

# Removing The Capes: The Truth About The lack Superwomen Syndrome

Jessica Partida and Taylesse Deans

WHITNEY  
RADER

ASD '15

This Photo by Unknown Author is licensed under [CC BY-NC-ND](#)

This Photo by Unknown Author is licensed under [CC BY-NC-ND](#)



## What To Expect:

- In this presentation you will see the findings from the experiment that took place surrounded by the topic, Removing The Capes: The Truth About The Black Superwomen Syndrome. In following slides you will see pie charts with data from surveys that fellow black women took. These 2 surveys where, the black superwomen syndrome and the psychological well-being survey. Both surveys where approved by medical professionals and a licensed psychologist. There where 6 participants in total. To maintain the participants privacy no names or information will be disclosed.



A Black woman with voluminous curly hair is sitting in a field of tall, green grass. She is wearing a bright yellow, sleeveless dress. Her right hand is raised to her head, and she is looking directly at the camera with a serious expression. The background is filled with tall grass and some green leaves. The overall lighting is soft, and the colors are vibrant.

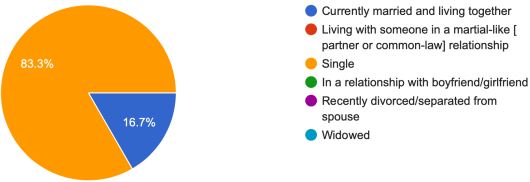
# The Black Superwomen Survey

# About The Survey

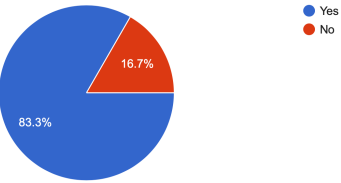
- This survey has 60 very details detailed questions about the life of a the black women. The questions range from income, to family, to education, and many more. We had 6 responses from black women ranges all ages and different walks for life. The data are as follows.

#1-6

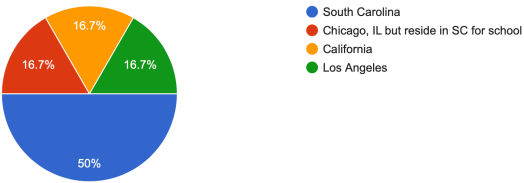
Which of the following best describes your current marital status?  
6 responses



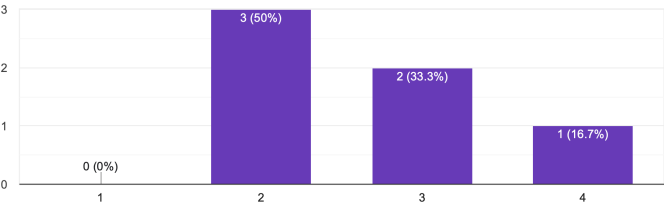
Were you born in the United States?  
6 responses



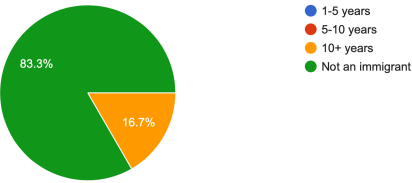
Please indicate where you currently live.  
6 responses



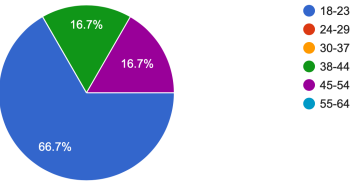
Describe the level of satisfaction and fulfillment in your life  
6 responses



If you are a landed immigrant how many years have you lived there?  
6 responses

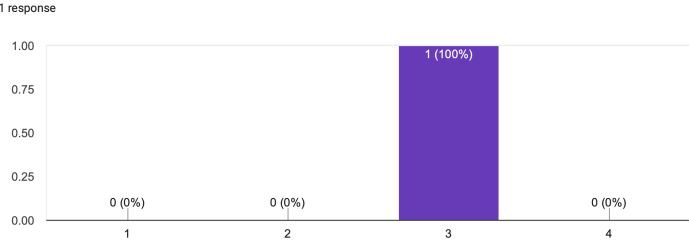


Please Select Your Age Group  
6 responses

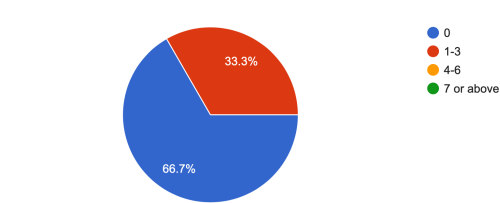


#7-12

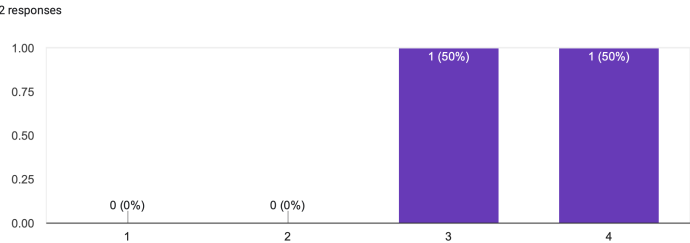
Do you find your role as a wife, partner/common-law fulfilling, satisfying or rewarding? If you are not a wife please move on the the next question.



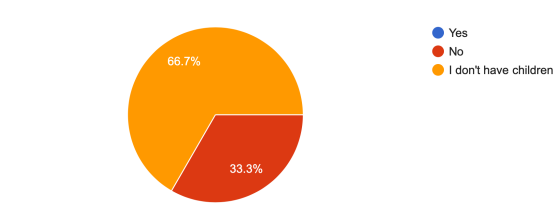
How many dependent children to you have?



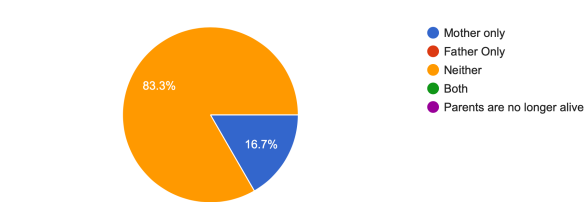
Do you find your role as a mother fulfilling, satisfying or rewarding? If you are not a mother please move on to the next question



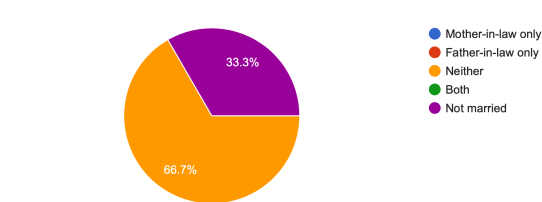
Do any of your children have special needs?



Are you a caregiver for your parents?



Are you a caregiver for you in-laws

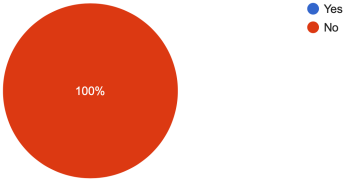




/

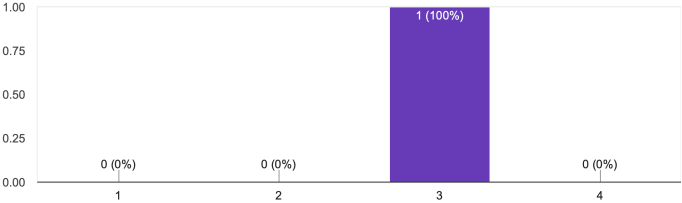
Not including your children, parents, or in-laws, are you a caregiver for anyone else?

6 responses



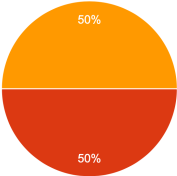
Do you find your role as a caregiver fulfilling, satisfying or rewarding? If you are not a caregiver please move on to the next question

1 response



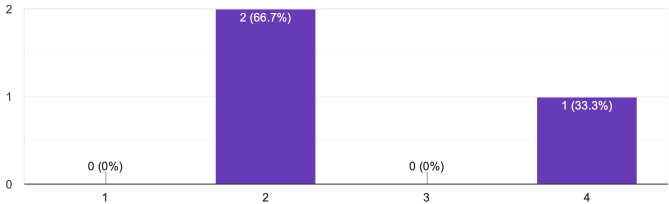
Do you attend any classes?

6 responses



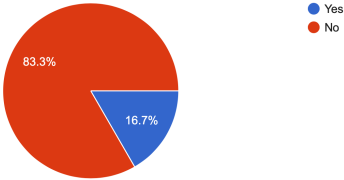
Do you find your role as a student fulfilling, satisfying or rewarding? If you are not a student please move on to the next question

3 responses



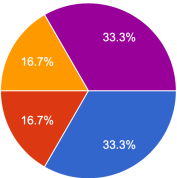
Do you belong to a sports team?

6 responses



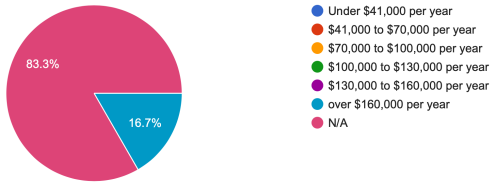
Please select your highest level of education completed.

6 responses



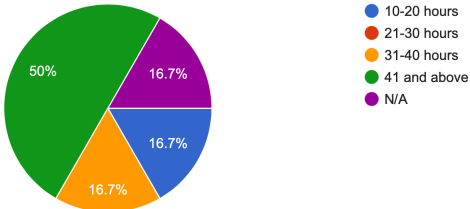
Please select your combined income (you and your partner/spouse). If you are not married please select N/A

6 responses



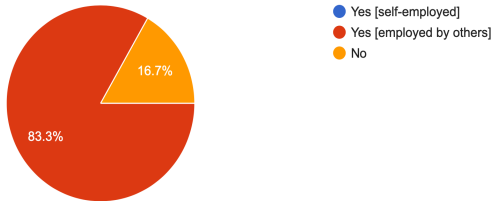
If yes to the question above, on average how many hours do you work per week?

6 responses



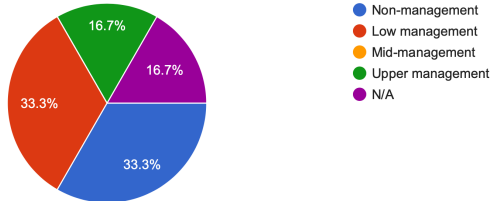
Are you currently employed either full or part-time?

6 responses



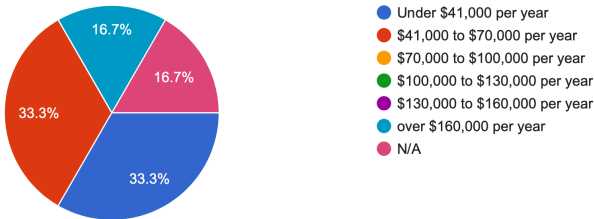
Please select the level of management that best describes your position at work. Select N/A if you are not employed.

6 responses



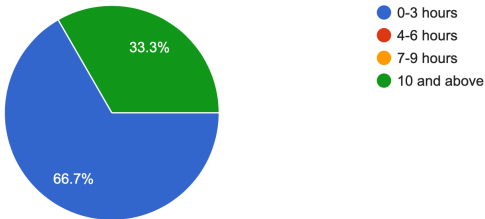
If yes, please select your income. If you do not earn an income please select N/A.

6 responses



During a typical workweek, how much time do you spend traveling to and from work?

6 responses

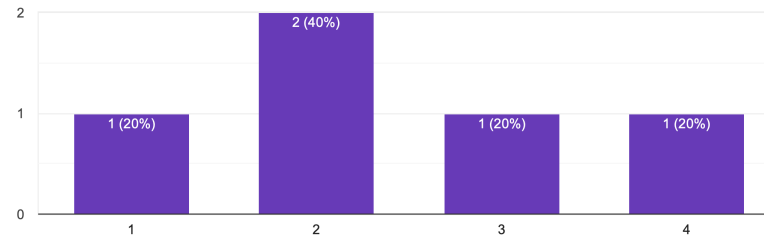




#25-30

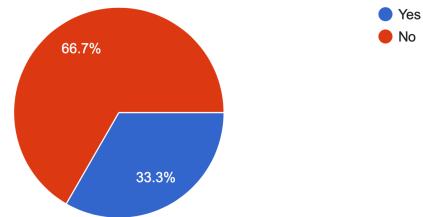
Do you find your role as a worker/employee fulfilling, satisfying or rewarding? If you are not working please move on to the next question.

5 responses



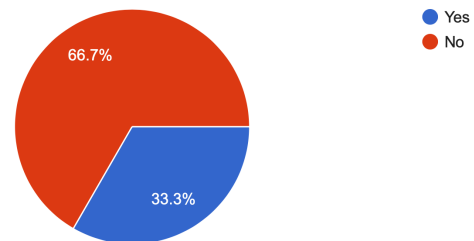
Do you travel out of town for business?

6 responses



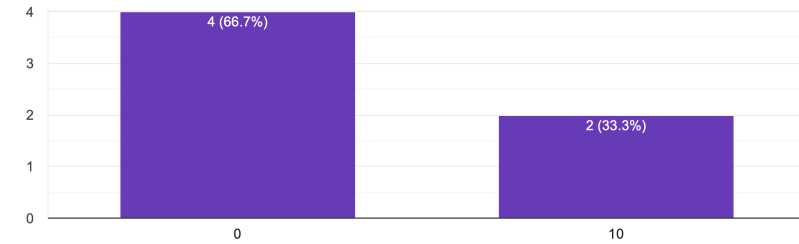
Are you currently involved in regular volunteer work?

6 responses



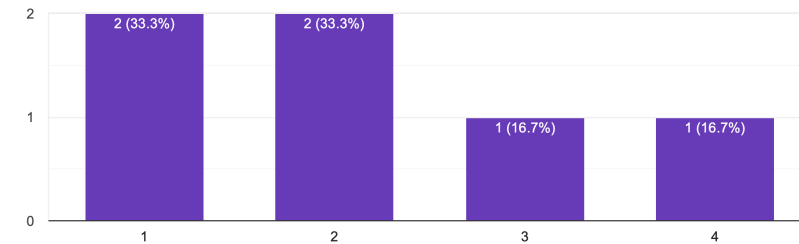
If yes, how many hours on average do you volunteer per month? (if you are not a volunteer enter a "0". Only enter the number of hours.

6 responses



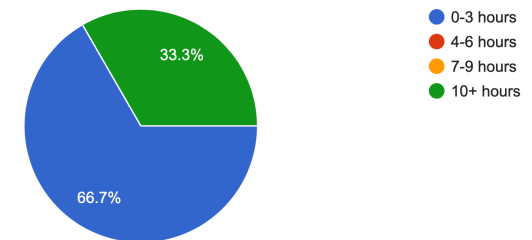
Do you find your role as a volunteer fulfilling, satisfying or rewarding?

6 responses



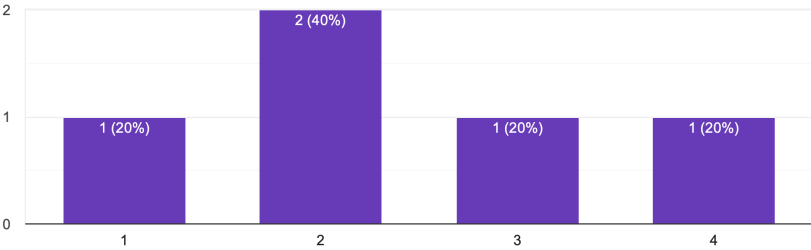
How many hours per week do you spend performing childcare and/or dependent care?

6 responses



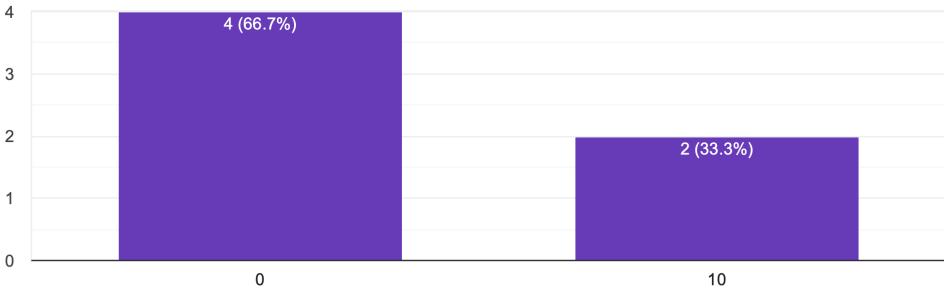
Do you find your role as a worker/employee fulfilling, satisfying or rewarding? If you are not working please move on to the next question.

5 responses



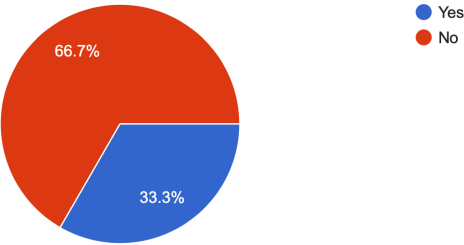
If yes, how many hours on average do you volunteer per month? (if you are not a volunteer enter a "0". Only enter the number of hours.

6 responses



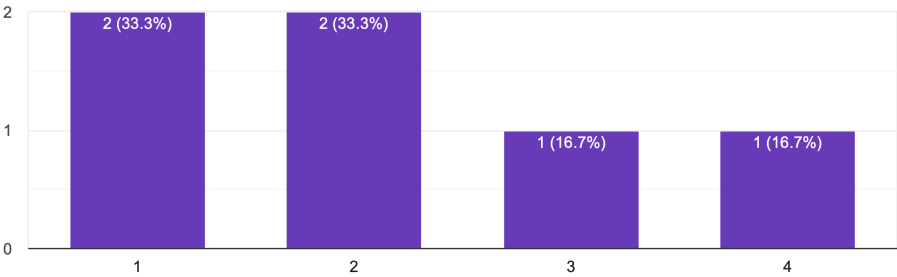
Do you travel out of town for business?

6 responses



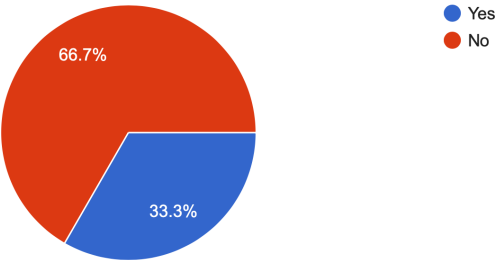
Do you find your role as a volunteer fulfilling, satisfying or rewarding?

6 responses



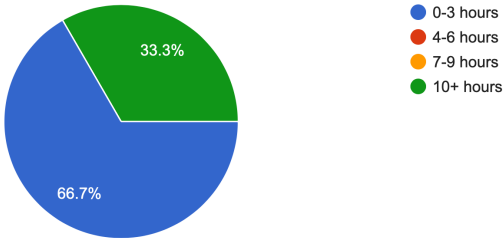
Are you currently involved in regular volunteer work?

6 responses



How many hours per week do you spend performing childcare and/or dependent care?

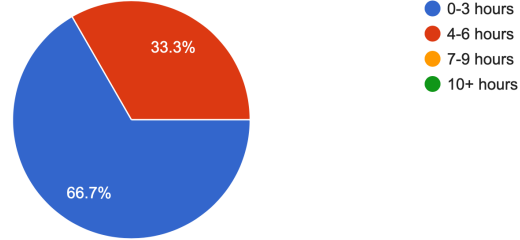
6 responses



#37-42

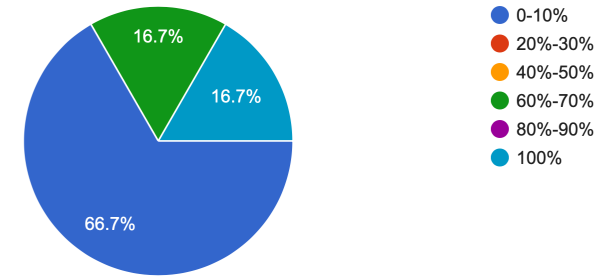
How many hours per week do you spend in food preparation (grocery shopping/cooking)?

6 responses



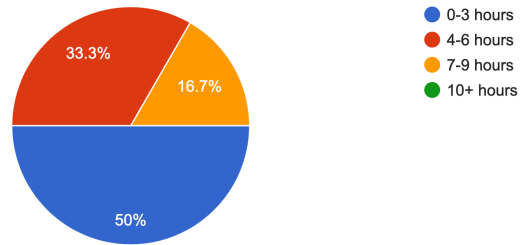
What percentage of childcare and/or dependent care are you responsible for?

6 responses



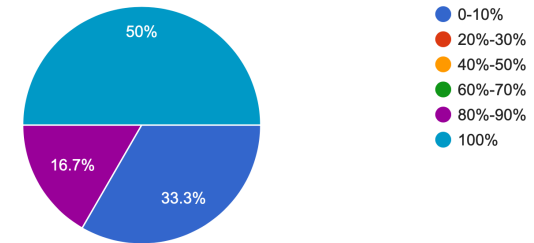
How many hours per week do spend cleaning your home?

6 responses



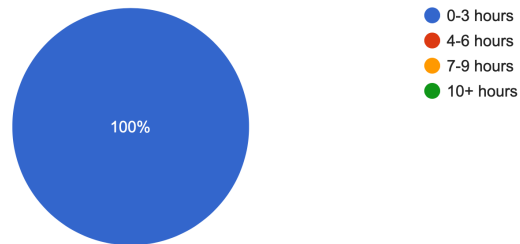
What percentage of food preparation (grocery shopping/cooking) are you responsible for?

6 responses



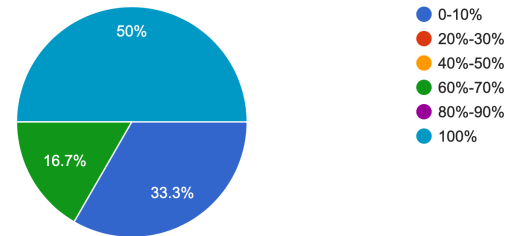
How many hours per week do you spend on extracurricular activities for children and/or dependents? (includes driving to and from activity locations).

6 responses



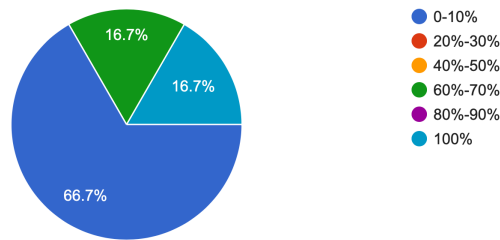
What percentage of cleaning your home are you responsible for?

6 responses



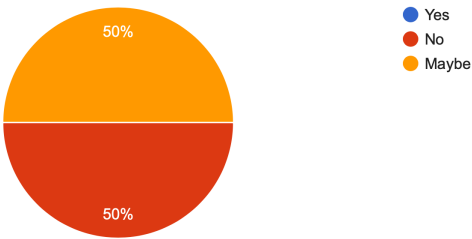
What percentage of extracurricular activities for children and/or dependents are you responsible for? (includes driving to and from activity locations)

6 responses



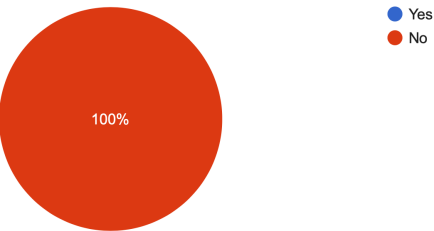
Do you find your role as a homemaker fulfilling, satisfying, or rewarding?

6 responses



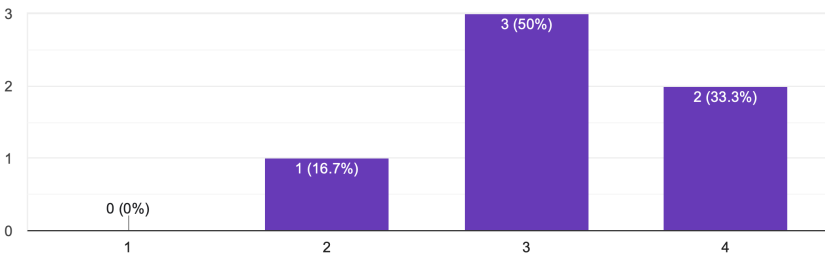
Do you have a nanny or inhome day care for your child/children?

6 responses



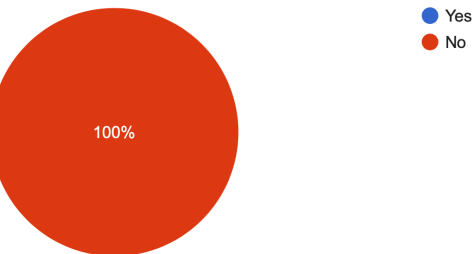
Please select what best describes your level of stress during an average week.

6 responses



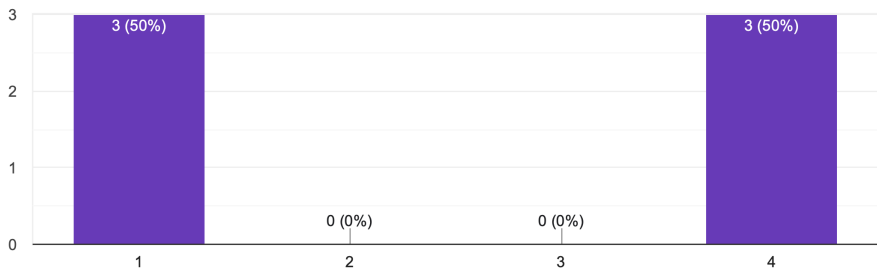
Do you have a maid or house cleaning service?

6 responses



Do you suffer from sleep insomnia? (problems sleeping)

6 responses

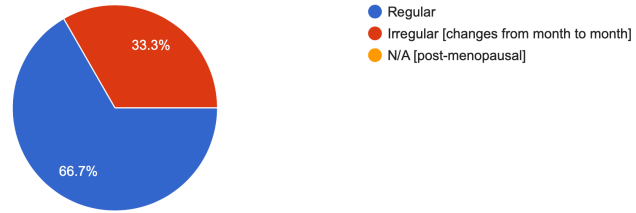




#49-54

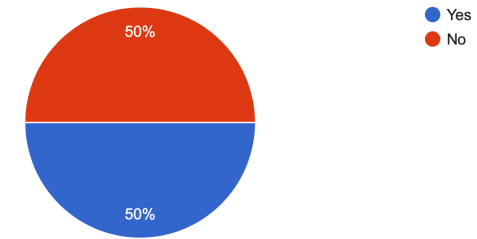
On average how many days is your menstrual cycle?

6 responses



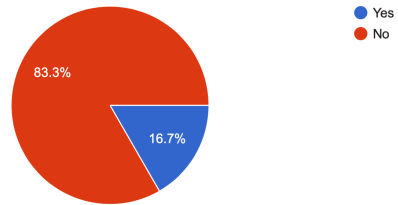
Do you exercise?

6 responses



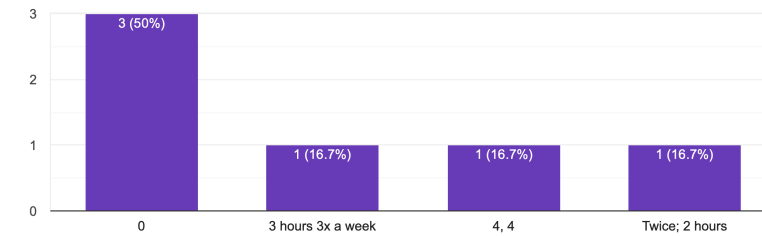
Have you been diagnosed by your doctor as being "perimenopausal" (transitioning from normal menstrual periods to none at all)?

6 responses



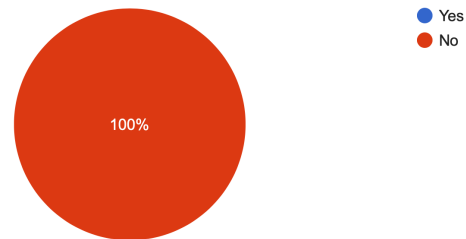
If yes, on average how many times per week do you exercise and for approximately how many hours? (if no please type a '0' )

6 responses



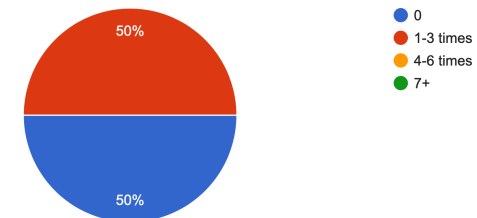
Do you take birth control pills?

6 responses

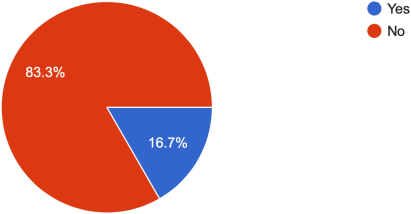


In the past 12 months, how many times have you visited a physician?

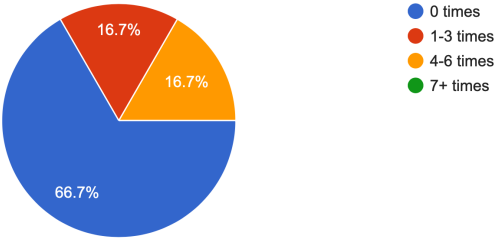
6 responses



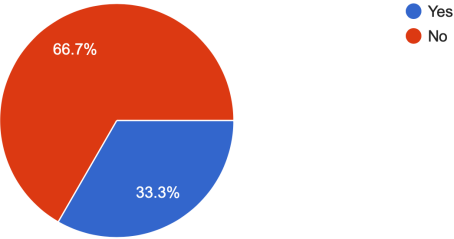
Have you had surgery or any other medical procedure within the past 60 days?  
6 responses



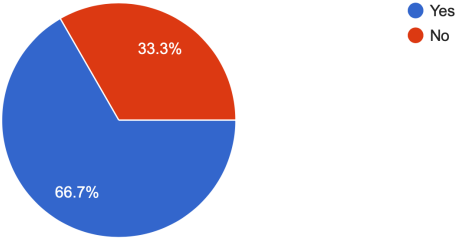
If yes, on average how many times per month? (If no, enter the number "0")  
6 responses



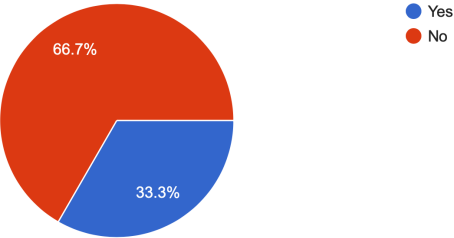
Have you ever been diagnosed with high blood pressure or hypertension?  
6 responses



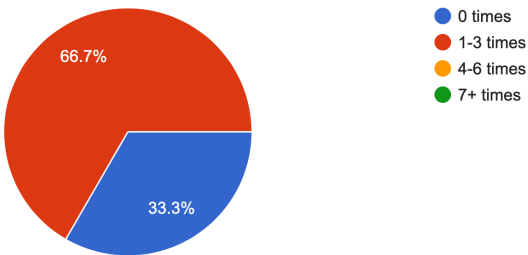
Do you usually have weekly leisure time for yourself?  
6 responses



Do you engage in sexual activity?  
6 responses



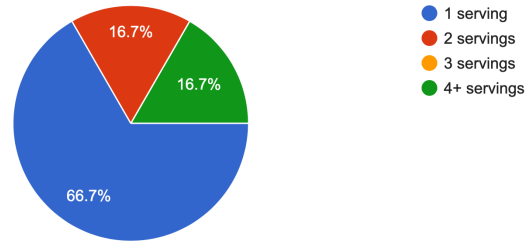
If yes, on average how many hours per week? (If no, enter the number "0")  
6 responses



#61-66

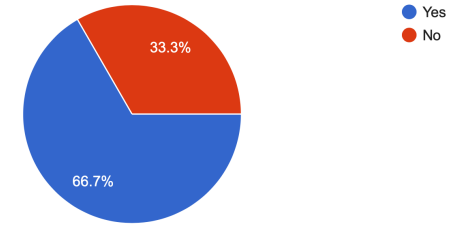
On average, how many servings of alcohol do you consume per week?

6 responses



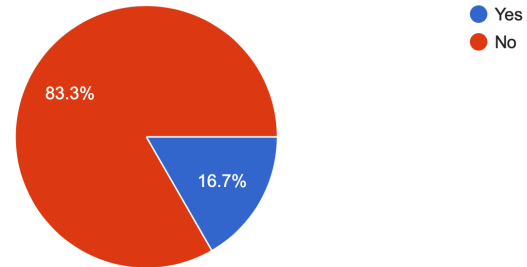
Have you ever allowed yourself to suffer either emotionally or physically because you were told to be strong by a relative or friend?

6 responses



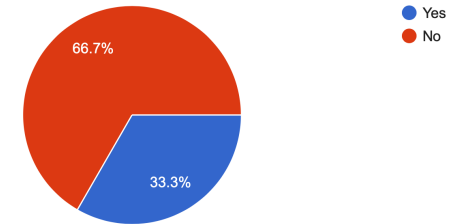
Do you smoke tobacco at least once per day?

6 responses



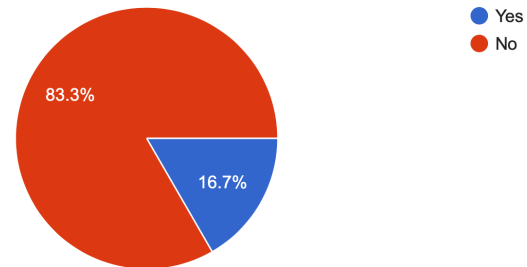
Do you feel protected?

6 responses



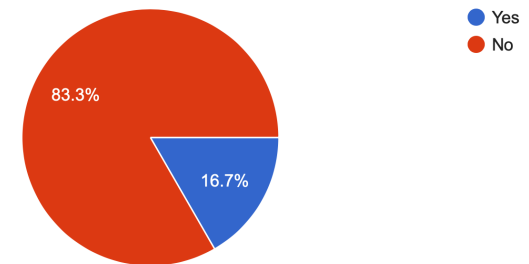
Have you ever lost a job or business opportunity based on your race?

6 responses



Do you feel you are valued in society compared to other women in a different race?

6 responses



A photograph of a therapy session. A therapist, wearing a white lab coat and blue jeans, is sitting on a light-colored couch. A client, wearing a white shirt, is lying on the couch with their face buried in their hands, suggesting distress or crying. The therapist is holding a tablet and a pen, looking towards the client. The background is a wooden wall.

# Psychological Well-Being



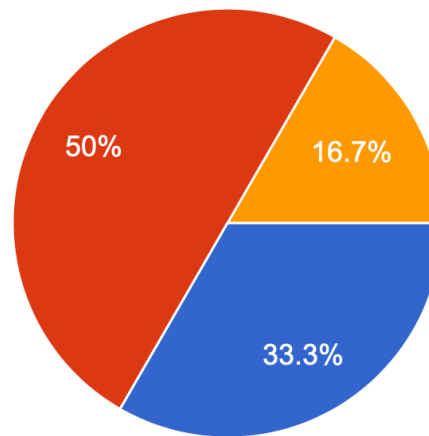
- This was a psychological well-being test that has been approved by a medical examiner. By completing the test, the researchers will be able to score and evaluate the participant's mental health. The psychological well-being questionnaire has 8 sections: self-image, independence, mood, relationships, daily activities, physical health, future, and psychological well-being. All sections have a statement where the participants observe their current feelings and then base how they feel on a scale from 1 to 4. The statements and data are as follows.

## About the Survey

#1

### Self Image Which scenario best fits how you currently view yourself

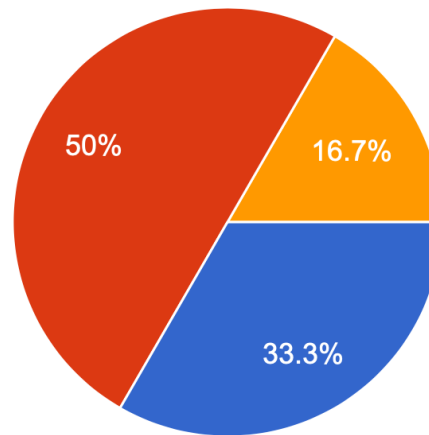
6 responses



- I think very positively about myself
- I think positively about myself
- I think negatively about myself
- I think very negatively about myself

## Independence Which scenario best fits how you currently view yourself

6 responses

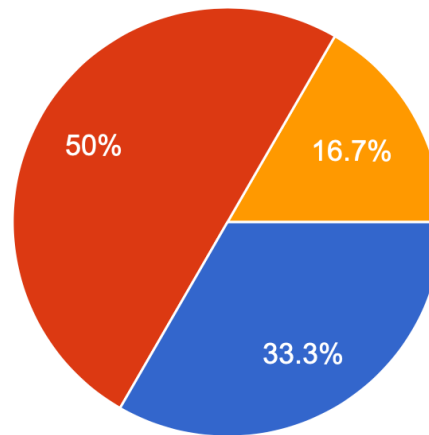


- I am very satisfied with my level of independence
- I am satisfied with my level of independence
- I am dissatisfied with my level of independence
- I am very dissatisfied with my level of independence

#3

### Mood Which scenario best fits how you currently view yourself

6 responses



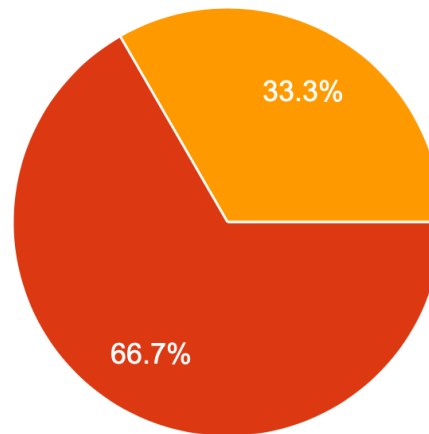
- I do not feel anxious, gloomy, or depressed
- I feel a little anxious, gloomy, or depressed
- I feel anxious, gloomy, or depressed
- I feel very anxious, gloomy, or depressed



#4

### Relationships Which scenario best fits how you currently view yourself

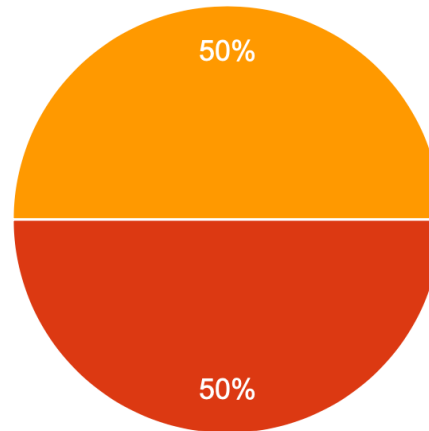
6 responses



- I am very satisfied with my relationships
- I am satisfied with my relationships
- I am dissatisfied with my relationships
- I am very dissatisfied with my relationships

Daily Activities (For example: work, study, household, leisure activities) Which scenario best fits how you currently view yourself

6 responses

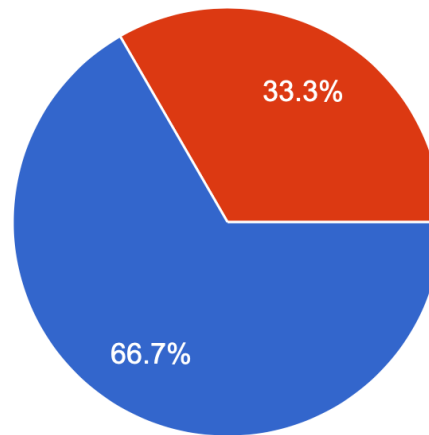


- I am very satisfied with my daily activities
- I am satisfied with my daily activities
- I am dissatisfied with my daily activities
- I am very dissatisfied with my daily activities

#6

### Physical Health Which scenario best fits how you currently view yourself

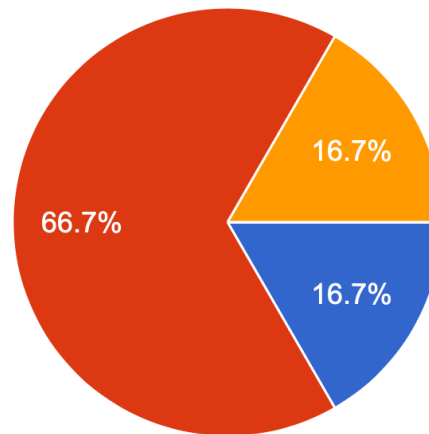
6 responses



- I have no physical health problems
- I have some physical health problems
- I have many physical health problems
- I have a great many physical health problems

### Future Which scenario best fits how you currently view yourself

6 responses



- I am very optimistic about my future
- I am optimistic about my future
- I am gloomy about my future
- I am very gloomy about my future



Psychological Well-Being On the scale below, please indicate how you rate your psychological well-being. 0 represents the worst imaginable psych...ts the best imaginable psychological well-being.

6 responses

