**Background**

Multiple studies have documented health and healthcare disparities between African Americans and whites in the United States. Many studies have traced these disparities to socioeconomic barriers such as age, race, income, and level of education. However, it has been found that when variables such as income, access, and insurance are controlled, it would not eliminate health and healthcare disparities all together. A growing body of literature suggests African Americans possess certain health beliefs and perceptions regarding the healthcare system which influences health and health seeking behaviors.

**Objectives**

1. Explore health seeking behavior among rural African American adults in rural eastern North Carolina
2. Investigate African Americans’ perceptions and health beliefs, and explore their influence on health seeking behavior.

**Methods**

20 Interviews were conducted with 20 African Americans in Halifax County and Northampton County. Thematic analysis was conducted.

**Results**

**OBJECTIVE 1:**

A cultural pattern of health seeking behavior among African Americans was identified (Figure 1).

- Illness Appears
- Individual Waits By Resting
- Self Treatment
- Navigate Health Care System

**OBJECTIVE 2:**

Thematic analysis revealed the African American participants in this study possess perceptions and beliefs (Table 1). However, its influence on health-seeking behavior varies.

<table>
<thead>
<tr>
<th>Perceptions of the Health Care System</th>
<th>Health Beliefs</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Doctor’s Have an Agenda”</td>
<td>“God Plays a Role in Healing”</td>
</tr>
<tr>
<td>“Unequal”</td>
<td>“Being Sick is a Mental Experience”</td>
</tr>
<tr>
<td>“Poor Quality”</td>
<td>“Discomfort is Part of the Healing”</td>
</tr>
</tbody>
</table>

**Discussion**

Preliminary findings from this study suggests that more research needs to be conducted on the health-seeking behavior of African Americans, as well as their perceptions and beliefs. Among the sample, 95% were insured. However, attending a doctor was considered a last resort. The data from this study also suggests that health-care disparities may be explained by factors beyond the widely documented in literature and often-cited barriers. Delays to seek care was noted; however, participants did not cite structural or financial barriers. Instead, perceptions and beliefs influenced decisions for majority.

**Limitations**

This was a small-scale study in two small counties located in rural eastern North Carolina. Therefore, it cannot be generalized to the entire African American community.

**References**


