Navigating the Intersection: ADRD Risk, Diagnosis, and Outcomes Among Black Women

Te'J Rodriguez[1], Terri Shields, MBA[2]
[1]Livingstone College, [1]University of Pittsburgh – School of Public Health, [2]JADA House International

BACKGROUND

Dementia affects millions of older adults worldwide and is one of the leading causes of disability among aging populations.

In the United States, African American adults are twice as likely to develop Alzheimer's disease and related dementias compared to their white counterparts.

Black women experience a particularly high burden of dementia because they face the combined effects of racial and sex-related disparities.

OBJECTIVES

Identify why Black women are at higher risk for dementia and the key contributing factors.

Promote awareness, prevention, and early intervention to reduce dementia risk.

METHODS & FINDINGS

Conducted a literature review using PubMed. Keywords: "ADRD Risk" and "Black Women."

Black women bear a disproportionate burden of ADRD due to the interaction of biological, behavioral, and social risk factors.[1]

Hypertension emerged as one of the strongest modifiable predictors of future cognitive decline.[2]

Healthcare disparities contribute to delayed diagnoses and reduced utilization of dementia-related services.[4]

Community-based education and culturally responsive interventions have shown promise in improving awareness and promoting earlier detection.[5]

Older Black women are approximately **twice as likely** to develop Alzheimer's disease and related dementias (ADRD) as non-Hispanic White women.

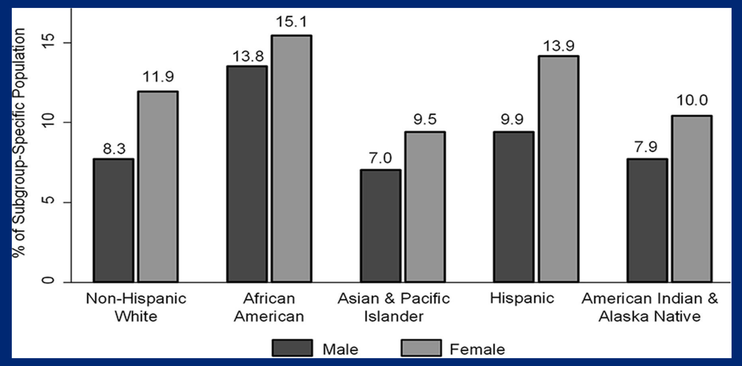

Figure 1. African Americans have the highest dementia prevalence among all racial and ethnic groups. Females also have higher dementia rates than males across every group.[3]

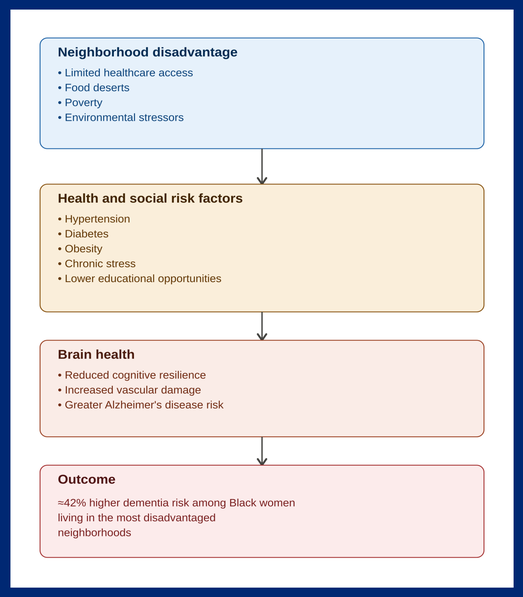

Figure 2. Neighborhood disadvantages contributes to health and social risks that increase dementia risk, particularly among Black women.[1]

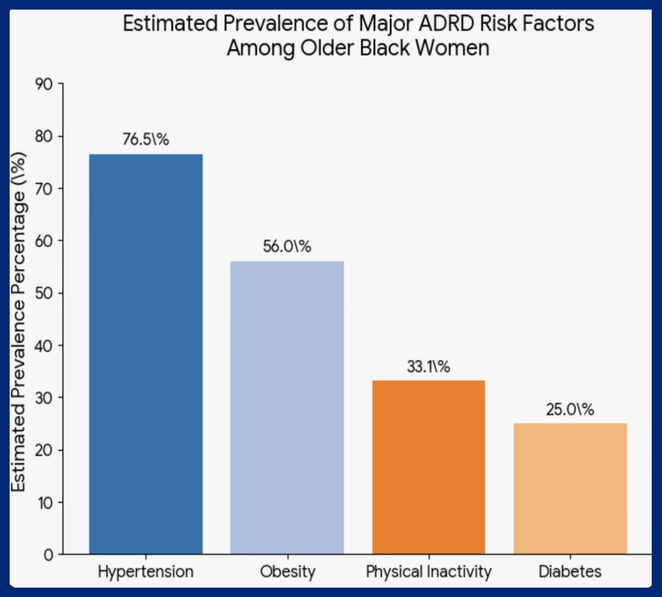

Figure 3. Hypertension is the most common dementia risk factor among older Black women, followed by obesity, physical inactivity, and diabetes.[2]

KEY CONTRIBUTORS

Hypertension: Strongest modifiable dementia risk factor.
Diabetes & obesity: Increase inflammation and vascular damage.
Chronic stress: Accelerates cognitive decline.
Limited healthcare access: Delays diagnosis and treatment.
Low clinical trial participation: Limits tailored treatments.
Social determinants: Education, income, and neighborhood influence dementia risk.

PUBLIC HEALTH SIGNIFICANCE

Promote early dementia screening for high-risk Black women.
Expand access to culturally responsive healthcare.
Encourage healthy lifestyles to reduce risk factors.
Increase Black women's participation in dementia research.
Improve public awareness and caregiver support.

RECOMMENDATIONS

Increase early dementia screening.
Expand culturally competent healthcare.
Reduce modifiable risk factors.
Increase Black representation in research.
Strengthen education and caregiver support.

REFERENCES & CREDITS

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