

# Attending an HBCU may protect Black students from later health problems

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North Carolina A&T fans cheer their team on at the 2019 Celebration Bowl.  
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African Americans who attend historically Black colleges or universities (HBCUs) may be at lower risk for health problems later in adulthood

compared to African Americans who attend predominantly white institutions, a new study suggests.

The research showed that Black adults who had enrolled in an HBCUs had a 35% lower probability of developing metabolic syndrome by midlife compared to Black adults who enrolled in predominantly white schools. Additionally, the benefit of attending an HBCU was more pronounced in African Americans who grew up in more segregated environments.

Metabolic syndrome is defined as the presence of at least three of five factors that increase the risk for heart disease, diabetes and stroke—excess belly fat, elevated blood pressure, low 'good' cholesterol, and high levels of blood glucose and triglycerides.

"We've known for a very long time that the more years of completed schooling someone has, the better their health is likely to be across the life course, but there's been very little research looking at the different contexts in which education occurs and their impact on subsequent health outcomes," said Cynthia Colen, lead author of the study and associate professor of sociology at The Ohio State University.

"This study really points to a strength of HBCUs that people don't normally think about: Not only can they be health protective, but they can be health protective for years to come, not just while people are in school."

Colen conducted the study with Nicolo Pinchak, an Ohio State graduate student in sociology, and Kierra Barnett, a postdoctoral researcher in Ohio State's Kirwan Institute for the Study of Race and Ethnicity. The research is published online in the *American Journal of Epidemiology*.

The team used data from the National Longitudinal Survey of

Adolescent to Adult Health (Add Health), which consists of periodic interviews with people who were middle- and high-school students in grades 7-12 in 1994-95. Colen specifically used information collected during follow-up interviews that were conducted in 1996, 2001 and 2008.

The 727 Black respondents in the final study sample attended a total of 319 institutions of higher learning—273 predominantly white institutions and 46 HBCUs. The National Center for Education Statistics describes Historically Black Colleges and Universities as "institutions that were established prior to 1964 with the principal mission of educating Black Americans."

This national survey (Add Health) collected detailed health data during all interview waves, providing the Ohio State researchers with the specific measures they used to assess whether the Add Health respondents had developed metabolic syndrome by 2008 when they were in their late 20 and early 30s.

Colen and colleagues constructed statistical models to determine the extent to which HBCU attendance was associated with metabolic syndrome in midlife. These models controlled for a number of characteristics that could influence both HBCU enrollment and adult health, such as age, sex and region of the country, as well as a series of family, school and neighborhood conditions they experienced during their childhoods.

The analysis showed that 31% of the respondents who had attended predominantly white institutions had metabolic syndrome by midlife, compared to 23% of those who had attended HBCUs, and that HBCU attendance was associated with a 35% reduction in the odds of having metabolic syndrome among college-educated African Americans. The researchers noted that this kind of health benefit mirrors the risk

reduction that scientific studies suggest people can achieve through change in diet or exercise.

Overall, almost 30% of college-educated Black adults in the study sample developed metabolic syndrome by the time of their interviews in 2008, when they were still relatively young.

"That is the time period of the life course, when people are in their 30s and 40s, when we see the fastest growth in Black/white health disparities. This is largely driven by the emergence of chronic diseases, such as hypertension, diabetes and obesity," Colen said.

What is notable about this particular study is that college-educated African Americans were not being compared to whites—which was a strength of this research, she said: "Here, we are looking at how health is unequally distributed among African Americans. And we identify HBCUs as an opportunity not only for upward mobility, but as a potential driver of better health over the [life course](#) for individuals who spent their formative years at these types of institutions of higher learning."

Though the available data can't explain why or how former HBCU students' risk for [metabolic syndrome](#) is lower than those who attended predominantly white schools, Colen has some possible theories: At HBCUs, Black students regularly interact with African American faculty, staff and students who can serve as mentors, and they are less likely to be chronically exposed to the racial discrimination that has been shown to erode both mental and physical health years after people first encounter this type of unfair treatment.

Similarly, the researchers can only speculate about why the health-protective benefits of HBCUs are stronger for Black adults who grew up in more segregated environments.

"Our findings suggest that HBCUs are likely to be health protective for the segment of society who needs it most—those growing up in the most racially isolated environments," the researchers noted. "Moreover, this finding underscores the important role that place, in general, and segregation, specifically, plays in the unequal distribution of [health](#)."

**More information:** Cynthia G Colen et al, Racial Disparities in Health among College Educated African-Americans: Can HBCU Attendance Reduce the Risk of Metabolic Syndrome in Midlife?, *American Journal of Epidemiology* (2020). [DOI: 10.1093/aje/kwaa245](https://doi.org/10.1093/aje/kwaa245)

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