physical activity in the African American female community, it can be beneficial when planning for interventions and forums. Intention, perception of behavioral control, attitude toward behavior, and subjective norm each reveals a different aspect of the behavior, and each can serve as a point of attack in attempts to change sedentary behavior (Ajzen, 1991).

**Implications for Future Research**

The results of this study may not be representative of all African American women and their adolescent daughters. However, this exploration of a small group of upper middle-class professional African American women and girls provides insight into the phenomena and has yielded some pertinent findings. With the knowledge that African American women have little history of physical activity to draw from and African American girls fear being stereotyped by peers for the sports they play, future research might address the types of role models that would motivate African American women and girls and increase their knowledge levels. Future studies might also focus on whether family physical activity as social support increases physical activity levels within this demographic.

Because African American women, closely followed by Hispanic women, report the lowest levels of physical activity than any other subpopulation in the United States increasing chances of becoming overweight or obese and overweight adolescents have a 70% chance of becoming overweight or obese adults, which increases to 80% if one or
more parent is overweight or obese (HHS, 2010), future research studies might also include African American women and their daughters from a variety of socio-economic backgrounds and demographic regions emphasizing attitudes, perceived benefits and barriers, knowledge, self-motivation, and enjoyment. Additional themes may include the priority placed on the needs of the family at the expense of one's own needs, the positive association between a healthy diet and being physically active, and equating being busy with being active (Wilcox, Henderson, Richter, Greaney, & Ainsworth, 2002), as well as how much time a mother needs to be physically active per week to encourage physical activity in her daughter. Finally, the weight of personal and cultural values heavily influence African American women and girls’ physical activity behaviors and should be addressed in future research.

Conclusion

The sedentary lifestyle of many African American women and girls is a multi-faceted issue. Barriers to physical activity for African American women include the influence of culture and low physical activity intelligence. For their daughters, stereotypes and lifestyle influences play a major role in sedentary behaviors. For the women in this study, their lack of physical activity history makes these barriers difficult to overcome. For their daughters, peer pressure to look and act a certain way provides an excuse to be inactive. It is imperative that research yielding concrete results continue to provide resources to all women, particularly women of color from all socio-economic backgrounds.
REFERENCES


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SONYA DANIELS WALKER

CONTACT
2394 Champagne Isle Street
Las Vegas, NV 89135
(310) 908-8333; Email: fitproconsulting@gmail.com

BACKGROUND

Current Positions: 
Date of Appointment:
CMS Hospitality, Inc.
Health and Wellness Manager
6033 West Century Blvd., #890
Los Angeles, CA 90045
September 2007

University of Nevada Las Vegas
Part-time Instructor
College of Education
4505 Maryland Parkway
Las Vegas, NV 89154-3031
August 2008

Education:
Degree Completion:
Ph.D. University of Nevada Las Vegas 2012
M.A. Pepperdine University; Culver City, CA 1999
B.A. Spelman College; Atlanta, GA 1995

PROFESSIONAL ACADEMIC EXPERIENCE

July 2007 -
Atlanta New Century School
October 2007
Atlanta, GA
Position: International Baccalaureate Program Coordinator

August 2006 -
Lindley Middle School
August 2007
Mableton, GA
Position: Language Arts Teacher

August 2005 -
Neighborhood Charter School & Atlanta Charter Middle School
August 2006
Atlanta, GA
Position: Guidance Counselor

August 2001 -
King Middle School
August 2004
Atlanta, GA
Position: Comprehensive School Reform (CSR)
Facilitator, New Teacher Liaison, Read 180 Instructor

August 2000 -
Urban Learning Centers
August 2003  Los Angeles, CA/Atlanta, GA  
Position: Education Reform Consultant

March 1998 - Santa Monica High School  
June 2000  Santa Monica, CA  
Position: English Instructor

August 1995 - Davis Elementary School  
July 1997  Washington, DC  
Position: Pre-Kindergarten Teacher (Teach for America)

Summer 1994  Morehouse College Summer Science Institute  
Atlanta, GA  
Position: Undergraduate Assistant

OTHER PROFESSIONAL EXPERIENCE
2008 – present  Fitness Instructor - indoor cycling, cardio kickboxing, step aerobics, R.I.P.P.E.D™  
Las Vegas Athletic Club and UNLV PEX classes

STATE AND NATIONAL PRESENTATIONS
January 15, 2010  Co Presenter: Teaching Physical Education in an Urban Setting  
Clark County School District Physical Education & Adapted PE Conference in Partnership with NAHPERD  
Las Vegas, NV

Graduate and Professional Student Research Forum  
University of Nevada Las Vegas

Graduate Research in Preparation Symposium  
University of Nevada Las Vegas

April 24, 2009  Presenter: Community-based Recreational Opportunities in Urban Areas  
Graduate Research in Preparation Symposium  
University of Nevada Las Vegas

January 23, 2009  Co Presenter: Preparing Urban Physical Educators  
SWD/Az Alliance of Health Physical Education Recreation and Dance  
Phoenix, AZ
PROGRAM DEVELOPMENT
During my tenure as the CSR Facilitator at M. L. King Middle School, I designed and implemented the following program:

Single Gender Academy

PROFESSIONAL AFFILIATIONS
2011-present  Aerobics and Fitness Association of America

2009-present  UNLV Graduate and Professional Student Association representative for the Department of Sports Education Leadership

2008-present  American Alliance for Health, Physical Education, Recreation and Dance

2008-present  National Association for Sport and Physical Education

2003-present  Association for Supervision and Curriculum Development

COMMUNITY INVOLVEMENT
February 2012 Self-Esteem workshop, “Black is Beautiful from the Inside Out,” presenter for the Delta Sigma Theta GEMS; Las Vegas, NV

2011-present  Vice President and AIM for Healthy Living Coordinator. Jack and Jill of America, Inc.; Las Vegas Chapter.

2009-2011  Recording Secretary. Jack and Jill of America, Inc.; Las Vegas Chapter.


February 2011  Taught “Heart Healthy” fitness to second grade students at Ober Elementary; Las Vegas, NV

October 2010  Organized and implemented a second grade health fair at Paradise Elementary School; Las Vegas, NV