

**Supporting the Health of
African American and Black
Older Adults in Oregon**
Outcomes from a Needs Assessment



Oregon State University
Extension Service

Our Team



Tanisha Woodson
DHM Research
Director, Research Equity



Meilana Charles
Oregon State University
Oregon Parenting Education
Collaborative

Formerly lead of SNAP-Ed
African Heritage Workgroup



Asia Thogmartin
Oregon State University
Oregon Parenting Education
Collaborative

Formerly co-lead of SNAP-Ed
African Heritage Workgroup



Dusti Linnell
Oregon State University
Extension Service
Family & Community Health

SNAP-Ed State Team &
Formerly lead of
Older Adult Workgroup

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Project purpose

- **Provide space for Black and African American community members to share their perspective** on how they navigate their community to access food, prepare meals for their families, and programs they access to support them in their journey.
- The conversation covered the challenges they encounter when practicing healthy eating, as well as the programs they desire to have available in their communities.
- Our goal is to develop a set of recommendations that will aid community members and leaders in creating programs to support the health of older Black and African American Portland residents.

Methods

- Two focus groups with N=14 participants
 - The participants identified as Black and/or African American Portland residents who were 60 years of age and older.
 - Participants play an active role in cooking and providing meals for their household.
 - Participants lived in households that met the income criteria for SNAP eligibility.
- The virtual focus groups were conducted via Zoom on October 19 & 25, 2023
- Professionally moderated 2-hour sessions
- Each session consisted of group discussion. The quotes and commentary found in this report are drawn from transcripts.

Key takeaways

- **Health is top of mind for this group.** They prioritize health beyond just diet and exercise, embracing a holistic view that encompasses physical, mental, and spiritual aspects. The pursuit of health is embedded in a desire for the ability to continue showing up for their families.
- **The importance of nutrition is evident among this group.** Participants displayed a clear understanding of what a healthy meal entails while acknowledging that they struggle with consistently meeting the standards they set for their own nutrition. Techniques like cooking with others, meal prepping, and seeking online recipes were mentioned as strategies to aid in healthy eating. Challenges included insufficient planning, the desire for variety, and difficulties in making healthier choices. Financial constraints due to the rising cost of living also affected participants' ability to afford sufficient, nutritious food.
- **Interest around additional programming pertaining to nutrition is moderate.** Those who want more information or ideas regarding nutrition already have specific sources they turn to. However, there was interest in culturally specific cooking classes for making healthier versions of more traditional African American dishes.

Key takeaways

- **Participants understood the importance of exercise for maintaining physical health and the majority have established routines they follow.** Generally, this group participates in low-impact, solitary, and free exercise routines consisting mostly of walking and working out.
- **Mental health is very important to this group, and they employ a wide variety of methods to maintain their mental health.** These methods included spending time with loved ones, pursuing personal hobbies, and engaging in spirituality. They expressed an interest in attending community mental health events that are cost effective and cater specifically to the Black and African American communities.
- **Participants expressed a yearning for their communities to have more opportunities for interpersonal connection and community activities.** Participants did not identify specific programs they wanted across the board. However, people want activities and groups that cater towards the cultures of Black and African American communities. Additionally, for them to attend any programming, it needs to be local and free or heavily discounted. Individuals suggested various communication methods to get them information on community programs, including flyers in frequented businesses/spaces, social media, and local news sources.

ATTITUDES TOWARD HEALTH

For the majority of participants, the concept of health is profoundly personal, encompassing various aspects of life beyond just physical well-being. Being healthy implies the ability to lead the life they desire with their families.

"It means a lot to me to be healthy. Healthy means everything. I invest in my health. It's very important to me. I'm 75. I'm not on any medication or anything because of nutrition, and I eat right. It's extremely important to me to be healthy in order to be there for my family, for my grandchildren, my great-grandchildren."

–Woman, Age 75

"For me to feel and to be healthy means, even though you have some illnesses, to manage your illnesses. Either it has to be with medicine, healthy eating, exercise, managed life, managed illnesses. It could be blood pressure, diabetes, anything, but to manage them would be a good start for health, yeah."

–Woman, Age 58

"To be healthy means to be able to be mobile, not to be burdened with all of the diseases and illnesses that go around and are common to our ethnicity. To be healthy is to think and feel good about yourself. That's good, to have a nice social thing, to be financially able to take care of yourself, so the stress level is lower. That's to be healthy."

– Man, Age 74

What does it mean to be healthy?

"Eat right, get enough rest, mobile, can do for your own, get around, stay more active. I know, for me, to be more active and stay healthy, eat healthy for my grandkids, better get around. I can get around, but it takes time for me. I have high blood pressure and lung disease. Sometimes, I can't walk too far without stopping to take a breath. That's basically it for me."

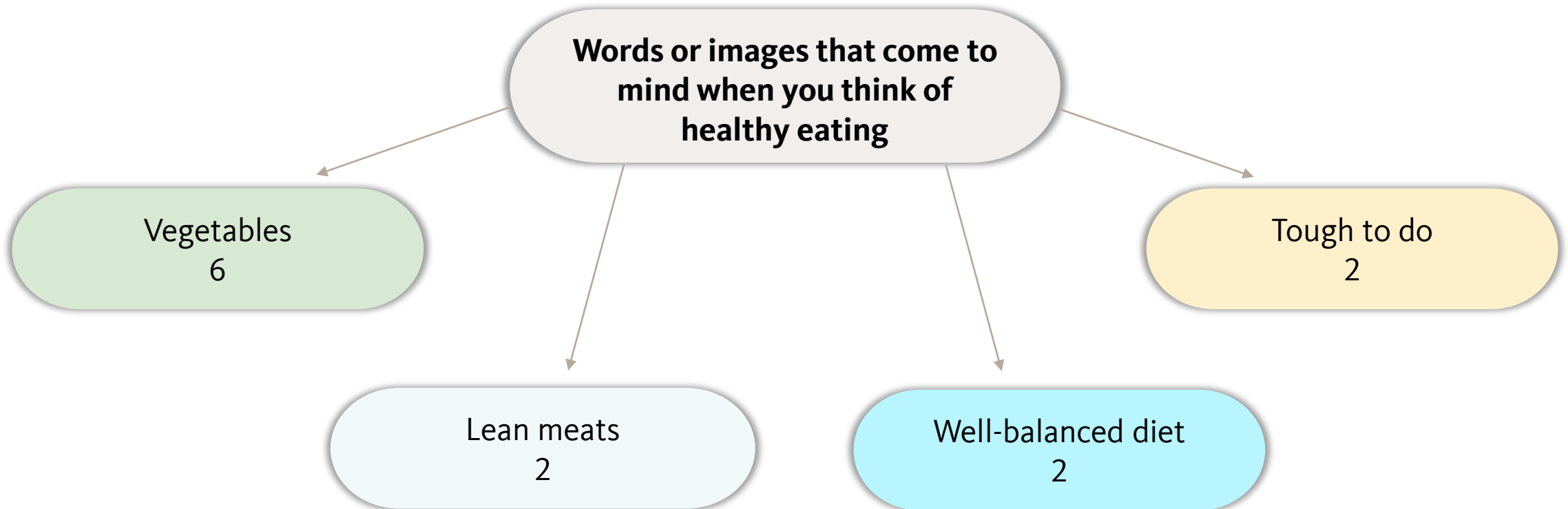
–Woman, Age 63

"For me, being healthy is, I look at it as spiritual, mental, and physical. I see a therapist to be able to balance out what's going on in life. Healthwise, I have children and grandchildren, too. Life shows up. Things show up, where I can't control it, but I can control how I react to it. I'm a Christian, so I have a spiritual line that I have to keep healthy, as well, through prayer, meditation, and stuff like that. I juice, too. I try, but I don't beat myself up when I don't make the mark."

–Woman, Age 60

FOOD ACCESS AND MEAL PREPARATION

Participants identified key aspects of healthy eating such as vegetables, lean meats, and well-balanced meals—with some acknowledging personal struggles to eat healthy.



Some participants acknowledged facing personal challenges in consistently upholding their preferred healthy diet.

Tough to do

“What comes to my mind when I think of healthy eating is that I'm not doing it. I'm working on it, but I'm not there yet. I didn't say that I'm not going to do it. I didn't say that I didn't want to do it. I'm aware of what I consider healthy eating is that I'm not eating those things that I should be eating. I'm eating more of the things that I shouldn't be eating than the things that I should be eating. I'm doing the things that are counterproductive to all of the things that I was saying about being healthy. It was easy to say what health is, but that doesn't mean that I have it.”

—Man, Age 74

“I need to work on eating vegetables. I eat salads. I eat broccoli, a little bit of greens, but string beans, peas. I don't eat corn out of the can, but I eat corn on the cob. For me, I need to eat more vegetables. I don't do that. I did when I was younger. Since I've gotten older, I make up my mind on what I want to eat.”

—Woman, Age 63

Participants highlighted "healthy meals" that focused on vegetables, baked meats, and moderation. The responses showed a strong grasp of nutritious eating and revealed a common struggle in meeting standards for a healthy meal on the daily.

Describe what a healthy meal looks like

"For me, it'd be baked chicken and a salad, sometimes maybe, a dinner roll or a piece of bread. The only fried foods that I eat is fried fish. Once in a while, maybe fried chicken. Mine is mainly baked or boiled. It depends on which one of my grandkids are here. Like I said, it all depends on the fried foods. I'm more baked and boiled food or putting it on my George Foreman Grill. I have to learn how to, like I said, start eating more vegetables."

—Woman, Age 63

"The majority of my food is baked. We normally have, not always salad, but we always have vegetables. Sometimes, a little rice. That's usually what the meal is. We don't eat a lot of bread."

—Woman, Age 67

"Healthy meal includes the protein, a little bit of carbs, and a lot of vegetables. I only eat healthfully. I eat too much of it"

—Man, Age 74

"For me, my plate should look like, which I don't usually do it, half of it should be vegetables, and a quarter of it should be protein. It could be meat or vegetarian patty, anything that you'd like, your starch, vegetable, or fruit, then you can include a glass of milk or some type of calcium or something in it."

—Woman, Age 58

Cooking with or for someone else, meal prepping, and looking up recipes online makes it easier to prepare healthy meals.



Some people find **cooking with someone** else helps keep them on track with healthy eating, while others find it complicates cooking.

Cooking for someone

“If I have somebody to cook with and keep the guardrails on, it’s easier for me. If it’s only me cooking for me, then I’m cooking to my tastes, my flavors, yeah.”

—Man, Age 61

“Yeah, cooking with someone, I grew up in a family of seven kids, so there was a lot. I was the one that did all of the cooking. When I cooked, I cooked enough for the whole family. That’s something that I’ve always done. I love cooking. I still cook with my daughter. It’s good when you can cook with someone. You can watch each other’s diet. “Oh, we don’t need this. We shouldn’t need all of this.” We help each other stay focused and stay on point as far as healthy eating.”

—Woman, Age 75

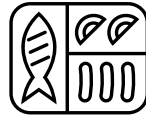
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Cooking for only one

“For me, I don’t have to cook for anybody but myself. Yesterday, I had a can of chili and a hotlink. That was my dinner. Tonight, I went to Carl’s Jr. and got myself a burger. I cooked some sidewinders in my air fryer. I don’t have to worry about cooking, preparing meals for the kids and for grandma and all of that, because I’m only taking care of me. I don’t require a lot.”

—Male, Age 70

Additionally, participants find meal prepping and looking up new recipes to be helpful when preparing healthy meals.



Meal Prepping

“I pre-cook. I make my meals out. They're in my head, what I'm going to cook, then I go to the store. I usually go to WinCo, their section where you buy the bulk. I will buy bulk nuts and cranberries and raisins. I will make my own trail mix, so that I throw one in the car. I put them in different places. When I get hungry, I grab some of that.”

—Woman, Age 60

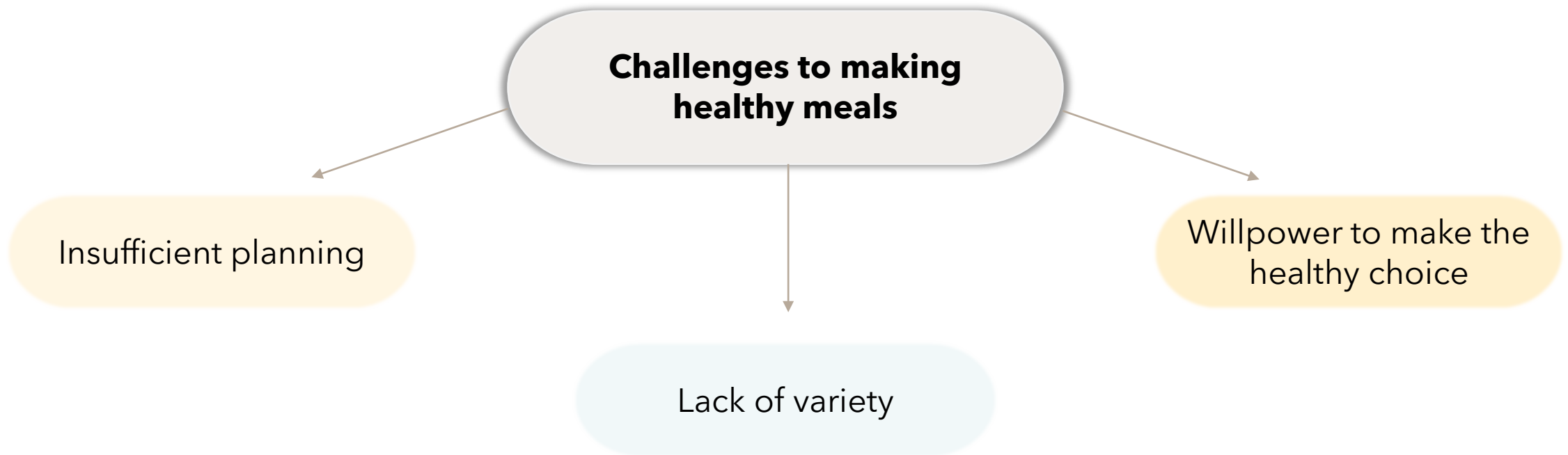


Looking up recipes

“I do go online for recipes. I figure that it's important to me to expand my palate a little bit, but it's always flavorful food that I'm cooking. Like I said, even though they throw the recipe out there, I put my little twist on it. I mainly eat chicken, ground turkey a lot, pork, stir fries, and stuff like that. I try to eat as healthy as I can, a lot of fruits and vegetables.”

—Man, Age 61

Participants cited insufficient planning, a desire for more variety, and difficulties in exerting willpower for healthier choices as challenges in preparing healthy meals.



People's difficulty in consistently opting for healthy choices and cooking for one arises from a dislike of the limited variety of food often associated with those choices.

Willpower to choose the healthy option

"Variety is a huge challenge. Also, it's not the challenge. We can, 24 hours a day, if we want to, but it's the willpower to make better decisions. It's easy to grab a cheap burger than to come home and make something healthy. The challenge is the mental access and us choosing better, doing better. The variety means expanding our cookbooks. That's really the challenge. Do you know what I mean? I struggle with variety from time to time."

—Man, Age 57

"I actually eat towards my palate, not to the healthier side. That's how I was raised. I was raised with flavorful food, so my palate craves that. It's like anything else. The adaptation is challenging to say the least, because I do like to taste my food, not only eat to be full."

—Man, Age 61

Hard to prepare a meal for one person

"Well, for me, there were nine people and a cat and a dog growing up. To prepare a meal for nine people consisted of a couple of chickens, then all of the trimmings to boot. I find it difficult now to even cook a meal, because it's only me. I'm pretty good about it the first day or even two days. After that, everything is withered. The vegetables are limp, and things like that. I end up tossing them out, so it's difficult, because it's hard for me to prepare a meal only for one person."

—Woman, Age 61

Many participants experienced situations where they lacked resources to purchase sufficient food for themselves and their family, noting the impact of the rising cost of living on their finances.

Do you ever find yourself in a situation where you do not have enough resources to get all the food you need for your family for the month?

Yes

“Groceries are definitely, I mean, outrageous in this country right now.”

–Man, Age 57

“Yeah, I’m pretty sure that we all have. A lot of people won’t want to admit it, but you’re going over your budget now. Everything is so expensive. It affects everybody, whether it’s gasoline or groceries.”

–Man, Age 61

Individuals employ strategies like opting for cheaper, less nutritious food and leaning on family support to get through months when finances are tight.

Make less nutritious choices

“Yeah, I went overbudget several times. I felt the pain there. Okay, trying to eat healthy is ten times more expensive than eating junk food. Do you know what I mean? Listen, I can have ten of these, or I can buy one of these. I'm opting for the one now, instead of the ten, yeah. I go organic when I buy anything now.”

—Man, Age 61

“I was saying, “Making poorer choices,” because we might not have the resources to get caught up with life. I have to find something in the cabinet, because I can't run to the store, or the freezer. I can't run to the store until the end of the week or whatever. We always make do, whether it's the food pantry or digging deep in the cabinets or freezer or whatever. Sometimes, it's only a simple sandwich, trying to get through until we can make it.”

—Man, Age 57

Lean on family

“I have six adult children. They all live in the Portland and Vancouver, Washington area. When things get a little tight, and they do get tight, because things are very expensive now, we've learned as a family, even as I was raising the kids, that we pull together sometimes. If things get a little low in this house, I'll call. We'll call here and there. We pull our resources together, so we all can eat. That's one thing that we learned to do as a family.”

—Woman, Age 75

“I'll either meet up with her, or she'll bring me something or something like that. Push comes to shove, if it's deeper than that, I have a daughter in Vancouver.”

—Woman, Age 66

People used additional strategies to stretch their food budget, like using coupons, cooking larger portions of food, and visiting food pantries.

Use coupons

"I use coupons. I had a coupon today when I went to Carl's Jr. I got two burgers for \$5.99. That was a hell of a deal for me."

—Man, Age 70

Make food go as far as possible

"Yes, it has, because I take care of my three grandchildren. A lot of times, I have to cut corners or make a big pot of spaghetti, something that's going to last. Hopefully, it will last for a couple of days but not all of the time. I have to make do with what I have and look in the cabinet and see what I can throw together to make a meal, yeah."

—Woman, Age 55

Food pantry

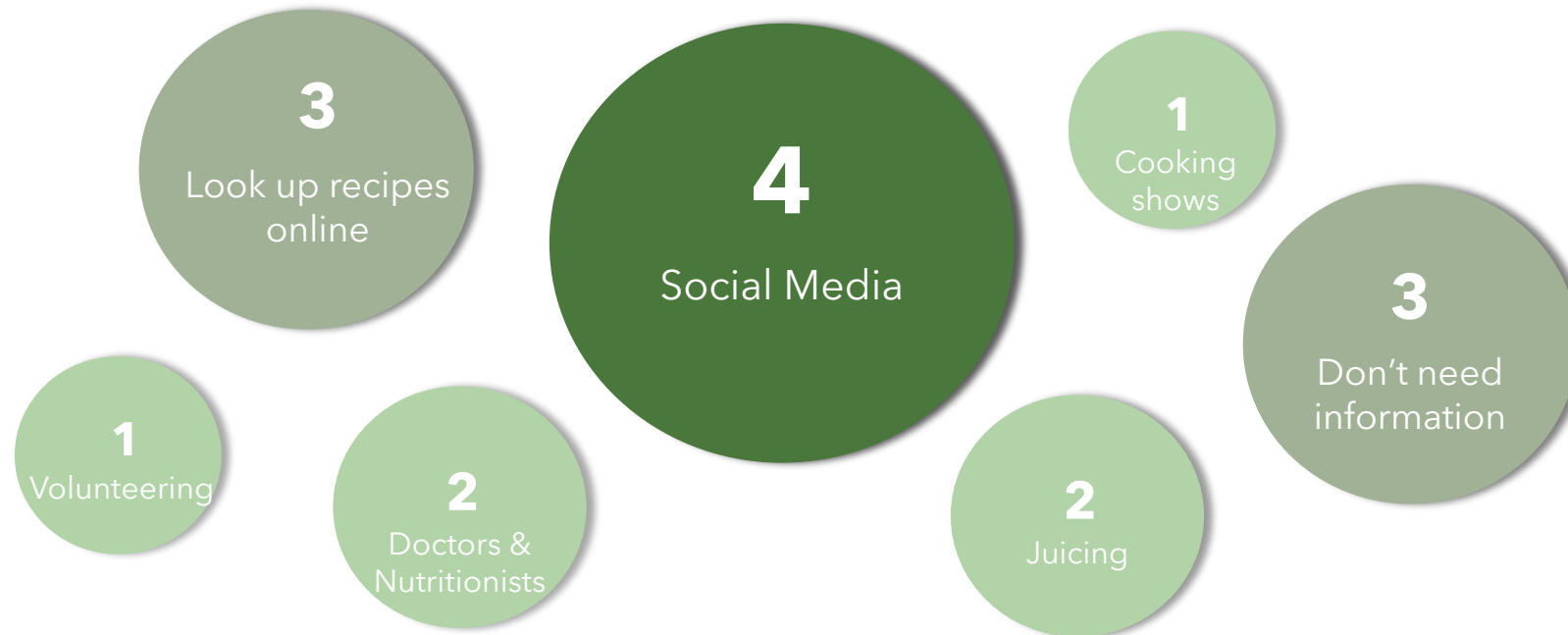
"In the past, I went to a food pantry. I'm not going to say that I never have. Do you know what I mean? As an older adult, I am having to dip into savings, whatever I have allotted. I have to go above and beyond."

—Man, Age 61

PROGRAMMING FOR HEALTHY EATING AND NUTRITION

Individuals seek information on healthy eating and nutrition from a variety of sources, predominantly relying on online platforms. Some also feel they do not need any additional information on the topic.

Where do you go when you want to learn about healthy eating and nutrition?



People predominantly use Facebook, YouTube, or Google to find recipes and nutrition information online, though they did not specify particular accounts, groups, or websites.

Where do you go when you want to learn about healthy eating and nutrition?

Social Media

"I go to YouTube. YouTube has the answers for everything."

—Man, Age 74

"I actually go onto my Facebook to tell you the truth. If there's one, I watch it, then it will keep popping up. It probably won't be every one of them, but I send it to myself in Messenger."

—Man, Age 61

"Online, Facebook, I do Facebook a lot. They have a lot of recipes on Facebook. I do that. No, people only send me different stuff. I don't know. I have a lot of friends that like to cook."

—Woman, Age 69

Online

"For me, my sister and me, we get on the Internet and pull up recipes for chicken, different ways to change up, or watching the food shows, the Food Network. We'll see different recipes online. She'll send me a recipe, or I'll send one to her. I'll go over and help her prep it if it's a good day for me, if I'm feeling good. If I'm not feeling good, she'll cook it. If she feels that I'll like it, she'll bring it over to me."

—Woman, Age 63

"Yeah, I go online. I Google a lot of stuff I find a lot of stuff out on Google."

—Woman, Age 69

"I go online a lot and look up nutrition, different things, what they are, and what they do for the body. I'm online a lot."

—Woman, Age 75

While some people seek nutrition advice from their doctors, a handful of people feel they do not need additional information on healthy eating.

Where do you go when you want to learn about healthy eating and nutrition?

Doctors & Nutritionists

"I get advice from doctors, nutritionists, because I have Type II diabetes. They teach, every time, about healthy food. Also, everything is cooked at home. We don't buy frozen or fast foods. Everything is prepped at home. My wife cooks. My doctor knows about the healthy foods and takes care of me. We support each other, advise each other on healthy food every time. I don't have any problems with that. The sources are okay."

—Male, Age 67

"Another place that I've gone is at my doctor's office. They're always handing out different meal plans that you can do. There's a nutritionist there that always tries to, is always there if you need any advice on how to prepare something."

—Woman, Age 66

Don't Need Help

"I'm in that same boat. I don't think that there's anywhere that I need to go to learn to do the right, yeah. I know what healthy eating is all about."

—Man, Age 74

"I don't feel that I have to get anybody to know what to eat."

—Man, Age 63

Only one participant had attended programs or community groups regarding nutrition. They were connected to the groups through their doctor and insurance company.



“I had an issue come up. Following the course of the doctor’s recommendation, Kaiser, for instance, people can say that they don’t like whomever that they don’t like, but Kaiser was great with some healthy stuff that I needed literature on and classes that I could go to and absorb all of the information. They were great with that. I would ring their bell all of the time. Follow-up was always great. They hooked me up with a lot of resources. That was one way to get knowledge.”

—Man, Age 57

Participants expressed interest in culturally specific cooking classes for healthier eating and called for an expansion of ethnic restaurants in Portland to better represent the city’s diversity.

Culturally Specific Cooking Classes

“Yeah, I wish that they had cooking classes. Traditionally, African Americans use spices like no other race that I know of, my grandmother to my mother to my aunts to my uncles. Them cooking is poetry in motion in the kitchen, but it’s always a little, how can I say that, traditionally back from enslavement times. They’re cooking smoked ham hocks and everything. I grew up on chitlins. I’m not afraid to admit that. It’s always that type of food that’s heavy for you. It’s not light. To be in the kitchen with somebody that can cook with flavor but make it healthy flavor would be ideal for me.”

–Man, Age 61

“For me, also, I wish that there were more culturally specific healthy eating cooking classes for free.”

–Woman, Age 58

Ethnic Restaurants

“That’s not something that we have a whole lot of in the Portland area when it comes to the ethnic restaurants. You go to other places, I don’t care what it is that you want, there’s somebody that’s selling it somewhere. That doesn’t happen here.”

–Man, Age 74

Initially, participants thought nutrition was not a topic that necessitated community support, seeing it as a self-motivated learning endeavor. This belief might stem from unawareness of available—or the potential for—community assistance.

“I don't think of the community as something that's going to help me do something personally, whether it comes to something as eating. The thought of going to a community center or something like that to meet with other people, to discuss it, if you go to overeaters anonymous or alcoholics anonymous or something like that, when you say community things, those are the things that I think of. That doesn't come to my mind when I'm thinking about a recipe or what I'm going to eat today.”

—Man, Age 74

Man, Age 57: *“You can only take support so far before we have to stand on our own two feet. A lot of this is independent, self-motivated knowledge finding or whatever.”*

Moderator: *“Does it have to be?”*

Man, Age 57 : *“Does it have to be?”*

PHYSICAL & MENTAL HEALTH

Participants incorporate low-impact exercises like walking, working out, and stretching into their routines for physical health.



Walking

"I walk more than I used to. I have a knee problem. I've been walking down the Mississippi hill."

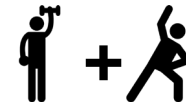
–Woman, Age 69

"Well, staying active, for one. Also, walking, because walking is less impact at our age than running."

–Man, Age 57

"It could be walking for 30 minutes a day. You don't have to do 30 minutes a day. You can do ten minutes at the time and three times a day. Only moving around in general will help."

–Woman, Age 58



Working Out & Stretching

"I workout in my home or three days a week around one hour, and then stretch."

–Man, Age 67

"I do the gym three days a week, Monday, Wednesday, Friday."

–Woman, Age 60

Participants take care of their mental health in a multitude of ways including spending time with loved ones, pursuing personal interests, and connecting with their religion/spirituality.

What are some things you do for your mental health?



Participants expressed a willingness to attend affordable events for mental health at local community centers that cater specifically to the African American community.

Moderator: *If it was held at your local rec center, your community center, is that somewhere that you'd go?*

Woman, Age 66: *Definitely.*

Moderator: *It sounds like having programs that are affordable and offered at the community center would be very helpful. Is that correct?*

Woman, Age 66: *Yes.*

Woman, Age 69: *Yes.*

Woman, Age 75: *It could be a cultural perspective, too. We're African Americans. We want something that's going to cater to us.*

PROGRAMMING IN COMMUNITIES

Individuals valued community events centered around dancing and music; however, the accessibility and cost of these events present challenges to participation.

Blues Festival

"In the summertime, they have festivals, the blues festival, all of that type of stuff, yeah. I like attending those."

—Man, Age 70

Dancing

"Hip-hop is good. I can get in there and do what I used to do a long time ago. I can't dance like that like I used to. It's a little slower now."

—Woman, Age 69

"Line dancing is good. I used to go to it all of the time. They used to have it, they still have it at Redcross, but you have to pay for that one. They have one that's free, but it's out in southeast Portland. It's out far. They need to offer it over at Matt Dishman, somewhere closer in, so people will have better access to it."

—Woman, Age 55



Proximity and cost are limiting factors for people's participation in community programming



Participants pointed out that events should be in their neighborhood and offered at a significant discount for them to attend consistently.

“In order for me to really get involved in something, I need for it to be close. I don’t need to go out of my way. If it’s convenient for me, I will do it. If I have to go out of my way to do it, I may start it, but I won’t finish it.”

—Woman, Age 67

Proximity

“I don't think absolutely free, but discounted within a range that I can afford to go. The gym membership is \$30 a month. I'm not doing that. That's a lot of money...”

—Woman, Age 60

Cost

Personal health is a primary constraint affecting participants' attendance at community programs. People may not have the ability to participate in the activity offered or are concerned for their health due to COVID.

Health Limitations

"I'm always getting something from Silver Sneakers. I don't partake in it. It's not that they're not there or don't know of them. I hear about things. This arthritis in my knees limits things. My mobility isn't where I'd like it to be. I'm working on getting it there. I used to participate in them regularly. I don't do that now, but I want to get back into."

—Man, Age 74

"A lot of stuff has changed since COVID. For me, I still have fear. I had COVID really bad. I still limit myself around big crowds. I still get nervous because of COVID."

—Woman, Age 63

Participants were reserved in proposing ideas for potential community programs, but a few indicated an interest in senior walking classes, free computer courses for seniors, and an inclusive community center.

"I would love to see a community center which includes everyone. Anyone can make, can go, and meditate, can go, live music, programs, that type of stuff. I don't think that there is one that can include everyone, inclusive. I don't see it. I don't know. Maybe I'm not aware."

—Woman, Age 58

Are there any programs you wish were offered in your community?

"It's not a dream, but what I would like to see in my community is, I'm a senior citizen. I don't know very much about computers. In my community, I'd love to see, for senior citizens, where you can go and learn the computer for free."

—Woman, Age 67

"I wish that there were walking classes for seniors, for anybody for that matter."

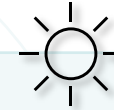
—Woman, Age 58

While a few individuals voiced general safety concerns, only one person specified that these concerns were a primary reason for not participating in community or personal events.



“I try to get my daughters to turn on their inside lights, their interior lights in their car. They walk up to their car. They open the door. It’s pitch black in there. You can’t see if somebody is hiding behind the seat, nothing. I always have, I tell them, “Keep that light on. If you leave home, leave your porch light on. Leave a light on in your home, so people won’t know that you’re not there. You’ll have something.” I don’t know, yeah. It’s crazy.”

—Woman, Age 66



“Yeah, I’m a daytime person. If there’s something at night, I usually don’t go. Daytime, afternoon, I’m scared.”

—Woman, Age 69

COMMUNICATIONS

Individuals suggested various communication methods to get them information about community programs, including flyers in frequented businesses/spaces, social media posts, and ads in local new sources.



COMMUNITY STRUCTURE

(e.g., Policies, Systems, Environment and PSE Change)

Participants looked to the past to envision their ideal communities. They desire a time with more **interpersonal connection** and **safety** in their communities.

Ideal Community

“I grew up in the country. We all knew each other. We had a community center in the neighborhood where everybody went. You went to church on Sunday and could leave your door unlocked at night. If I was going to look at a dream community, it’d be a community where I’d feel safe at nighttime to sit out in front, where I could walk around a corner safely. It’s more of a safe community. That’s what, if I was going to look at a community.”

—Woman, Age 67

“Right now, I wish that the community was like when I grew up. Where I grew up, I was born and raised in Boston, in the projects there. The thing that was unique about it, everybody knew everybody. Everybody communicated with everybody. When you hear the old saying now that it takes a village to raise a child, I know what that means. We don’t have that now. My dream community would be a community where the members of that community were aware of the fact that we’re all connected and all need each other.”

—Man, Age 74

“Likely it was back in the ‘70s and ‘80s, everybody getting along. Helping one another, kids going outside playing, families coming together, everybody getting along. Life is so short. Everybody helping one another, looking out for one another, being a community, everybody laughing, and doing things together. Friends, family members, everybody getting along.”

—Woman, Age 63

Additionally, an ideal community would feature increased diversity, a higher presence of children in neighborhoods, more community activities, and facilitate more connection within communities.

More children, more connection within communities, more diversity

“When we grew up, it was multigenerational. Everybody looked out for one another. Those days are long and gone. We’ve gone to a society, where we only care about ourselves. Everybody else is hands-off. I like to surround myself with likeminded individuals, which are more family-based, which is more love-based, which is more being productive. Of course, us living in Portland, Oregon, or any other state where the city has been gentrified, and nothing ever is going to be what it was. I want my community to somewhat look like me.”

—Man, Age 57

More diversity

“I’d have to have a whole lot of color in my community. I’m probably the only spec in the crowd within, I know, a four-block radius. I’m the only speck in the crowd. I’d like to see more color.”

—Woman, Age 66

More connection within communities, more children

“A community that has community. A community that has a lot of resources. A community that has resources when we’re in need of something, a safe community, where it’s safe. Children, because I love children. A community, people being together, parks, a community, where there’re parks and places to go for entertainment. That’s about it.”

—Woman, Age 75

More connection within communities, more activities

“I would love to see more activities. I think, the more people that are like you, around you, the more things that you are willing to do. I’m willing to go and visit somebody a block or so away from me. I don’t have anybody that close. Right there, the networking and the social aspect of seeing people and walking around in your neighborhood and having somebody like you to speak.”

—Woman, Age 66

RECOMMENDATIONS

Recommendations

- **Programs focusing on nutrition should be culturally specific.** Participants expressed an interest in preparing dishes traditional to Black and African American communities in a more health-conscious manner, and their current resources lack this cultural lens.
- **Creating a sense of community is crucial in program design.** The participants of these focus groups expressed a desire to feel a greater sense of community across the board and emphasized the importance of cultural relevance in potential programs. They are interested in activities surrounding music, dancing, and skill-building.
- **Geographic specificity is essential.** Programs need to cater to local neighborhoods rather than being centralized. This population will not engage consistently if programs necessitate traveling long distances.
- **Programming must be affordable.** Participants emphasized the need for heavily discounted or free programs. Financial constraints make costly events unfeasible and discourage participation.

Want to talk more about how we can use this information to engage African American and Black Oregonians?

Find me during the FCH & SNAP-Ed Conference

Round Tables on Adaptations for Equity

Tuesday May 7

3:30-5:00 PM