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# Experiences of Racism among Black and African American Children with Asthma

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#### Introduction

- People who identify as Black/African American have increased asthma prevalence, morbidity and mortality.
- Adverse childhood experiences and toxic stress have been associated with asthma risk and negative asthma outcomes.
- Experiences of racism have been described as a chronic stressor which has been associated with asthma morbidity.
- We initiated a pilot study to characterize described experiences of racism among Black/African American Children with persistent asthma.

### Methods

- Black/African American (non-Hispanic) children were asked to complete the "Perceptions of Racism in Children and Youth," a validated questionnaire, measuring perceptions of racism and discrimination.
- · Responses were analyzed for frequency of shared responses.

#### Results

- Thirteen children who self identify as Black/African American ages 9-17 years completed the survey.
- 100% of participants (n=13) endorsed experiencing at least one racist or discriminatory event ranging in frequency from once to occurring weekly.
- The frequency of specific experiences endorsed are depicted in Figure 1.

## Results

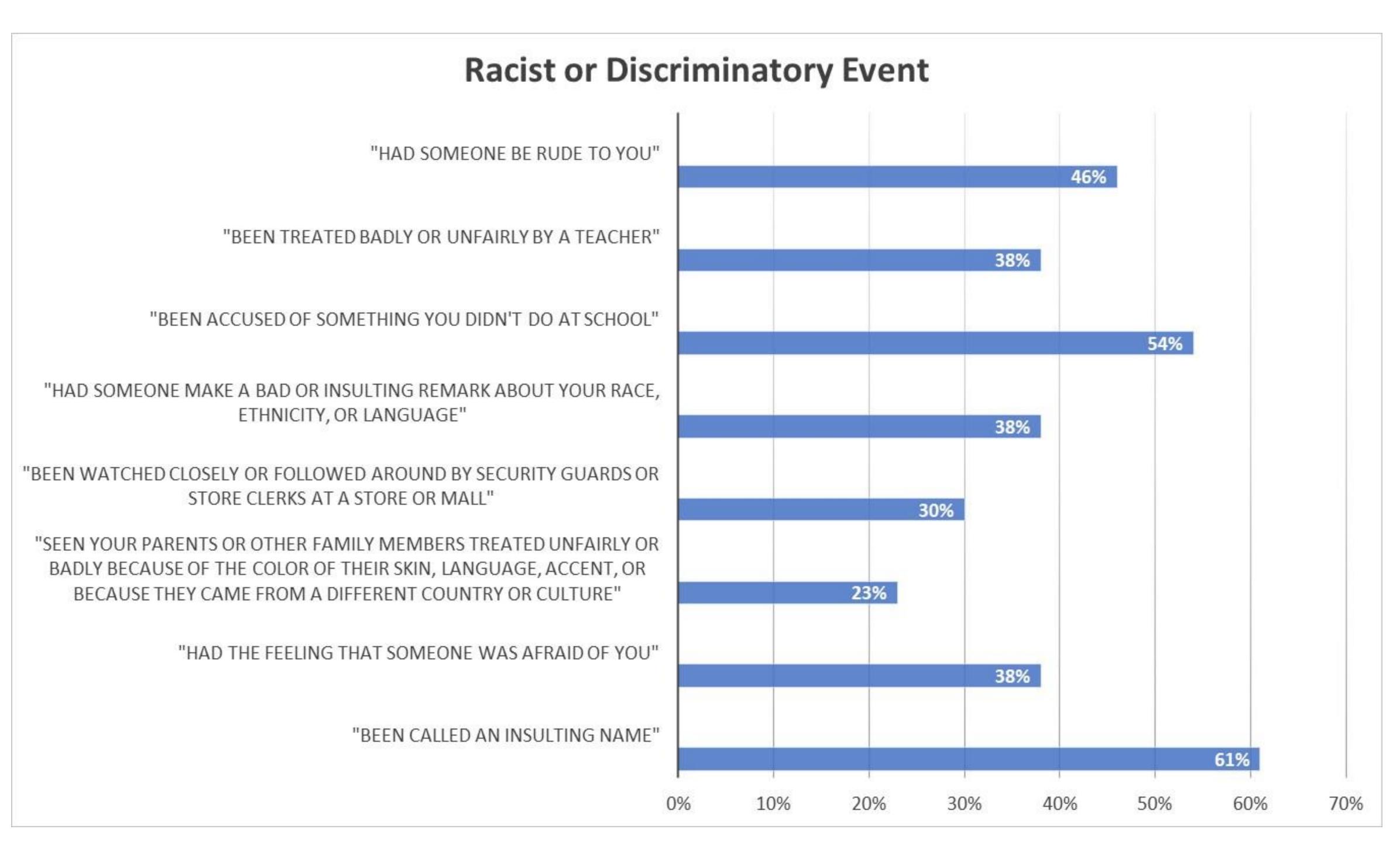


Figure 1: Percentage of participants who endorsed that a specific event occurred to them

### Conclusion

- Children with asthma who identify as Black/African American commonly report experiencing racism.
- Children with asthma who identify as Black/African American endorse a broad range of experiences of racism.
- The top 3 shared discriminatory events experienced by Black/African American children included someone being rude to them, being accused of something they didn't do at school, or being called an insulting name.
- These initial study findings should be further confirmed in larger populations.
- Intentional efforts are needed to raise awareness of racism as a chronic/toxic stressor experienced by children with asthma
- Efforts are needed to address and mitigate the impact of racism on asthma prevalence and morbidity.

#### References

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