

Kinesiology: Black Representation & the Diversity Within

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There needs to be more diversity in the kinesiology field. In the world, it is very noticeable that there are fewer African-American people in the medical field than Caucasian people. Within society, one will hear from different people and areas that “we need more African American doctors” or “there are not enough African American doctors,” which affects people and their society's norm mindset, especially people of color. There should indeed be more African-American people in the medical field. Diversity within this field should be much more expanded. Examining the diversity aspect of this topic will provide a clearer image of the necessity for more African Americans in the medical field, primarily Kinesiology. First, it will show some statistics about African American people in the medical field. Then, looking at African American patients with African American doctors versus Caucasian doctors, as well as other statistics that play a big part regarding this topic. In the medical field alone, there is a criminal percentage distribution between Caucasian and African-American people when it comes to having a medical job. In today's society, there is a sort of mindset that people have (usually blacks) stating that there is a need for more black doctors. With an African American patient community, it can be shown that those patients feel different as opposed to Caucasian doctors. In this presentation, there will be an explanation of the basics about African Americans in the United States, how many of them are doctors, and how hard it is for them to become doctors, as well as thoroughly discuss the diversity rate in the medical field, particularly kinesiology. There needs to be more diversity in the field of kinesiology. It is very noticeable that there are fewer African American people in the

medical field than Caucasian people, based on the research that was thoroughly discovered. This study is essential because there are a lot of pro athletes whose careers were cut short due to injury, as well as non-athletes who have had to stop doing certain things because of injuries. The discussion of the diversity rate within the kinesiology field will be on the percentages of African American people who go to school for medical careers and how many of them graduate, as well as their experiences while being on campus and provide ample understanding for the need of African Americans in the medical field.

While Kinesiology can be a broad topic, expanding from the diversity category to the success in the specific field and how vital Kinesiology is, there is a narrowed-down version that needs to be focused on. Finding answers to the specific questions: “Is there a limit between white doctors and black doctors regarding the race population?” and “Is there a fair level of diversity and equality between doctors and athletic trainers,” becomes an essential part of the efforts to increase diversity in the medical field. Understanding why diversity is pertinent to Kinesiology specifically will help narrow these efforts and, in turn, make them concentrated and potentially more effective. These ideas relate to each other due to how they explain and refer to diversity within the medical and athletic fields. In those two categories, people of many races are seen and recognized in those two fields. Depending on the sport, it is also noticeable that certain races dominate the racial percentage. With all of this being said, there will now be a thorough discussion of how kinesiology originally started and how diversity problems began within the field of kinesiology.

As we all know, Kinesiology has not been established forever, like a higher God or Adam and Eve. The *Alberta Kinesiology Association* explains how kinesiology started initially and how it has evolved to what it has become today (“The History of Kinesiology”). The earliest records of kinesiology can be traced back to ancient Greece, where the philosopher Aristotle observed and analyzed the movements of animals and humans in his studies of natural science. Throughout the 16th-21st centuries, Kinesiology has evolved in many ways. In recent history, tracing back to the 1930s, a man named R W Lovett, an orthopedic surgeon from Boston, had used muscle testing to assess disabilities in patients with polio and nerve damage (1932). This work was further developed by Henry and Florence Kendall, who published *Muscles: Testing and Function* (1949), helping to launch kinesiology muscle testing (“A Short History of Kinesiology”). These people were the people who had started the Kinesiology upcoming. In 1965, the University of Massachusetts Amherst created the United States' first Department of Exercise Science (now called Kinesiology) under the leadership of visionary researchers and academics in exercise science. Today, kinesiology is a thriving and multidisciplinary field, encompassing a wide range of expertise and applications. From improving athletic performance and injury prevention to developing assistive technologies for people with disabilities, the study of kinesiology continues to evolve and grow, building on centuries of research and innovation.

The African American experience of studying kinesiology in a predominantly white institution has not been a fun one. There are statistics from *The University of North Carolina at Greensboro* that which exemplify how the African American community

who attends the school has suffered the challenges of underrepresentation, experiencing stigma and the n-word, and Black culture as weird or unacceptable. The challenges of underrepresentation are obviously difficult ones to overcome. Although they anticipated this before coming to campus, some students were still 'taken by surprise' by the extent they were underrepresented. They felt a heavy sense of "isolation" even in the kinesiology classroom with the other students. There is another challenge of "not being understood," as someone thought, "If they have a conversation with the teacher about diversity, equity, and inclusion, how far would the conversation go?"

Having these challenges can affect the mental part of a human and cause them to think not so highly of themselves and come to a sense of depression or self-doubt. The stigma and the n-word regard the black community on the campus as being afraid of hearing it or being called one. Participants encounter people who question their intelligence and refer to some of their behaviors as 'ghetto.' In response, students feel they must work hard in classes to prove their intellectual capabilities, and they also adjust their behavior to distance themselves from the 'ghetto' label. Lastly, it was said that Black culture is weird, unacceptable, or not respected. The first example is the music and church. Someone was playing rap music and playing basketball, and the white person did not like it at all. Also, when someone was listening to their church service, a white individual stated that the service was "very dramatized and not the way of the Lord" and was even told he "wasn't gonna make it to heaven" because he does not go to the same church she does. Another part of black culture is "Hair" itself (Pseudonym). It is significant to the African American community because it is another way of public

expression. A black student speaks on how, in a class, they have to wear a tight-fitting cap, and their hair does not fit. After she took it off, her hair was messed up, which caused her to walk all the way back to her dorm to fix it. Along the way, many questioned her: “Why does your hair look like that?” and “Does it look like that every day?” (Pseudonym). Those questions constantly being asked took a toll on her and the other African American students. Given these factors of what it is like to be black on a Predominantly White Institution (PWI) campus, it is safe to say that the college road for these specific kids is not easy at all.

Kinesiology is a big part of sports, especially considering some athletes deal with injuries worldwide. There is no accurate number of athletes from adolescence to adulthood with people who play all sports. They all move their bodies in a way that makes them perform their respective sport. This ties into the thesis by mentioning the diversity of athletes referred to and discussing the diversity within the kinesiology field. It is also safe to say that therapy plays a dramatic role when it comes to injured athletes and former athletes who deal with injuries up to this day, but also as well as regular people who have injuries as well. Physical and Occupational Therapy are two very effective ways of rehabilitation and recovery for those individuals who deal with joint pain and have specific injuries. Those therapies focus on the specific injuries and work on them to insure that they heal properly and feel better.

Kinesiology is the study of human body parts and movements at its core. The technical definition is “Kinesiology is a form of therapy that uses muscle monitoring (biofeedback) to look at imbalances that may be causing disease in the body”

("Kinesiology"). It aims to detect and correct stress, nutrition, or minor injury imbalances. It also addresses physiological, anatomical, biomechanical, pathological, and neuropsychological principles and mechanisms of movement, studying everything that moves within the human body. There are seven subdisciplines of Kinesiology, which are: 1) exercise physiology, 2) biomechanics, 3) sport psychology, 4) motor development, 5) motor control, 6) sport history, and 7) sport sociology ("KNES-Kinsesiology"). Overall, this field of study is the examination(s) of the human body and how it moves.

In this country, according to the U.S. Census Bureau¹, the percentage of black people is 13.6%. According to *CNN*, only 5.7% of physicians identify as African American (Howard). Also, there is essentially a norm with some old-school style black people who still believe that racism still exists. Either that and trust is a factor with African American patients having African American doctors as opposed to Caucasian doctors. According to the *STAT* website, studies have shown that when Black doctors treat Black patients, they are more satisfied with their health care, more likely to have received the preventive care they needed in the past year, and are more likely to agree to recommended preventive care such as blood tests and flu shots (McFarling). Essentially, there should be more colored doctors in the medical field as it can be inspirational and make an impact on many other colored people in this nation.

Diversity, equity, and inclusion are generally associated with racial and ethnic issues. However, society and individuals must acknowledge and understand that these concepts are much more complex. Other meaningful components of diversity, equity, and

¹ <https://www.census.gov/quickfacts/fact/table/US/PST045222>

inclusion (i.e., gender, gender identity, sexual orientation, socioeconomic status, language, culture or national origin, religious commitments, age, disability, and political perspective) must also be addressed. Because diversity has many components, the concept of inclusion has multiple definitions. For example, the *Ford Foundation* defines inclusion as building “a culture of belonging by actively inviting the contribution and participation of all people” (Pennington).

The lack of diversity regarding professional organization leadership has also been evident in women’s organizations. For example, out of the 27 National Association for Physical Education of College Women presidents, none have been African American. Dating back to the early 1900s, the American Academy of Kinesiology and Physical Education, one of the oldest professional organizations in the field, has also lacked diversity. Despite having over 500 individuals elected to the American Academy of Kinesiology and Physical Education since 1926, only two have been African American. Finally, the Society of Health and Physical Educators (SHAPE America, formerly the American Alliance for Health, Physical Education, Recreation, and Dance) has not been immune to a lack of racial and ethnic diversity in positions of leadership; out of the 48 presidents of SHAPE America, only four have been African American (Pennington).

Diversity is much needed not only in this country but in the world as well. Specific machines, institutions, programs, and many other beneficial things would only have been thought of or introduced publicly to African Americans. According to the *VOA News* website, it states:

From the three-light traffic signal, refrigerated trucks, automatic elevator doors,

color monitors for desktop computers, to the shape of the modern ironing board, the clothes wringer, blood banks, laser treatment for cataracts, home security systems and the super-soaker children's toy, many objects and services Americans use every day were invented by Black men and women (Mekouar).

With these inventions that benefit all humans, knowing this information opens eyes to people who may not have known this.

Elongating and elaborating on the previous section, it is believed that diversity in kinesiology is needed simply because it can benefit young people of color and old people of color. People looking up to these African American doctors can give them aspirations to become doctors/work in the medical field. Also, it can cause better relationships to build with those doctors. Also, as African American patients fare with African American doctors, it can establish a strong foundation of trust for them all. Diversity in Kinesiology can also establish networking opportunities and create relationships with people to help those struggling individuals looking to become something in the medical field.

Regarding the doctor-patient category, research shows that racial concordance can improve communication, trust, and adherence to medical advice. That has implications for healthcare providers. That illustrates one of the many subtle ways that the health care of Black patients might be affected by the race of their doctor. A growing body of research aims to understand better how and why patient and doctor races can influence care. Studies have shown correlations including reduced infant mortality, greater patient adherence to health care guidelines, higher patient satisfaction, and better understanding of cancer risks. One recent study found that the life expectancy of Black residents

increased in counties with greater percentages of Black primary care physicians (Boyle). Given this information and knowledge displayed, it is now known that racial concordance is key in medical circumstances.

Diversity is in our daily lives in all spaces. This means experiencing traditions, learning new skills, and having a broader and less selfish view of ourselves to build a more just society. This is the importance of diversity: providing the opportunity to strengthen our development as a society. Valuing diversity is what institutions and community members do to acknowledge the benefits of their differences and similarities. They intentionally work to build sustainable relationships among people and institutions with diverse membership (“Valuing Diversity Project”). Having a world full of different races and ethnicities is beneficial because we can learn many different things and gain much knowledge from races and cultures we are not accustomed to. Diversity is important because it can lead to better outcomes in various aspects of life, fostering creativity, innovation, empathy, and social cohesion. It also helps create a more just and inclusive society where everyone has an opportunity to succeed (Ricee).

Based on the research that I’ve looked at thus far, I feel as though the solution(s) that we need in this country is basically to take chances on this up and coming generation of African American doctors/workers in the medical field. Depending on who all wants to pursue that career, if you have the knowledge and the skills to accomplish the job, you should be able to, no matter what your skin color is. Although it may be harder for African Americans as a community to earn these types of occupations, people have to take into account the beneficial possibilities that African American medical field workers

can bring to the world. If you teach these upcoming students the same knowledge that was taught to previous students who have become successful, it can play out great for not only the new generation of doctors, but for the individuals in the world who suffer from something which is causing a detriment in their health.

In the final analysis of this paper, you now know why or have a better understanding of the importance of diversity itself, but also for the Kinesiology field, as well as other medical fields as well. It was stated clearly how opportunities can be introduced to African Americans and also how beneficial it is for the world to experience diversity in the society. Given these points, we can essentially infer that diversity itself can help humans become better individuals, internally and externally, and also we can infer that kinesiology deserves more recognition and a better flow of diversity. As adolescents grow into adulthood, it is essential to know the fundamental understanding of the importance of diversity as well as the opportunities that come along with it.

Works Cited

- “A Short History of Kinesiology.” *Wellness Kinesiology*, Wellness Kinesiology Institute, www.wellnesskinesiology.com/pages/a-short-history-of-kinesiology. Accessed 22 Mar. 2024.
- Aguilar, Alain Justin. “The Experiences of Black Kinesiology Undergraduate Students at a Predominantly White Institution.” *Faculty of The Graduate School at The University of North Carolina at Greensboro*, 2022, pp. 1-24
- Boyle, Patrick. “Do Black Patients Fare Better with Black Doctors?” *AAMC*, 6 June 2023, www.aamc.org/news/do-black-patients-fare-better-black-doctors.
- Culp, Brian. “Social Justice and the Future of Higher Education Kinesiology.” *Faculty Publications*, Aug. 2018, Kennesaw State University. Accessed 29 Sept 2023. pp. 5-26.
- Hodge, Samuel R. and Corbett, Doris R. “Diversity in Kinesiology: Theoretical and Contemporary Considerations.” *Kinesiology Review*, vol. 2, pp. 156-159. Accessed 20 September 2023.
- Howard, Jacqueline. “Only 5.7% of US Doctors Are Black, and Experts Warn the Shortage Harms Public Health.” *CNN*, Cable News Network, 21 Feb. 2023, www.cnn.com/2023/02/21/health/black-doctors-shortage-us/index.html#:~:text=Only%20about%205.7%25%20of%20physicians,Association%20of%20American%20Medical%20Colleges.
- Kern, Seymour. “The Golden Scapel.” *California Medicine*, vol. 92, no. 5, p. 393.
- “Kinesiology.” *Better Health Channel*, Department of Health & Human Services, 2 Oct. 2014, www.betterhealth.vic.gov.au/health/conditionsandtreatments/kinesiology.
- “KNES-Kinesiology .” *UMD Academic Catalog*, UMD, academiccatalog.umd.edu/

undergraduate/approved-courses/knes/knes.pdf.

McFarling, Usha Lee. “In Counties with More Black Doctors, Black People Live Longer, ‘astonishing’ Study Finds.” *STAT*, 25 July 2023, www.statnews.com/2023/04/14/black-doctors-primary-care-life-expectancy-mortality/#:~:text=Other%20studies%20have%20shown%20that,blood%20tests%20and%20flu%20shots.

Mekouar, Dora. “Everyday Things Created by Black Inventors.” *All About America*, VOA, 13 Mar. 2022, www.voanews.com/a/everyday-things-created-by-black-inventors/6480850.html .

Pennington, Colin G. “Diversity, equity, and inclusion in kinesiology departments.” *The Physical Educator*, vol. 80, no. 4, 25 July 2023, pp. 387–402, <https://doi.org/10.18666/tpe-2023-v80-i4-11403>.

Perrin, David H. “Reflections on a career spanning kinesiology and athletic training.” *Kinesiology Review*, vol. 10, no. 2, 1 May 2021, pp. 191–198, <https://doi.org/10.1123/kr.2020-0056>.

Ricee, Susanne. “Why Is Diversity Important?” *Diversity for Social Impact*, 8 Feb. 2023, diversity.social/why-is-diversity-important/#:~:text=Overall%2C%20diversity%20is%20important%20because,has%20an%20opportunity%20to%20succeed.

“The History of Kinesiology: AKA.” *Alberta Kinesiology Association*, www.albertakinesiology.ca/en/page-news-1/the-history-of-kinesiology/#:~:text=The%20earliest%20records%20of%20kinesiology,his%20studies%20of%20natural%20science. Accessed 22 Mar. 2024.

“Valuing Diversity Project.” *American Psychological Association*, American Psychological Association, 31 Oct. 2002, www.apa.org/pi/valuing-diversity/#:~:text=Valuing%20

diversity%20is%20what%20institutions,and%20institutions%20with%20diverse%20me
mbership.