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### Superwoman Schema: Fighting Back with Holistic Therapy

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# Superwoman Schema: Fighting Back with Holistic Therapy

by

Chavonne N. Good

A project submitted to the faculty of  
Gardner-Webb University Hunt School of Nursing  
in partial fulfillment of the requirements for the degree of  
Doctor of Nursing Practice

Boiling Springs, NC

2022

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Date

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Last, but certainly not least, I give thanks to God – Always, my strong tower and promise keeper. Thank you for the plans I know you *still* have in store for me. Jer. 29:11

### **Abstract**

For decades, Black women have upheld the stereotype of being consistently strong, capable, tenacious, and unwavering throughout life's many challenges. Unfortunately, while being resolute in their desire to succeed against all odds, many Black women have unknowingly embraced the characteristics of a phenomenon known as Superwoman Schema. Superwoman Schema consists of five characteristics that are not inherently negative. However, when Black women consistently embody these traits which include the determination to succeed and to be strong, and an obligation to help others; they may neglect their own self-care needs. Subsequently, while neglecting themselves, focusing on others, and continuously trying to strive and thrive, Black women may in turn develop stress and stress-related conditions. Mindfulness-based holistic therapies such as meditation, yoga, and deep breathing have been shown to decrease anxiety and stress while also improving certain stress-related conditions such as hypertension and obesity. This DNP project sought to bring awareness to Superwoman Schema and its negative stress effects. The project also served to introduce to Black women the practice of holistic therapies as a potential method to decrease their perceived stress levels as related to Superwoman Schema.

*Keywords:* Black women, holistic therapy, meditation, stress, Superwoman Schema

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### **Problem Recognition**

It is what it is. PUSH (Pray Until Something Happens). Never let them see you sweat. Keep on keeping on. All these sayings are commonly heard in the African American/Black community specifically among Black women who use these mantras to continue going about their daily lives in working, serving in multiple roles, and agreeing to additional responsibilities all the while taking care of their families and friends and anyone else but themselves. However, the ideation of the “strong Black woman” also carries positive concepts when one thinks of examples of this woman to include Harriet Tubman, Rosa Parks, and more recently Michelle Obama who have all persevered despite significant barriers. The strong Black woman has been known to be the matriarch and “backbone” of her family determined to succeed against all odds. However, negative implications of the strong Black woman concept have been identified and thus led to the discovery of the Black Superwoman Syndrome or Superwoman Schema (Woods-Giscombe, 2016).

The Superwoman Schema (SWS) consists of five distinct characteristics including an obligation to be strong, to suppress feelings and emotions, to deny vulnerability and dependency, to possess a determination to succeed, and an obligation to help others (Woods-Giscombe, 2016). While there is not anything inherently wrong with the above characteristics, it is the feeling of obligation to adhere to and sustain these traits which may lead to health alterations related to obesity, hypertension, cardiac disease, and psychological symptoms including stress and anxiety which Black women often suffer (Beauboeuf-Lafontant, 2010). Although African Americans are more likely to experience psychological distress, depressive symptoms, and comorbidities related to stress than

Caucasian Americans; fewer African Americans, and even fewer Black women, utilize some type of mental health service for treatment of stress (Bamford et al., 2020; Richards, 2021).

Although traditionally stress and stress-related conditions are primarily treated with pharmacological means, holistic therapy as an adjunct to pharmacological-based care is growing and has been recognized as an effective treatment modality as well (Kinchen & Loerzel, 2018). Pharmacological-based treatments for stress and anxiety can be costly, whereas holistic therapies are typically less expensive initially and often require no subsequent or ongoing costs to consumers.

Alternative therapies have been shown to decrease stress levels while improving mood and morale and can serve as a beneficial cost-effective treatment for stress and other stress-related conditions (Goldstein-Levitas, 2016). While environmental, work and familial factors can contribute to increased anxiety and stress in all persons, the additional pressures that Black women experience within the Superwoman Schema (SWS) can cause a greater impact on their stress levels and lead to subsequent poorer health outcomes (Woods-Giscombe, 2016). Due to the conflicting status of the “strong Black woman” ideation and whether it is a positive or negative trait, Black women are still potentially sacrificing peace of mind, mental health, and ultimately their physical health without some form of stress relief. Holistic therapy can prove to be a positive, cost-effective, and manageable form of treatment for stress and stress-related conditions.

### **Problem Statement**

Black women exhibiting the characteristics of Superwoman Schema are at risk for increased stress levels as well as increased stress-related conditions including obesity,

hypertension, and somatic symptoms (Barajas et al., 2019; Beauboeuf-Lafontant, 2010; Hall et al., 2018). Stress and stress-related conditions account for approximately 190 billion dollars in healthcare costs annually (Heckman, 2019).

### **Literature Review and Synthesis/Introduction**

The purpose of this literature review was to examine the current research as it pertains to Black women and stress, the identification of and effects related to the Superwoman Schema phenomenon, as well as research regarding utilizing holistic therapy to manage stress. The review also seeks answers to the PIO question: *Can Black women who may be experiencing Superwoman Schema benefit from utilizing holistic therapy to decrease stress levels?* This literature review was conducted via the Cumulative Index for Nursing and Allied Health Literature (CINAHL) using the keywords: Black women, stress, Superwoman schema, and holistic therapy. The literature review will also include subtopics related to the mental and physical effects of stress.

### **Black Women and Stress**

#### ***Mental Effects of Stress***

The term “strong Black woman” is a term used to describe African American women who appear to persist and thrive under pressure. (Jones & Shorter-Gooden, 2004. Even through years of oppression, disregard, and misconceptions, she has endured. Endured while caring for husbands, children, family members, friends, bosses, and coworkers in lieu of caring for herself. However, the cost for this strong Black woman holding it all together has been at the expense of both her mental and physical health. Black women prevailing under pressure at the risk of their health is not a new concept. Bell Hooks (2014) understood this threat as she stated, “It is not that Black women have

not been and are not strong; it is simply that this is only a part of our story, a dimension, just as the suffering is another dimension – one that has been most unnoticed and unattended to” (Hooks, p. 153, 2014). In their studies, Gamst et al. (2020) and Liao et al. (2019) linked stress resulting from the obligation Black women feel to persist, as well as other race-related stressors, to decreased mental health including anxiety, loneliness, depression, agoraphobia, and posttraumatic stress disorder. Lincoln (2017) and Uzogara (2017) also concluded that chronic stress and its association with depression was higher in Black women than in white women and was correlated with more psychological distress in Black women in general. Stress resulting from being strong Black women, in addition to its potential to elicit anxiety and depression, has also been linked to insomnia and poor sleep quality (McLaurin-Jones et al., 2020).

### ***Physical Effects of Stress***

In addition to adverse mental health outcomes, Black women are also at risk for poor physical health outcomes related to stress (Szymanski & Lewis, 2015). In their studies, Barajas et al. (2019), Liao et al. (2019), and Ross et al. (2018) all correlate higher risks for Black women developing cardiovascular disease due to chronic stress. Rosenthal and Lobel (2018) echo the sentiment in their study which finds Black women to be disproportionately affected by cardiovascular disease. In addition to heart disease, the authors Barajas et al. (2019) and Ross et al. (2018) also found stress to be a mediator of obesity, while Hall et al. (2018) concluded that stress indeed increased the risk for both obesity and heart disease.

### **Superwoman Schema**

The strong Black woman ideation does not carry in its entirety a negative connotation. It is a concept adopted and accepted by Black women over the years to cope, portray strength, and preserve the Black family dynamic and culture (Abrams et al., 2019). Eventually dubbed Superwoman Schema, this model consists of five distinct characteristics to include: an obligation to be strong, to suppress feelings and emotions, to deny vulnerability and dependency, to possess a determination to succeed, and an obligation to help others (Woods-Giscombe, 2016). Superwoman Schema although highly integrated in Black women and experienced as a sense of pride in some, has been studied as a precursor to stress and stress-related conditions such as obesity, heart disease, and depression (Adkins-Jackson et al., 2019; Beauboeuf-Lafontant, 2010; Gamst et al., 2020).

### **Holistic Therapy as Stress Relief**

Holistic therapy has been well researched as a potential adjunct treatment option for stress and anxiety and can be used as a low-cost adjunctive to pharmaceutical medications otherwise known as treatments as usual (TAUs) (Bamber & Morpeth, 2018). Additionally, holistic therapies, specifically meditation has been shown to be a successful mindfulness-based stress reduction therapy (MBSR). Meditation has been shown to decrease stress and anxiety by assisting participants in achieving mental clearing and clarity while helping them to focus and improve psychological well-being (Bamber & Morpeth, 2018; Lacaille et al., 2017).

In her 2017 study, Hazlett-Stevens researched 30 participants seeking psychological services who attended multiple mindfulness-based stress reduction therapy

sessions over a 2-year period. At the culmination of the therapies, all participants reported significant improvements related to their stress, anxiety, worry, and depression (Hazlett-Stevens, 2017). Hilton et al. (2017) reported statistically significant findings of decreased depressive symptoms in their systematic review and meta-analysis study of individuals suffering from posttraumatic stress disorder (PTSD) who underwent mindfulness-based stress reduction therapies. Several studies on the individual practice of regular meditation support participants' feelings of increased focus, self-awareness, emotional regulation, and more mindful responses to stressors (Lacaille et al., 2017; Nardi et al., 2020; Schnaider-Levi et al., 2017).

Lacaille et al. (2017) studied 117 participants who documented their meditation practices and outcomes in daily diaries. The authors found that consistent meditation practices over a longer period increased the participants' ability to react to daily events and stressors more mindfully. Schnaider-Levi et al. (2017) reported similar long-term results of mindfulness meditation in their qualitative study on teacher burnout. The authors (Schnaider-Levi et al., 2017) used inquiry-based stress reduction meditation techniques in which the teachers identified thoughts that caused them stress and subsequently used introspection meditation to question and examine whether their thoughts were true interpretations. In results similar to the Lacaille et al. (2017) study, after 12 weeks the teachers reported improved levels of self-awareness, focus, and increased ability to accept the realities of their day-to-day (Schnaider-Levi et al., 2017).

Nardi et al. (2020), studied the effects of mindfulness-based stress reduction on cardiovascular health, specifically blood pressure while Raja-Khan et al. (2017) investigated MBSR on fasting glucose levels in obese women; and both studies

concluded that mindfulness-based stress reduction therapy such as meditation increased mindfulness and decreased perceived stress. Additionally, in the 2017 study by Raja-Khan et al., fasting glucose also significantly decreased after 8 and 16 weeks of the intervention, and Nardi et al. (2020) concluded their participants exhibited improved cardiovascular health behaviors such as increased physical activity and dietary choices which correlate with blood pressure reduction habits.

Holistic therapies and mindfulness-based approaches like meditation have been shown to decrease stress, anxiety, and depression (Bamber & Morpeth, 2018; Lacaille et al., 2017). Additionally, MBSR research has also demonstrated an increase in individual focus, self-awareness, and more mindful reactions to daily stressors which can be linked to decreased somatic symptoms such as blood glucose and blood pressure levels (Nardi et al., 2020; Raja-Kahn et al., 2017). By utilizing mindfulness meditation as a form of holistic therapy, it may be possible to decrease the mental and perhaps even physical effects of stress related to Superwoman Schema.

### **Needs Assessment**

#### **Target Population/Community**

The target population will include Black women residing in Upstate South Carolina who could potentially embody the characteristics of Superwoman Schema. The guiding PICOT question for the project is:

- Is there a difference in the stress levels of black women experiencing Superwoman Schema characteristics after receiving a 45-minute holistic therapy session?

## Sponsors and Team Selection

Sponsors and project team will include the Doctor of Nursing Practice (DNP) project chair; a project partner who is a doctoral-prepared registered nurse, holistic practitioner, and wellness coach, and three project committee members including the director of a local health department, a consulting psychologist specializing in posttraumatic stress disorder, and a doctoral prepared registered nurse/healing touch practitioner. Additional members of the team will include two participant recruitment champions with much enthusiasm for the project.

## Organizational Assessment

**Table 1**

### *Organizational Assessment*

Marketing Assessment	Workforce Assessment
<ul style="list-style-type: none"> <li>• Assess availability to promote and recruit study participants via social media and word-of-mouth</li> <li>• Assess availability to promote/recruit in local health departments, churches, and schools</li> <li>• Consider local places frequented by target population to include beauty salons</li> </ul>	<ul style="list-style-type: none"> <li>• Need to ensure involvement from holistic expert</li> <li>• Consider utilization of volunteers from local sororities to assist in focus group facilitation</li> <li>• Recruitment champions to assist with marketing, promotion, and recruitment</li> <li>• Psychologist to offer expert opinion/advice on stress disorders</li> <li>• Consider membership or securing holistic certification</li> </ul>



## SWOT Analysis

**Table 2**

*SWOT Analysis*

Superwoman Schema Project SWOT Analysis	
<p><b>Strengths</b></p> <ul style="list-style-type: none"> <li>• Sufficient data and research available to support the need for projects related to Black women, stress, and health disparities</li> <li>• Potential for large population sample related to timeliness and interest of project topic</li> <li>• Low need for an abundance of resources to complete the project</li> </ul>	<p><b>Weaknesses</b></p> <ul style="list-style-type: none"> <li>• Loss of anticipated and main holistic project partner due to death</li> <li>• Potential feelings of stigma and reluctance of population sample to admit weakness and accept help</li> <li>• Need for multiple small focus groups may prolong the study and potentially decrease sample size</li> <li>• Potential project sites as churches may deter potential study participants.</li> </ul>
<p><b>Opportunities</b></p> <ul style="list-style-type: none"> <li>• Availability of actual certified holistic nurse completing intervention for participants</li> <li>• Secure alternate site for focus groups unrelated to church/religion</li> <li>• Availability of resources from the local health department</li> </ul>	<p><b>Threats</b></p> <ul style="list-style-type: none"> <li>• Difficulty in securing holistic health partnership</li> <li>• Covid pandemic and reluctance of participants to meet in face-to-face focus groups</li> <li>• Time constraints; not allowing for multiple focus groups</li> </ul>

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### Superwoman Schema Project SWOT Analysis

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- Wide reach of recruitment champions with enthusiasm for project
  - Participant hardship – transportation, childcare
- 

#### **Available Resources**

Available resources for the project include two predominantly Black churches identified as potential locations for the project's focus groups, as well as resources from a local health department to include printed patient education and potential staff involvement.

#### **Desired and Expected Outcomes**

##### ***Project Goal***

The goal of the project was to provide an educational session to Black women and bring awareness to Superwoman Schema (SWS) while also introducing holistic interventions including meditation, yoga, and deep breathing to aid in stress reduction and improving the mental and physical health outcomes of this at-risk population.

##### ***Project Outcome***

The intended outcome of the project was to decrease stress levels and improve the mental and physical health of Black women.

##### ***Objectives***

Objectives for the project:

- Bring awareness to Superwoman Schema and its stress effects through an educational session.
- Assist Black women in identifying self-perceived stress levels through the use of the Perceived Stress Scale.

- Utilize holistic interventions such as meditation, yoga, and deep breathing to decrease stress levels.

### **Cost/Benefit Analysis**

The cost of healthcare related to stress and stress-related conditions such as heart disease, stroke related to hypertension, and obesity are astronomical. In the state of South Carolina, African Americans have a higher risk of developing heart disease and strokes and have higher rates of obesity than Caucasians (South Carolina Department of Health and Environmental Control [SCDHEC], 2018). Additionally, conditions related to heart disease accounted for 15,419 hospitalizations for African Americans in South Carolina with an associated hospitalization cost of more than 884 million dollars (SCDHEC, 2018). Whereas, nationally, stress and stress-related conditions account for approximately 190 billion dollars in healthcare costs annually (Heckman, 2019).

Potential costs for the project include funds for service fees of holistic practice partners, the printing of educational materials for study participants, fees and/or donations to the practice location site for a focus group, as well as food and door prizes for participants. The estimated budgeted cost of project funds is \$1,000 which is significantly minimal compared to the enormous cost of treating stress and stress-related conditions in the state of the project study.

### **Scope of Project**

This project intends to study the effects of holistic therapy and its potential to reduce stress and improve the mental and physical health outcomes of Black women who may personify the characteristics of Superwoman Schema. This project seeks to study Black women in Upstate South Carolina who after an introduction to the phenomenon of

Superwoman Schema (SWS) may recognize themselves and identify with the five characteristics of SWS. These five characteristics include an obligation to be strong, to suppress feelings and emotions, to deny vulnerability and dependency, to possess a determination to succeed, and an obligation to help others (Woods-Giscombe, 2016), and have been associated with many health alterations to include obesity, hypertension, cardiovascular disease, stress, and anxiety (Beauboeuf-Lafontant, 2010).

Participants in the study will be asked to complete a self-perceived stress assessment prior to taking part in three holistic therapy interventions including prayer meditation, yoga movement meditation, and quiet calm through deep breathing exercises. After completing the holistic therapies, the participants will again be asked to complete the self-perceived stress assessment post-intervention.

Research participants will be recruited through social media event postings to obtain registration for the voluntary study session. Participants will also be asked to provide email contact information if preferred for subsequent follow-up of continued holistic techniques learned during the event.

### **Goals, Objectives, and Mission Statement**

#### **Project Goal**

The goal of this project was to provide an educational session to bring awareness to the negative effects of Superwoman Schema (SWS) while also introducing holistic interventions including meditation, yoga, and deep breathing to aid in stress reduction and improving the mental and physical health outcomes in Black women.

### **Define Process/Outcome Objectives**

The intended outcome of this project was to assist Black women in the utilization of holistic therapies to decrease stress levels and improve their mental and physical health.

Objectives Include:

1. Bring awareness to and recognition of Superwoman Schema to Black women in Upstate South Carolina so they may be able to recognize and combat the negative effects related to this pattern of characteristics.
  - Provide a 15-minute educational session on the five characteristics of Superwoman Schema and the negative effects associated with this condition.
  - Have the participants complete a Superwoman Schema knowledge assessment prior to the education session.
  - Have the participants complete a Superwoman Schema knowledge assessment after the education session.
2. Introduce three holistic interventions: meditation, yoga, and deep breathing to Black women in Upstate South Carolina (the project participants) to aid in stress reduction and improving their mental and physical health outcomes.
  - Provide a 45-minute holistic session led by a certified wellness coach to instruct the project participants throughout 5-minutes of prayer mediation/intention setting, 30-minutes of yoga and mindful movements, and 10-minutes of deep breathing and quiet calming.

3. Assist Black women who believe they may embody the characteristics of Superwoman Schema in identifying their self-perceived stress levels through pre- and post-intervention survey questionnaires.
  - Provide the participants with the Perceived Stress Scale (Cohen et al., 1983) to complete prior to the education and holistic sessions.
  - Provide the participants with the Perceived Stress Scale survey to complete after the education and holistic sessions.
  - Follow-up with the participants 2 weeks after the education and holistic sessions via email to ascertain if the participants have continued to utilize and /or incorporate any of the learned interventions in their day-to-day lives. Participants will also be asked to complete the Perceived Stress Scale once more.

### **Mission Statement**

The mission of this project was to decrease stress levels and improve mental and physical health outcomes in Black women thereby decreasing health disparities in this population through their recognition of certain stress precursors related to Superwoman Schema and the utilization of holistic interventions.

### **Theoretical Underpinnings**

#### **Orem's Self-Care Nursing Theory**

Dorothea Orem defines self-care as the “practice of activities that individuals initiate and perform on their own behalf in maintaining life, health, and well-being” (Hagran & Fakharany, 2015, p. 12). Orem's Self-care Nursing Theory has been used to guide many facets of patient care and nursing practice over several decades since its

inception in 1971 (Hartweg, 1991). Also often referred to as Orem's Self-care Deficit Nursing Theory, the basis of this theory is that individuals who can participate in their own self-care are more apt to not only recover more quickly from sickness but are also better able to prevent illness (Whelan, 1984). There are six major assumptions of the theory: (1) people should be self-reliant and responsible for their own self-care, (2) people are distinct individuals, (3) nursing is a form of action and is an interaction between two or more people, (4) an important component of primary care prevention and ill health is for an individual to successfully meet their universal and developmental self-care requisites, (5) a person's knowledge of potential health problems is needed for self-care behaviors, and (6) self-care and dependent care are learned behaviors within a social-cultural context (Hartweg, 1991).

### **Self-Care, Self-Care Deficit, and Nursing Systems**

Orem's grand theory is a combination of the three theoretical concepts of self-care, self-care deficit, and nursing systems (Younas, 2017; Whelan, 1984). These ideas are interrelated whereas each concept's components or lack thereof necessitates the components of the next idea. Essentially, if a person lacks the ability or knowledge to accomplish their own self-care, a self-care deficit ensues, which in turn necessitates the need for nursing care. Alternatively, during acute or chronic illness in which a new self-care deficit occurs, the need for nursing care arises to assist the individual in returning to health and wellness by engaging in self-care.

### ***Self-Care***

A person's self-care includes various activities performed independently to meet and maintain their health and well-being. A necessary concept of self-care is a self-care

agency which is an individual's ability to perform their own self-care activities. These activities, also known as self-care requisites, include actions such as activities of daily living, getting adequate nutrition, rest, social interaction, as well as refraining from activities that could potentially lead to injury and illness (Hagran & Fakharany, 2015).

### *Self-Care Deficit*

A self-care deficit occurs when a person is unable to meet their therapeutic self-care demands, those activities needed to maintain health and wellness. When an individual is incapable of independently completing self-care due to limitations caused by their chronic or acute conditions, limiting actions, or their lack of knowledge a self-care deficit occurs thus necessitating a need for nursing care (Hagran & Fakharany, 2015)

### *Nursing Systems*

The need for nursing intervention occurs when a self-care deficit is evident. Subsequently, nursing systems are developed to meet the individual's self-care needs or requisites. The nurse engages the nursing processes to determine the best way to manage the patient's needs. Nursing systems can be: (1) fully compensatory whereas the nurse provides total care for the patient, (2) partial compensatory whereas the nurse and patient collaborate to meet their self-care requisites, and (3) supportive educative whereas the nurse assists the individual by using support, encouragement, and overall knowledge to assist the person in meeting or maintaining their own self-care needs (Orem, 1995).

### **Black Superwoman Schema and Orem's Self-Care Nursing Theory**

The five characteristics of the Black Superwoman Schema: an obligation to be strong, to suppress feelings and emotions, to deny vulnerability and dependency, to possess a determination to succeed, and an obligation to help others, all at first glance



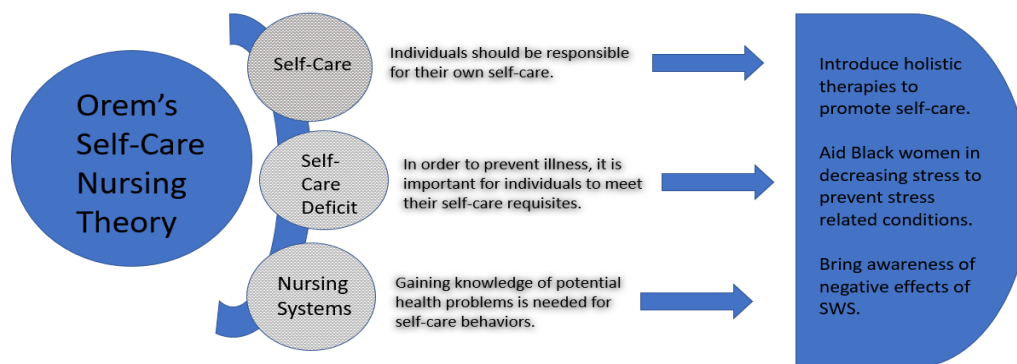
appear to be positive traits (Woods-Giscombe, 2016). However, as these traits manifest in some Black women, instead of signifying strength and tenacity, these characteristics can be self-destructive. When Black women internalize the characteristics of Superwoman Schema (SWS) and become so focused on proving themselves worthy and demonstrating persistence, they can lose focus on the need for self-care. Instead of admitting exhaustion, weakness, vulnerability, and the need for assistance, Black women exhibiting the characteristics of Superwoman Schema continue to give until they inevitably empty themselves of their own resources and expose themselves to stress and unwellness (Woods-Giscombe, 2016).

The desire to adhere to and sustain against all odds the characteristics of SWS has been linked to multiple health alterations in Black women to include stress and stress-related conditions (Beauboeuf-Lafontant, 2010; Woods-Giscombe, 2016). However, research has shown holistic therapies such as yoga, meditation, and deep breathing to be effective adjunctive therapies to common pharmacological treatments for these disorders (Bamber & Morpeth, 2018; Lacaille et al., 2017). As Black Superwoman Schema and the negative effects therein can be linked to a lack of self-care, it is imperative to stress the importance of self-care habits to Black women suffering from this pattern.

Three assumptions from Orem's Self-Care Nursing Theory stipulate that to prevent illness, it is important for an individual to successfully meet their self-care requisites, an individual's knowledge of potential health problems is necessary for self-care behaviors, and ultimately people should be responsible for their own self-care (Hartweg, 1991). However, when Black women knowingly or unknowingly assume the characteristics of Superwoman Schema, they may become unable to meet their self-care

demands and thus develop self-care deficits. When Black women experience self-care deficits related to Superwoman Schema, nursing interventions may become necessary to assist them in maintaining self-care. According to Orem's Self-Care Nursing Theory, ways nursing may assist in optimizing an individual's self-care demands are through guiding, teaching, and supporting them in a return to self-care (Hagran & Fakharany, 2015).

The goal of this project was to provide an educational session to bring awareness to the negative effects of Superwoman Schema while also introducing holistic interventions including yoga, meditation, and deep breathing to aid in stress reduction and improve the mental and physical health outcomes of Black women. Orem's Self-Care Nursing Theory is an applicable theory for this project as it seeks to decrease the limitations of self-care deficits associated with a lack of appropriate actions and knowledge related to Superwoman Schema. This project also strives to meet three of the theoretical assumptions by (1) bringing awareness of Superwoman Schema to Black women and thereby increasing their knowledge of the potential health problems related, (2) assisting Black women in preventing stress-related illness by helping them to meet their self-care demands, and (3) using supportive/educative nursing systems to help Black women be self-reliant and responsible for their own self-care through holistic stress-relieving therapies such as yoga, meditation, and deep breathing.

**Figure 1***Orem's Self-Care Nursing Theory C-T-E Diagram***Work Planning****Gantt Chart – Project Management Tool**

This Doctor of Nursing Practice (DNP) project utilizes a Gantt chart as the preferred project management tool. This DNP project is designed to be completed within four sequential semesters beginning in Summer 2021 with an anticipated culmination date of Summer 2022. The DNP project consists of nine total steps including Internal Review Board (IRB) application and approval submitted after step six (Zaccagnini & Pechacek, 2019). The *C. Good DNP Project Planner* in Table 3 outlines the nine project steps, the anticipated start and end dates of each step, as well as the actual beginning and end dates for each step. A legend describing the color-coding is also noted on the planner. The highlighted period on the planner coincides with the ninth and final step on July 21, 2022, the Gardner-Webb Hunt School of Nursing Scholars' Day during which oral dissemination of the project will be completed.

## DNP Project Timeline

The project timeline is an overview outlining the development and anticipated project dates.

**Table 3**

*Project Timeline*

Task	Date
DNP Project Step 1 – Problem Recognition	
• Identify Topic	June 2021 – July 2021
• Define Problem Statement	June 2021 – July 2021
• Literature Review	June 2021 – July 2021
DNP Project Step 2 – Needs Assessment	
• Identify target population: PICOT	June 2021 – January 2022
• Identify sponsors and stakeholders	June 2021 – January 2022
• Assess available resources	June 2021 – January 2022
• Determine desired and expected outcomes	October 2021 – January 2022
• Team selection	January 2022
• Cost / Benefit Analysis	January 2022
• Define the scope of the problem	January 2022
• Extensive Literature Review: Complete Literature Matrix	October 2021 – January 2022

Task	Date
DNP Project Step 3 – Goals, Objectives, and Mission	
Statement	
• Define project goals	February 2022
• Define process / outcome objectives (SMART)	February 2022
• Develop mission statement	February 2022
DNP Project Step 4 – Theoretical Underpinnings	
• Literature Review	February / March 2022
• Incorporation of Orem’s Self-Care Theory of Nursing	February / March 2022
DNP Project Step 5 – Work Planning	
• Construct project management tool – Gantt	March 2022
• Budget	March 2022 – April 2022
DNP Project Step 6 – Planning for Evaluation	
• Evaluation plan for project	April 2022
• Seek IRB Approval	April 2022
• Construct IRB	April 2022
• Hunt School of Nursing Approval	April 2022
• Gardner-Webb University Approval	April 2022
DNP Project Step 7 – Implementation	
• Address threats and barriers	May 2022
• Monitor implementation	May 2022

Task	Date
<ul style="list-style-type: none"> <li>Closure</li> </ul>	May 2022
DNP Project Step 8 – Interpretation of Data	
<ul style="list-style-type: none"> <li>Qualitative &amp; Quantitative Data Analysis</li> </ul>	May – June 2022
<ul style="list-style-type: none"> <li>Process Improvement</li> </ul>	May – June 2022
DNP Project Step 9 – Utilization and Reporting of Results	
<ul style="list-style-type: none"> <li>Written Dissemination</li> </ul>	May – June 2022
<ul style="list-style-type: none"> <li>Oral Dissemination HSON Scholars' Day</li> </ul>	July 21, 2022

### **Budget**

This Doctor of Nursing Practice project proposes a total expense budget of \$1,000. Actual and estimated costs for project implementation remain under the total budget at \$935. Direct costs for this project include monies allocated for the project partner's time and travel to the project location as well as costs for the participant yoga straps, two door prizes, and refreshments.

Indirect costs associated with this project include a donation fee for the building location, internet and utility usage in the building, marketing supplies to include flyers and printing costs, and office supplies such as paper and pens for participants. A provisional indirect percentage rate was calculated by dividing the estimated indirect costs by the direct costs, and approximately 37% of the total project costs will be allocated towards indirect costs.

- $\$ 260 \div \$ 695 = 37\%$  Provisional Indirect Rate

## Figure 2

### *Project Budget*

Project Implementation Date: <b>April 30, 2022</b>		Total Budget Allowance: <b>\$1,000</b>		
<b>CATEGORY</b>	<b>ESTIMATED</b>	<b>ACTUAL</b>	<b>OVER/UNDER</b>	
<b>Project Partner - Time/Travel</b>	500.00	500.00	0.00	
<b>Rock Church - Donation</b>	150.00	150.00	0.00	
<b>15 Yoga Straps</b>	75.00	75.00	0.00	
<b>2 Bags (door prizes)</b>	70.00	70.00	0.00	
<b>Snacks / Water</b>	50.00		50.00	
<b>Printing / Flyers / Paper /Pens</b>	50.00		50.00	
<b>Internet / AC / Equipment</b>	40.00		40.00	
<b>Total Expenses</b>	<b>935.00</b>	<b>795.00</b>	<b>140.00</b>	

### **Planning for Evaluation**

#### **Project Outcome and Objectives**

The intended outcome of this project was to assist Black women in the utilization of holistic therapies to decrease stress levels and improve their mental and physical health.

Three objectives will be used to implement the project and will serve to measure the accomplishment of the intended goal. The objectives include:

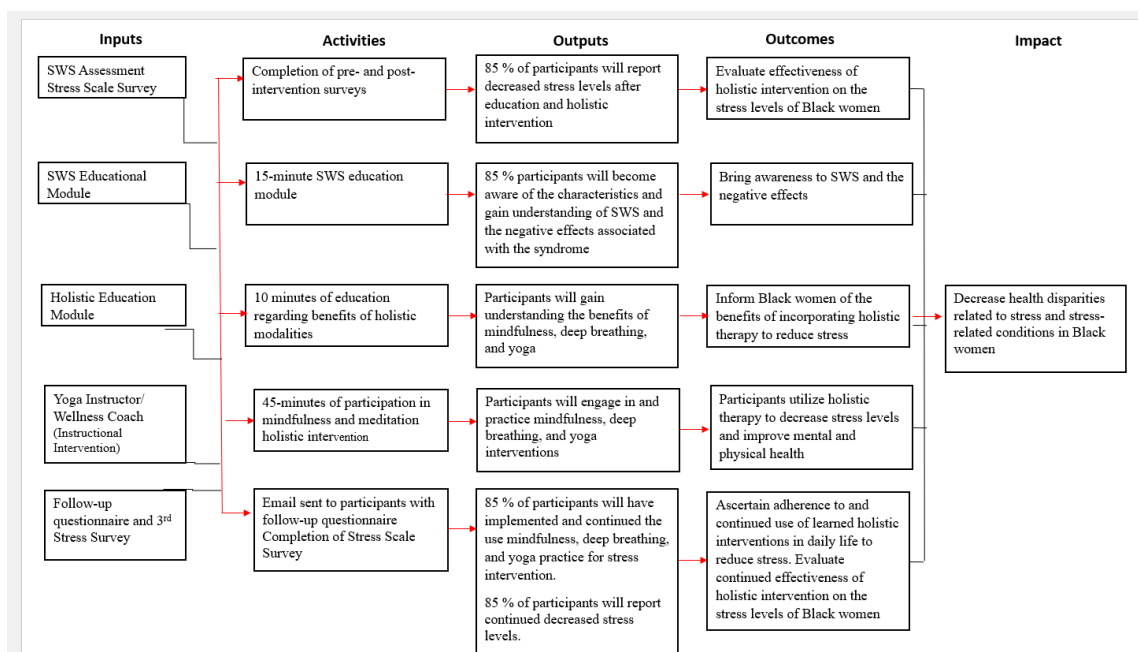
1. Bring awareness to and recognition of Superwoman Schema to Black women in Upstate South Carolina so they may be able to recognize and combat the negative effects related to this pattern of characteristics.
2. Introduce three holistic interventions: meditation, yoga, and deep breathing to Black women in Upstate South Carolina (the project participants) to aid in stress reduction and improving their mental and physical health outcomes.

- Assist Black women who may embody the characteristics of Superwoman Schema in identifying their self-perceived stress levels through pre- and post-intervention survey questionnaires.

### Superwoman Schema DNP Project Logic Model

**Figure 3**

#### *Superwoman Schema DNP Project Logic Model*



### Evaluation Methods

Participants in this project will be asked to complete two assessments to measure the initial outcomes of the project. The Superwoman Schema (SWS) knowledge assessment and the Perceived Stress Scale (Cohen et al., 1983) will be administered both pre- and post- holistic intervention and again 2 weeks after the initial intervention. The SWS knowledge assessment serves to determine the participants' current and subsequent knowledge regarding Superwoman Schema; while the Perceived Stress Scale (PSS) seeks



to measure the participants' perceived stress prior to and after being introduced to holistic measures such as yoga, deep breathing, and mindfulness to combat stress.

### ***Superwoman Schema Knowledge Assessment***

The Superwoman Schema knowledge assessment questionnaire is a five-item assessment that will be used to determine the participants' pre- and post-knowledge of Superwoman Schema (Appendix A). The questionnaire ascertains the participants' familiarity with SWS and their understanding of its associated characteristics. Upon analyzing the results of the Superwoman Schema knowledge assessment, the project leader will be able to assess the percentage of participants whose knowledge and awareness of SWS increased as a result of the intervention.

### ***Perceived Stress Scale (PSS)***

The Perceived Stress Scale is a 14-item Likert-style survey that gauges users' stress by evaluating their answers to questions designed to assess their thoughts and feelings over the last month (Appendix B). When analyzing the results of the PSS pre- and post-intervention, the project leader can make an assumption as to what percentage of the participants' stress decreased after the utilization of holistic therapy.

## **Interpretation of Data**

The goal of this project was to provide an educational session to bring awareness to the effects of Superwoman Schema (SWS) while also introducing holistic interventions including meditation, yoga, and deep breathing to aid in the stress reduction of Black women. During the educational session, qualitative data was collected through the use of the Perceived Stress Scale (PSS) (Cohen et al., 1983) via pre- and post-intervention surveys as well as a follow-up survey 2 weeks post-intervention.

Quantitative data was also collected through the use of a Superwoman Schema (SWS) knowledge assessment questionnaire created by the DNP project leader. The SWS questionnaire was collected both pre- and post-intervention during the educational session.

### **Qualitative Data**

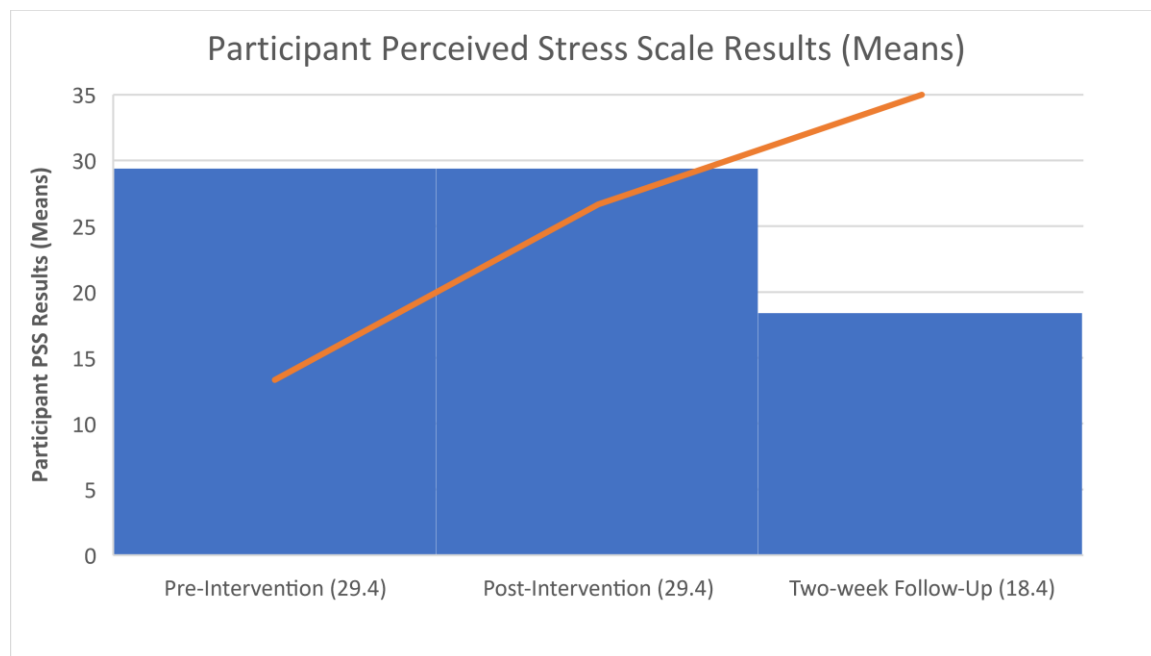
Cohen et al.'s (1983) Perceived Stress Scale survey (Appendix B) consists of 14 questions that ask participants to assess their thoughts and feelings regarding certain life situations over the last month. Participants can provide their answers via a Likert scale ranging from 0 - 4 for each question whereas a rating of 0 = "never" and a score of 4 = "very often." Scores on the PSS can range from 0 – the lowest score possible, to 56 – the highest score possible. Although there is no definitive cut-off score for the Perceived Stress Scale, Cohen et al. (1983) state the higher the stress score result, the more the participant perceives their current life stressors.

Five (100%) of the participants attending the project session completed both the pre-and post-intervention Perceived Stress Scale, while only four (80%) of the participants completed the follow-up survey provided 2 weeks after the educational session. The participants' pre-intervention perceived stress scale scores ranged from 14-37 which reflects a mean PSS of 29.4 which indicates a moderate level of stress in most participants. The participants' post-intervention perceived stress scale scores ranged from 12-40 which although reflected different individual scores, still averaged a mean PSS of 29.4. Four of the five total participants completed the 2-week follow-up survey, and their scores ranged from 15-24 with a reflected mean score of 18.4 which indicates a low perceived stress level in the participants. The mean 2-week follow-up Perceived Stress

Scores were lower than the mean pre-and post-intervention PSS results. Figure 4 illustrates the participants' pre-, post-, and 2-week follow-up PSS result means.

**Figure 4**

*Stress Scale Results*



Pre, post, and follow-up results were analyzed using a paired t-test to determine if there were any statistical differences in the scores. A statistical significance is determined by a p-value of  $< 0.05$ . The p-value for the pre-and post-intervention scores on the PSS survey was 1.0 which does not indicate a statistically significant difference ( $p > 0.05$ ) between the two sets of scores. There was no difference in the participants' Perceived Stress Scale mean scores during the educational session. This could be attributed to the short timeframe between the participant's completion of the initial, pre-intervention Perceived Stress Scale and their completion of the post-intervention PSS 2 hours later. The participants were able to learn and practice the holistic therapies only once between the pre-and post-intervention stress survey collections. Hazlett-Stevens (2017) found that

continued and regular practice of mindfulness-based holistic therapies resulted in a significant decrease in participants' perception of worry, anxiety, and stress (Hazlett-Stevens, 2017). The Participants' PSS mean scores collected in this DNP project during the 2-week follow-up stress survey correlate with Hazlett-Stevens' (2017) former research. Table 4 reflects the results of the paired sample t-test for the pre-and post-intervention PSS results.

**Table 4**

*Paired Samples t-test Results of the Pre-and Post-Intervention PSS*

Paired Differences			
Mean	Std. Deviation	<i>t</i>	Sig. (2-tailed)
29.4	8.879	0.000	1.000

The p-value for the post-intervention and 2-week follow-up PSS scores was 0.0527 which does indicate a statistically significant difference ( $p = 0.05$ ) between the two sets of scores. The participants' Perceived Stress Scale mean scores were decreased two weeks following the initial educational session intervention and after the participants continued practicing the learned holistic methods. Table 5 reflects the results of the paired sample t-test for the post-intervention and 2-week follow-up PSS results.

**Table 5**

*Paired Samples t-test Result of the Post-Intervention and 2-week Follow-Up PSS*

Paired Differences			
Mean	Std. Deviation	<i>t</i>	Sig. (2-tailed)
23.9	8.960	2.725	0.052

Throughout the DNP project session, the participants openly shared examples of how Superwoman Schema affected their lives. The participants laughed and cried during

the session, and several stated they felt safe to share and the session was “exactly what they needed.” At the end of the DNP project session, participants expressed gratitude and thankfulness, and one participant repeatedly stated, “I needed this.”

### **Quantitative Data**

Quantitative data was collected during the DNP project session via a Superwoman Schema knowledge assessment (Appendix A) created by the DNP project leader. The knowledge assessment consisted of five questions that were a mixture of yes/no, multiple choice, and rating questions. One hundred percent of the participants answered “no” during the pre-survey to the first question – Are you familiar with the term Superwoman Schema and its five (5) associated characteristics? Subsequently, after the end of the project session and upon completing the post-survey, 100% of the participants now answered “yes” to the same question.

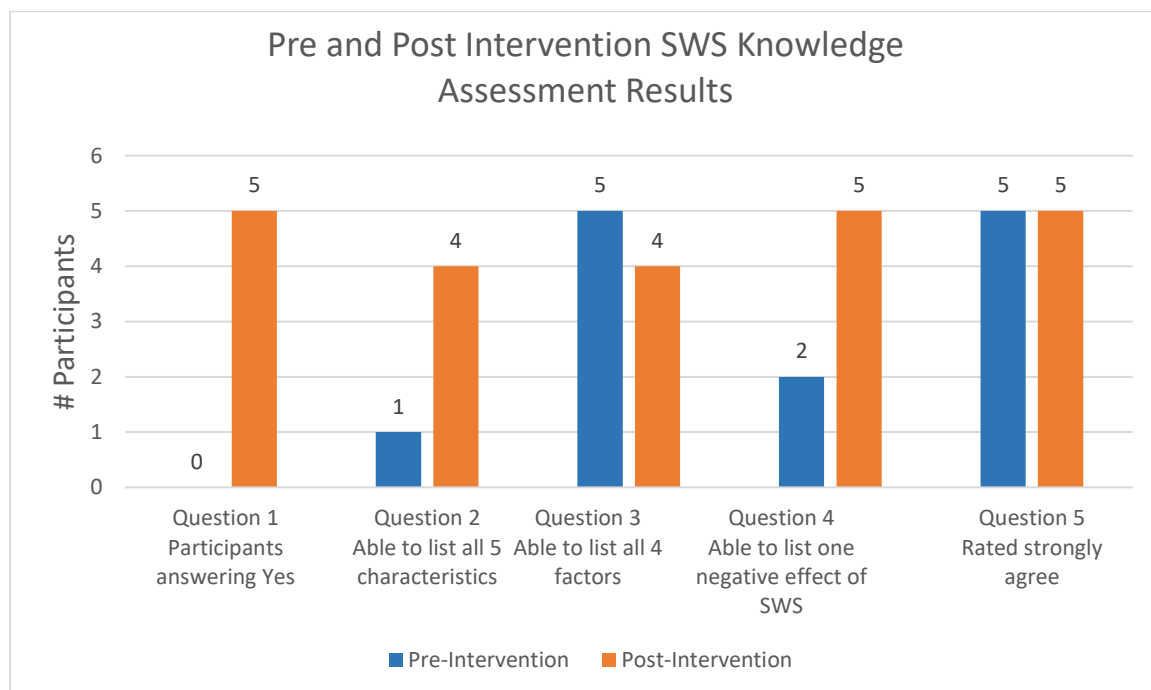
The second question on the knowledge assessment asked participants to select the five characteristics of SWS – an obligation to be strong, an obligation to help others, a determination to succeed, the suppression of feelings and emotions, and the denial of vulnerability (Woods-Giscombe, 2016). During the pre-survey, 80% of the participants were only able to select four of the five SWS characteristics, while 20% were able to correctly select all five of the characteristics. Whereas on the post-survey, 80% of the participants were now able to correctly list all five of the SWS characteristics, and only 20% listed only four of the traits.

The third question asked participants to select all of the contributing factors to Superwoman Schema which include family history/matriarchy, spiritual beliefs, racial history/slavery, and societal expectations (Woods-Giscombe, 2016). One hundred percent

of the participants were able to list all four factors on the pre-intervention survey, while only 80% of the participants listed the four factors during the post-survey. One participant only listed three of the factors, which because of the 100% pre-survey results could be attributed to a technical issue, the participant misreading the question, or perhaps an oversight due to the participant potentially rushing through the survey.

When asked the fourth question on the pre-survey if they could list at least one potential negative effect related to Superwoman Schema, 40% of the participants answered no, while 60% of the participants answered yes and listed items to include: burnout, depletion, and feeling you must keep going no matter what. One hundred percent of the participants answered yes to the fourth question on the post-intervention assessment and listed items to include: overeating, wearing themselves out, denying their own emotions and feelings, stress, anxiety, and obesity.

The fifth and final question on the SWS knowledge questionnaire asked participants to rate their agreement to the statement – Do you feel holistic therapies such as mindfulness, yoga, and deep breathing can be helping in combating stress and stress-related conditions related to Superwoman Schema? Participants could rate their agreement as: *strongly agree, somewhat agree, neither agree or disagree, somewhat disagree, and strongly disagree*. One hundred percent of the participants answered strongly agree both pre-and post-intervention. Figure 5 reflects the pre-and post-intervention results of the Superwoman Schema knowledge assessment.

**Figure 5***SWS Knowledge Assessment Results***Process Improvement Data***Project Outcomes*

The intended outcome of this project was to assist Black women in the utilization of holistic therapies to decrease stress levels and subsequently improve their mental and physical health. Three objectives were used to implement and subsequently evaluate the project outcome.

The first objective – Bring awareness to and recognition of Superwoman Schema to Black women in Upstate South Carolina so they may be able to recognize and combat the negative effects related to this pattern of characteristics – was measured by the Superwoman Schema knowledge questionnaire. This objective was successfully met as 100% of the participants answered yes to questions 1 and 4 on the post-intervention survey and were also able to provide adequate answers to question 5 on the survey.

The second objective – Introduce three holistic interventions: meditation, yoga, and deep breathing to aid in stress reduction – was achieved during the project educational session with 100% active participation in the holistic therapy portion of the project session. Additionally, on the 2-week follow-up survey, 100% of the participants stated they had continued practicing the learned holistic therapies either a moderate amount, a lot, or a great deal. Furthermore, there was a statistically significant difference between the post-intervention and the 2-week follow-up Perceived Stress Scale scores which indicated a collective reduction in the perceived stress of the participants after being introduced to and with the continued practice of meditation, yoga, and deep breathing.

The third objective – Assist Black women who may embody the characteristics of Superwoman Schema in identifying their self-perceived stress levels through pre- and post-intervention survey questionnaires. This objective was assessed as the participants were asked to complete the Perceived Stress Scale both pre- and post-intervention during the project session as well as 2 weeks later during a follow-up survey.

### ***Changes Related to Project***

The participants attending the project session were introduced to the concept of Superwoman Schema and its potential negative effects. At the culmination of the project, participants were able to identify the five characteristics of SWS as well as the factors contributing to the schema. Through the identification of SWS, participants are now able to recognize if they identify with the characteristics of SWS in order to be alert to its potential negative effects on their mental and physical health. Project participants were



introduced to simple holistic practices they could perform anywhere, on the spot in order to help reduce their perception of daily stressors.

### ***Project Impact***

The additional pressures that Black women experience related to the negative effects of Superwoman Schema can cause a greater impact on their stress levels and lead to subsequent poorer health outcomes (Woods-Giscombe, 2016). Due to the conflicting status of the “strong Black woman” ideation and whether it is a positive or negative trait, Black women are still potentially sacrificing peace of mind, mental health, and ultimately their physical health without some form of stress relief. The adoption and practice of holistic therapies, specifically meditation, yoga, and deep breathing, have been researched to be effective forms of stress management and reduction (Bamber & Morpeth, 2018; Lacaille et al., 2017).

As the goal of the DNP project was to introduce holistic therapies as a means to decrease stress associated with the negative effects of Superwoman Schema, the project results support this goal with successful achievement of the project objectives and an overall reduction in participant stress levels on the 2-week follow-up surveys. Although this DNP project utilized a small sample size, the project findings correlate with current research supporting the use of holistic therapies to increase mindfulness, emotional regulation, and focus while also decreasing anxiety, worry, and perceived stress levels (Lacaille et al., 2017; Nardi et al., 2020; Raja-Kahn et al., 2017; Schnaider-Levy et al., 2017). Black women suffering from the negative effects of Superwoman Schema who partake in the continued practice of meditation, yoga, or deep breathing may benefit from the stress reduction advantages of such practice.

### ***Project Sustainability***

After the DNP project session, several participants expressed a desire for additional sessions in order to engage with other Black women through continued conversation in a “safe space” to share their thoughts and feelings. Participants expressed gratitude for the session and all stated they would appreciate having this opportunity to meet, discuss, and destress with other Black women more often. In order to sustain the project, the project leader could continue and expand this project to capture participation from those who expressed interest in attending the initial project session; however, were unable to attend due to severe weather in the geographical area. The project leader could also continue work on this subject within her nursing career and in her community. Additionally, as the results of this DNP project could eventually be published, another researcher could expand the project to encompass other Black women outside of Upstate, South Carolina.

### ***Potential Measurements to be Collected in the Future***

Stress and stress-related conditions have been linked to obesity, hypertension, and increased blood glucose levels (Barajas et al., 2019; Hall et al., 2018; Ross et al., 2018). However, holistic therapies such as meditation, yoga, and deep breathing have been researched to improve cardiovascular health by lowering blood pressure (Nardi et al., 2020), decreasing fasting glucose levels (Raja-Khan et al., 2017), and increasing physical activity and dietary choices thereby decreasing obesity (Nardi et al., 2020).

Potential measurements to be collected in the future through the continuation of this project that could expand on the above research include long-term objective data

such as participant BMI, oxygen saturation, blood pressure, blood glucose, and cortisol levels.

### **Conclusion**

For years, Black women have been thought to be strong, capable, and unyielding in the face of adversity. Unfortunately, through generations of matriarchal and racial histories that forced Black women to “keep on keeping on” despite life’s challenges, many Black women have unknowingly been affected by Superwoman Schema. This schema is characterized by traits such as an obligation and desire for Black women to be strong and to succeed all while denying vulnerability and suppressing their emotions. While there is not anything inherently wrong with the above characteristics, it is the feeling of obligation to adhere to and constantly sustain these traits that may lead Black women to experience health alterations to include stress and stress-related conditions.

Black women while more likely than Caucasian women to experience stress and stress-related comorbidities such as hypertension and obesity, are even less likely to utilize or seek medical services for the treatment of stress. However, research has shown holistic therapy and mindfulness-based stress reduction (MBSR) therapies such as meditation, yoga, and deep breathing to be beneficial in the reduction of stress, anxiety, and stress-related conditions. As such, holistic therapies can be successful, cost-effective treatment options to manage and decrease stress in Black women.

The recognition of potential health-altering stressors such as Superwoman Schema and the subsequent, continued practice of learned holistic therapies like meditation can assist Black women in managing their stress levels and maintaining self-care. The results of this DNP project support current research indicating Black women

who may be experiencing the negative stress effects of Superwoman Schema and who indulge in the continued practice of meditation, yoga, and deep breathing can anticipate a reduction in their perceived stress levels and potential improvement of stress-related conditions.

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## Appendix A

### Superwoman Schema Knowledge Assessment

1. Are you familiar with the term Superwoman Schema and its five (5) associated characteristics?

**Yes** \_\_\_\_\_ **No** \_\_\_\_\_

2. Please select the five (5) characteristics that encompass Superwoman Schema.

- |  |  |
|--|--|
| <p><b>a)</b> an obligation to be strong</p> <p><b>b)</b> denying vulnerability</p> <p><b>c)</b> a desire to obtain a college education</p> <p><b>d)</b> suppression of feelings and emotions</p> | <p><b>e)</b> an obligation to help others</p> <p><b>f)</b> an obligation to work overtime</p> <p><b>g)</b> a determination to succeed</p> <p><b>h)</b> a desire for entrepreneurship</p> |
|--|--|

3. Which of the below are contributing factors to Superwoman Schema? (Select all that apply.)

- a)** Family history / matriarchy
- b)** Spiritual beliefs
- c)** Racial history / slavery
- d)** Societal expectations

4. Can you list one potential negative effect related to Superwoman Schema?

**Yes** \_\_\_\_\_ **No** \_\_\_\_\_

If you answered yes, please list your response here.

\_\_\_\_\_

5. Do you feel holistic therapies such as mindfulness, yoga, and deep breathing can be helpful in combating stress and stress related conditions related to Superwoman Schema?

Strongly agree    Somewhat agree    Neither agree nor disagree    Somewhat disagree    Strongly disagree

## Appendix B

### Perceived Stress Scale

PSS-14

#### INSTRUCTIONS:

The questions in this scale ask you about your feelings and thoughts during **THE LAST MONTH**. In each case, you will be asked to indicate your response by placing an "X" over the circle representing **HOW OFTEN** you felt or thought a certain way. Although some of the questions are similar, there are differences between them and you should treat each one as a separate question. The best approach is to answer fairly quickly. That is, don't try to count up the number of times you felt a particular way, but rather indicate the alternative that seems like a reasonable estimate.

	Never	Almost Never	Sometimes	Fairly Often	Very Often
	0	1	2	3	4
1. In the last month, how often have you been upset because of something that happened unexpectedly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. In the last month, how often have you felt that you were unable to control the important things in your life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. In the last month, how often have you felt nervous and "stressed"?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. In the last month, how often have you dealt successfully with day-to-day problems and annoyances?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. In the last month, how often have you felt that you were effectively coping with important changes that were occurring in your life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. In the last month, how often have you felt confident about your ability to handle your personal problems?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. In the last month, how often have you felt that things were going your way?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. In the last month, how often have you found that you could not cope with all the things that you had to do?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. In the last month, how often have you been able to control irritations in your life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. In the last month, how often have you felt that you were on top of things?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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## PSS-14

	Never	Almost Never	Sometimes	Fairly Often	Very Often
	0	1	2	3	4
11. In the last month, how often have you been angered because of things that happened that were outside of your control?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. In the last month, how often have you found yourself thinking about things that you have to accomplish?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. In the last month, how often have you been able to control the way you spend your time?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>