

Needs Assessment Report

Ohio's Strategic Prevention Framework – State Incentive Grant (SPF SIG)
FRANKLIN COUNTY

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Community Profile

FRANKLIN COUNTY¹

Franklin County has an estimated population of 1,178,799. The population is predominantly Caucasian (71.2%), with a considerable African American population (21.5%). Approximately 2.8% of the population identifies as multiracial. A small percentage (4.9%) of the county's population reports being of Hispanic or Latino origin.

English is the predominant language, although 11.1% of residents report that another language is spoken at home.

Among residents above 25 years of age, 88.9% have a high school diploma and 35.0% have a Bachelor's degree or higher. The high school graduation rate is similar to that of the state rate (87.4%). However, the percentage of higher education degrees in the county is considerably higher than the state rate (24.1%).

The median household income (2006-2010) is \$49,087, which is slightly above the state median of \$47,358.

The five year (2006-2010) estimated percentage of the county population below poverty level is 17.0%. This is considerably higher than the estimated state percentage (14.2%).

CITY OF COLUMBUS²

Columbus, the largest city in Franklin County, has an estimated population of 797,434 or 66% of the county's population. The population is predominantly Caucasian (61.5%), with a considerable African American population (28.0%) which is significantly higher than the state (12.0%). Approximately 3.3% of the population identifies as multiracial and a small percentage (5.6%) of the county's population reports being of Latino origin.

English is the predominant language, though 12.9% of residents reporting that another language is spoken at home.

Among residents above 25 years of age, 87.7 % have a high school diploma and 32.3% have a Bachelor's degree or higher. The high school graduation rate is similar to that of the state rate (87.4%). However, the percentage of higher education degrees in the county is considerably higher than the state rate (24.1%).

The median household income (2006-2011) is \$43,348, which is below the county median of \$49,087 and below the state median of \$47,358.

The five-year (2006-2010) estimated percentage of the city below poverty level is 21.8%. This is higher than the estimated county percent 17% and considerably higher than the state (14.2%).

¹ Data sources for Franklin County include the 2011 Census and the 2006-2010 American Community Survey.

² Data sources for the City of Columbus include the 2010 Census and the 2006-2010 American Community Survey.

Your chance of becoming a victim of violent crime in this area is one in 119. This includes forcible rape, murder and non-negligent manslaughter, armed robbery, and aggravated assault, including assault with a deadly weapon.³

³ <http://www.neighborhoodscout.com/oh/columbus/>

Introduction

The community's biggest issue related to substance abuse:

The Franklin County Urban SPF Coalition will target African American young adults who reside in the urban core of Columbus (zip codes: 43204, 43205, 43206, 43211, and 43223).

The African American residents in the urban core have a favorable attitude towards marijuana use, higher rates of drug use and live in families that have a history of parental drug abuse. Anecdotally, the urban core young adults listen to hip hop/rap music whose lyrics glamorize drugs, drug use and "gangsta" lifestyles and see the hip hop/rap artists as role models to emulate in language and clothing. "In the United States, many rappers create songs that, through performances and records, spread news of urban African American youth daily lives, dreams, and discontents outside of their immediate neighborhoods. Rappers are viewed as the voice of poor, urban African American youth, whose lives are generally dismissed or misrepresented by the mainstream media."⁴

- In 2005 a study by Dr. Brian Primack from the University of Pittsburgh's School of Medicine found: 77% of Billboard's 62 most popular rap songs portrayed substance use, often in the context of peer pressure, wealth and sex⁵.

Respondents to the coalition's usage survey reported the following:

- 29% reported drinking alcohol and using marijuana in the past 30 day.
- 8% in the past 3 months were disqualified for employment or lost a job because of a failed drug test
- 47% (almost one in two respondents) reported their parents had a problem with alcohol.

Community residents purchase drugs from local drug dealers in affordable packages and purchase drug paraphernalia at corner stores and gas stations. According to the coalition's store observation project:

- 89% of the store counters in the urban core contain cigars, cigarillos, black and mild cigars, and blunt wraps near the register⁶.

⁴ http://www.stanford.edu/class/e297c/poverty_prejudice/mediarace/socialsignificance.htm downloaded October 16, 2012

⁵ Drugs and Alcohol Often Used in Popular Music ;
http://www.redorbit.com/news/health/1243006/drugs_and_alcohol_often_used_in_popular_music/?print=true

⁶ Appendix: Introduction FCUC Store Observation Final Report

A description of the population being targeted for SPF SIG project⁷:

The urban core population has an estimated population of 125,206. The majority of the population is Caucasian (49%), with a considerable African American population 43,373 (34.6%) which is higher than the Columbus (28%) and the state (12.0%). A small percentage – 6,200 (4.9%) of the urban core’s population – reports being of Hispanic or Latino origin.

The estimated population of 18-25 year olds is 12,870 and the estimated population of African American 18-25 year olds is 5,880.

The median household income (2006-2010) for the target zip codes ranges from \$24,304 (43205) to \$39,513 (43204) which is lower than Columbus (\$43,348) and the state median of \$47,358.

The five-year (2006-2010) estimated percentage of the urban core population below poverty level range from 26% (43204/43206) to 47% (43205). This is considerably higher than the estimated city percentage 21.8% or the state percentage (14.2%).

The 18-25 year old population in the urban core is more likely:

- **To listen to hip hop/rap music considered to be the “CNN for black people”⁸:**
 - 79% of the 18-25 year olds reported their favorite music is hip-hop.⁹
- **To be unemployed or not in the labor force:**
 - The urban core unemployment rate is 44%, which is significantly higher than the City of Columbus unemployment rate of 8% and Franklin County unemployment rate 7%.¹⁰
- **To be admitted to juvenile justice institution or prison:**
 - In 2010, 71% of Franklin County youth admitted to juvenile justice institutions were African Americans from the urban core.¹¹
 - In 2010, blacks represented 44.0% of those committed to state prison facilities from the Franklin County court system, although they comprised only 19.3% of the population of Franklin County.¹²
- **To experience suspension in school or academic failure in school:**
 - In 2009-10, 45% of African American males in Franklin County graduated from high school compared to 80% of the white non-Latino males (Ohio ranked 46th in the nation).¹³
 - The OSU Kirwan Institute for the Study of Race and Ethnicity’s African American Male Initiative analytic review of the literature has revealed studies continue to show that

⁷ Data sources include the 2011 Census and the 2006-2010 American Community Survey.

⁸ http://www.berkeley.edu/news/media/releases/2008/04/01_rapmusic.shtml

⁹ Appendix Individual Level FCUC 18-25 year old Usage Survey 2012

¹⁰ Appendix Individual Level FCUC 18-25 year old Usage Survey 2012

¹¹ http://centralohioindicators.org/site/indicators/safety/1_PDFS/Safety%205.pdf

¹² http://centralohioindicators.org/site/indicators/safety/1_PDFS/Safety%209.pdf

¹³ www.blackboysreport.org The Schott 50 State Report on Public Education and Black Males — 2012

teachers perceive African American males to be academically inferior, overly aggressive, lacking adequate leadership, and social skills.¹⁴

- The same review found that structural factors contribute to the disproportionate number of black males suspended from school, including zero tolerance policies and the criminalization of male behavior.¹⁵
- **To be a statistic in a health disparity¹⁶:**

Blacks are 21.5% of the population in Franklin County. If there was an equal and fair distribution of disease, blacks would represent approximately 20% of the deaths for each cause, yet they represent:

 - 63% of the homicides in Franklin County
 - 52.5% of conditions originating in the perinatal period that negatively affecting the health outcomes of mother and the baby including: infant mortality, low birth weight and pre term births.
 - 47.2% of HIV disease including Living with AIDS/HIV and HIV incidence

Sub-target/underserved population(s) chosen for SPF SIG project:

The coalition will not implement the SPF with a sub-target/underserved population.

Description of sub-target/underserved population(s):

N/A

¹⁴ Appendix Introduction The OSU Kirwan Institute for the Study of Race and Ethnicity African American Male Initiative

¹⁵ *ibid*

¹⁶ Appendix: Unequal Health: The Black/White Gap in Franklin County December 2010

Recent Community Needs Assessments

Total Number of Needs Assessments: Two

Needs Assessment:	Primary Prevention Awareness, Attitude, and Use Survey (PPAAUS)
Year Conducted:	2009
Sponsoring Agency	Education Council Foundation
Findings Relevant to 18-25 Year Olds:	<p>Survey Questions</p> <p>Willingness to Use Marijuana “Willing” reflects responses of “Would Like to Try or Use It” or “Would Use It Any Chance”</p> <ul style="list-style-type: none"> • 19% of the students expressed interest in smoking marijuana. <p>“Age of First Use and Marijuana” The average age of first use of marijuana was 14. Of the Franklin County schools students who smoked marijuana:</p> <ul style="list-style-type: none"> • 7% indicated they had started smoking at age ten or younger • 68% started smoking between the ages of 11 and 15 • 26% started smoking marijuana when they were 16 or older <p>Perceived Peer Use of Marijuana</p> <ul style="list-style-type: none"> • 45% of the students perceived that at least half of their classmates smoked marijuana at least once a month <p>Self-Reported Use of Marijuana (“Regular use” in all report sections concerning self-reported use includes all students who checked “Use about Every Day,” “Use about Once or Twice a Week,” or “Use about Once or Twice a Month” – in other words, monthly or more often.)</p> <ul style="list-style-type: none"> • 13% of students surveyed reported regular use of marijuana • 8% smoked at least once a week <p>Perceived Risk of Marijuana- If people try it once or twice</p> <ul style="list-style-type: none"> • 27% of high school students perceived no risk of harm (physical or otherwise) if people try marijuana once or twice • 33% of high school students perceived a slight risk <p>Perceived Risk of Marijuana- If people try it occasionally</p> <ul style="list-style-type: none"> • 16% of students perceived no risk of harm (physical or otherwise) if people smoke marijuana occasionally • 20% of students perceived a slight risk <p>Perceived Risk of Marijuana- If people smoke it regularly</p> <ul style="list-style-type: none"> • 11% perceived no risk of harm (physical or otherwise) if people smoke marijuana regularly • 10% of students perceived a slight risk
Findings Relevant to Community Readiness:	None

Needs Assessment:	Minnesota Institute of Public Health Community Readiness Assessment
Year Conducted:	2012
Sponsoring Agency	Franklin County Urban Coalition
Findings Relevant to 18-25 Year Olds:	<p>Domain I: Perception of an ATODG Problem Within Community</p> <p>The top moderate or serious problems among 18-20 year old;</p> <ul style="list-style-type: none"> • 83% rank marijuana use is a moderate or serious program for young adults • 72% rank other drug use is a moderate or serious program for young adults
Findings Relevant to Community Readiness:	<p>Domain I: Perception of an ATODG Problem Within Community</p> <ul style="list-style-type: none"> • 66% recalled an alcohol or drug related youth death in the community in the last 12 months • 61% of the residents believe that alcohol and drugs contribute “quite a bit” or “a great deal” to violent crimes such as theft, armed robbery, physical assault • 60% believe that alcohol and drugs contribute it contributes to property crimes (such as vandalism) <p>Domain II: Permissive Attitudes Toward ATODG</p> <ul style="list-style-type: none"> • 31% of respondents agreed or strongly agreed that “it’s OK for 18-20 year olds to drink <p>Domain III: Support for ATODG Policy and Prevention</p> <ul style="list-style-type: none"> • 67% reported that it’s possible to reduce ATOD use through prevention • 62% of respondents indicated that public service announcements (PSA) are a good way to change attitudes about alcohol and tobacco use • 63% of the respondents said the community has responsibility to set up prevention programs to help people avoid ATOD problems <p>Domain IV: Access to Alcohol, Tobacco, and Gambling</p> <ul style="list-style-type: none"> • 32% said it is not at all or a little difficult for teens to buy alcohol at a store themselves • 28% stated that it is not at all or a little difficult for them to order a drink at a bar <p>Domain V: Perception of Community Commitment</p> <ul style="list-style-type: none"> • 37% of respondents indicated that they believe the community is not interested in changing, no matter what the issue • 33% believe that there is no sense of commitment in the community

Community Readiness

Community Readiness Assessment Used:

Minnesota Institute of Public Health (MIPH) Community Readiness Survey 2012

Community Readiness Assessment Conducted:

January 2012 – March 2012

A review of the community readiness in the community, with respect to priority substance, found the following:

For marijuana usage, the coalition determined that the community was in the *vague awareness* stage of community readiness.

Sharing community readiness findings in the community:

The coalition posted findings on our website and provided a brief overview of the findings. We have planned a series of press releases, some community conversations and town hall meetings with the target population. We also plan to present the information to other stakeholders and to the health advisory committees that are located in each target zip code area.

Use of community readiness findings in strategic planning:

This data will drive our efforts to increase risk awareness of marijuana use within the target population. We will also incorporate plans to engage the target population and other stakeholders in the zip code target communities in an effort to be more active in mobilizing others around these issues.

Suggested strategies for strategic planning:

Over the next year, we will focus on preplanning and preparation phases of readiness. It will require us to engage more of the target population in focus groups, other information gathering sessions and have our partners and the larger community involved on an intentional level. We will use data from our marketing and availability of alcohol, tobacco, and drug paraphernalia observation efforts to drive our steps. We will also need to look at the policy information we have assembled and what connection these policies have to community readiness and change.

Plans to evaluate strategic plan strategies:

Our evaluation process will need to incorporate several variables that we assume will indicate increased readiness. Among these will be an increase in the number of the target population engaged in our ongoing community conversations, our follow up to the observation surveys especially related to potential policy change, ongoing information sharing on our website and other social media and the increase in traffic to our website, and an increase in other stakeholders in organizational engagement and participation in coalition activities.

Individual Level

Based on the consumption data (30-day use and age of first use) analyzed, these are the community's major concerns surrounding the problem of consumption of the priority substance:

The Franklin County Urban Coalition (FCUC) chose to focus on marijuana. The FCUC Usage Survey data indicate that 42% of 18-25 year olds in our targeted urban areas have used marijuana or hashish in the last 30 days. In comparison, SAMSHA estimates that in Ohio (2012) 18.5% of the population use marijuana (aged 18-26). The mean age of first use was 13.9 for marijuana according to respondents of the FCUC Usage Survey. Thus, usage of marijuana is very much more widespread than is typical for Ohio. Our conclusion is that marijuana is indeed the more serious problem in our targeted urban neighborhoods.

Based on the perceptions of disapproval data (attitudes) analyzed, these are the community's major concerns regarding the attitudes surrounding consumption of the priority substance:

Our survey found that 43% of 18-25 year olds reported some level of disapproval regarding use of marijuana and 55% reported some level of disapproval or use of alcohol. It is interesting to note that there is less disapproval of marijuana use than alcohol use overall. However, we also noted that in our targeted zip codes, the response of "neither approve nor disapprove" was indicated by 42% regarding marijuana, but only 35% regarding alcohol. Thus, we conclude that marijuana use is more socially acceptable than alcohol use. This compares with 59% of Ohio 18-29 year olds being strongly or somewhat in favor of legalizing marijuana use.¹⁷ It would seem that the level of disapproval from our target population is comparable to that of Ohioans in general. Thus, we confirm our theory that marijuana is likely to be the more serious issue.

Based on the perceived risk/harm data analyzed, these are the community's major concerns surrounding the perceived risk/harm of consuming the priority substance:

In our targeted zip code areas, the perception of risk was higher for alcohol use than marijuana use (62% vs. 47%). Of interest is the distribution between great and moderate perceived risk. The percentage of marijuana use perceived as a great risk was only 19%, and for alcohol use was 33%. This compares with SAMSHA's estimates of rates of perceived great disapproval of those aged 18-25 of marijuana use once or twice per month of 22-25% (2005-2006 measures). Thus, we again confirm our theory that marijuana is likely to be the more serious issue.

¹⁷ The Ohio Poll, May 2009, University of Cincinnati

Priority Substance: Marijuana									
Data Available for Target Population									
30 Day Use									
Specific Measure: Think specifically about the past 30 days. During the past 30 days, on how many days did you use marijuana or hashish?									
Does this measure qualify as a NOMs item?					Yes				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
Franklin County Urban Coalition (FCUC) Usage Survey	2012	African Americans aged 18-25 from our targeted urban neighborhoods	43,373	Convenience	600	537	Percentage of respondents who indicated use in the past 30 days.	41%	Percentage
Age of First Use									
Specific Measure: How old were you the first time you used marijuana or hashish? Response Options: Never used, _____ years old									
Does this measure qualify as a NOMs item?					Yes				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
Franklin County Urban Coalition (FCUC) Usage Survey	2012	African Americans aged 18-25 from our targeted urban neighborhoods	43,373	Convenience	600	537	Mean age of first use	13.9	Mean
Disapproval of Use									
Specific Measure: How do you feel about someone your age using marijuana or hashish once a month or more? Response Options: Neither approve nor disapprove, Somewhat disapprove, Strongly Disapprove									
Does this measure qualify as a NOMs item?					Yes				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
Franklin County Urban Coalition (FCUC) Usage Survey	2012	African Americans aged 18-25 from our targeted urban neighborhoods	43,373	Convenience	600	537	Percent of respondents who reported being somewhat or strongly	43%	Percentage
Perceived Risk/Harm of Use									
Specific Measure: How much do people risk harming themselves physically and in other ways when they smoke marijuana once or twice a week? Response Options: No risk, Slight risk, Moderate risk, Great risk									
Does this measure qualify as a NOMs item?					Yes				
Data Source	Year(s)	Population	Population Size	Sampling Strategy	Sample Size	Response #	Reported Outcome	Value	Value Type
Franklin County Urban Coalition (FCUC) Usage Survey	2012	African Americans aged 18-25 from our targeted urban neighborhoods	43,373	Convenience	600	537	Percent reporting moderate or great risk	47%	Percentage

Interpersonal Level

Identified contributing factors with good data and/or evidence to justify that they are impacting priority substance use in the community:

- Multigenerational use: parental abuse of alcohol & drugs
- Culturally acceptable drug use in hip hop culture
- High rates of unemployment: more time available to get high and hang out
- Low high school graduation rates/education achievement

Contributing factors for which the community needs to collect more data and/or evidence to justify they are impacting priority substance use in the community:

- Marijuana use as a rite of passage
- Gang affiliation/neighborhood violence

Plans to collect that data and/or evidence:

- Marijuana use as a rite of passage – focus groups primarily with African American males
- Gang affiliation – focus groups with City of Columbus Recreation and Parks Application for Purpose Program participants
 - Barack Recreation Center (43206)
 - Beatty Recreation Center (43205)
 - Glenwood Recreation Center (43204)
 - Linden Recreation Center (43211)
- Gang affiliation: get data from the City of Columbus Police Department
- “Neighborhood Violence Reduction” OSU CEASEFIRE Project

Based on the data gathered on social norms, these are the concerns around social norms that might contribute to priority substance use in the community:

Data from the FCUC 18-25 Year-Old Usage Survey and the MIPH Survey indicate that the community has a favorable attitude towards marijuana use.

- Culturally acceptable to use alcohol and other drugs in the family.
 - 47% of 18-25 year olds reported a parental alcohol problem when they were growing up.
- Culturally acceptable to listen to music that advocates marijuana use and drug dealing in the lyrics of the songs.
 - Gangsta music encourages the use of marijuana, most famously Dr. Dre’s iconic 1992 album “The Chronic,” which is a slang term for marijuana. Gangsta music promotes drug dealing as a means of making a living since they are unable to get ordinary jobs.¹⁸
- Unemployment is a cultural reality for our population:
 - Higher rates of unemployment (44%) for African Americans living in urban core¹⁹

¹⁸ The Effects of Gangsta Rap: http://www.ehow.com/info_8080114_effects-gangsta-rap.html

¹⁹ Appendix Individual FCUC 18-25 Usage Survey 2012 Results Summary Work % unemployed

- Urban core young adults that failed a drug test in the past 90 days (8%)
- Lack of high diploma or GED or other entry level qualifications for the workforce

Priority Substance	
Marijuana	
Contributing Factors Presenting in Community	
Acceptance Example	Community members view marijuana (80%) use as the top problem among teenagers and young adults (18-20) in their neighborhoods.
Supporting Evidence	MIPH Franklin County Final Report May, 2012
Rite of Passage	N/A
Supporting Evidence	N/A
Multigenerational Use	47% (almost one in two adults) of the 18-25 year olds reported their parents had a problem with alcohol.
Supporting Evidence	FCUC 18-25 year-old Usage Survey - Tell Us about You and Alcohol: Did a parent or caregiver have a problem with alcohol?
Public Substance Use	N/A
Supporting Evidence	N/A
18-25 Year-Old Perception	56% of the 18-25 year olds reported that a person has no risk or a slight risk of harming themselves physically and in other ways when they smoke marijuana once or twice a week.
Supporting Evidence	FCUC 18-25 year-old Usage Survey - Tell Us about You and Marijuana: How much do people risk harming themselves physically and in other ways when they smoke marijuana once or twice a week?
Culturally Acceptable	N/A
Supporting Evidence	N/A
Available in Home	61% of respondents believe alcohol and drugs contribute “quite a bit” or a “great deal” to violent crimes such as theft, armed robbery, physical and property crimes.
Supporting Evidence	MIPH Franklin County Final Report May, 2012

Continued on next page.

Other (Hip Hop Culture/Lifestyle)	79% of the 18-25 year olds reported their favorite music is hip hop.
Supporting Evidence	FCUC 18-25 year old Usage Survey Tell us about you and music: Q 1 What is your favorite kind of music?
Other (Hip Hop Culture/Lifestyle)	In a study that analyzed Billboard's 279 most popular songs in 2005, a staggering 77% of the 62 rap songs portrayed substance use, often in the context of peer pressure, wealth and sex.
Supporting Evidence	Drugs and Alcohol Often Used in Popular Music. http://www.redorbit.com/news/health/1243006/drugs_and_alcohol_often_used_in_popular_music/?print=true
Other (Hip Hop Culture/Lifestyle)	In a study that analyzed rap music lyrics of 341 songs, selected by popularity, from 1979 to 1997. They recorded the number of mentions of drug references such as snorting or injecting, selling drugs, drug paraphernalia and altered states of being. 69% of the 341 songs from 1994-1997 mentioned drugs. 58% percent of songs with drug mentions expressed a positive attitude toward drugs.
Supporting Evidence	An Innovator Identifies an Alarming Trend for Young People: Listening to Rap Music Could Be Dangerous to Their Health http://www.rwjf.org/en/about-rwjf/newsroom/newsroom-content/2008/05/an-innovator-identifies-an-alarming-trend-for-young-people--list.html downloaded 4/24/2013 List of rap songs that talk about drugs (indirect or direct mention) http://wikibin.org/articles/list-of-rap-songs-about-drugs.html
Other (Hip Hop Culture/Lifestyle)	In a 1995 study, researchers found that substance use and aggressive behaviors among young people (15-25 years old) were significantly associated with listening to rap music. Frequent exposure to rap music significantly contributes to positive values toward substance use and violence. Young people who often listen to rap music view substance use and violence more positively; thus, music listening, at most, reinforces these values.
Supporting Evidence	Supporting Evidence Music, Substance Use, and Aggression, MENG-JINN CHEN, PH.D.,† BRENDA A. MILLER, PH.D., JOEL W. GRUBE, PH.D., AND ELIZABETH D. WAITERS, PH.D. Prevention Research Center, Pacific Institute for Research and Evaluation, 1995 University Avenue, Suite 450, Berkeley, California 94704 JOURNAL OF STUDIES ON ALCOHOL / MAY 2006 pdf.

Factors Related to Social Norms That Contribute to Consumption in Your Community
Factor 1: Multi-generational use: parents or care givers have an alcohol or drug problem
Whom does this affect/occur with?
Parents, infants in the womb (fetal alcohol syndrome/effects), early childhood development, childhood development, pre-teen and teen years
Who allows this?
Parents, grandparents, extended family
When does this occur?
During the developmental years of an infant, child or adolescent
Where does this occur?
In homes, during family celebrations, outings, in relatives' homes
How does this occur?
Parents communicate that drug use is normal through words and actions. Children experience alcohol and drug use as normal part of growing up.
Under what conditions is this allowed to happen?
Parents or friends are preoccupied with getting drunk or high.
Factor 2: Hip hop culture or lifestyle
Whom does this affect/occur with?
18-25 year olds identify with lyrics in the music that encourage drug use, sexual conquest and clothing styles that are represented by recording artists.
Who allows this?
The young adults that seek out media outlets such as radio stations, cable TV, movies, and reality shows that promote this lifestyle.
When does this occur?
Daily, during the course of the day and evening activities
Where does this occur?
In homes, in cars, on the street corners, at the gym
How does this occur?
18-25 year olds discuss the politics of hip hop in person and on social media, listen to music and watch DVDs.
Under what conditions is this allowed to happen?
18-25 year-old urban young adults residing in high-crime areas and high unemployment with little or no hope of changing life situations
Factor 3: High rates of unemployment
Whom does this affect/occur with?
18-25 year olds unemployed or employed part-time; work as day laborers
Who allows this?
Young adults who drop out of high school, failed GED test (fewer jobs available for unskilled workforce), young adults who test positive for controlled substances or have a criminal record (thereby disqualifying themselves for jobs that are available).
When does this occur?
During the normal work week - 8 hours a day, 40 hours a week
Where does this occur?
In the urban core neighborhoods
How does this occur?
Young adults denied employment: lacking high school diploma, testing positive for control substances or background check revealing arrest record
Under what conditions is this allowed to happen?
No response

Community-Level

Retail Factors

Identified contributing factors with good data and/or evidence to justify that they are impacting priority substance use in the community:

- Store customers can purchase drug related paraphernalia in 89.7% of the 68 convenience stores and gas stations in the urban core zip codes based on results from the store observation project.
- Product Placement: Store customers, children, teen, young adults have access to drug related products on counters at the registers or at point of sale in 95% of the 68 convenience stores and gas stations in the urban core zip codes based on results from the store observation project.

Contributing factors for which the community needs to collect more data and/or evidence to justify they are impacting priority substance use in the community:

None

Plans to collect that data and/or evidence:

N/A

Based on the data gathered on retail availability, these are the concerns around retail availability that might contribute to priority substance use in the community:

Store customers in the urban core have a greater accessibility to drug paraphernalia than surrounding neighborhoods in Columbus with similar populations of 18-25 year olds. Counters near the register contain drug paraphernalia – rolling papers, blunts and pipes – at higher percentages than the comparison group of convenient stores and gas stations. Drug-using paraphernalia normalize drug-using behavior as acceptable and desensitize youth and young adults to the negative consequences associated with drug use.

Priority Substance	
Marijuana	
Contributing Factors Presenting in Community	
ID Issues	No response
Supporting Evidence	No response
Density	No response
Supporting Evidence	No response
Characteristics	No response
Supporting Evidence	No response
Employees	No response
Supporting Evidence	No response
Product Placement	Presence of drug related products at register: 38.6% of the store counters near the register contain pipes versus 9.4% of the comparison group counters contain pipes at registers/point of sale. 89% of the urban core store counters near the register contain cigars, cigarillo, Black & Mild cigars and blunt wraps. 58% of the urban core store counters near the register contain rolling papers versus 20% of the comparison group counters contain rolling papers at registers/point of sale.
Supporting Evidence	FCUC SPF Store Observation Project Final Report January 16, 2013

Factors Related to Retail Availability that Contribute the Most to Availability
Factor 1: Customer accessibility to drug paraphernalia in stores
Whom does this affect/occur with?
Customers, children, teens and young adults that enter the store to purchase other items.
Who allows this?
Convenience stores' and gas station owners' sale of the products. Customers appreciate the easy access to the products. Community residents allow the sale by not doing anything about it.
When does this occur?
Every day during retail store hours usually 8:00am -11:00pm
Where does this occur?
Convenience stores and gas stations in urban core zip codes
How does this occur?
Convenience stores and gas stations selling drug paraphernalia normalize smoking marijuana as acceptable and desensitizing youth and young adults to the negative consequences associated with drug use.
Under what conditions is this allowed to happen?
The urban core population that use marijuana create a demand for drug using paraphernalia and store owners supply the products to meet the demand because it's not illegal to sell drug-related paraphernalia.
Factor 2: Customer accessibility to drug paraphernalia at registers/point of sale
Whom does this affect/occur with?
Customers, children, teens, young adults, who enter the store to purchase other items.
Who allows this?
Convenience stores' and gas station owners' sale of the products. Customers appreciate the easy access to the products. Community residents allow the sale by not doing anything about it.
When does this occur?
Every day during retail store hours usually 8:00am -11:00pm
Where does this occur?
Convenience stores and gas stations in urban core zip codes at the register
How does this occur?
Convenience stores and gas stations selling drug paraphernalia normalize smoking marijuana as acceptable and desensitizing youth and young adults to the negative consequences associated with drug use.
Under what conditions is this allowed to happen?
The urban core population that use marijuana create a demand for drug using paraphernalia and store owners supply the products to meet the demand because it's not illegal to sale drug-related paraphernalia.

Social Availability Factors

Social Availability: Identified contributing factors with good data and/or evidence to justify that they are impacting priority substance use in the community:

- 18-25 year olds getting the marijuana from neighborhood drug dealers connections, friends and family members
- 18-25 year olds attending gatherings with large amounts of marijuana available for consumption at community festivals, clubs, and house parties with areas for smoking marijuana outside and illegal clubs

Contributing factors for which the community needs to collect more data and/or evidence to justify they are impacting priority substance use in the community:

None

Plans to collect that data and/or evidence:

N/A

Based on the data gathered on social availability, these are the concerns around social availability that might contribute to priority substance use in the community:

Smoking marijuana is a common occurrence in the neighborhood based on the FCUC 18-25 Year-Old Survey (42%) reported using marijuana in the past 30 days and the age of first use 13.9.

Priority Substance	
Marijuana	
Contributing Factors Presenting in Community	
18-25 Year olds getting marijuana from...	Neighborhood drug dealers' connections, from parents' underwear drawer or family members, stealing from each other
Supporting Evidence	Anecdotal evidence
18-25 year olds attending gatherings with large amounts of marijuana...	Community festival, house parties, clubs & bars have outside places to smoke.
Supporting Evidence	Anecdotal evidence

Factors Related to Social Availability that Contribute the Most to Availability
Factor 1: 18-25 year olds getting the marijuana from neighborhood drug dealers connections, friends and family members
Whom does this affect/occur with?
Urban core population 18-25 year olds, adults and youth 17 & under
Who allows this?
Some community residents see smoking marijuana as socially acceptable and a low-risk drug using activity.
When does this occur?
Daily
Where does this occur?
Homes, neighborhoods, schools
How does this occur?
Some community residents smoke marijuana regularly and purchased it from local drug dealers and their supplies from convenience stores and gas stations in the neighborhood.
Under what conditions is this allowed to happen?
The urban core population that use marijuana create a demand for drug using paraphernalia and store owners supply the products to meet the demand because it's not illegal to sale drug-related paraphernalia.
Factor 2: 18-25 year olds attending gatherings with large amounts of marijuana available for consumption at community festivals, clubs with areas for smoking marijuana outside and illegal clubs
Whom does this affect/occur with?
Urban core 18-25 year olds, adults and youth 17 & under
Who allows this?
Some community residents see smoking marijuana as socially acceptable and a low risk drug using activity.
When does this occur?
Daily
Where does this occur?
Outdoor community festivals, outdoor areas near clubs, backyards, front porches
How does this occur?
Some community residents smoke marijuana regularly and attend activities where the use is permitted.
Under what conditions is this allowed to happen?
Some community residents and drug dealers see smoking marijuana a social activity and not a criminal activity.

Promotional Factors

Identified contributing factors with good data and/or evidence to justify that they are impacting priority substance use in the community:

- Local promotion: stores and gas stations have excessive numbers of tobacco, marijuana or drug related ads.
- Local promotion: stores and gas stations display marijuana related products near the register.

Contributing factors for which the community needs to collect more data and/or evidence to justify they are impacting priority substance use in the community:

None

Plans to collect that data and/or evidence:

N/A

Based on the data gathered on promotion, these are the concerns around promotion that might contribute to priority substance use in the community:

Store customers in the urban core have a greater visibility of alcohol and drug paraphernalia than surrounding neighborhoods in Columbus with similar populations of 18-25 year olds. Counters near the register contain drug paraphernalia – rolling papers, blunts and pipes – at higher percentages than the comparison age group of convenience stores and gas stations. The advantage is the store can promote new products or discounted products to appeal to the 18-25 year old store customer.

Priority Substance	
Marijuana	
Contributing Factors Presenting in Community	
Local Promotion	Stores and gas stations have excessive numbers of marijuana or drug related new products/promotions for Hood Wraps: 36% of urban core convenience stores and gas stations have prominent tobacco, marijuana or drug related advertisement on front door of store versus 21.9% of convenience stores and gas stations in comparison zip codes.
Supporting Evidence	FCUC SPF Store Observation Project Final Report January 16, 2013
National Promotion	No response
Supporting Evidence	No response

Factors Related to Promotion that Contribute the Most to Availability
Factor 1: Stores and gas stations promote new marijuana-related products near the register and on the window; for example, a new adjustable 5-hooded cigar... "so hood so good."
Whom does this affect/occur with?
Customers coming in the door
Who allows this?
Convenience store and gas station owners and community residents
When does this occur?
Daily during retail store hours 8:00am-11:00pm
Where does this occur?
Convenience stores' and gas stations' front doors and windows
How does this occur?
Manufactures and vendors supply the advertising the windows and doors to sell their drug related products
Under what conditions is this allowed to happen?
Convenience store owners and some community residents see smoking marijuana as socially acceptable and a low-risk drug-using activity so promoting new products associated with its use is acceptable.

Pricing Factors

Identified contributing factors with good data and/or evidence to justify that they are impacting priority substance use in the community:

- Urban core convenience stores and gas stations sell marijuana related items (blunts, rolling papers) in affordable single packaging.
- Local drug dealers sell marijuana in various sizes and in various price ranges.

Contributing factors for which the community needs to collect more data and/or evidence to justify they are impacting priority substance use in the community:

None

Plans to collect that data and/or evidence:

N/A

Based on the data gathered on promotion, these are the concerns around pricing that might contribute to priority substance use in the community:

Store customers in the urban core have a greater accessibility to alcohol and drug paraphernalia than surrounding neighborhoods in Columbus with similar populations of 18-25 year olds due to the number of stores selling products. These stores offer a wide range of drug related products and sell them in single packaging so they are affordable to low income residents in the neighborhood.

Priority Substance	
Marijuana	
Contributing Factors Presenting in Community	
Container Pricing	Convenience stores and gas stations price marijuana related products cheaply to customers; density of retailers creates competition and can lead to low pricing. Urban core convenience stores and gas stations offer marijuana-related items (blunts, rolling papers) in affordable single packaging .
Supporting Evidence	FCUC SPF Store Observation Project January 16, 2013
Other (Marijuana Packing)	Local drug dealers sell marijuana in various sizes and in various price ranges.
Supporting Evidence	Anecdotal evidence, affordable to non-working young adults

Factors Related to Pricing that Contribute the Most to Availability
Factor 1: Urban core convenience stores and gas stations offer marijuana-related items (blunts, rolling papers) in affordable single packaging
Whom does this affect/occur with?
No response
Who allows this?
Convenience store and gas station owners and community residents
When does this occur?
Daily during retail store hours 8:00am-11:00pm
Where does this occur?
Convenience store and gas station registers or at the point of sale
How does this occur?
Vendors sell the packaged drug related products at wholesale prices to convenience stores and gas stations for them to offer at retail prices to consumers to make a profit.
Under what conditions is this allowed to happen?
Store customers purchase the single packaged drug related-products to use with their marijuana.
Factor 2: Local drug dealers sell marijuana in various sizes and in various price ranges
Whom does this affect/occur with?
No response
Who allows this?
Community residents who purchase the marijuana from local dealers
When does this occur?
Daily
Where does this occur?
On street corners, alleys, houses
How does this occur?
Drug dealers sell the packaged marijuana at street prices to consumers to make a profit.
Under what conditions is this allowed to happen?
Drug dealers and some community residents see buying and selling marijuana a business transaction and not a criminal activity.

Organizational-Level

Capacities

Organizations currently implementing prevention strategies for priority substance:

- Africentric Personal Development Shop
- Columbus Public Health
- Columbus Area/Project Linden Inc.
- Urban Minority Alcoholism & Drug Abuse Outreach Program
- APADO

Opportunities for SPF SIG coalition to work with these organizations:

- Africentric Personal Development Shop worked with the coalition to collect community readiness surveys and usage surveys.
- Columbus Public Health has two staff that are coalition members (18-25 year-old member, governmental member). Staff assisted with writing the proposal and writing the community readiness section of needs assessment. One member attended the SAPST, OPEC, SPF SIG conferences and the 18-25 year-old member attended the SPF SIG conference.
- Project Linden collected MIPH Community Readiness Surveys and 18-25 Usage Surveys
- Urban Minority Alcohol and Drug Abuse Outreach Program (UMADAOP) has one staff that is a member of the coalition who wrote sections in the original application and wrote the Needs Assessment section on Cultural Competence. The staff attended the SAPST, OPEC, and SPF SIG conferences. Their staff collected MIPH Community Readiness Surveys and 18-25 Year-Old Usage Surveys,
- Two coalition members serve on Alcohol and Drug Abuse Prevention Association of Ohio ADAPO committees the organization that compiled a position paper on Marijuana as medicine.

Types of prevention strategies currently being implemented for the priority substance in the community:

Education, environmental, alternatives, community-based process, problem ID referral, and information dissemination

Opportunities for the SPF SIG coalition to capitalize on current prevention programming to help support or buttress SPF SIG efforts:

- The coalition is working with the agencies that address marijuana usage in the community.
- The coalition collaborated with the Columbus Recreation and Parks APPS Program to survey 18-25 year olds at the Cap City Festivals held at Barack, Beatty, Linden, Glenwood centers.
- The ADAMH Board of Franklin County funded Columbus Public Health to provide prevention services and early intervention services to the young adults involved in the Columbus Recreation and Parks APPS Program.

- Plans are to strengthen relationships with the Pride Centers to meet residents active in the block watch groups in the urban core.

Gaps

Gaps in prevention programming for the priority substance:

Prevention strategies offered at the agency level target 18-25 year olds after a negative consequence (i.e., suspension from school, failing a drug test at work, domestic violence charge, or DUI). Outreach is needed to impact community residents in the neighborhood before they are suspended from school, denied employment or affiliate with gang.

Ways the SPF SIG coalition can fill these gaps:

- Plans are to strengthen relationships with the Pride Centers to meet residents active in the block watch groups in the urban core so we can implement community readiness strategies.
- Plans are to compile the data from the 18-25 Year-Old Usage Survey 2012 and share finding with the residents.

Policy-Level

Policy issues, based on gathered data, that may contribute to consumption of the priority substance within the community:

It is problematic that crime data of all kinds are lacking after 2007. The local database has experienced major problems, making the data unusable. It prevents appropriate response development based on current information regarding trends and response outcomes.

Enforcement tactics such as looking for marijuana paraphernalia during routine traffic stops would make enforcement appear arbitrary to the offender, and not related to his/her actual behavior. In 2007, Franklin County had the fourth highest arrest rate for marijuana possession of Ohio counties, behind Hamilton, Cuyahoga and Summit. Considering the presence of Ohio State University within the county area, this would indicate that arrest percentages are not a strong focus within the county as a whole.

Nevertheless, racial differences appear (based on state data). In 2007, arrests of whites for marijuana possession composed 66% of arrests, while arrests of African-Americans composed 34%. However, this translates to 120 arrests per 100,000 of population for Whites vs. 430 arrests per 100,000 of population for African-Americans. Our target population is African Americans. In addition, the racial disparity in possession arrests of African-Americans would reinforce the appearance of arbitrariness over behavior.

Policy		Number of Infractions (arrests, etc.)		
Policy Level: State, local or IHE	Description	2007	2008	2009
State	Possession of drugs/paraphernalia	4720	5226	5322
Local	Drivers checked at sobriety checkpoints/arrests	7337/27	N/A	N/A
Local	Felony DUI	1	N/A	N/A
Local	Complaints investigated	3	N/A	N/A
Local	Narcotics specific warrants	4	N/A	N/A
Local	Narcotics arrests	212	N/A	N/A
Local	Drug Buys	159	N/A	N/A
Local	OVI arrests	1	N/A	N/A
Local	Complaints investigated	253	N/A	N/A
Local	Marijuana possession/paraphernalia arrests	1197	N/A	N/A

Factors Related to Policy Issues That Contribute to Consumption in Your Community
Factor 1: Marijuana and marijuana paraphernalia is readily available in Franklin County and adjacent counties
Whom does this affect/occur with?
African American young adults (aged 18-25) living in the urban core of Columbus
Who allows this?
Neighborhood, family, and peer culture regarding substance (marijuana and alcohol) use
When does this occur?
During everyday social interactions, supported by music and other social stimuli
Where does this occur?
Our targeted neighborhoods are largely urban, African-American, and economically disadvantaged.
How does this occur?
Marijuana, like alcohol and synthetic marijuana, is easily available for purchase by street dealer, friend and corner market. Substance use has high social influence.
Under what conditions is this allowed to happen?
Urban communities with high level of poverty, lack of employment and lack of education as well as social influences (such as a high prevalence of adhering to a hip hop lifestyle) combine to foster marijuana use.
Factor 2: Possession of small amounts of marijuana is lightly punished, as is paraphernalia possession, unless confiscated in high crime areas or communities of color, such as our targeted urban core. For details, see Appendix: Policy-Level/CRIMINAL JUSTICE AND LAW ENFORCEMENT FACTORS.
Whom does this affect/occur with?
Those who come to the attention of police regarding marijuana or paraphernalia possession
Who allows this?
This is state law. Until September 2012, paraphernalia possession was more heavily punished than marijuana possession itself. Arrests are dependent, in part, on the judgment of the officer involved.
When does this occur?
Law enforcement maintains sobriety checkpoints, where they look for alcohol, marijuana, and other illicit drugs.
Where does this occur?
In high-crime areas or communities of color, possession arrests rates are much higher than in other neighborhoods.
How does this occur?
Minimal punishment coupled with a high arrest rate in urban, largely African-American neighborhoods tends to lead citizens to feel that the law enforcement activity is more random and arbitrary than associated with actual behavior.
Under what conditions is this allowed to happen?
In some instances, overt racial prejudice is at work. However in many cases, where high crime rates occur, the perception among law enforcement officials is that much that happens is problematic. This leads to the assumption of worst-case thinking.
Factor 3: The city of Columbus has initiated 7 programs to proactively address marijuana use. Pride Centers promote a stronger sense of community, resident empowerment, particularly in blighted neighborhoods within the city of Columbus. Law enforcement has introduced strategies to reduce crime and drug trafficking which increase the arrest and conviction of African Americans. Franklin County Courts, law enforcement and the ADAMH of Franklin County work together to increase the number of people going to treatment instead of jail, adding to the proactive approach to the issue. For program details, see the Appendix: Policy-Level/RESPONSE.
Whom does this affect/occur with?
Urban core neighborhood citizens, particularly those who are at risk for developing addictive behavior
Who allows this?
The city of Columbus, law enforcement entities, Franklin County Courts, and the ADAMH Board have partnered to lower drug use, trafficking, and crime.
When does this occur?
Developing a sense of community and personal empowerment develops slowly as citizens work with community liaisons to solve individual and neighborhood issues.
Where does this occur?
Franklin County has a drug specialty court that places as many as possible into treatment rather than jail. Funded in part by the ADAMH Board, this diversion is of great assistance to those whose primary issue is drugs rather than crime. In addition, the neighborhood Pride Centers allow youth and adults access to facilities and programs designed to promote a stronger sense of connection to their community and self-empowerment.
How does this occur?
By introducing access to a one-stop-shop for city services that protect the health, safety and welfare of the families living in the area, the Columbus Pride Centers provide a positive influence in problem neighborhoods.
Under what conditions is this allowed to happen?
Those who find themselves in court are able to access treatment programs and structure provided by the court to deal with drug use problems. Pride Centers foster alternatives to drug use by facilitating access to employment, healthy recreation and other community services.

Cultural Competence

Millennials (Generation Next)

Prevention Programming:

- **These prevention programs are offered to Millennials by the following group(s):**
Our coalition has not been able to find any specific prevention programs for our target population. However, there are educational, reentry, alternative, and workforce development programs that have prevention components. Many of these programs contain life skills and soft work skills/components geared to help socialize participants to be functional in the workplace and society in general. The list is as follows:
 - City Year (corps)
 - Columbus Public Health (Leadership Resiliency)
 - Columbus Recreation and Parks (APPS)
 - COWIC (the Central Ohio Workforce Investment Corporation) (workforce development)
 - Godman Guild (workforce development, GED, family services)
 - Goodwill (workforce development)
 - Hinkles and McCoy (training services)
 - Impact (reentry, workforce development, education)
 - UMADAOPFC (reentry)
 - Urban League (father to father, reentry, education)
 - Youthbuild (workforce training, education, life skills)

- **These programs do not specifically target Millennials, but could potentially reach them or be modified:**
General education and workforce development programs are located throughout the city through GED, community colleges and other programs. Some of the specific programs are as follows:
 - Africentric Personal Development Shop
 - Africentricity: Freedom from Abusive Relationships (AFAR)
 - Columbus Area Inc. (MECCA-Prenatal Program)
 - Columbus Public Health
 - Community for New Direction (focus)
 - Maryhaven (underage drinking driver intervention program, juvenile underage drinking program)
 - Project Linden (Women's ATOD Program, Women's Pregnant Program, Women's Pre-Treatment Program)
 - SAGE (community prevention program)
 - UMADAOPFC (Community-based program)

- **Sources for program information:**

We held two focus groups with the target population at Franklin County Youthbuild. One group was male and female between 18-24 years old. The other group was all African American male ex-offenders between 18-24 years old. The ADAMH funds the majority of ATOD prevention programs in our target area, and they shared their data. Lastly, our coalition members work in the field and have shared programs they are aware of as well.

Expertise:

Individuals with Expertise Working with Millennials		
Name	Agency	Contact Information
Mike Dean	Youthbuild	820 Mansfield Ave Columbus Ohio, 43219 (614) 222-4745
Craig Comedy	UMADAOPFC	510. E. Mound St. Suite 100 Columbus Ohio 43215 (614) 227-9694, columbus@umadaopfc.com
DJ for Power 107.5	Power 107.5	350 E. 1st Ave Suite 100, Columbus, OH 43201, Main Phone: 614-487-1444
John Dawson	Community for New Direction	2323 W. 5th Avenue Suite 160 Columbus, OH 43204) (614) 272-1464
Greg Jefferson	Community for New Direction	2323 W. 5th Avenue Suite 160 Columbus, OH 43204
Shannon Butler	Youthbuild Columbus Community School	1183 Essex Avenue Columbus, OH 43201- 2925
Chip Livisay	Columbus Public Health	240 Parson Ave. Columbus, OH 43215
Brian Woods	TOUCH	3968 E. Main Street Columbus, Ohio 43213 614-338-8733
James Cotton	Buck-Icon Foundation	(614) 937-7865, info@buckicon.com
Jerome Decarlo	Huckleberry House	1421 Hamlet St. Columbus, OH 43201

- **Ways local expertise can be tapped into for the SPF SIG process:**

Everyone listed and their organizations have direct access to our target population. They can help be a conduit between service providers and our target population. Some provide successful programming that can be shared with other providers. Some are already members of our coalition and bring the resources of their organizations or businesses to the coalition. Their expertise has already been essential to our coalition’s work thus far.

- **Sources for expertise information:**
Two focus groups with Millennials and from surveying agencies who provide service to Millennials

Gaps:

- **Perceived gaps in prevention programming for Millennials:**
While some programs serving Millennials offer life skills programming, from information garnered thus far, few focus specifically on ATOD concerns with them. The 18-25 year olds in our focus groups stated that ATOD prevention came up sparingly in programs and usually only as it relates to drug testing for employment. Many youth in focus groups stated that both marijuana and alcohol are used to get away from stress and as a normal part of their social interactions. Since many spend little time with adults over forty, much of their socialization into adult life is coming from their peers. They also point out that most young people they know are not involved in any type of program, and do not have the drive they do to become successful. They are bombarded with messages of alcohol and marijuana use targeted specifically to them through music, videos, and movies while receiving little about prevention through the same mediums. Lastly, much of the historical research to this age group has been at universities, which much of our target group does not attend.
- **Ways these gaps were identified:**
The majority of information for this section came from focus groups of Millennials. In addition, a survey of existing programming for this population shows large gaps in prevention-specific programs and the number of Millennials in the programs' period. Our target population also suffers from the highest risk factors for ATOD abuse in this city, especially in unemployment, peer influence, social norms and access to alcohol and marijuana.
- **Ways to close these gaps:**
This will take much time and effort. However, prevention agencies can start training staff of those agencies who work with our target populations to infuse prevention programming into their existing curriculums. ODADAS is pushing prevention professionals to become trainers. In addition, prevention providers can work with agencies serving Millennials to apply for joint funding to meet those needs as well. Agencies working with Millennials often lose them to ATOD abuse, lack of life skills, and negative peer influences. Our coalition will need to educate agencies, law enforcement, elected officials, educators, etc. of the need for a strong investment in ATOD prevention for Millennials. We also need to tie in volunteer groups from community groups including elders, churches, professionals, businesses and social and civic organizations. Many members of these groups have grown up in the same or similar communities as our target population, and have been able to become successful and build many of the protective factors our target population needs to in order to be successful.

Sub-Target/Underserved Population

The coalition will not implement the SPF with a sub-target/underserved population.

Appendix I: Additional Introduction Information

Executive Summary of the 2009 PPAAUS - Primary Prevention Awareness, Attitude, & Use Survey

STUDENT PERSPECTIVES ON THE USE OF ALCOHOL, TOBACCO, OTHER DRUGS, AND VIOLENCE

FRANKLIN COUNTY OHIO SCHOOLS

INTRODUCTION

Research on the use of alcohol, tobacco and other drugs has consistently shown that the use of these substances by young people is correlated with a wide range of negative behaviors including low academic performance. In 1988, the Safe and Drug-Free Schools Consortium, a program of the Educational Council, initiated a needs assessment of students in grades six through twelve. Every three years, this assessment is repeated; for 2009, the eighth occasion of the survey, over 32,000 8th, 10th and 12th grades only in public and non-public schools were included in the Primary Prevention Awareness, Attitude, and Use Survey. This summary contains highlights of the report. For comprehensive results of the 2009 Franklin County report or those of other triennial surveys, contact the Safe and Drug-Free Schools Consortium. The comprehensive results of the 2009 Franklin County report may be found on the Educational Council website at www.edcouncil.org.

The purpose of this adolescent self-report inventory is to provide information that can be used to guide prevention and intervention efforts; to track changes over time in the self-reported use of alcohol, tobacco, and other drugs; to identify possible correlates and predictors of drug and alcohol use; and to identify areas of problem behaviors and safety concerns. Many items and topics in PPAAUS have remained the same over the years, allowing the Consortium to track suggested trends in usage, behavior and attitudes.

SURVEY HIGHLIGHTS/KEY MESSAGES

Some Correlates of Alcohol, Marijuana and Tobacco Use

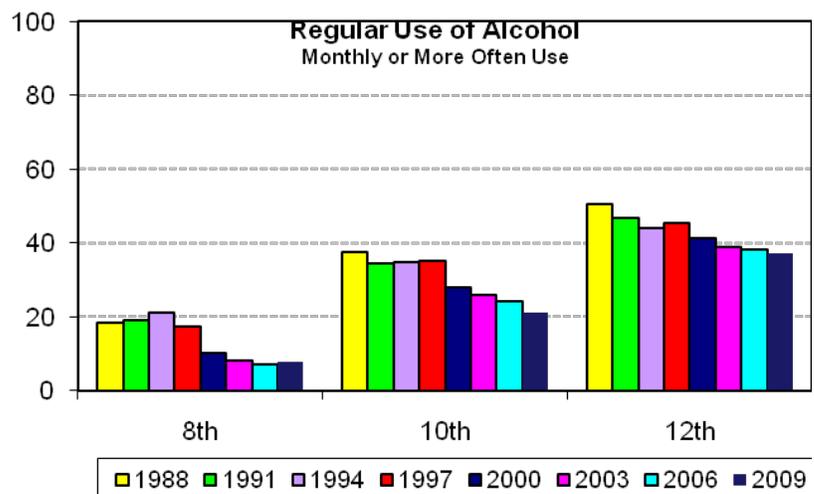
- Students whose friends and parents give the message “it’s NOT OK to use” report much lower use of alcohol, marijuana and tobacco.
- Students who report having teachers who show respect and provide student assistance, as well as having staff, students and parents who work together report lower use of alcohol, marijuana and tobacco.
- Students who report that their families have “strong family values against the use of alcohol, tobacco or other drugs” are much less likely to use alcohol and marijuana.
- Students who participate in school program activities use less alcohol, tobacco and other drugs than students who did not participate.
- Students who use alcohol, cigarettes and marijuana also report higher levels of skipping school, cheating in school, suspension from school, selling drugs, vandalizing property, getting drunk and lower grades in school.

Alcohol

- 8% of eighth graders, 21% of tenth graders, and 37% of twelfth graders drank regularly (at least once a month).
- 2% of eighth graders, 7% of tenth graders, and 13% of seniors drank alcohol at least once a week.
- The average age of first use of alcohol for eighth grade students was 11.9, for tenth grade students, 13.6 and for twelfth grade students, 15.0.
- 68% eighth graders, 47% of tenth graders, and 33% of twelfth graders had never drunk alcohol.
- 10% of eighth graders, 20% of tenth graders, and 32% of twelfth graders reported binge drinking at least once in the last 30 days.
- 18% of eighth graders, 16% of tenth graders, 19% of twelfth graders thought there was minimal harm (no risk or slight risk) associated with binge drinking on the weekends.
- 0.8% of eighth grade students used alcohol in school, 15% used it at parties and 16% used it at home. 2% of the tenth grade school students used alcohol in school, 34% used it at parties and 24% used it at home. 2% of the twelfth grade school students used alcohol in school, 52% used it at parties and 24% used it at home.

Trends:

Overall, alcohol use declined 1997 to 2009, bringing it to the lowest levels since the first PPAAUS survey in 1988. Across all grades, regular use decreased an average of 1.3% from 2006, with the largest decrease shown among students in 10th grade.

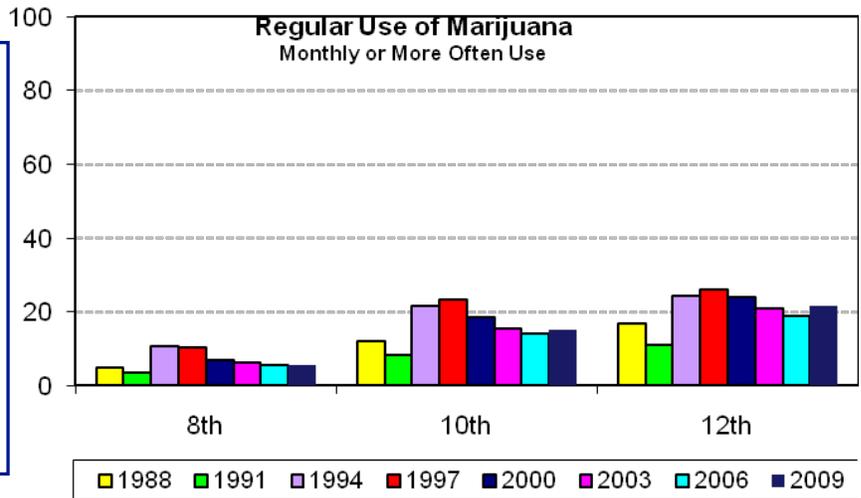


Marijuana

- 6% of eighth graders, 15% of tenth graders, and 22% of twelfth graders smoked marijuana once a month or more.
- Average age of first use for eighth grade students was 12.2, 13.8 for tenth grade students and for twelfth grade students, 15.0.
- 87% of eighth graders, 72% of tenth graders, and 59% of twelfth graders had **never** smoked marijuana.
- 18% of eighth graders, 17% of tenth graders, and 26% of twelfth graders believe there is minimal harm (no risk or slight risk) associated with smoking marijuana regularly.
- Among eighth grade students, 0.9% of the students reported smoking marijuana at school, 8% at parties and 6% at home. Among tenth grade students, 3% of the students had smoked marijuana at school, 19% had smoked at parties and 13% at home. Among, twelfth grade students, 4% of the students had smoked marijuana at school, 29% had smoked at parties and 17% at home.

Trends:

After a large increase in use from 1991 to 1994 in all grades, marijuana use remained fairly stable through 1997. In 2000, decreases in use were seen in all grades. This trend continued in 2003 and 2006, to levels below the 1994 levels. However, in 2009, students in 10th and 12th grades reported an increase in the use of marijuana.

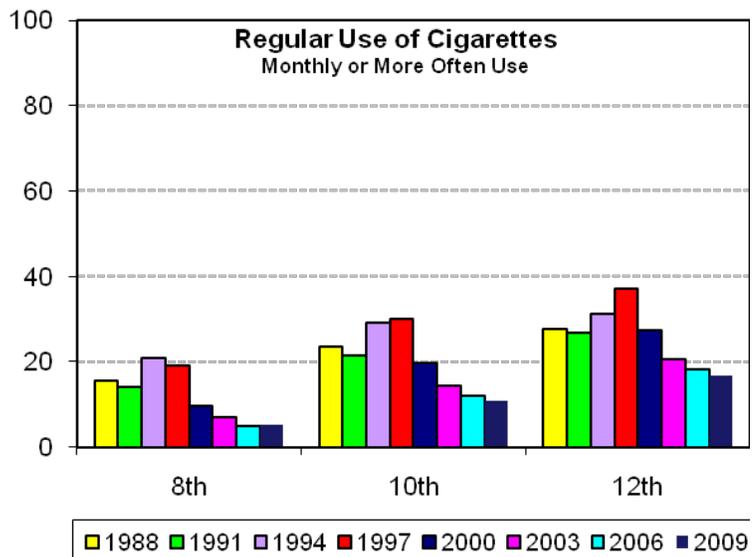


Tobacco

- 2% of eighth graders, 5% of tenth graders, and 8% of twelfth graders reported smoking cigarettes daily.
- An additional 4% of eighth graders, 6% of tenth graders and 9% of 12th graders smoke at least once a month up to twice a week.
- The average age of first use for eighth grade students was 11.7, 13.2 for tenth grade students and for twelfth grade students, 14.7.
- 85% of eighth graders, 75% of tenth graders, and 67% of twelfth graders had *never* smoked cigarettes.
- 19% of eighth graders, 13% of tenth graders, and 12% of twelfth graders thought there was minimal harm (no risk or slight risk) associated with smoking one or more packs of cigarettes per day.
- Less than 1% of eighth grade students used cigarettes in school, 6% used them at parties and 8% used them at home. 3% of tenth grade students used cigarettes in school, 11% used them at parties and 11% used them at home. 3% of twelfth grade students used cigarettes in school, 18% used them at parties and 13% used them at home.

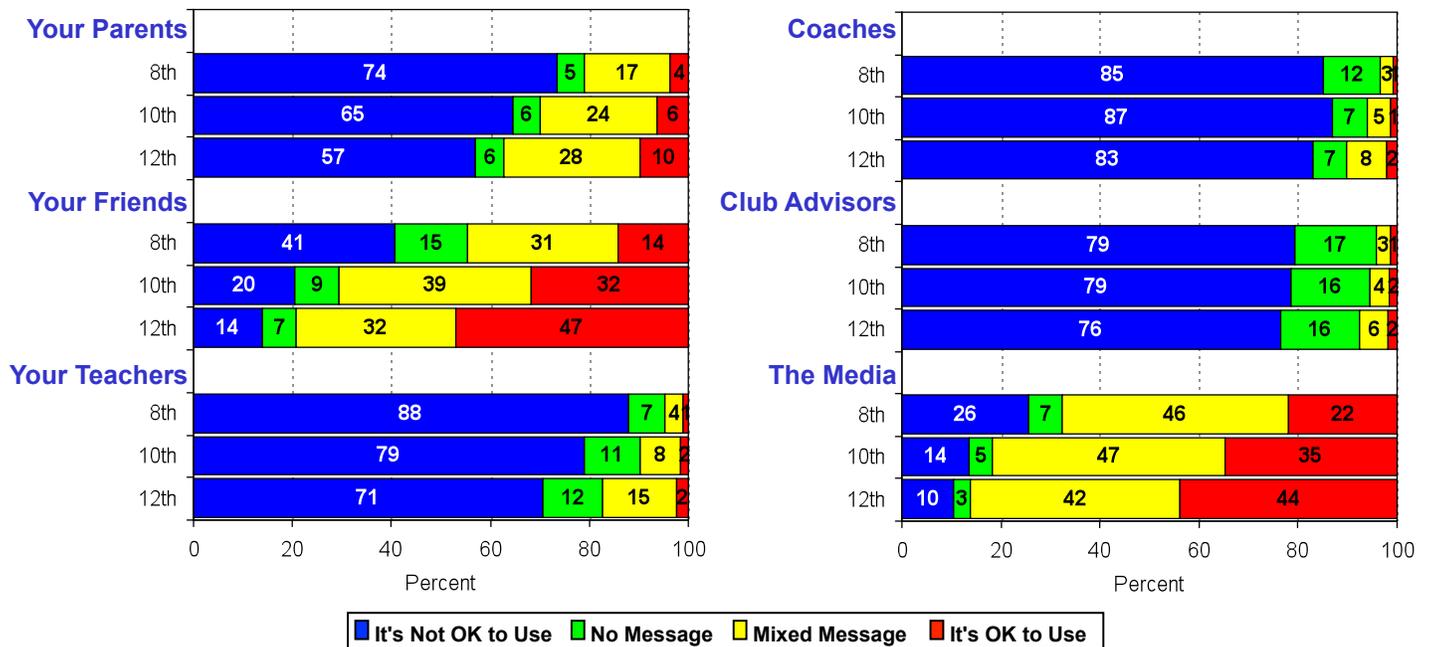
Trends:

After increases in cigarette use in 1994 and 1997, use in 2009 continued a downward trend that began in 2000. However, there is a slight increase in use among students in 8th grade.



Messages about Drinking

For club advisors and coaches, percentages are based on ONLY those students who participated in activities or sports.



“Message” items were also included for tobacco and marijuana. The responses for these items produced similar patterns as messages about drinking.

Problem Behaviors

In-School

- 22% of Franklin County students in grade eight, 37% in grade ten and 48% in grade twelve had skipped class at least once in the past year.
- 15% of eighth graders, 21% of tenth graders and 29% of twelfth graders had skipped school at least once in the past year.
- 43% of eighth graders, 55% of tenth graders and 54% of twelfth graders had cheated on a class test at least once.

Community

- 5% of students in eighth grade, 10% of students in tenth grade and 12% of students in twelfth reported that they had sold drugs in the past year.
- 22% of eighth graders, 20% of tenth graders and 15% of twelfth graders had vandalized property.
- 20% of students in eighth grade, 17% of students in tenth grade and 13% of students in twelfth grade reported that they had been suspended from school.
- 26% of students had ridden in a car when the driver had been drinking in the past year, 24% with a driver who had been smoking pot.
- 19% of students who drive had done so while drinking, 20% of students had driven a car while using marijuana, and 43% of students had served as a designated driver.

Bullying-Related Behaviors

Students were asked questions about behaviors during school that are associated with bullying. They were asked to reflect on how they treat peers (perpetrator), whether or not they are treated negatively (victim) and what they do when others are being bullied (bystander).

Perpetrators

- 25% of eighth grade students, 19% of tenth grade students and 16% of twelfth grade students had pushed others around to make them afraid (5% of all students more than three times).
- 51% of eighth graders, 40% of tenth graders and 32% of twelfth graders had told lies or spread false rumors about someone (7% of all students four times or more).
- 34% of eighth grade students, 28% of tenth grade students and 23% of twelfth grade students reported they had left someone out of a group or activity to hurt them (5% of all students more than three times).

Victims

- 9% of eighth grade students, 7% of tenth grade students and 4% of twelfth grade students reported that they had been robbed at school within the past year (1% of all students more than three times).
- 18% of eighth grade students, 11% of tenth grade students and 7% of twelfth grade students said they had been physically attacked at school (2% of all students four times or more)
- 44% of the eighth graders, 38% of the tenth graders and 30% of the twelfth graders had been verbally attacked (9% of all students four times or more).
- 19% of eighth grade students, 16% of tenth grade students and 11% of twelfth grade students had feared for their physical safety at school.
- 29% of the eighth graders, 26% of the tenth graders and 21% of the twelfth graders had been called names, disrespected, physically threatened, or made to feel afraid online.

Bystanders

- 40% of eighth grade students, 47% of tenth grade students and 47% of twelfth grade students did nothing when another student was being called mean or hurtful names (5% of all students joined in).
- 24% of the eighth graders, 29% of the tenth graders and 27% of the twelfth graders did nothing when another student was being physically attacked (2% of all students joined in).
- 37% of eighth grade students, 44% of tenth grade students and 45% of twelfth grade students did nothing when they observed someone spreading mean rumors or gossip (6% of all students joined in).

Prevention Programs

- 75% of the Franklin County students had participated in Drug Abuse Resistance Education (D.A.R.E) at least once in school.
- 21% of all students surveyed had been in drug-free clubs or activities.
- 16% of students had participated in violence prevention programs.
- 24% of the Franklin County students had participated in drug-free leadership, camps or retreats.
- 9% of all students had participated in Winners' Choice Camp.
- 28% had participated in after school mentoring or tutoring.

Out-of-School Activities

- 52% of eighth grade students participated daily in educational activities outside of school. 59% and 58% of tenth and twelfth grade students, respectively, participated in such activities daily.
- 46% of eighth graders, 43% of tenth graders and 40% of twelfth graders participated daily in physical activities and community sports.
- 34% of students in eighth grade reported daily participation in family activities. 28% of tenth graders and 25% of twelfth graders participated in such family activities daily.
- 49% of the eighth graders, 58% of the tenth graders and 68% of the twelfth graders participated in social activities with friends at least once a week.
- 40% of the eighth grade students, 37% of the tenth grade students and 33% of the twelfth grade students participated weekly or more often in religious activities.
- 7% of the eighth grade students, 12% of the tenth grade students and 44% of the twelfth grade students worked for pay at least once a week in out-of-home jobs.
- 5% of the eighth graders, 8% of the tenth graders and 13% of the twelfth graders did volunteer or community service activities weekly or more often.
- 13% of the eighth grade students, 11% of the tenth grade students and 11% of the twelfth grade students were in community activities at least weekly.

How are Franklin County Youth Spending their Lives? 2006 vs. 2009

Change from 2006 PPAAUS Survey	8 th Grade	10 th Grade	12 th Grade
Regular Use of Alcohol	Increase	Decrease*	Decrease
Regular Use of Marijuana	Stay the Same	Increase*	Increase*
Regular Use of Cigarettes	Increase	Decrease*	Decrease*
Regular Use of Chewing Tobacco	Increase*	Increase*	Increase
Daily Participation in Athletic/Exercise Activities	Decrease*	Decrease	Increase*
Daily Participation in Educational Activities Outside of School	Decrease*	Stay the Same	Decrease
Weekly+ Participation in Social/Entertainment Activities	Increase	Decrease	Decrease*
Weekly+ Participation in Religious Activities	Decrease	Decrease	Decrease*

**Significant Differences at the .05 level.*

PPAAUS maintains very good internal and external reliability. Reliability coefficients from PPAAUS average .7808.

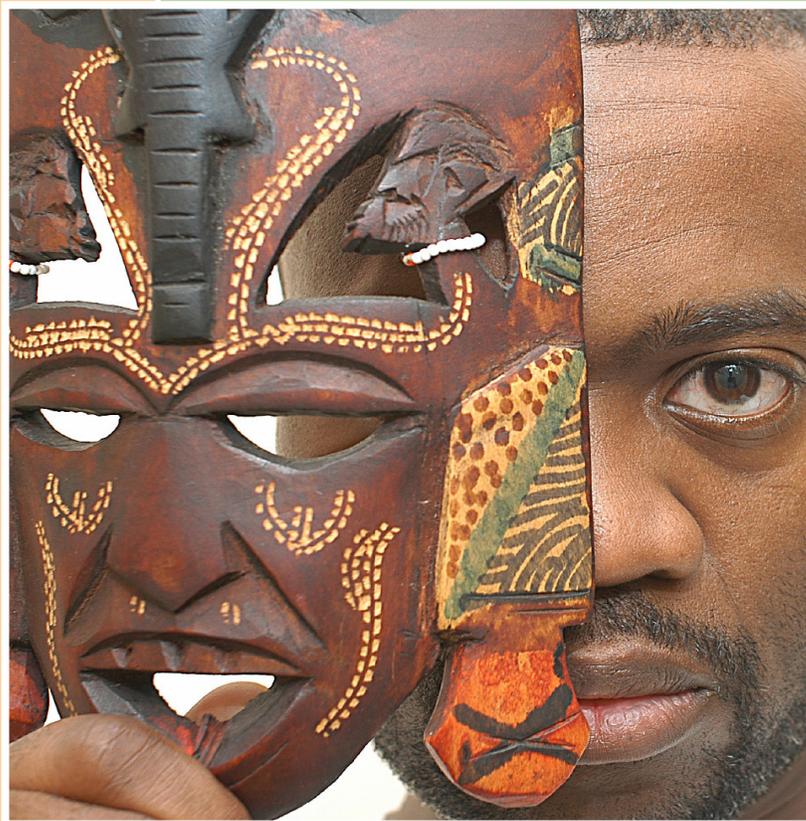
A Questionable-Response (QR) filter was used to identify students who may have been exaggerating or careless in their response patterns. Two or more QR points based on these criteria were cause to eliminate a survey from analyses. In the Franklin County Schools, 1,141 questionnaires (3.5 percent) were excluded from the final data set because of two or more QR points.



For more information, please contact The Safe and Drug-Free Schools Consortium, a program of the Educational Council, 1929 Kenny Road, Suite 300, Columbus, OH 43210, 614-292-0728.

African American Male Initiative

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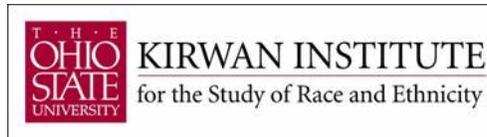
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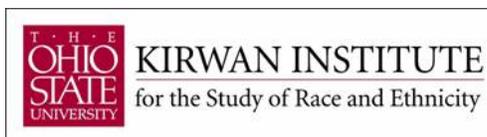
April 25, 2008

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The image features a decorative header section. On the left, there is a solid orange rectangular block. To its right is a larger green rectangular block. A thin black crosshair is centered on the green block, with the text 'Executive Summary' written in a dark red, cursive font over it.

Executive Summary



Executive Summary:

African American Male Initiative

Prepared by: The Kirwan Institute for the Study of Race & Ethnicity, The Ohio State University

Prepared for: The W.K. Kellogg Foundation

April 25, 2008

For nearly two years, the W. K. Kellogg foundation has funded the Kirwan Institute to expand the knowledge base and academic scholarship on African American males. The major goals we have met in this work include: A) updating the review of social science literature on African American males; B) assembling and learning from a national advisory board of scholars on African American males; C) completing a mapping project on the isolation of African American males from opportunities, a goal not explicitly recorded in our grant proposal; and D) convening a national conference on African American males that will culminate in a published anthology of emergent research and literature on African American males. We organize this report using these four goals as section markers, followed by two sections for our recommendations and references. We conclude with an Appendix evaluating our work for the Kellogg Foundation.

A wide range of statistics reflects the plight of black men in America: their high rates of criminality, incarceration, alcohol and drug use, unwed parenting, and premature death; their low rates of legal employment, high school completion, college attendance, and active participation in the lives of their children. In this report, we bring to light many key research, advocacy and policy initiatives. It is critical, however, to position them within a larger, structural context that acknowledges the cumulative interaction of systemic, institutional and spatial barriers impacting black males. Truly transformative efforts on behalf of black males can only be grounded in a deep recognition of and prescriptive attention to this structural context. Creating a more cohesive “field” of researchers and advocates whose practices engage this context can strengthen efforts to subvert racial hierarchy, construct communities of opportunity, and promote democratic practices for African American males, as well as for all members of society.

A. Literature Review

One of our objectives was to update the literature on African American males. We did this by completing a comprehensive review of the relevant social science literature, including information on policies and programs for black males. As the last such review took place more than a decade ago, we worked to determine gaps in the emerging literature and areas that need greater energy. We also sought to identify structural solutions to the crises that African American males face.

The authors of the original review determined that research on black males was situated in four main areas: education; psychological issues; politics and economics; and demographic and statistical data. Although these issues remain salient more than ten years later, several emergent themes have broadened the research field. These include the identity construction of black males; the community/environment/geography link with black male developmental outcomes; the impact of homelessness; the role of “other fathers” or “social fathers”; and the influence of music on the racial identity and academic achievement of black males.

Our analytic review of the literature has revealed that much of the research and scholarship on black males has been rooted in a “cultural” or “deficit” model in which disparities are attributed to black males themselves rather than to their environments or to institutional arrangements. Of course, there is often a complex interaction between the cultural and personal, on the one hand, and the institutional and environmental, on the other, an interaction the literature has largely ignored. In light of the overuse of the deficit framework, we have too little research that examines how structural factors impact outcomes in the areas of education, employment, and mental/public health for males. Furthermore, much of the research also concentrates on “young black males,” ignoring investigations regarding older males or young adolescent . Finally, the research is sparse on African American males who manage to successfully overcome the structural barriers they face. We bring attention to some of these barriers in our section on mapping the opportunity structures of African American males.

Recent Literature

1. Education

- Studies continue to show that teachers perceive males to be academically inferior, overly aggressive and lacking adequate leadership and social skills.
- Successful teacher interaction with black males involves smaller classes, proactive contact by teachers with their parents, and increased feedback to parents about their children’s progress and status.
- Several structural factors contribute to the disproportionate number of black males being suspended from school, including zero tolerance policies and the criminalization of male behavior.
- Gifted education classes are typically segregated environments in which students are chosen on the basis of standard IQ test scores rather than on the basis of other forms and measures of intelligence. These classes also too often feature teaching biases that favor whites over blacks.

Policy Recommendations

Pre-school Policies

- ❖ Efforts should be made to increase the academic involvement of fathers at all levels in their children's education, especially at the pre-school level. School activities for black fathers should include both formal and informal opportunities so they can develop relationships with school personnel.
- ❖ Parents should be engaged in pre-school level activities that offer opportunities to increase their academic skills so they are better prepared to help their children. Studies have shown that low-income black parents tutored in mathematics improve the academic outcomes of their children.
- ❖ The components of highly successful programs that improve school outcomes should be examined and replicated. The Perry School Program and the Abecedarian project are examples of successful programs whose components included early-education, family support, home visits, group meetings with parents, and activities focused on social, emotional, cognitive and language areas for children.

Elementary School Policies

- ❖ Mandatory cultural competency courses and in-service training for teachers should be put in place that includes information on the learning styles and cultural background of many African American male students. Training should also include assisting teachers in recognizing and understanding their own biases and prejudices about African American males (and other historically marginalized groups).
- ❖ Strategic plans should be made to recruit and retain more black male teachers. Currently, black males represent 1% of the teaching force (Lewis, 2006). Recommendations to help with the recruitment and retention of male teachers include assigning male teachers a mentor, targeting black male high school students for recruitment into the teaching profession, increasing collaboration with 2-year institutions since most males attend community colleges, and using teacher preparatory programs to increase black male PRAXIS scores.
- ❖ Culturally specific programming that is attentive to learning styles.
- ❖ School personnel should keep records on the number of black male students who enroll and persist in gifted classes.
- ❖ After-school funding should be provided for programs with an emphasis on academic competency and social activities for black males in non-school hours.

Middle School Policies

- ❖ A “safety valve” process should be implemented in schools with predominately African American male students to track the number of males recommended for suspension. When the suspension rates of black males reach a critical level, school personnel should be alerted and strongly consider enacting policies to reduce the number of black males suspended.
- ❖ School social workers should take a more active role in questioning referrals from teachers and administrators. All referrals should include previously established, uniform data in order to reduce the overrepresentation of black males in special education (Mills, 2003).
- ❖ Comprehensive reevaluation of the use of zero tolerance policies in middle schools should be undertaken.
- ❖ Single sex classes should be offered for black males in math and science classes; their progress should be monitored.

High School Policies

- ❖ Schools should place equal focus on the academic competency of black male students and on improving their high school graduation rates.
- ❖ A dropout prevention program utilizing successful models based on best practices that specifically target African American male students should be established.
- ❖ School counselors should be more readily available to students and their families in order to better educate them regarding options for higher education, as well as the college application and financial aid processes. College preparation programs should be offered to prepare students for successful college outcomes. In addition, viable alternatives (such as trade schools) should be presented to males who are not college bound. This information should be provided at the 9th and 10th grade levels, not just during the junior and senior years.
- ❖ Black male students should be strongly encouraged to enroll in gifted and AP classes, with efforts made to ensure the presence of a critical mass of black male students in those classes.

College

- ❖ College programs and interventions that support males beyond their first year of college should be established. Studies have shown that males disidentify with college as they move through their college years, which may contribute to their high attrition rates.

- ❖ Measures must be taken to ensure that black males are both academically and socially integrated into college to increase their retention rates.
- ❖ Supportive measures for African American males enrolled in two-year colleges should also be developed and implemented.

Future Research Directions

- Future research and evaluations should disaggregate program data to examine African American male outcomes.
- New studies should examine the influence of male teachers, both black and non-black, on black male student outcomes.
- White and other non-black teachers who have had success in teaching black male students should be identified, and their methods and approaches should be studied and highlighted.

2. Identity

- Examining multiple aspects of educational institutions is essential to understanding how black boys define who they are and how they internalize the perceptions of school personnel and classmates.
- The literature analyzing the effects of the “burden of acting white” on black students has yielded conflicting findings. Further exploration is required to determine if this dynamic is significant to black male identity.
- African American gay and bisexual men who identified more positively with both the African American and gay communities reported higher levels of self-esteem.

Policy Recommendations

- ❖ Racial identity models for black males should examine their combined experience of being both black and male. Current models focus on either race or gender.
- ❖ Programmatic support for black males should continue throughout their college years to buttress their self-concept and self-esteem.

Future Research Directions

- More work on the implications for black males of “acting white” is needed to resolve conflicting and inconclusive findings in the existing literature.
- Future research should consider how African American males develop their concept of self as both racial and gendered individuals, and examine the impact of this within a social-political context.
- Research should investigate the normative development of black males and their identity when compared to the development of other adolescents.
- Studies should be done on the environments in which black males are living and learning, and the historical, political, and social implications of these environments on black males.

3. Marriages and Family

- The “dysfunction” of single-female-headed households is central to past and current research on the antisocial development of black males. However, some studies show that black males residing in single-female-headed households do not have worse developmental outcomes than do those in other family structures. This inconsistency warrants further review.
- Constellation studies are examining extended family structures, including non-resident fathers, “other fathers,” and “social fathers.”

Policy Recommendations

- ❖ Child support enforcement policies should be flexible and offer employment and support services for fathers (Mincy & Sorenson, 1998).
- ❖ Parenthood for men may be problematic because of their own poor or absent relations with their fathers. Programs are needed to assist men in building linkages and resolving issues with their own fathers (Roy, 2006).
- ❖ Fatherhood initiatives often focus on either the needs of fathers or their children. Programs should attempt, in a meaningful way, to incorporate the needs of both fathers and their children and recognize the contributions of fathers beyond economic support (V. Gadsden, personal communication, Winter 2007).
- ❖ The stigma of single-parent families should be unraveled and the work-family link revalued by assuring economic security for all family forms.

Future Research Directions

- New investigations should address how black male fathers contribute to their children's development, particularly in the home. In addition, future investigations should address the outcomes of black male children residing with single and divorced fathers.
- A new wave of historical scholarship should continue to challenge the dysfunction thesis of the single-mother-household and its impact on black males and the black family.

4. Mental Health

- African American adolescents are at a greater risk of experiencing behavioral and emotional problems such as depression than members of any other ethnic group because they disproportionately reside in dangerous, segregated, and opportunity-poor communities.
- Suicide has become a significant public health issue for African Americans.
- Many barriers prevent African American males from utilizing mental health services effectively.
- Black male involvement in out-of-school time activities may be protective for their mental health.

Policy Recommendations

- Mental health research should consider the influence of environmental stressors, and peer and family support, on the mental health of black males.
- Researchers should focus on the reasons for the increase in suicidal behavior.

Future Research Directions

- ❖ Future research should examine the risk and protective factors associated with depressive symptoms among African American males. This would be beneficial in developing prevention and intervention strategies for those at-risk for developing these symptoms.
- ❖ Future research should determine the roles of peers and family members in supporting males during mental health crises, since black males are less likely to depend on mental health workers for support.

5. Economics

- Skill shifts in the market have expanded opportunities for higher educated black males who are also less affected by immigration.
- Lack of employment for black males is often due to a spatial mismatch between where they live and where appropriate jobs are available, as well as to deindustrialization and employment discrimination.
- The lack of work and connection to socializing institutions have been shown to be just as important as poverty and lack of well paying jobs to the “social disorganization” many black males endure.
- African Americans who migrate to the South for jobs enjoy better economic outcomes than do those who remain outside the South or those who migrate westward.

Policy Recommendations

- ❖ The Earned Income Tax Credit should be expanded for low-income men and for noncustodial fathers who are current in their child support payments (Holzer, 2004).
- ❖ Classroom instruction should be linked to the job skills needed in the current labor market, i.e., Career Academies (Holzer, 2005).
- ❖ Access to effective programs such as the Job Corps and Youth Services Corps should be increased for males who drop out of high school (Holzer, 2005).
- ❖ Employment discrimination enforcement agencies should establish programs to monitor the practices of wage and employment discrimination and conduct random job audits at the national, state, and local levels (Coleman, 2003).
- ❖ Metropolitan areas should have full employment policies and initiatives such as empowerment zones to alter the distribution of jobs in these areas (Stoll, 1997).
- ❖ Develop institutional and social connectors for African American males.

Future Research Directions

- Research is needed to examine further the impact of male migration to the South and foreign immigration to the U.S. on black male employment.

6. Incarceration and Juvenile Justice

- Statistical findings still show alarmingly disproportionate rates of black male imprisonment which is related to discriminatory perceptions, expansion of punitive policies, low levels of education attainment and unemployment, and under-employment.
- Young black males receive more severe sentencing for most crimes than do members of other race-gender-age groups. Black youths are 48 times more likely to be incarcerated for drug offenses than whites - for identical drug crimes. In some states, more than 90% of convicted drug offenders are people of color.
- Studies consistently indicate that people of all races use and sell drugs at remarkably similar rates. If there are significant differences in the surveys to be found, they tend to suggest that whites, particularly white youths, are more likely to engage in illegal drug dealing than people of color. Any notion that drug use among blacks is more severe or dangerous is belied by the data.
- Drug arrests climbed from 450,000 in 1975 to nearly 2 million in 2005, despite the fact that illegal drug use for most of that period was declining. African Americans make up only 13% of regular drug users in the United States, but are 63% of all drug offenders admitted to prison.
- More than 40% of young African American men believe they, personally, have been stopped by the police on the basis of race, and many others believe their family members have been.
- For those charged with first time drug offenses, black youths are 48 times more likely than whites to be sentenced to juvenile prison. Latinos are 13 times more likely than whites to land in juvenile prison for a first time drug offense.
- Racial disadvantage accumulates as offenders advance through the system. Blacks account for 26% of all juvenile arrests nationally, but they account for 44% of juveniles who are detained, 46% of those who go to adult court, and 58% of those who end up in adult prison. The rates for whites are reversed. Whites comprise 71% of all juvenile arrests, but 53% of those detained, 50% of those going to adult court and 25% of those in adult prison.

Policy Recommendations

- ❖ “In order to fully account for the impact of the penal system on labor market inequality, research should include the effects of noncustodial supervision and the employment experience of convicts after release (Western & Pettit, 2000, pg.11).”
- ❖ Mandatory sentencing laws should be repealed (Mauer, 1999).

- ❖ “Efforts to reduce crime should not just target the offender’s criminal behavior, but should also include targeting the offender’s family and community. These efforts should also include improving the offender’s self-concept and self-esteem (Spencer & Jones-Walker, 2004, pg.95).”
- ❖ Funding for community-based interventions should be increased (Spencer & Jones-Walker, 2004).
- ❖ Policies should rely on research rather than rhetoric. Lawmakers must weigh the potential intended and unintended consequences of proposed changes in crime and drug control policy.
- ❖ An approach to criminal justice that balances the needs of society, victims, and inmates should be adopted.
- ❖ Truth-in-Sentencing and Three Strikes laws that have proven ineffective in the fight against crime and drugs should be repealed.
- ❖ The 100-to-1 powder cocaine/crack cocaine ratio and other drug sentencing laws that have incarcerated nonviolent offenders while failing to capture “drug kingpins” should be reexamined and challenged.
- ❖ Nonviolent, non-dangerous drug addicts and offenders in the prison system should be diverted and provided improved treatment and support services.
- ❖ Nonviolent and non-dangerous juveniles should be diverted from confinement and their job and training opportunities should be increased.

Future Research Directions

- Strategies to disrupt the school-to-prison pipeline should be research-based.
- The ways that black men have been constructed as targets of public policy should be examined.
- Rehabilitation options in community-based programs for youth offenders should be explored and enhanced.
- Research should be conducted on how to best prepare former prisoners for licit employment.
- An audit should be conducted of private correctional institutions to determine the physical conditions of the inmate population and the effectiveness of inmate rehabilitation programs in these institutions.
- The impact of drug courts should be studied.

7. Homelessness

- Homelessness is a gendered phenomenon, with an estimated 80–90% of the indigent population being male. It has damaging effects on health and well-being.
- The rise in homelessness is due to a number of structural economic and geographical shifts, including deindustrialization without adequate support and resources in the community.

8. Music

- The influence of music on the attitudes and behaviors of black males has emerged as a significant research theme, with emphasis on the effects of exposure to rap music and videos as well as the possibilities of using music as a culturally relevant tool inside and outside of the classroom.

Future Research Directions

- Future research on the impact of music should not be limited to the negative effects that rap music has on black male behavior. There should also be an examination of the possibilities of using music as a culturally relevant tool inside and outside the classroom.

B. Advisory Board Interviews

To meet our second goal, we assembled a national advisory board to assist the project team with guiding the social science literature review. The Board includes representation from various social science disciplines whose research interests and project agendas focus on black males. The members worked to identify new directions in research, initiatives, and policies that would improve African American male outcomes. Because scheduling an actual meeting proved difficult, we conducted numerous face-to-face and telephone interviews that provided insights into: 1) gaps in the research literature; 2) initiatives and policies that are particularly helpful to African American males, and 3) successful outcomes as they conceive of them. We summarize the Board's conclusions regarding major gaps in the research literature below.

Gaps in Research Literature

- The myopic lens of pathology should be replaced with research on structural barriers.
- The racial dynamics of policy development should be examined.
- More empirical work should be done, including work that does not rely on census data.

- A need exists to disaggregate the research findings by gender or race *and* to look at the combined impact of race and gender on black males.
- Much more attention must be paid to the resiliency of those black males who manage to succeed in the face of significant structural and institutional obstacles to success.

C. African American Male Mapping Project

Drawing upon the Kirwan Institute's expertise, we completed a mapping project designed to show black males' spatial proximity to a range of important social opportunities, and to place the constraints that many males face in a geographical perspective to create more targeted and transformative responses. We examined the state of opportunity for black males in seven large, diverse metropolitan regions: New York, NY; Chicago, IL; Detroit, MI; Houston, TX; Atlanta, GA; Los Angeles, CA; and Washington D.C. The maps and observational report have been included in this report.

In each region examined, most African American males are spatially isolated within opportunity-deprived and distressed neighborhoods that are devoid of the resources most Americans take for granted.

The richness of these data provides a compelling new dimension for studying the relationship between African American males and opportunity in geographic, social, and economic terms, in both high and low opportunity areas. By understanding the mix of structural components in "very high opportunity" areas for black males (e.g., housing stability, childcare, criminal activity), critical solutions or policies may be implemented. Likewise, an understanding of how black males in "very low opportunity" areas persist and become successful can inform policies and solutions designed to assist in their development.

There is a growing body of literature and research on the importance of marginalized populations having physical and social access to a rich network of opportunities. It is not surprising then to find that access to opportunity matters for black males and that they are often concentrated in low opportunity communities. What may be surprising is that there is often great opportunity with better outcomes for black males in the southern part of the United States. This suggests the need for more targeted studies related to opportunity and black males as well as policies to more deliberately link black males to rich opportunity structures.

Future Mapping Research Directions

Future research should examine factors that contribute to African American male success across the opportunity spectrum rather than focusing only on males in very low-opportunity areas. Opportunity mapping may be the first step in conceptualizing future steps that contribute to the healthy development of black males. We argue that expanding and maintaining connections to the resources of opportunity is a key strategy for systematically improving the lives of African American males.

D. National Conference and Anthology

Based on the findings of the literature review and the conversations with the advisory board members, the Institute hosted a conference, entitled “African American Males: Beyond the School to Prison Pipeline and Moving toward Opportunity,” that examined the school-to-prison pipeline from a range of disciplinary perspectives. This was a highly successful conference attended by nearly four hundred people. Panels from the conference included: 1) African American Males and the Educational System; 2) The Impact of Health and the Economy on African American Males; 3) African American Males and Incarceration; and 4) The Dynamics of African American Male Opportunity.

We are assembling papers from the conference into an anthology for future publication. Topics include: schools and prisons, structural racism and street socialization, the educational risks of delinquent peer associations, and mental health issues.

E. Recommendations

Specific policy recommendations resulting from our literature review are in section E of this report. The recommendations in this section encompass strategies to support best practices and next steps for African American male scholarship and advocacy. Efforts to advance racial and ethnic justice, in general, and the welfare of African American males, in particular, have been too fragmentary, disjointed and sometimes counter-productive. We suggest organizing these strategies around the creation of a vibrant national African American Male Network that would facilitate more purposeful knowledge production, consensus building, and strategic collaboration within the universe of individuals and organizations already engaged in this work. Although the focus of this report is on the literature review and identifying gaps in the literature, we recognize that there is also a need to act—carefully and deliberately, based on what we know. Where things are still unclear, we suggest trying to gain greater clarity, not just in research, but also in well designed monitored pilots. For example, we suggest more closely linking black males to opportunity communities with social support.

To realize these vital objectives and create such a Network, we see a critical need for at least six components:

- ❖ Models of and support for collaboration within the African American Male field;
- ❖ a research advocacy database;
- ❖ support for racial justice research and advocacy centers;
- ❖ identification and support for transformative structural approaches vs. deficit models;
- ❖ program evaluation of promising African American male initiatives; and

- ❖ development, support, and evaluation of a small number of comprehensive pilot projects in different parts of the country.

F. References

This section provides an exhaustive list of the journal articles, books and other sources utilized in this report.

*African American Male Social Science
Literature Review*

A. African American Male Social Science Literature Review (1994–2007)

Context

In August 1983, publisher John Johnson introduced *Ebony* magazine's special issue on The Crisis of the Black Male as "an editorial response to underground rumblings we detected in hundreds of letters from our readers [who] said, almost without exception, that something strange and ominous is happening to Black males in this country and that someone should sound the alarm before it is too late" (Johnson, 1983). By the end of the 1980s, the "black male crisis" had become widely regarded as a self-evident feature of American life. A welter of symposia, conferences, journal and magazine articles, special reports, and scholarly and popular books have tracked the life chances of black males in general, and of young black urban males in particular. Virtually all of these accounts include statistics reflecting the plight of black men in America: their high rates of criminality, incarceration, alcohol and drug use, unwed parenting, and premature death; their low rates of legal employment, high school completion, college attendance, and active participation in the lives of their children.

Across these and other dimensions, the life chances of black American males have improved little overall in the last quarter century. In some cases, they have deteriorated further in spite of the fact that attention to the crisis has encompassed actions as well as words. For example, between 1989 and 1999 alone, the U.S. Congress held at least 10 hearings that expressly featured black men. Over the same period, Ohio, California, Indiana, Illinois, Louisiana, Maryland, New York, North Carolina, Tennessee and Wisconsin established commissions or task forces to examine the challenges facing black males. In the late 1980s, the private sector also took up the cry. Among the most significant initiatives was the Kellogg Foundation's establishment of the National Task Force on African-American Males in 1992. The Task Force, chaired by former Atlanta mayor and UN ambassador Andrew Young, issued its report, *Repairing the Breach: Key Ways to Support Family Life, Reclaim Our Streets, and Rebuild Civil Society in America's Communities*, in 1996 (National Task Force, 1996). Numerous other entities, both public and private, have generated more narrowly targeted reports.

Not surprisingly, perhaps, African American individuals and groups have been at the forefront of the effort to "sound the alarm" regarding black male welfare. In 1988, The Center for the African-American Male at Albany State University, formerly the Center for the Study of the Black Male became the first institute devoted to the production and dissemination of research on black males (Majors, 1994). A similar center, the Morehouse Research Institute, was founded in 1990. The Institute, funded by major grants from the Ford and Rockefeller foundations, aims above all to "address the dearth of scholarship on issues impacting African-American men."¹ To this end, the Institute publishes *Challenge: a Journal of Research on African American Men*. The year 1990 also saw the birth of the first national umbrella organization for black males, the National Council of African American Men, which publishes the *Journal of African American Male Studies*. Other prominent black-led groups that advocated for or provided services mainly

¹ See the Institute's web site at <http://www.morehouse.edu/academics/cenins/mri/index.html>.

or exclusively for black males included The National Trust for the Development of African American Men, African-American Male Achievers Network, Boys-into-Men, the African American Male Institute, Men Against Destruction: Defending Against Drugs and Social Disorder (MAD DADS), and Concerned Black Men.

All of this begs the crucial question: why have these efforts had so little apparent success at improving the conditions of black American males as a whole? Certainly, part of the answer is structural, having to do with macroeconomic developments and policy decisions that have exacerbated the decades-long trend toward rising income and wealth inequalities in this country. And, of course, to say that the African American male crisis has generated significant attention is not to say that it has generated attention sufficient to the magnitude and complexity of the challenge, or that those efforts have been well directed. So although mentoring programs and other direct service efforts doubtless have a part to play in ushering black boys into healthy and productive adulthood, they aim to prepare black males to function more effectively within preexisting opportunity structures; they do not aim at the transformation of those structures. It is this transformative lens through which we look as we consider our literature review.

Goal of the Literature Review

The first comprehensive research review of the social science literature on the life experiences of African American males, entitled *Social Science Literature Concerning African American Men*, was conducted by E.T. Gordon, E.W. Gordon, and J.G. Nembhard in 1994. Gordon et al. found that research on the issues impacting the well-being of black males did not emerge until the latter half of the 20th century. From 1950–1970, research on males framed their experiences through a “deficit” perspective. The deficit perspective argued that the economic and social problems of black males developed from their depraved genetic and cultural backgrounds. It also attributed black males’ supposed lack of responsibility for themselves and their families to the legacy of slavery. In the 1980s and 1990s, however, Gordon et al. found that research on this group shifted notably. Using the lens of institutional racism and discrimination, researchers considered how drugs, crime, violence, inferior schooling, economic instability, and substandard housing impacted the behavior and attitudes of males. Gordon et al.’s literature review categorized the issues facing males into four major categories: 1) demographic and statistical issues; 2) psychosocial issues; 3) political/economic issues; and 4) educational issues.²

Surveying the literature written from 1994–2007, the period after Gordon et al.’s initial review, this project updates the social science findings on African American males. The purpose of the review is to identify gaps in the literature, identify areas of investigation that show promise for increasing understanding of black males, and highlight research that explores the dynamics accounting for success in their lives.

² **Demographic and Statistical Issues:** “Research studies in this category highlight the plight of the African American male in terms of statistical findings that have led many to suggest that Black men are an ‘endangered species.’” **Psychosocial Issues:** “The emphasis of studies focusing on the psychosocial issues affecting African American males is on how these males behave and react to conditions in US society, particularly inequality, discrimination, and poverty.” **Political/Economic Issues:** “The emphases in these studies are on economic conditions, the disproportionate suffering of African American males from economic downturns, and structural inequalities in the US economy.” **Educational Issues:** Studies in this category document and analyze “the continuing problems experienced by African American males in achieving academic success” (Gordon et al 1994).

Our analysis revealed that the landscape of research has not changed dramatically since 1994. The four major categories of issues remain salient more than ten years later. However, several emergent themes have broadened the research field. The first emergent theme from the past ten years investigates the identity construction of black males as both racial and gendered selves. These studies focused on the negative perceptions of black males by school personnel and other students. The negative perceptions are often internalized by black males leading to problematic behavioral outcomes. Homelessness is another new research category in the literature. Although limited in scope, the literature illuminates the strong association between homelessness, job loss, and mental and public health factors. A third emergent theme considers the influence of music on the racial identity and academic achievement of black males. Recent research has found that black male college students who listen to rap music that contains socially conscious lyrics had healthier male self concepts and racial identities than black males who listened to rap music that contained violent lyrics (Jamison, 2006).

There is also a growing body of research labeled “community/environment/geography,” which links developmental outcomes for black males to neighborhood and community factors. Crowder, Tolnay, and Aldeman (2001), for example, have demonstrated that black males from low opportunity areas in northern cities who migrated south increased their economic and job opportunities and had better social networks in their new communities of residence. Lastly, the previous review revealed that research on single-female-headed households showed that black males who resided in mother-only households have poor social and academic outcomes. This finding still holds true in more recent research studies. A growing body of research known as “constellation studies” recognizes that single-female-headed households may include extended family members and non-resident fathers. Therefore, research may begin to compare outcomes for males in mother-only households and mothers raising males with non-resident fathers, thus beginning to account for the diverse family structures of households with black male children (Zimmerman, Salem, & Maton, 1999).

Research on the family structures that black males reside in has also begun to examine the role of “other fathers” or “social fathers” – male relatives or family associates who act as role models – on black male development. The long-neglected influences of divorced fathers and single-parent father households have also begun to garner critical attention in the literature.

Our analytic review of the literature has revealed that much of the research and scholarship on black males has been rooted in a “cultural” or “deficit” model. In other words, the lens used to explain black male disparities in education and employment outcomes or their overrepresentation in the juvenile justice system was largely rooted in a framework that construed black males as the source of their own problems, giving little consideration to contextual or structural factors. Because of the overuse of the deficit-framework, less research is available that explains how structural factors impact outcomes in the areas of education, employment, and mental/public health for males. Because of this framework, we are under-informed about how some black males manage to avoid the pitfalls and hardships that beset other black males, despite structural constraints (Noguera, 2003). Furthermore, much of the research also concentrates on “young black males,” ignoring inquiries regarding older males or the early adolescent growth period for males. This gap in the literature is especially critical in the preadolescent years for male

development because the dearth of such research limits the development of interventions that may promote key substantive and transformative changes for this population. In addition, without studies on older males, the research loses the critical voices and experiences of mature males.

Methods

We conducted an exhaustive review of social science databases to locate scholarship on African American males written from 1994 through 2007. We limited the range of materials through the following qualifiers: 1) studies must include specific analysis of black males (studies using the generic category “minority” males were not cited); 2) scholarship must be published as a journal article; and 3) studies with small sample sizes (studies with two or fewer individuals) were largely excluded. (One exception to this rule regards studies on “gifted” children, some of which examine only one or two children; these were included in our review.) From the database searches, the project team culled pertinent abstracts. From the abstracts, we developed a list of primary categories and subcategories, cataloging each article according to this template.

This review is organized by the major themes found in the research on black males, which included: education, identity, marriage and family, mental health, economics, education, incarceration and juvenile justice, homelessness, and the impact of music. Our presentation of these findings include: 1) an introduction to the past research findings in each major area by Gordon et al. (1994); 2) an overview of the current research; 3) policy recommendations; 4) future research directions; and 5) where possible, a list of programs that may target interventions for black males.

1. Education

Introduction to Education Literature

The E.T. Gordon, E.W. Gordon, and J.G. Nembhard review identified several primary themes in the educational research literature on black males. These included: 1) racially disparate outcomes in educational achievement; 2) discriminatory practices of school personnel towards males; 3) the effects of teacher-student cultural differences on performance outcomes; 4) increased dropout rates and diminished higher education attendance; 5) the role and structure of the nuclear family on achievement; and 6) the impact of school disciplinary practices on the disproportionate suspension rates of black males (Gordon et al., 1994).

a. Teacher Perception

Ten years later, many of the themes identified in the Gordon et al. (1994) literature review remain relevant to scholarship on African American males. Research on the effects of teacher perception on black male educational outcomes consistently shows that teachers perceive males to be academically inferior, lacking adequate leadership and social skills, and often find them to be overly aggressive in the classroom. Much of the research on teacher perception has compared the opinions of black and white female teachers on the social and classroom skills of black and

white school children (Davis, 2003, 2006; Fuentes, 2003; Monroe, 2005; Neal, McCray, Webb-Johnson, & Bridgest, 2003; Rong, 1996). However, Rong (1996) studied the effects of teachers' race and gender on their perceptions of the abilities of black and white elementary school children and found that teachers tended to rate students more highly if they shared the same racial or gender identity. White female teachers rated white female students the highest on social and academic outcomes and, similarly, black female teachers rated black female students the highest. The combined effects of race and gender on student ratings were stronger among white female teachers than black female teachers.

White male teachers tended to rate white male and female students more similarly than their white female teacher counterparts. White and black male teachers' perceptions of black students were not included in this study because of the study's randomized design and there were too few black male teachers for their results to be included. In short, Rong's (1996) study showed that for female teachers, students of the same race and gender were rated higher than students who did not share this similarity. This study suggests the need for future research to examine the perceptions of male teachers, both black and white, on black male educational outcomes.

Studies have shown that successful teacher interaction with black males has involved proactive contact by teachers with their parents, increased feedback to males from teachers on their school performance, and instruction that occurs in smaller classes (Davis, 2003; McKay, Atkins, Hawkins, Brown & Lynn, 2003).

b. Cultural Mismatch

The negative perception of black male students is foundational to another important theme in the Gordon et al. (1994) review: the cultural mismatch of black males and school teachers (Monroe, 2005; Rong, 1996). Teachers often view the displayed behavior of African American males as disruptive and deficient when compared to their peers. For example, "play fighting" was frequently read for males as aggressive behavior (Monroe, 2005). Because many teachers have little pre-service or in-service training in the cultural ethos or the social world of many black students, this may produce a cultural mismatch in the classroom (Weinstein, Curran in Monroe, 2005 pg. 79). Boykin (1984) illuminates several interconnected dimensions of black cultural ethos that may be emphasized by black students in the classroom, i.e., movement, verve, communalism, and expressive individualism. In addition, cultural mismatch in the classroom has been linked to the disproportionate placement of black males in special education and being suspended. Teachers who have little interaction with black male students not only sometimes view black males as overly aggressive but also lack the ability to control the classroom environments that contain males. This often leads teachers to remove black male students from their classrooms (Monroe, 2005).

c. Suspension

A number of studies examining school discipline observed the higher suspension rates of African American males (Raffaele-Mendez, Knoff, & Ferron, 2002; Raffaele-Mendez & Knoff, 2003; Monroe, 2005, 2006). In a 2002 study of a Florida school district, Raffaele-Mendez et al., found that black males in elementary and secondary schools received higher rates of suspension than

any other population. As students progressed into middle school, suspension rates increased. Raffaele-Mendez and Knoff's (2003) research posited that the disciplinary perspective exercised by an educational institution affected suspension rates. Schools focusing on prevention, rather than punishment, for example, had notably lower suspension rates. Schools focusing on prevention demonstrated three characteristics: 1) the use of strategies like social skills training for students and behavior management training for teachers; 2) various opportunities for parental involvement, including the development of school plans for discipline; and 3) a perspective arguing that "responding to student's needs and treating them with respect is effective in removing problematic behavior (p.274)."

Many studies reveal that several structural factors contribute to the disproportionate number of black males being suspended: zero tolerance policies, criminalization of males in the school system, and multiple suspensions of individual males that do not work and instead exaggerate the rates of suspensions for males (Fuentes, 2003; Monroe, 2006; Raffaele-Mendez & Knoff, 2003; Rios, 2007; Saunter, 2001). The increased school suspensions of black males have also been linked to their overrepresentation in the juvenile justice system (Fuentes, 2003; Monroe, 2006; Rios, 2007; Saunter, 2001). The impact of school suspensions on black males entering the juvenile justice system and often later being incarcerated has far-reaching and deleterious effects. As Mark Soler, Executive Director of the Center for Children's Law and Policy notes, "the pathway from school to prison for African American Males not only contributes to their high incarceration rates but also to their inability to support themselves outside of the underground economy and to be[ing] good fathers and husbands (Fuentes, 2003, pg. 20.)"

d. Special Education

Cultural mismatch influences the classification of special education for black males. In one study, Herrera (1998) found that race predicted special education enrollment rates. Surveying ten cities, the author found that schools with the highest proportion of white teachers also had the largest number of African American male students enrolled in special education, while those cities with higher proportions of black teachers had lower rates of black male placement in special education (Atlanta, Washington, D.C.). Moreover, those cities with the very lowest proportion of black teachers, such as New York, Milwaukee, and San Diego, had uncharacteristically high rates of black male special education enrollment, with one out of every six African American males placed in special education. In a 2003 study, Sherwin and Schmidt suggested that the over-identification of special needs resulted from teachers' and administrators' misinterpretation of cultural "communication codes." Researching two California communities, Santa Fe and Havenhearst, the authors found that African American males consistently greeted one another with a "mock battle greeting." While African American males engaged in "mock battle" behavior in both communities, verbally aggressive behavior was not observed generally among other male groups in the Santa Fe community. Because of cultural differences in communication styles in the Santa Fe community, administrators, and staff members observing different codes were more apt to punish this perceived aggressive behavior practiced by African American male youth.

e. Gifted Education

One area not addressed in the Gordon et al. (1994) review was black males in gifted education. In a 1995 study, Ford revealed that gifted education is a segregated environment, with very few black males in advanced classes. Identifying causes for the absence, she asserts that a key factor is the typical identification of “giftedness” with exclusive reference to IQ scores. Students who display intelligence in other areas are often overlooked, and as result, become underachievers or consistently perform poorly on standardized tests, which may be biased against them in the first place. Ford also suggests that differences in cultural learning styles affect minority students’ underrepresentation in gifted education. She summarized that African American students were more concrete learners than abstract ones, and that most teachers are not able to identify the skills of minority students. This difference was exacerbated by the lack of training offered to teachers in the area of gifted education: 61% of teachers had received no training at all.

Because of the structural and cultural factors that contribute to the low number of black males in gifted education, several suggestions were made in the literature to improve outcomes for males in gifted classes. The suggestions included recordkeeping of school personnel on how many students are enrolled in classes and persist in classes, culturally responsive classrooms that support the learning styles and cultural ethos of black male students, and mentors to help develop the talents of students (Grantham, 2004; Moore, Ford, & Milner, 2005; Whiting, 2006.)

f. Higher Education

Gordon et al.’s (1994) literature review revealed a growing knowledge base examining the falling enrollments and graduation rates of African American males in higher education. Among the factors contributing to this trend, they identified problems with standardized tests, resistance to seeking support, and insufficient teacher-student interaction. While our research illuminated the same impediments, we also located important scholarship focusing primarily on the successful performance of African American college males.

A central theme in the research on African American male college success was the necessity of sustained institutional support. In a 2003 study, Bonner found that institutional support was a key factor for the retention and success of African American males, and that predominantly white institutions (PWIs) provided less institutional support than historically black colleges and universities (HBCUs). A 2000 study by Brown concluded that African American men heavily favored instrumental support in the university, a form of academic attention that provides “individuals with advice or guidance concerning possible solutions to problems.” According to Brown, HBCUs were more adept at providing instrumental support than PWIs. Similarly, Bonner (2003) noted that African American males had more contact with faculty at HBCUs than at PWIs, and felt that their needs were better met at HBCUs. Finally, Fleming (2002) found that the predictive validity of the SAT was better for black freshman males in HBCUs than for black freshmen in PWIs where black males underperform based on the prediction of the SAT.

g. Successful African American Male College Students

Harper's (2006) research argued that along with institutional support, peer support is an important factor in African American success in higher education. Examining 32 high-achieving African American males from Research I universities in the Midwest—defined as those students having greater than 3.0 cumulative GPAs, who were involved in leadership in campus organizations, and were recipients of numerous honors and awards—Harper found that the peer support these males received counteracted the “acting white” hypothesis presented by Fordham and Ogbu (1986). Peer support, as Astin (1993) argues, may be a very important element of the successful college experience for African American males (Harper, 2006).

While Harper's study demonstrated that African American male success was buttressed by peer support, a 2003 study by Moore, Madison-Colmore, and Smith suggested that these students thrived on a “prove-them-wrong-syndrome.” In a sample of 24 African American male college students in the engineering field, the authors determined that the students were able to persist in rigorous academic programs by developing a coping mechanism of “positive vigor.” Rather than ignoring hardships, the difficulties strengthened their resolve, inspiring their success. As one male college student stated, “I pretty much know when I come into a class that I'm either getting an A, A-, B+, or B-. Regardless of what you think of me, I am going to get one of these grades (Moore et al., 2003, pg.68).”

Another study found that spirituality was important to the success of black males. Herndon (2003) conducted a qualitative study using 13 African American college males at predominantly white institutions to assess spirituality. Through interviews, he ascertained that spiritually focused African American males are more likely to succeed in college because spirituality bolsters resilience and provides a sense of purpose and support from their religious community.

h. Two-Year Institutions

The majority of African American males attend two-year institutions (52%) and not four-year institutions (Horn et al., 2002 in Flowers, 2006). While most research on African American males in higher education focused on the conditions provided by PWIs or HBCUs, Flowers' (2006) research examined the underexplored domain of public two-year institutions. In his sample of 467 African American males seeking postsecondary education, Flowers (2006) found that black males at four-year colleges were more likely to participate in study groups, converse more with faculty members outside of class, and reported feeling more academically and socially integrated at higher education institutions than their black male community college counterparts. Given the increasing presence of black males at two-year institutions, Flowers (2006) recommends that administrators and college counselors develop appropriate methods to ensure that African American males are being engaged academically and socially at two-year institutions.

Policy Recommendations

Pre-school

- ❖ Efforts should be made to increase the involvement of fathers in the pre-school activities of their children, at the local level. School activities for fathers should be both formal

and informal opportunities and should be structured to develop relationships between black males and school personnel.

- ❖ Parents should be engaged in pre-school level activities that offer opportunities to increase their academic skills so they are better prepared to help their children. Studies have shown that low-income black parents tutored in mathematics have improved the academic outcomes of their children.
- ❖ The components of highly successful programs should be examined and replicated. For example, the Perry School Program and the Abecedarian project included early-education, evaluation design, family support, home visits, group meetings with parents and activities focused on social, emotional, cognitive and language areas for children.
- ❖ Develop alternative ways to select students for placement in AP courses to increase the number of black males.
- ❖ Develop greater institutional support for black males in PWIs.

Elementary School Policies

- ❖ Mandatory cultural competency courses and in-service training for teachers should be put in place that would include information on the learning styles and cultural background of many African American male students. Training should also include assisting teachers in recognizing and understanding their own biases and prejudices against African American males (and other historically marginalized groups).
- ❖ Strategic plans should be made to recruit and retain more black male teachers. Currently, black males represent 1% of the teaching force (Lewis, 2006). Some suggestions offered to help with recruiting and retaining male teachers include assigning male teachers a mentor, targeting black male high school students for recruitment into the teaching profession, increasing collaboration with 2-year institutions since most males attend community colleges, and using teacher preparatory programs to increase black male PRAXIS scores.
- ❖ Culturally specific programming that pays attention to cultural specificity and learning styles.
- ❖ After-school funding should be provided for academic competency and social activities for black males in the non-school hours. Research has shown that in the non-school hours black males spend more time watching television than their white peers.

Middle School Policies

- ❖ A “safety valve” process should be installed in schools with predominately African American male students to track the number of males being recommended for

suspensions. When the suspension rates of black males reach a critical level, school personnel should be alerted and should enact policies to reduce the number of black males being suspended.

- ❖ School social workers should take a more active role in questioning recommendations by teachers and administrators in order to reduce the overrepresentation of black males in special education (Mills, 2003).
- ❖ Comprehensive reevaluation of the use of zero tolerance policies in middle schools should be undertaken.
- ❖ Single sex classes should be established for black males in math and science.

High School Policies

- ❖ Schools should place equal focus on improving academic competency and high school graduation rates for black male students.
- ❖ A drop-out prevention program that specifically targets African American male students should be established.
- ❖ School counselors should make sure that students and their families are aware of the college admissions process, critical aspects of the financial aid process, and how to prepare for successful college outcomes. In addition, viable alternatives should be presented to males who are not college bound.
- ❖ Black male students should be strongly encouraged to enroll in gifted and AP classes, with efforts made to ensure the presence of a critical mass of black male students in those classes.
- ❖ School personnel should maintain detailed records on how many black male students are enrolled in gifted and AP classes and how many persist in those classes.

College

- ❖ College programs and interventions that support males beyond their first year of college should be established. Studies have shown that males disidentify with college as they move through their college years, which may contribute to high attrition rates.
- ❖ Measures must be taken to ensure that black males are both academically and socially integrated into college.
- ❖ Supportive measures for African American males enrolled in two-year colleges should be developed and implemented.

Helpful Programs

- AVID-<http://www.pac.dodea.edu/edservices/EducationPrograms/AVID.htm>
- The Carolina Abecedarian Project—<http://www.fpg.unc.edu/~abc/>
- Perry Preschool Program-
<http://www.highscope.org/Research/PerryProject/perrymain.htm> The Meyerhoff Program-<http://www.umbc.edu/meyerhoff/>
- Trio Program-<http://www.coenet.us/ecm/AM/Template.cfm?Section=Home>
- Youthbuild-
<http://www.youthbuild.org/site/c.htIRI3PIKoG/b.1223921/k.BD3C/Home.htm>
- Project Peace- <http://www.doe.state.in.us/sservices/peace/welcome.html>

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Future Research Directions: Education

- Literature on black males at the pre-school level should be expanded.
- New studies should examine the influence of male teachers, both black and white, on black male student outcomes.
- White teachers who have success with teaching black male students should be identified and their methods and approaches should be studied and highlighted.
- Future research and evaluations should disaggregate program data to examine African American male outcomes.
- Future research should also do a better job of pairing research findings to current policies to advance new intervention strategies, particularly in implementing effective pedagogy.

2. Identity

Introduction to the Literature on Identity

Examining educational institutions is essential to understanding how black boys define who they are and how they internalize the perceptions of school personnel and classmates (Davis, 2001). Black boys occupy a complex position within the educational system; they are viewed negatively inside the classroom as being disobedient and disruptive and yet loved outside of the school walls as the center of “popular youth sub-culture” (Davis, 2001). This conflict is a significant factor in the school experiences of black males. Often, the negative perceptions of black males held by school personnel and other students do not remain unnoticed by males. Consequently, black males may resist these stereotypes by disidentifying with school or displaying defiant behavior.

Middle schools are generally the site where males begin to construct their identities. Secondary schools often mark a shift in the schooling environment that becomes more individualistic and emphasizes strict discipline in classroom behavior and policies, i.e., zero-tolerance to regulate students' behaviors. Unfortunately, the policies and discipline procedures in middle schools often have deleterious effects on black male school outcomes (Davis, 2001; Hudley, 1997; Monroe, 2005).

a. Acting White/Disidentification

The literature analyzing the effects of the “burden of acting white” on black students has been conflicting. Introduced by Fordham and Ogbu in (1986), the authors argued that the burden of “acting white” was a significant factor in the black-white achievement gap and was one of the major reasons for black students' poor performance in school. In order to avoid “acting white,” black students developed an oppositional identity to high achievement which is associated with acting white. Studies by Ainsworth-Darnell and Downey (1998) and Cook and Ludwig (1997), however, found little evidence to support the oppositional identity or a “burden of acting white” among black adolescents. In Tyson, Darity, and Castellino's study (2005), the authors found that many black students opted out of advanced courses, but none did so because of concerns about negative peer reactions to achievement. Instead, black students' course choices reflected how well they thought they would perform in them.

Two studies, which focused on the academic disidentification of black males in educational settings, may be critical in understanding how to design supports for male students. Osborne (1997), found that disidentification from 10th-12th grade was significantly stronger for black male students. As black males advanced through high school, their school engagement and academic self-concept did not increase as it did for other groups. In a study on college males, Cokeley (2002) showed that black males' academic self-concept decreased from freshman year to their junior and senior years. In short, both studies show “that the longer black males stay in school the more detached their academic self-concept and self-esteem became from academics.” Both studies suggest that programmatic supports for black males in educational settings should not be limited to their freshman year but should continue throughout their years in college.

b. Sexual Orientation

Using the Integration Mode of Racial-Ethnic Sexual Identity Acculturation scale, Crawford et al. (2002) found that African American gay and bisexual men who identified more positively as being African American and gay reported higher levels of self-esteem, HIV prevention self-efficacy, stronger social support networks, and greater levels of life satisfaction than gay black men who reported less positive feelings about being African American and gay.

Policy Recommendations

- ❖ Racial identity models for black males should examine their combined experience of being both black and male. Current models focus on either race or gender.

- ❖ Programmatic support should be available to black males throughout their college years to buttress their self-concept and self-esteem.

Future Research Directions: Identity

- To clarify existing conflicts, literature on the implications of “acting white” should be studied further.
- Future research should consider how African American males develop their concept of self as both racial and gendered individuals; currently there are no models that simultaneously address both race and gender.
- Research should investigate the normative development of black males. There is a substantial body of research on the maladaptive development of males but very little research that examines normative patterns of growth for males.
- Future studies should focus on African American adolescent racial identity development; most studies have examined college age males and adults.

3. Marriage and Family

Introduction to the Marriage and Family Literature

The “dysfunction” of single-female-headed households was central to past research on the impact of family structure on the antisocial development of black males (Gordon et al., 1994). According to the previous review, black males raised in father-absent households were more likely to have lower educational achievement, earlier onset of sexual activity, lower self-esteem, and greater likelihood of participation in criminal behaviors. The high rate of father-absence in black families was identified as one of the primary factors contributing to the catastrophic outcomes of black males. More importantly, previous research conveyed that the impact of father-absence was far-reaching, spanning from education to incarceration, and its detrimental effects were long-lasting, impacting even the adult lives of men (Gordon et al., 1994).

a. Family Structure

The majority of current research still maintains that single-female-headed households produce lower positive outcomes for black males, especially in comparison to single-father-headed households (Rodney & Mupier, 1999). This raises a serious issue since the number of African American males raised in single-female-headed households has steadily increased since the last review (Gordon et al., 1994). There is a growing body of new research, however, suggesting that black males residing in single-female-headed-households do not have lower developmental outcomes (Battle, 1999; Battle & Scott, 2000; Zullig, Valois, Huebner, & Drane, 2005). An emergent tactic in family structure research is to examine family constellations. Constellations

take into account extended family members and non-resident fathers, which will permit the comparison of outcomes for black males across a range of family structural settings (Zimmerman, Salem, & Maton, 1999).

Two studies, Battle and Scott (2000) and Battle (1999), found that African American males in mother-only households scored better on standardized math and reading tests than those in father-only households. Battle's research also found that when socioeconomic status was added to the analysis, the outcome remained the same, implying that economic status is less significant than family configuration. Battle (1999) suggests that children in all types of family configurations have the potential to do well socially and academically; however, their effective functioning depends on the type of resources and strengths that their families provide to counterbalance problems. Battle and Scott (2000) posit that African American mothers are apt to seek out resources such as supplementary academic activities and assistance from teachers or community members, as well as utilize their support networks for their sons' development.

Gutman and McLoyd (2000) also examined the effects of poverty on black elementary and middle school students. Their study was both critical and uncommon because they compared families of high-achieving and low-achieving African American elementary and middle school students living in poverty and identified differences between both groups of parents on how they managed their children's education within their homes, schools, and communities. The authors discovered that the parents of the high-achieving students were more proactive in their children's education while parents of low-achieving students were more reactive. In other words, the authors indicated that parents of high-achieving students initiated contact with schools to monitor their child's progress, while it was uncommon for parents of low-achieving students to visit or have contact with the schools unless it was initiated by the school. In most circumstances, the communication initiated by the school was caused by the students' academic underachievement or behavior infraction. The parents of high-achievers reported augmenting their children's educational experience by enrolling them in programs promoting academic achievement, peer relations, and social skills. Within the home environment, parents of both high achievers and low achievers reported that they assisted their students with schoolwork, but parents of high achievers indicated that they also organized scheduled time to work on homework, created additional math problems, and assigned extra assignments in the areas of reading and writing.

Much of the research on family functioning addresses the impact of parental support and style on improving black male educational outcomes (Argyle & Henderson, 1985; Maccoby & Martin, 1983; Shearin, 2002). Research has shown that authoritative parenting—providing children with warmth and love while also maintaining authority (Mandara, 2006; Tolan, & Gorman-Smith, 1996)—best supports the rearing of African American male children. Parents who used an African American version of authoritative parenting—teaching their male children about cultural heritage and encouraging resiliency despite racial impediments—who were actively involved in monitoring their children's academic progress, and who were active in diminishing their children's counterproductive use of time, were better able to cultivate an environment in which African American males were more likely to succeed in school.

b. Fatherhood

Past research on African American males and fatherhood has represented African American men as incompetent, unreliable, untrustworthy, sexually predatory, and erratically present in the lives of their children (Gadsden & Smith, 1994; Hurd & Rogers, 1998; Smith, Krohn, Chu, & Best, 2005). Due to this negative representation, African American fathers have been largely “invisible” in past research examining the development of children and the functioning of African American families (Coley, 2001). When examined in the literature, the contributions of African American fathers were framed almost exclusively in terms of their capacity to provide economic support for their children (Hurd & Rogers, 1998; Tamis-LeMonda & Cabrera, 1999; Gadsden & Smith, 1994). This frame is limited. For example, in a 1999 study, Roy interviewed 40 African American fathers in a community-based parenting program in Chicago and found that fathers understood themselves not merely as providers in their children’s lives, but as vital caregivers.

Current research shows that fathers are not only caregivers but that many fathers actively engage in protecting the safety and well being of their children and spend productive time with their children. In a 2005 longitudinal study by Smith, Krohn, Chu, and Best (2005), the authors determined that young African American fathers spent an equal amount of time with their eldest child (eldest children were examined because of the young age of the fathers) as fathers from other racial and economic backgrounds. This study also found that fathers who received public assistance were more likely to live with their eldest children than those fathers not receiving public assistance. Because the support received was in the areas of housing, food, and healthcare assistance, rather than in cash benefits, the study determined that the public policy in place was providing support as intended. This is especially significant information in that it points to the familial benefits that attach to “upgrad[ing] fathers’ employment potential and earning power” (Smith et al., 2005, p. 997).

Several studies have found that lack of employment status is a key impediment to black fathers’ involvement with their children (Anderson, Kohler, & Letiecq, 2005; Dallas & Chen, 1998). Studies have shown that a father’s employment status can be linked to the amount of contact with children, participation in educational activities, and quality of parent-child interaction. The lack of viable employment for fathers can also cause depression in black men. In a 1996 study, Fagan examined the way in which 33 low-income African American fathers interacted with their pre-school age children during play. He observed the father’s responsiveness to his child during play interactions was significantly related to his employment status and self-esteem. Depression brought on by resource challenges, i.e., inability to pay child support, limited access to reliable transportation, and lack of permanent housing, may inhibit fathers’ ability to respond to the needs of their children (Anderson, Kohler, & Letiecq, 2005). On a positive note, high quality mother-father relationships were significant predictors of father involvement with their child and may serve as a buffer to other life stressors for fathers (Downer & Mendez, 2005; Fagan, 1996).

c. “Other Fathers”

Because there is still a significant number of African American children who do not have contact with their biological fathers or have “absent fathers,” researchers have begun to look at “other

fathers” or “social fathers” and the impact that these “non-biological fathers” have on African American children (Hunter, Friend & Murphy et al., 2006; Coley, 2001; Tamis-LeMonda & Cabrera, 1999). “Social fathers” and “other fathers” can be defined as brothers, brothers-in-law, grandfathers, uncles, male mentors, or any male relative or family associate who acts as a role model by sharing their values and displaying father-like or appropriate behaviors to a child (Hunter, Friend, & Murphy et al., 2006; Tamis-LeMonda & Cabrera, 1999; Bryant & Zimmerman, 2003). Fifty-one percent of children in the Jayakody and Kalil (2002) study had “other fathers” or “social fathers.” They found that the presence of a “social father” who was a male relative was associated with a higher level of the child’s readiness for school (Jayakody & Kalil, 2002).

In a 2005 study, Downer and Mendez (2005) examined African American fathers and “social fathers” to determine their levels of involvement with their pre-school children attending Head Start. Father involvement was defined using three distinct activities that support and contribute to children’s learning: general childcare activities, home-based educational activities, and school-based educational activities. The results of their study found that African American fathers participated in a wide variety of childcare activities with their children. The most common weekly activities included playing with toys or games indoors, talking about what happened at Head Start, taking children along while doing errands, and involving the child in household chores.

Another group of fathers that has received very little attention are the African American fathers who are full-time parents. Coles (2002) suggests that single African American fathers who are fathers full time exist in higher frequencies than single white fathers. In Coles’ study, ten African American fathers were interviewed regarding the reasons why they wanted to become parents. Coles found that the men’s motivations “centered on fulfilling a sense of duty or responsibility, reworking the effects of having had weak or absent fathers themselves, wanting to provide a role model for their children, and fulfilling an already established parent-child bond” (p. 412). Eggebeen, Snyder, and Manning’s (1996) study reported that 15.5% of single-parent families are headed by single fathers (as cited in Coles, 2002) and African American single fathers make up roughly 6% of those custodial parents (National Urban League, 1998 as cited in Hamer & Marchioro, 2002).

Hamer and Marchioro (2002) note that some reasons for the increase in African American single-father households are that African American males who have never been married are gaining custody of their children due to the mother’s incapacity to provide financially for her children, parental unfitness, either physically or psychologically, and because of the mothers’ lack of desire to perform a maternal role full time. In a study of 24 African American men from a poor Midwestern area, Hamer and Marchioro found that generally, the men in these studies became parents by “default” and were reluctant to take on the role of being a full-time single parent. Although the number of African American single fathers is increasing, there are still many social and economic disparities affecting other African American men in becoming custodial parents. These disparities include jobs that provide lower income wages than white male jobs, work schedules with non-flexible hours, and health insurance that is not affordable (Hamer & Marchioro, 2002).

d. Mate Selection/Divorce/Domestic Violence

Research found that African Americans divorce at higher rates than other races, double that of whites (Tucker & Mitchell-Kernan, 1995 as cited in Pinderhughes, 2002), and that they have poorer marital satisfaction than whites (Broman, 2005). Orbach, Veroff, Hassan, and Horrocks (2002) suggested that race and education were the only two variables predicting the risk of divorce over time. However, they also found that increased education does not protect African American males from divorce (Orbuch et al., 2002). In their study of 174 African American couples in Michigan, Orbuch et al. found that African American men who were married to career women reported less marital well-being. The researchers hypothesized that this dissatisfaction emerged from the men not being able to fulfill the “traditional” gender role of male as provider or breadwinner. Others suggest that the unequal ratio between black males and females has also lead to divorce and decline in marriage for the African American male (Pinderhughes, 2002). Researchers have indicated that economic and societal constraints such as racism, inadequate education, high unemployment, underemployment, and disadvantages in training, hiring, and job maintenance play a significant role in black family functioning and marital stability (Lawson & Thompson, 1995; Wilson, 1996 as cited in Taylor, Tucker, & Mitchell-Kernan, 1999; Zuberi, 1998).

Economic constraints have been found to be highly associated with spousal abuse in African American families living in high-risk environments plagued by poverty and alcohol-related problems for males (Cunradi, Caetano, Clark, & Schafer, 2000; Caetano, Schafer, & Cunradi, 2001). Cunradi, Caetano, Clark, and Schafer (1999) found that African American couples with alcohol problems present were at a ten times greater risk for having male to female partner violence than those couples without male alcohol-related problems. Hampton and Gelles (1994) remarked that abuse toward women in African American families was 113 per 1000 and only 30 per 1000 in white families, according to The First National Family Violence Survey (Strauss, Gelles, & Steinmetz, 1980 as cited in Hampton & Gelles, 1994).

Policy Recommendations

- ❖ Child support enforcement policies should be flexible and offer employment and support services for fathers (Mincy & Sorenson, 1998).
- ❖ Parenthood for men may be problematic because of their own poor relations with their fathers. Programs should try to build into their framework ways that may assist men to build linkages with their own fathers (Roy, 2006).
- ❖ Fatherhood programs/initiatives often focus on the needs of fathers or their children. Programs should attempt in a meaningful way to incorporate both the needs of fathers and children and recognize the contributions of fathers beyond economic support (V. Gadsden, personal communication, Winter 2007).
- ❖ The stigma of single-parent-families should be unraveled and the work-family link revalued by ensuring economic security for all family forms. This could be facilitated by reform of the low-wage labor market and affordable childcare.

- ❖ Create support of “social” and “other” fathers for black males.
- ❖ Support parents of African American males to be more proactive in the education of their sons.

Future Research Directions: Marriage and Family

- New investigations should address how black male fathers contribute to their child’s development, particularly in the home. In addition, future investigations should address the outcomes of black male children residing with black male single and divorced dads.
- A new wave of historical scholarship should continue to challenge the dysfunction thesis of the single mother household and its impact on black males and the black family.
- A new wave of historical scholarship should continue to challenge the single mother household “dysfunction thesis.”

4. Mental Health

Introduction to Mental Health Literature

Family dynamics is central to the mental health literature on black males. E.T. Gordon, E.W. Gordon, & J.G. Nembhard’s literature review revealed that prior to 1994 studies on the mental health of African American males focused on how males behaved and responded to the societal conditions of inequality, discrimination, and poverty. Some of the main issues found in the past review on male psychosocial issues include:

- pathology of the black family (single-female-headed households)
- relationships between black males and females
- coping strategies for addressing the stresses of racial stereotypes, institutional racism, and poverty

A key critique of the past review was that the mental health literature did not consider the influence of environmental stressors on the mental health of black males.

a. Depression

African American adolescents are at a greater risk for experiencing behavioral and emotional problems such as depression than any other ethnic groups because they reside in high-risk urban

segregated communities (Kubrin, Wadsworth, & DiPietro, 2006; Goodman, 1999, Taylor, 1996 both cited in Hammack, Robinson, Crawford, & Li 2004), which may be highly stressful (Myers, 1989 as cited in Zimmerman, Ramirez-Valles, & Maton, 1999, Cunningham, 1999). Researchers defined these high-risk environments as communities that are segregated from mainstream society by high poverty, a lack of jobs (Kubrin et al., 2006), and high rates of exposure to violent crimes and homicides (Williams & Williams-Morris, 2000).

Kistner, David, and White (2003 as cited in Kistner, David-Ferndon, Lopez, & Dunkel, 2007) found that African American boys showed more signs of depression when compared to African American girls, white girls, and white boys, with all children in grades three through five. In a longitudinal follow-up study, Kistner et al. (2007) examined ethnic and sex differences in depressive symptoms along with possible mediators such as academic achievement and peer acceptance of those differences among African American and white children. Results of the study revealed that among African American children, black boys still had a much higher frequency of symptoms of depression than black girls. African American boys reported more depressive symptoms as the school year went on while African American girls and white boys and girls reported either less severe depressive symptoms or about the same level of severity over the school year. Lower academic achievement scores were associated with increases in depressive symptoms for African American boys and white boys and girls. However, in a study by Bynum and Kotchick (2006) African American adolescents who reported a more positive relationship with their mothers and greater autonomy were more likely to report more positive self-esteem, less symptoms of depression, and fewer behaviors that were delinquent.

Other studies on African American male depression revealed that high exposure to violence was “significantly associated” with symptoms of post-traumatic stress disorder (PTSD) and depression in African American males which could not be alleviated by social support (Farrell & Bruce, 1997; Gorman-Smith, Henry, & Tolan, 2004; Gorman-Smith & Tolan, 1998; Hammack, Richards, Luo, Edlynn, & Roy, 2004; Kliwer et al., 2004; Kliwer, Parrish, Jackson, Walker & Shivy, 2006; Paxton, Robinson, Shah, & Schoeny, 2004; Sullivan, King & Farrell, 2004). Studies have linked higher depression rates in black males to substance and sexual abuse (Friedman, Granick, Bransfield, Kreisher & Schwartz, 1996; Friedman, Terras, & Glassman, 2000; Herd, 1994 as cited in Washington & Teague, 2005; McCluskey, Krohn, & Lizotte, 2002; Moisan & Sanders-Phillips, 1997; Stewart, 2003). African American males may be at a higher risk for substance abuse and drug-related problems than their white counterparts due to being bombarded by what Pierce (1970 as cited in Washington & Teague, 2005) called “microaggressions.” Microaggressions “are defined as insults (verbal/nonverbal, visual, or both) directed toward people of color, frequently automatically or unconsciously (Washington & Teague, 2005).” In addition, African American boys who physically matured early were placed at-risk for higher levels of depressive symptomology (Ge, Kim, Brody, Conger, Simons, Gibbons, & Cutrona, 2003).

b. Suicide

Suicide has become an important public health issue for African Americans in recent years, specifically among youth (U.S. Public Health Service, 2000 as cited in Joe, 2006). In 2004, suicide was found to be the third leading cause of death among 15 to 24- year-old African

Americans (Kochanek, Murphy, Anderson & Scott as cited in Joe, 2006). According to Joe's (2006) study, suicide rates peaked for African American males at ages 20 to 24 and 25 to 29. The highest rate in this age-period-cohort analysis was seen in the 25 to 29 age group of males, with 41.05 per 100,000 African American males committing suicide. Even though the suicide rate for African Americans (6.2 per 100,000) is lower than the rates for whites (12.4 per 100,000), suicide appears to be a greater risk for young African American men than young white men, as black men represented 84% of suicide victims in the African American community (Joe & Kaplan, 2001). Between 1980 and 1995, the suicide rate among African American youth, ages 10 to 19 more than doubled compared to whites (American Association of Suicidology, 1996, as cited in Willis, Coombs, Cockerham, & Frison, 2002). The rates of suicide among black men begin to increase dramatically in early childhood, reach their peak in adolescence, begin to decline steadily and plateau in mid-life, and begin to increase in late life moderately (Gibbs, 1997; Moscicki, 1994 as cited in Joe & Kaplan, 2001). Some studies, such as Kubrin, Wadsworth, and DiPietro (2006) have argued that the increase in black male suicide is linked to deindustrialization and extreme poverty in communities in which African American males reside.

Protective factors against suicide for African American youth have also been identified throughout the literature. Foremost among these were strong kinship ties and social support (Gibbs, 1988 as cited in Joe, 2006). Black males residing in the South has also been linked to lower suicide rates (Wingate, Bobadilla, Burns, Cukrowicz, Hernanadz, Ketterman, Minnix, Petty, Richey, Sachs-Ericsson, Stanley, Williams, & Joiner, 2005). For example, Wingate et al.'s (2005) study indicated that African American men who resided in the South reported the lowest scores of any group on the suicide scale. Gibbs' (1997 as cited in Wingate et al., 2005) suggested that the context of the South likely buffers against suicide because there is low racial integration or the separation of different racial groups and cohesion among individuals within each racial group. Gibbs (1997 as cited in Wingate et al., 2005) also stated that if social agencies were not present to provide essential services to African Americans in the South, the "extended family, kin networks, and the African American church fulfilled those needs" (pg. 618). Joe (2006) suggested that strengthening social supports and religious beliefs and curtailing income disparities may reduce the risk of suicide among African Americans. Moreover, research has found that lower occupational and income inequalities between whites and African Americans reduced the risk of suicide among African American men (Burr, Hartman, & Matteson, 1999 as cited in Joe, 2006).

c. Coping Mechanisms

According to Bonner (1997), because some African American males live in high-risk environments or "cultural cocoons," they are given little opportunity to develop appropriate coping and adaptive skills. Sparks' (1996) study on coping processes of African American adolescent males living in violent communities found that the 27 African American males, aged 13-19, used five types of coping strategies. These processes included and are defined as "confrontative coping," using aggressive efforts to alter the situation; "distancing," using cognitive efforts to detach oneself and to minimize the significance of the encounter; "self-controlling," attempting to regulate their own feelings and actions while in the midst of a violent encounter; "escape-avoidance coping," employing wishful thinking and/or behavioral efforts to

escape or avoid the emotional reaction associated with the situation; and “planful problem solving,” making a plan of action and sticking to it” (p. 11). Cunningham (1999) suggests that providing “psychological armor” would allow African American males to effectively cope within their high-risk environments. The author describes “psychological armor” as the competency and self-worth needed to confront hostile situations and individuals” (p. 584).

d. Treatment

The research suggests that there are a high number of barriers to African American males’ utilization of and participation in mental health services (Jackson-Gilfort, Liddle, Tejada, & Dakok, 2001). Researchers suggest that adolescent African American males’ reluctance to discuss their feelings results in a possible underreporting of depressive symptoms (Ialong, et al., 2004), a fear that participation in mental health services will lead to a negative stigma in their community, (McKay, Nudelman, McCadam & Gonzalez, 1996; Richardson, 2001, as cited in Lindsey, Korr, Broitman, Bone, Green, & Leaf, 2006), and feelings of shame or embarrassment (Lindsey, et al., 2006). Because of these negative consequences, African American adults are more likely to receive mental health services from general medicine or medical doctors than from mental health clinics (Cooper-Patrick, Gallo, Powe, Steinwachs, Eaton, & Ford, 1999). For example, Lindsey, et al. (2006) found that many of the African American male adolescents in their study chose to deal with their problems on their own instead of attending formal mental health counseling because they believed that voicing their feelings would be seen as a sign of weakness. Finally, studies have shown that black males who had lower negative experiences with the mental health profession had fewer negative attitudes towards seeking professional help than their black male counterparts who had experienced a higher number of negative experiences with mental health professionals (Scott & Davis, 2006).

Policy Recommendations

- ❖ Zimmerman, Ramirez-Valles, Maton (1999) suggest that black male involvement in out-of-school time activities may serve as a protector mechanism for mental health illnesses.
- ❖ Mental health researchers should consider the influence of environmental stressors on the mental health of black males and the role of peer and family support.
- ❖ Researchers should focus on the reasons for the increase in suicidal behavior.
- ❖ Efforts should be made to provide and further research effective coping mechanisms.
- ❖ There should be more research on creating supportive environments.

Future Research Directions: Mental Health

- Mental health literature should consider the influence of environmental stressors on the mental health of black males.
- Future research should examine the risk and protective factors associated with developing depressive symptoms for African American males. This would be beneficial in developing prevention and intervention strategies for those at-risk for developing these symptoms.
- Researchers should focus on what is missing from the literature: reasons for the increase in suicidal behavior among African American male youth, since they appear to be most at risk for suicide-related deaths (Joe, 2006). This would also be beneficial to developing effective interventions to prevent suicide.
- Future research should determine the role of peers and family members in supporting males during mental health crises, since black males are less likely to depend on mental health workers for support (Lindsey et al., 2006).

5. Economics

Introduction to Economics Literature

Since the mental health of black males has often been related to their lack or loss of employment, and the disconnect from social institutions and opportunities, it becomes critical to examine research on black male employment and these other areas. The past review on the impact of the economy on black males showed that the majority of the research centered on the high unemployment rates of black males, the structure of employment, unequal pay for work comparable to their white counterparts, and the correlation between unemployment and social ills such as poor mental health, anti-social behavior, and marital discord. One issue that was relevant in the E.T. Gordon, E.W. Gordon, & J.G. Nembhard (1994) review was how skill shifts in the job market have negatively affected black male employment, particularly lower educated males (Holzer & Offner, 2001; Simpson, 2000). Lower educated black males were more severely impacted by skills shifts than black males who have received more education. In fact, according to Simpson's research (2000), skill shifts in the market expanded opportunities for higher educated black males. Higher educated black males may have more opportunities for employment because they have gained social capital through their educational experiences (Lichter & Oliver, 2000). Finally, given the literature's attention to differences between higher educated and lower educated black males, it is important to highlight the work of Jackson (2006) and Heggins (2004). Investigating the difficulties professional black men face when seeking employment, both authors concluded that the perceptions of employers were not as negative for black men who attain advanced degrees. However, black males, especially those in academia, suffer from the lack of mentorship, a circumstance which affects their ability to network.

a. Spatial Mismatch

One key factor for the lack of employment for black males is that jobs are not located in the areas where black men reside (McLennan, 2003; Stoll, 1997). For example, Stoll's (1997) article uses the "spatial mismatch hypothesis" to examine how the movement of jobs from the cities to the surrounding suburbs affects job opportunities for African American men compared to their Latino and white counterparts. The authors found that as jobs become more decentralized (that is, as they move from the city and into the surrounding suburban areas), the "incidence and duration" of black and Latino males remaining jobless was more frequent and longer over time than for their white male counterparts. Black males had the highest overall incidence and duration of job loss and were more likely to live in metropolitan areas with higher levels of job decentralization.

Because of the lack of jobs for black males in urban cities, scholars have observed increased rates of southern employment-based migration for black males. Crowder and Tolnay (2001) examined the pattern of migration for African American males for the time period from 1970 to 1990. This investigation sought to show the ways in which African American men migrated as a way to increase access to economic opportunities. The findings of this study indicated that the black males who were mobile tended to do better than those males who were not mobile. This study found that those black males who moved to the South fared better than the other groups, followed by those who moved to metropolitan areas in the West. Other research by McLennan (2003) contradicted these findings, indicating that males who lived in the South participated in jobs that were outdated.

b. Immigration

Simpson's (2000) research suggests that educated black males were more impacted by immigration than less educated black males. A 1% increase in immigration representation corresponded with a .1% decrease in the ratio of employment for black males. Simpson (2000) did not expand on why immigration impacted educated black males more than their less educated black male counterparts.

c. Discriminatory Practices

African American males not only suffer from deindustrialization, low wages, and lack of employment opportunities, but from employment discrimination (Coleman, 2003). Studies have shown that employers perceive black males as lacking "soft skills." According to Moss and Tilly (1995), black males were seen as having the lowest levels of people and teamwork skills, motivation, and flexibility. They state that, "soft skills are increasing in importance to employers... black men are perceived by many as coming to the hiring gate with less soft skills (p.15)."

Policy Recommendations

- ❖ The Earned Income Tax Credit should be expanded for low-income men or noncustodial fathers who are current in their child support payments (Holzer, 2004).

- ❖ Classroom instruction should be linked to the job skills needed in the current labor market, i.e., Career Academies (Holzer, 2005).
- ❖ Access should be increased for males who drop out of high school to effective programs such as the Job Corps and Youth Services Corps (Holzer, 2005).
- ❖ Employment discrimination enforcement agencies should establish programs to monitor the practices of wage and employment discrimination and conduct random job audits at the national, state, and local levels (Coleman, 2003).
- ❖ Metropolitan areas should have full employment policies and initiatives, such as empowerment zones, to alter the distribution of jobs in these areas. (Stoll, 1997).

Helpful Programs

Parent's Fair Share- http://www.mdrc.org/project_12_39.html

Future Research Directions: Economics

- Research needs to further examine the impact of males migrating to the South to explore economic opportunities.
- Research should further examine the impact of immigration on black male employment.

6. Incarceration and Juvenile Justice

Introduction to Incarceration Literature

The lack of employment and economic opportunities was a strong contributing factor to the incarceration of males. The previous evaluation of the literature on incarceration noted that the delinquency and criminal activities of black males was intensely studied by early twentieth-century scholars (Gordon et al., 1994). Most analyses focused on factors contributing to the mass incarceration of black males, including subcultures of violence, family structure, labor market discrimination, and economic forces compelling males to seek financial gain through alternative routes. Gordon et al.'s review revealed two trends that frame most of the past discussions: (1) Few research studies examined the impact of racism on incarceration, and (2) Less attention has been given to the effect of culture on black male imprisonment *sans* autobiographical accounts.

More than ten years after the last review of incarceration literature, statistical findings still show alarmingly disproportionate rates of black male imprisonment. Although black males represent only six percent of the U.S. population, 49% of males in the criminal justice system are black (Haney & Zimbardo, 1998). At the end of 2005, for example, 3,145 per 100,000 black males in the U.S. were sentenced prison inmates. This is a stark contrast to other racial groups who were incarcerated at significantly lower rates. Per 100,000 Latinos, 1,244 were sentenced inmates, while only 471 per 100,000 white males were incarcerated (U.S. Department of Justice, 2007). In light of the flagrantly disparate incarceration rates, a central theme in this literature is the impact of racial bias and past criminal history on black male imprisonment (Mauer, 1999; Stewart, 2000). Black males received longer sentences than white males, were more likely to be sent to adult court as juveniles, and were more likely to receive the death penalty for crimes against whites than crimes against blacks (Coker, 2001; Hagan & Peterson, 1995; Mauer, 1999).

Many scholars believe that discriminatory perceptions of black males as threatening or violent also plays a pivotal role in their overrepresentation in the criminal justice system. Carmichael substantiated this claim in a 2005 study detailing how racial and ethnic threat was an indicator in municipalities' increased use of their city jails. Cities used their jails more when: (1) they were situated in neighborhoods with large percentages of minority populations; and (2) there were greater disparities in SES between whites and blacks/Latinos. However, when cities were well integrated along racial and economic lines, cities used their jails less frequently. Using "contact theory" to explain his findings, Carmichael notes that "this account suggests that interracial and interethnic contact exposes people to the similarities in attitude and behavior of groups once seen as "different," thus promoting communication and challenging traditional stereotypes (p.547)." In short, when cities are more highly integrated along racial and economic lines, metropolitan areas tend to use their jails less because the main source of fear (minority size) no longer appears threatening.

a. "Get Tough" Policies/War on Drugs

Scholars almost always link the increased confinement of males to the expansion of punitive policies in the United States (Mauer, 2005; Stewart, 2000). Introduced in the 1970s, and intensifying gradually during the subsequent two decades, heightened punitive measures have been used by politicians to increase their support base in a growing conservative political climate (Mauer, 2005). "Get tough" policies, which punish offenders more severely and for longer periods of time, were said to reduce crime by being tougher on repeat offenders and adolescents. The courts not only take this approach with ex-offenders, but first-time offenders as well. If a person is perceived as being a possible repeat offender, that person has a greater chance of going to prison and receiving a longer sentence (Robinson, 2001). Mass incarceration, therefore, is due largely to the court's "ability to punish the uncommitted crime" (p. 1446). However, Haney and Zimbardo (1998) argued that black and Latino males face long stints in prison, possibly for a lifetime, for untreated addiction and drug offenses.

b. Education and Prison Programs

The dearth of educational attainment is a strong predictor for black male involvement in the criminal justice system. The lower the educational level for black males, the more likely their

involvement in the criminal justice system. Incarcerated individuals who are released from prison with higher levels of educational attainment prior to prison entry are more likely to be reintegrated back into society and avoid prison re-entry (Case & Fassenfest, 2004). Despite evidence that higher educational attainment was correlative with more successful reintegration, rehabilitation in the prison system was anomalous. Black males had the greatest risk for recidivism across racial subgroups.

Exploring the motivations of black male participation in correctional education programs, Schlesinger (2005) found that inmates were more likely to join programs in order to congregate with friends and avoid personal stagnation or the wrong crowd, in addition to educational gain. Schlesinger (2005) also determined that the black males in his study were more likely to focus on high school level education or a particular trade, whereas white males attempted to attain associate or bachelor degrees.

Case and Fassenfest (2004) researched focus groups of white and black male ex-offenders to determine how post-secondary education programs in prison had benefited inmates post-release. Inmates received college courses provided by 14 local colleges and universities. Focus groups were conducted to determine if the education received in prison eased reintegration into their communities. White male prisoners viewed prison education as more helpful to them post-release than their black male counterparts. Black males reported greater value in vocational training that provided them with work-skill experiences, believing that work-skill experiences were more transferable to the job market.

7. Juvenile Justice

a. Early Criminalization

The intersections of race, gender, and age impacting discrimination in sentencing have clear implications for juvenile justice. African American males were disproportionately represented at every stage of the juvenile justice process, including court referrals, drug offenses, and adjudication and were transferred from juvenile to adult court more frequently than their white male counterparts. The involvement of black males in the juvenile justice system occurs early in their childhood (Bishop & Frazier, 1996; Rios, 2006; Tatum, 1996). Many youths of color enter the criminal justice system as early as eight years old (Rios, 2006). In California, 95% of all juveniles sent to court were racial minorities (Rios, 2006). Since the majority of the crime statistics point to black males as the offenders, Tatum (1996) suggests that young black males, like their adult counterparts, receive tougher penalties. Critical of these alarming incarceration rates for youths of color, some studies argue that juvenile detention centers are no longer rehabilitative, but instead, nothing more than warehousing (Morrison & Epps, 2002; Rozie-Battle, 2002; Wordes & Jones, 1998).

b. Status Offenses, Schools, and Juvenile Justice

A central contributing factor to the troubling conditions of black male youth incarceration is the juridical response to status offenses. Status offenses are crimes committed by minors such as underage drinking, smoking, and truancy that ordinarily would not be considered crimes when

youth reach adulthood. This is a key route through which black male youth enter the juvenile justice system (Steinhart, 1996). The expansion of punitive policies has led to an increase of status offenders entering the court system who ordinarily would not be in court but are now detained, a condition leading to saturation in the juvenile justice system and acceleration of the existing problems of minor offenders (Gavazzi, 2005; Wordes & Jones, 1998). Programs that sought alternatives to detention for status offenders found that black males who successfully completed the program displayed significantly lower levels of interpersonal conflicts and mental health conditions than peers who did not complete the program (Gavazzi, 2005).

c. The Impact of Age, Race, Gender, and Employment on Incarceration

The incarceration literature on African American males revealed an inverse relationship between employment and imprisonment. In a 2000 study, Spohn and Holleran found that “unemployed males are significantly more likely than employed males to be sentenced to prison, but unemployment has no effect on incarceration among females. Similarly, unemployed blacks and Latinos are substantially more likely to be sent to prison than unemployed whites (p. 296).” For example, a study by Tatum (1996) demonstrated that there is an inverse relationship for both black males and white males between economic opportunities, i.e., employment, and juvenile offenses. As juvenile offenses increase, economic opportunities decrease for both black and white males. The strongest predictor for both delinquent white males and black males participating in juvenile offenses is geographic location. The more rural the location in which white males reside the greater the likelihood of delinquency; the more urban the location in which black males reside, the greater the likelihood of black male delinquency.

Steffensmeier, Ulmer, and Kramer (1998) hypothesized that offenders who were young, black, and male would be more likely to be incarcerated than any other subgroup of offenders. Not only did their research support the hypothesis that young black males receive the most severe sentencing, but the study illuminated the nuances of race, gender, and age on incarceration rates for black males. The authors argued that “both black and white males aged 30–49 are less likely to be incarcerated than males aged 18–29 and receive shorter terms, though whites aged 30–39 still fare somewhat better than their black counterparts” (Steffensmeier, Ulmer, & Kramer, 1998, p. 779). In short, the younger a black male offender, the greater the likelihood he will receive a harsher sentence than his white counterpart, yet, as black male offenders grow older, differences between sentencing decrease.

d. Family Structure and Substance Abuse

Another critical factor contributing to black males’ harsher treatment than white males is the court’s perception of black families. Because juvenile courts view single-female-headed households as less stable, black males are given harsher sentences (Bishop & Frazier, 1996; DeJong & Jackson, 1998). The perception of two-parent families as more stable, however, also positively affects whites: while white juvenile offenders from two-parent households are given less jail time, black males from two-parent families are not.

While black male youth receive more severe punitive discipline generally, research has demonstrated specific discrimination in the area of drug infractions. In a 1998 study, DeJong and

Jackson examined differential sentencing patterns among black, Latino, and white juveniles. Surveying 18.1% females, 60.6% whites, 32.3% blacks, and 6.1% Latinos and 1.0% individuals identifying as other, the authors found that black and Latino youth were referred for sentencing at slightly younger ages than white juveniles, more likely to be referred for drug charges, and more likely to live in single-mother-headed households. Black youth charged with drug crimes were more likely to be incarcerated than black youth charged with other crimes. White youth were no more likely to be incarcerated for drug crimes than for other offenses.

Policy Recommendations

- ❖ “In order to fully account for the impact of the penal system on labor market inequality, research should include the effects of noncustodial supervision and the employment experience of convicts after release (Western & Pettit, 2000, pg.11).”
- ❖ Mandatory sentencing laws should be repealed (Mauer, 1999).
- ❖ “Status offenses” should be de-criminalized.
- ❖ “Efforts to reduce crime should not just target the offenders’ criminal behavior but should also include targeting the offenders’ family and community. These efforts should also include improving the offender’s self-concept and self-esteem (Spencer & Jones-Walker, 2004, pg.95).”
- ❖ Funding for community-based interventions should be increased (Spencer & Jones-Walker, 2004).
- ❖ Policies should rely on research rather than rhetoric. Lawmakers must weigh the potential intended and unintended consequences of proposed changes in crime and drug control policy.
- ❖ An approach to criminal justice that balances the needs of society, victims, and inmates should be adopted.
- ❖ Truth-in-Sentencing and Three Strikes laws that have proven ineffective in the fight against crime and drugs should be repealed.
- ❖ The 100-to-1 powder cocaine/crack cocaine ratio and other drug sentencing laws that have incarcerated nonviolent offenders while failing to capture “drug kingpins” should be reexamined.
- ❖ Nonviolent, non-dangerous drug addicts and offenders from the prison system should be diverted and provided improved treatment services.
- ❖ Nonviolent and non-dangerous juveniles should be diverted from confinement and job opportunities should be increased.

- ❖ De-bias intervention for the criminal justice worker should be studied and implemented where effective.

Future Research Directions: Incarceration and Juvenile Justice

- Strategies to disrupt the school-to-prison pipeline should be research-based.
- The ways black men have been constructed as targets of public policy should be examined.
- Rehabilitation options in community-based programs for youth offenders should be explored.
- An audit should be conducted of private correctional institutions to determine the physical conditions of the inmate population and the effectiveness of inmate rehabilitation programs in these institutions.
- The positive impact of drug courts should be studied.

8. Homelessness

Introduction to the Literature on Homelessness

Homeless black men were not given much attention in the past review (Gordon, Gordon, & Nembhard, 1994). Homelessness is a gendered phenomenon, with an estimated 80–90% of the indigent population being male (Baker, 1994). An estimated 49% of the homeless population in the U.S. is African American; therefore, the concerns of homeless black men must not be overlooked because there is a strong association between employment and homelessness for African American men. Scholars attribute the rise in homelessness to a number of structural economic and geographical shifts. The movement of skilled “blue collar” labor from central cities to suburbs and other nations represents a shift to a service-oriented economy in the United States, caused largely by deindustrialization, and has impelled a rise in poverty levels (Molina, 2000). The reclamation and gentrification of low-cost housing by businesses and people has led to a decline of 2.5 million low-income housing units between 1980 and 1988 (National Academy of Sciences, 1988 as cited in Baker, 1994) and the displacement of residents from their neighborhoods. The long-term effects of Reagan-era cuts to public housing and domestic welfare programs are unfolding yielding low levels of supply in affordable housing (National Housing Institute, 1992, as cited in Molina, 2000). The decline in affordable low-cost housing during the 1980s was particularly devastating to African Americans, who represented close to half of those living in such units (Baker, 1994).

a. Risk Factors Among Homeless African American Men

The social isolation experienced by homeless men has a number of damaging effects on their health and well-being. Several studies identified an increased risk of acquiring HIV/AIDS among the homeless. Minorities, who constitute a large percentage of the homeless, are the fastest growing population of HIV-positive cases, a phenomenon researchers ascribe to lack of cultural sensitivity among safe sex campaigns and a disproportionate lack of healthcare (Stephens, Braithwaite, Lubin, Carn, & Colbert, 2000).

High levels of HIV/AIDS vulnerability among the homeless are attributable to unsafe sexual practices, often caused by the conditions of poverty. Homeless commercial sex workers reported that they were more likely to engage in higher risk sexual activity when homeless and/or hungry. African American homeless men reported willingness to trade sex for money or drugs at the rate of 44% (Song, 1997), a number the researchers felt may have been underestimated due to the self-reported nature of the study.

Other studies on risk factors for homeless black men have focused on depression and substance abuse (Beck, 1999, 2001 & Bolger et al., as cited in Littrell and Beck, 2001; Dixon, 1997).

Policy Recommendations

- ❖ Molina (2000) suggests a national policy dealing with the problem of homelessness, first and foremost creating new low cost housing and providing subsidies for low-income single men and women to provide short term assistance while readying impoverished individuals to find new jobs.
- ❖ Littrell and Beck (2001) suggest treating depressive symptoms in the homeless, identifying and addressing causes of depression and encouraging problem-focused coping to encourage faster transitioning from homelessness.
- ❖ As previously mentioned, the attitudes and beliefs of the homeless populations may not translate to safe sexual practices (Song, et al. 1997). Kalichman and colleagues (1998) suggest that HIV risk reduction techniques should be integrated into substance abuse treatment programs.
- ❖ Community services and assisted living should be made available for black homeless men.

9. Music

Introduction to Music Literature

Although the impact of music on male development is not discussed in Gordon et al.'s seminal literature review (1994), the influence of music on the attitudes and behaviors of black males has emerged as a significant research theme. The emergence of music as a key theme is especially salient because the past literature review illuminated that some scholars linked the violent behavior of black males to their high exposure to television (Gordon et al., 1994). In light of this research,

it is particularly important to consider the impact of males' exposure to rap music videos on black male behavior (Johnson, Jackson, & Gatto, 1995; Ogbar, 1999; Tyson, 2006). In a 1995 study, Johnson, Jackson, and Gatto examined the effects of exposure to rap music video on 46 adolescent black males. They found that black male middle and high school students exposed to violent rap videos (i.e., videos containing images of shootings, explosions or assaults) used more violence to solve problems, held more misogynistic views, and engaged in more violent acts than those black male students who did not view violent rap videos.

In a 2006 study, Jamison expanded the research of earlier scholars to examine the impact of types of rap music on levels of black male college students' racial identity, cultural misorientation (i.e., rejection of black cultural norms), and hypermasculinity. The author classified types of rap music as: (1) recreational music containing boasting and romantic/sexual themes; (2) reality "gangster rap" music containing violent and misogynistic lyrics; and (3) conscious music containing social conscious lyrical content. College-aged black males who reported higher levels of black racial identity listened more to conscious rap music than college-aged black males who identified less with being black and listened more to reality or recreational rap music. Moreover, black males who showed more appreciation for conscious rap music had healthier male self-concepts or senses of manhood.

The few studies on the impact of music on black male behavior suggest a potential relationship between racial identity and prosocial behavior. Black males who have a strong sense of racial identity are more likely to listen to socially-conscious rap music and are less likely to engage in violent behavior. Undoubtedly, more research is needed to substantiate these early findings.

Future Research Directions: Music

- Future research on the impact of music should not be limited to the effects rap music has on black male behavior. It should also examine the possibilities of using music as a culturally relevant tool inside and outside of the classroom.

Conclusion

Over the past decade, new scholarship has emerged in the areas of identity, music, and the impact of homelessness on black males. Identity studies show great promise in offering a better understanding of how black males conceptualize their reality and how this may impact their economic, education, mental and public health outcomes. Many of the studies reviewed were still rooted in the deficit approach and offered few policy recommendations and interventions to improve the well-being of black males. The review of the literature also revealed the need for program evaluations that include black males specifically and the identification of program components that have shown success for males. Finally, the comprehensive review of the literature showed that studies that account for favorable outcomes for black males are sorely needed and illuminated the dearth of research initiatives that advance both cultural and structural solutions for males. Future studies on black males should focus on longitudinal outcomes and include the voices of black males and how they understand and shape their world. In sum, quantitative research designs, combined with qualitative studies that accurately capture the way

in which African American males navigate the world they live in is required to effectively reduce the disparities faced by males. Ideally, strong studies will ultimately provide solutions that are sustainable and transformative for black males.

There has been inadequate attention to how black male outcomes within particular social domains shape their outcomes across domains. While it is acknowledged that where one lives can impact one's educational performance, the likelihood of incarceration, and mental health problems, there are still very few programs that take this interactive and cumulative approach to its logical conclusion. Mapping work at the Kirwan Institute suggests that the structure of opportunity across a number of domains is critical to consider both in terms of research and policy related to African American males. There have been studies of the impact of opportunity on the general population but none specifically focused on black males. This approach, implemented in the mapping section, looks at a number of factors together and thus avoids the fragmented approach that often results in a narrow focus that fails to address the interactive nature of institutions. While more research is needed, there should be efforts to put in place research-based pilot programs and clarify unanswered questions. Black males should not have to wait another decade while research continues to refine questions and design. While the condition of black males is extreme and distinct, many of the insights in this report are not unique to African American males. It is the accumulation of disadvantages and the broad lack of prescriptive responses to them that makes the group's circumstances perhaps uniquely grim.

For example, the finding that blacks do not do as well in predominantly white institutions (PWIs), where there is little institutional support, would surely be true for any group that found itself unsupported by host institutions. The research literature is replete with examples of the importance of teacher expectations on the performance and self-esteem of students. It is therefore not surprising that this holds true for African American males as well. While there is a need to recognize the interaction of individual behaviors and institutional policies and practices, the condition of African American males might be better explained by how they are treated by society and its social and culture institutions than something in African American males alone.



Advisory Board Interviews

B. Advisory Board Interviews

Introduction

A critical aspect of the African American male project was to assemble a national advisory board to guide the social science literature review on black males. The board includes representatives and scholars from various disciplines whose research interests and project agendas focus on African American males. During our review of the literature on black males, several issues emerged that made apparent the need to consult with our experts to broaden our understanding of the research findings on black males.

The research team found that several issues concerning poor outcomes for black males were discussed without the identification of policies or practices that would improve those outcomes. For example, much of the research on the disproportionate number of black males incarcerated for drug offenses offered limited analysis or initiatives to address the problem. The interviews and discussions with the advisory board were critical in deepening our understanding of the issues faced by black males, providing valuable insight into the policies and initiatives that enhance the quality of life for black males, and helping us further illuminate how we define success for them. The interviews provided by scholars afforded insights into the research on broad concepts that were illuminated in journal articles. Over the course of the grant period, the researchers conducted face-to-face and telephone interviews with the advisory board members and OSU partners. We presented several questions to each of the board members and OSU partners with additional questions to each advisory member specific to their area of research interest. Collected below are the interview questions, and their responses. The list of the advisory board follows.

Question 1: What are some gaps in the research literature on African American males and what types of studies do you think would be helpful to the research base if conducted?

a. Abandoning pathology as a myopic lens for research on African American males for a structural approach

According to the majority of respondents, research literature on African American males tends to be based on the pathological model that frames the experiences of black males only from a deficit perspective and does not account for the successful outcomes of males. Antoine Garibaldi suggests that by using the pathological model to discuss outcomes for black males, the positive outcomes of the community stay unrecognized. According to Stephen Gavazzi, research that continues to use the pathological model as a starting point is problematic because it continues to further “marginalize minority youth” and does not allow for a greater understanding of the strengths of the community in which they reside. Miles Anthony Irving indicates as well that studying the strengths of black males, their families and communities would generate techniques to further empower communities as well as mitigate the problems they face. He indicates that the current research literature fails to connect with the community, and suggests that the research does not provide “practical application” to the individuals working directly with the African

male community. James Moore and Garibaldi, like Irving, believe that research tends to be “basic” and consistently leaves out best practices that prove to be successful and can be used by practitioners or social workers to improve their interventions. Additionally, A. J. Franklin suggests that there have been programs within the community that have proven to be helpful to African American males but the majority of these community programs remain unreported. Moore also suggests that there is a strong need for “experimental designs” in research on African American males, and that most of the past and current research has been based on census data.

Further research needed on structural barriers

Both Cynthia Hudley and Vivian Gadsden highlight a pressing need to look at those black males who succeed in spite of the barriers faced by most. Hudley suggests looking at the family processes of low achieving, low income African American males and comparing these processes to high achieving, low income African American males. Putting these processes in a larger structural context, she argues, would allow us to see the larger structural barrier these black males are working against. Gadsden argues similarly, saying that the literature does not look critically at the life course of African American males, and that white and black males are often compared, which may be an erroneous comparison. She states that we know a lot about when black males fail in school, but very little about how they experience school in a positive light.

b. A Progressive Research Agenda

Irving indicated that in order to address these gaps within the research literature, research needs to be more “progressive” and have a “productive research agenda.” According to Moore, the majority of research has currently been limited to census data and therefore does not include experimental designs with control groups. Gavazzi suggests that the current research has an over-reliance on one perspective and does not include multiple perspectives. Finally, Victor Rios suggests that research design should go far beyond the quantitative/qualitative binary and become more triangulated.

c. The need for gender and race specific studies

Many of the respondents stressed the significance of the need to disaggregate the research studies not only by gender *or* race but also rather by the combination of gender *and* race. Gavazzi indicates that there are distinct needs for black males and black females. Garibaldi states that there continues to be a growing gender gap between African American males and African American females. The current research has a tendency to “categorize all groups of children as being the same...Research studies place ‘at risk’ children in the same group with students who are not at risk when it is convenient to the study,” according to Gwendolyn Cartledge. She suggests that this method simplifies the study and we cannot see what works or does not work by this homogenization of groups. Franklin states that research on race tends to group African Americans together and does not recognize important variation within the community. Moore

recommends that analysis of African Americans needs to also consider economics to determine what behaviors are the same or different in African American families based on their incomes.

Cartledge argues that, “[e]ven if there are studies that are prevention [based]... rarely do we researchers disaggregate the data in terms of African American males. As a matter of fact, very often they don’t even indicate who their subjects are, be it by race, sometimes they will just give race and not gender. It’s really hard to look at this data and see how effective those interventions are for these populations.”

According to Gavazzi, “there has unfortunately been a tendency in the research literature to unintentionally marginalize minority youth by creating special sub-samples of minority youth and placing them into samples that are predominantly Caucasian, and then running statistical procedures that make it appear as if the minority youth ‘look like’ the Caucasian youth.” This has also been done with gender. The real disparity tends to exist when you don’t pay attention to race, gender and ethnicity and how they interact.

Further research needed on gender construction

Another theme within the interviews was the lack of studies on the way in which gender is constructed. There was some consensus with the respondents that further studies need to address how “structures are lived within individuals” (Rios) and “how gender is constructed within a socio-cultural, historical, and structural context” (Tony Whitehead). Franklin asserts that theoretical, clinical, and empirical literature excludes the role of black fathers.

d. Other gaps in the research literature on African American males

Racial Dynamics of Policy Development

According to Marc Mauer, we need more research on the racial dynamics of policy development, particularly in the criminal justice system. This research would examine how certain policies are adopted and applied to the group under consideration and what the alternatives to this process might be.

Empirical Findings in Addition to Census Data

Moore argues that much of the research has been limited to census data. More empirical findings are needed

Question 2: What are some initiatives and policies that you are aware of that you think are particularly helpful to African American males specifically, and why are these initiatives helpful?

a. Essential Elements of Successful Programs

The advisory board members identified several elements of key policies and components of programs that they found to be helpful to African American males.

Proper Implementation and Adequate Funding

Gardner indicated that many initiatives and policies, like No Child Left Behind, are good policies but the problem arises when the policies are implemented. He suggests that negative outcomes associated with the policies exist due to many different translations of the policies and lack of funding to carry out programs. Ronald Ferguson, like Gardner, allows that the inadequacy of funding is significant to the implementation of programs as well. He argues that “pretty much any program model can work pretty well if you implement it well. It’s not about the model so much as it is about implementation.”

Gardner also suggested that it is often difficult to find funding for programs because of skepticism about whether these programs would produce the desired outcomes.

Community Partnerships

Mauer and Tony Whitehead highlighted the importance of programs composed of community partnerships with churches and community personnel. Whitehead called community collaboration a “community based participatory approach.” Moore and Gardner suggested that community partnerships could lead to supplemental educational programs and provide internship opportunities to African American males allowing for the practice of newly obtained skills. Cartledge agreed that some programs, such as after school programs, are critical, but cautions that these programs should not supplement African American males’ education. After-school programs should not end up taking on the responsibilities of the schools and being the primary source of education, according to Cartledge.

Mauer provides an example from Boston in the early 1990s, during a very disturbing rise in youth violence involving young black males. A police-community partnership was developed that emphasized outreach of law enforcement personnel to the church community and community service organizations. They attempted to give youth something to do other than loiter in the streets. At least for a period of time in the 1990s, the homicide rate declined significantly.

Parental Involvement

Another component the advisory board members recommended be included in initiatives and programs is parental advocacy groups. Cartledge indicates that parents are sometimes unable to advocate for their children because they are unaware of how to navigate through the educational

system. Moore indicated that parents play a significant role in their children's lives and direct their children on how to survive in their different environments. Parental support and involvement coupled with effective programs would benefit African American males, the interviewees concluded.

Cultural Awareness

The advisory board also identified cultural awareness as an important component of an effective program. Irving suggested that including cultural pedagogy in programs and initiatives gives youth a better understanding of their cultural history and allows them to further develop their cultural identity. According to Hudley, these programs would also allow African American males to interact with individuals that they can connect with. Gavazzi agreed that more culturally specific programs are needed to address the many problems within the community but he also indicated that better measures related to evaluations are needed within programs in order to accurately measure program effectiveness on a number of outcomes.

b. Helpful Policies and Initiatives for African American Males

Many advisors reported specific types of policies and initiatives that have proven helpful to African American males.

Education

According to Moore, the Meyerhoff Program at University at Maryland Baltimore County takes children who come from places and environments that render them educationally vulnerable and susceptible to failure to produce high quality students. Moore notes that, "when we think about African American males, we don't always think about them in the STEM (Science, Technology, Engineering and Math) fields and many of these students [in the Meyerhoff Program] go on to pursue advanced degrees. We haven't done [enough] in public policy because we are still losing too many African American males throughout the educational pipeline."

Cartledge highlighted the Abecedarian project out of North Carolina and Alabama, which conducts long-term programs, working with poor children, most of them African American, from infancy right up to formal school. The project just completed nearly 20 years of follow-up research and found that the youngsters who participated in this program, compared to their control-group peers, had much greater success in K-12, were more likely to pursue post-secondary education, and had lower levels of criminality. It is clear that high quality pre-school programs truly give children a head start.

Criminal Justice

Mauer suggested that the drug court initiative was helpful because it allows the individual to obtain treatment in lieu of incarceration. He stated:

The idea is to get people with substance abuse problems into treatment rather than incarceration...it is likely that this has had some beneficial effects in reducing incarceration, although it doesn't mean that there aren't racial dynamics to go along with that as well...it's possible that African Americans are less likely to get in the treatment programs than whites might be.

Gardner pointed to multi-systemic therapy programs that work with kids who have been in a lot of trouble in the criminal justice system. These programs work with the child's whole ecological niche. Such programs have a fairly good reputation from evaluation research for making a difference.

Employment

According to Franklin, programs like Upward Bound have clearly been beneficial for African American male participants. The Job Corps continues to make a contribution to segments of the African American male population that do not go on to higher education. In terms of policies, some of the loan programs have been helpful for young people to be able to pursue higher education. The labor department and manpower programs, work programs, youth development programs, are also very helpful in their funding structure. Gadsden notes that the federal initiatives around work have been helpful when engaged by fatherhood organizations and groups, not simply for the men to talk about fatherhood, but also about other stressors.

Question 3: What do successful outcomes for African American males look like?

When asked what successful outcomes for African American males "look" like, the responses were mainly centered on the respondent's area of interest. Within education, Irving defined academic success as the completion of each grade level before being promoted to the next. For the younger black male student, Cartledge described success as the ability to read and be well adapted behaviorally to the academic environment.

Garibaldi defined success as graduating from high school and attending college and ultimately pursuing an advanced degree. He noted simply attending college is not enough since many black students do not persist beyond their first or second year of college. Sometimes this is due to academic reasons, but more often than not it owes to a lack of basic skills such as time management.

Mauer indicated that within criminal justice, success for black males would involve having less contact with the criminal justice system. If contact with the criminal justice system has already been made, Whitehead suggested that success would mean that many more black men are able to make constructive transitions back into the community.

Regarding identity, health, and mental health, success was defined as having a good sense of cultural identity (Gavazzi), self-identity (Rios), resiliency (Franklin), and political consciousness (Rios). Irving suggested that overall good health is a combination of being successful

psychologically, physically, economically, and within families and relationships. Both Hudley and Irving defined success overall as being able to provide for oneself, the people one cares for, and advancing the greater community. They also both noted that this type of success is ultimately defined at the individual level. As Gadsen described success:

They [African American males] become residential rather than non-residential fathers. They have the job skills to be able to take care of their families...they have a reduction or non-existence of criminal records, a reduction in their criminal activity or they don't engage in criminal activity in the first place. The big one is that they are fully engaged with their kids...[and are] involved in the children's schooling and they take responsibility for their families and for themselves.

In general, Hudley suggests that success for black males looks no different than success for any other group.

Concluding Thoughts

A major theme throughout these interviews was the idea that the majority of research on African American males tends to focus on disparate outcomes, with little research focusing on the resiliency and success of some males. As Mauer stated, "We know one in three African American men has some experience with the criminal justice systems before age 30, but we don't know about the other two out of three." The interviewees agreed that there was not enough research about those males who successfully navigated structural barriers. They also agreed that research should focus on the intersectionality of race and gender for black males. It is our hope that the interviews contained herein serve as a clarion call to the scholarship and interventions on black males by advancing the following key areas: both cultural and structural solutions for males; scholarship on how success is defined for black males; research on black males who succeed in spite of barriers; and help to develop programs for those black males in and outside of the juvenile justice system to transform the dialogue and scholarship on black males. The interviews in their entirety may be found at the institute's website located at www.kirwaninstitute.org.

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African American Male

Mapping Project

C. African American Male Mapping Project

Introduction

Much of the social science literature on black males has identified a number of different social, political, and economic disparities between black males and other racial and gender subgroups (i.e., white males and black females). Despite the excess of studies on black male disparities, there is little research situating African American males within a larger social context. There are only a handful of studies which examine successful black male outcomes and even fewer across multiple contexts. What would educational outcomes for black males show if the lens used linked teacher preparation, neighborhood health, and employment viability? Due to the consistent lack of contextualization—a process necessary to understand the contemporary conditions of black men—the project research team used a GIS mapping strategy to visually represent the environmental factors affecting African American males. To generate an opportunity-focused map using GIS methods, researchers identify a number of indicators contributing to opportunity. For the present study, 15 indicators were selected. The indicators are then organized into a composite image. Once mapped, these images reveal where groups are located in relation to opportunity structures. By generating maps showing the relationship between African American males and opportunity, we can begin to frame black male opportunity structures in geographical perspective and create more targeted and transformative initiatives.

Not merely a simple indicator of well being, “opportunity” is defined here as the structures and environmental conditions that contribute to community stability and individual advancement. Spanning a range of economic and social factors such as sustainable employment, high-quality educational institutions and experiences, healthy and safe communities, stable and safe housing, and access to healthcare, “opportunity” is an entire environmental context consisting of structure, or the macro-level, and culture, or the micro-level. Access to structures of opportunity is critical to an individual’s success. Structures may mediate personal choice in implicit and explicit ways. An individual who has more structural barriers, and consequently less opportunity, may have a more limited way of exhibiting agency than those in areas of higher opportunity.

Geographical Isolation v. Connection to Opportunity

Considering a range of indicators, the mapping project illuminates a discernable pattern of African American male isolation in opportunity-deprived neighborhoods. Expanding and maintaining connections to the resources that create opportunity is a key strategy for systematically improving the lives of African American males. Central to this endeavor is the promotion of mobility for racially marginalized populations, engendering access to the benefits of opportunity-rich neighborhoods. As the research reviewed illustrates, connecting people to opportunity-rich communities promotes economic and educational access, and consequently success, especially for youth.

1. Data and Methodology Summary

Research on opportunity indicators was collected from seven large, racially and ethnically diverse metropolitan regions: New York, NY; Chicago, IL; Detroit, MI; Houston, TX; Atlanta, GA; Los Angeles, CA; and Washington D.C. In these seven regions, researchers track the behavior and outcomes of a total population of 1,169,796 African American males.³

To analyze the geographical distribution of opportunity, the mapping team prepared a multivariate index using 15 indicators of opportunity. From this “opportunity index,” the team developed quintiles to rank neighborhoods based on their opportunity index score (very low, low, moderate, high, very high). The opportunity mapping methodology has been utilized at the Kirwan Institute for similar assessments in more than dozen other areas, and has been integrated into both policy advocacy and research.

The study measured opportunity through three primary indicators: education, economy/employment, and neighborhood health. In the education category, five indicators were used:

1. Census data on childhood poverty detailing the number of persons below the age of 18 who were at or below the 1999 poverty level

Greater rates of childhood poverty were related to lower opportunity.

2. Census tract data on high school dropout rates showing the proportions of those people who are 25 and older and have not received a high school diploma or equivalency

Greater numbers of high school dropouts were connected to lower opportunity.

3. Census tract data measuring the relationship between not having received a diploma and unemployment for those between the ages of 16 and 19

Geographical areas with high populations of this group were associated with lower opportunity.

4. Census tract data measuring high school completion rates for people 25 and older

Increased rates of high school completion were associated with higher opportunity.

³The analysis focused on young males due to the prevalence of research characterizing childhood as a significant time period for understanding the impacts of environmental factors on life outcomes and targeting interventions to improve opportunities for children. The analysis used a year 2000 Geolytics CensusCD to retrieve this data.

5. School district statistics cataloging reading scores, math scores, and the percent of economically disadvantaged students

Increased reading and math scores were associated with higher opportunity, while higher numbers of economically disadvantaged students were associated with lower opportunity.

The following indicators are used for the category of economy/employment:

1. Census tract data detailing households receiving public assistance

Increased numbers of households receiving public assistance were associated with lower opportunity.

2. Census tract data measuring median household income

Increased median household income was attributed with higher opportunity.

3. Census tract data calculating gendered rates of unemployment

This measure examines the number of people over the age of 16 who are classified as unemployed. This indicator excludes those in the Armed Forces as well as those not seeking employment. Increased unemployment rates were associated with lower opportunity.

4. Job change data recording the net change in number of employees in a zip code and the proportion of job change between a certain time period

Increased rates in job changing were correlated with areas of higher opportunity. This variable is a time-series measurement between the years 2000 to 2004.

The following indicators were used for the category of neighborhood health:

1. Census tract data detailing the proportion of vacant residential property to housing units

Increased rates of vacant properties were indicative of lower opportunity.

2. Census tract data measuring property values

Increased median home value was indicative of higher opportunity.

3. Census tract data showing homeownership rates

All owner-occupied households were used as a measure of high opportunity. The more owner-occupied households that were present, the higher the opportunity in an area.

4. Census data measuring non-childhood poverty rates

Increased rates of poverty status (in proportion to the total population) were attributed a relationship to lower opportunity.

5. Percentage of population change using a time-series measurement

This demarcation captures the net change in the number of people within a specific census tract from the year 1990 to 2000. Census tracts were normalized to their respective year 2000 boundaries. Increased population rates were characterized as having a relationship to higher opportunity.

6. Census tract data reporting local criminal activity

Increased crime rates were associated with lower opportunity.

Each measure of opportunity was combined into a visual representation on the maps of each metropolitan area. Lighter colors represent areas of less opportunity, and darker colors represent those of greater opportunity. Each block of an area shown by the lightly colored borders is one census tract. The green dots in the maps represent the African American males, ages 14 and under. Contingent upon the map being used, the green dots represent a different number of African American males present in a given area. (Larger versions of the maps are made available in the concluding pages of this section.)

2. Maps with Findings

Figure 1: Atlanta, GA Metropolitan Area

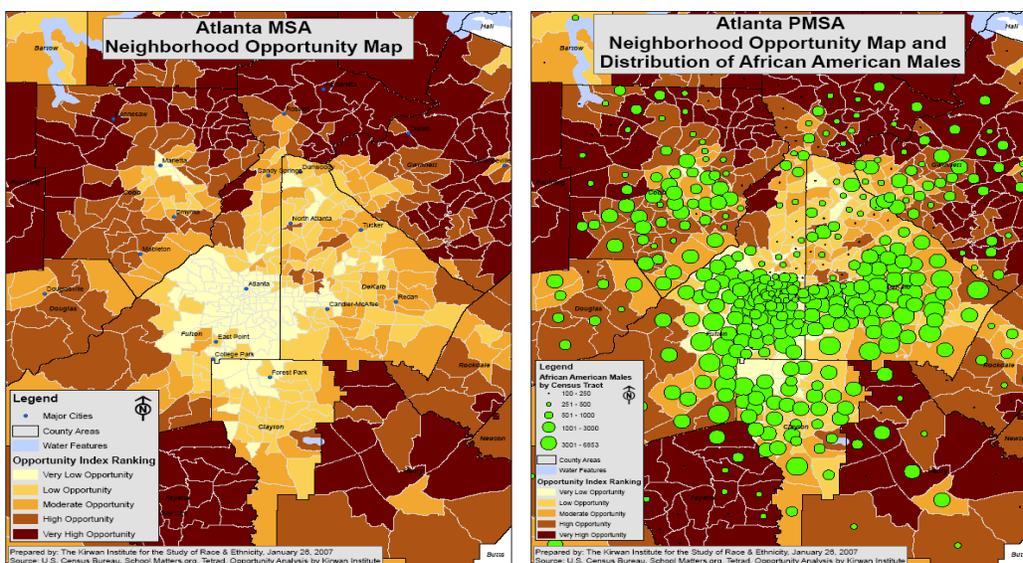


Figure 1 illustrates the metropolitan area of Atlanta. In this area, the total population was 4,112,646. African American males age 14 and under totaled 160,745. Of this cohort, 55% were concentrated in areas of very low or low opportunity, while only 19% were located in areas of high or very high opportunity. African American females shared a similar geographical profile with black males, with 56% living in areas of low to very low opportunity. The number of black males and females who lived in these areas was almost equal for Atlanta. In contrast, 73% of white males lived in areas of high or very high opportunity, which was the highest proportion of the seven regions. Finally, only 12% of white males in Atlanta resided in areas of low or very low opportunity.

Figure 2: Chicago, IL Metropolitan Area

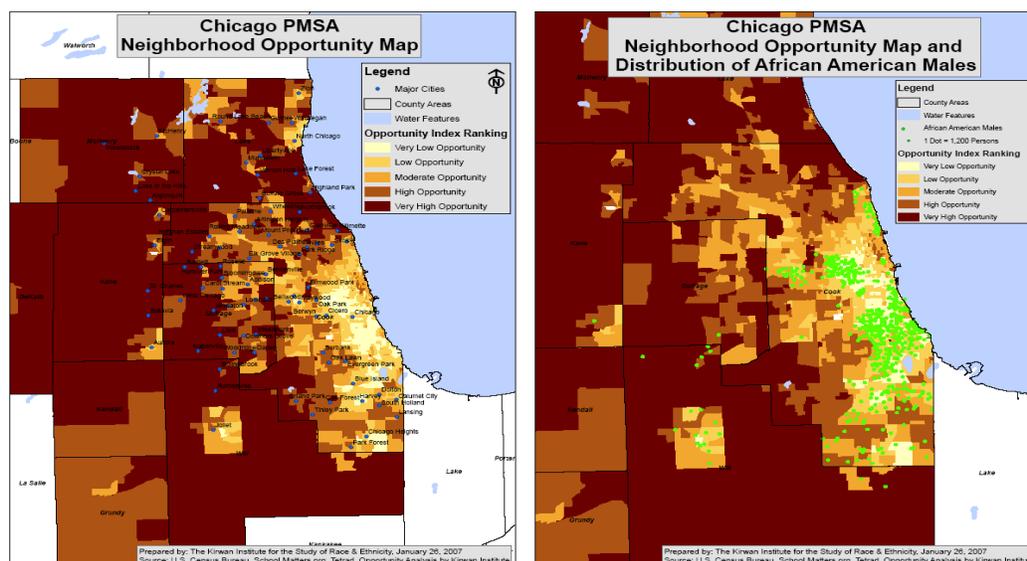


Figure 2 illustrates the metropolitan area of Chicago, IL. In this area, the total population was 8,272,768, and the number of African American males age 14 and under was 215,500. Of this sample, three out of four African American males (75%) lived in an area of low or very low opportunity, while only 10% lived in areas of high or very high opportunity. Black females were almost equally represented in areas of low to very low opportunity, with 76% residing in these areas and only 10% present in places of high to very high opportunity. In contrast, 14% of white males lived in areas of low to very low opportunity, while 69% of white males lived in areas of high to very high opportunity.

Figure 3: Detroit, MI Metropolitan Area

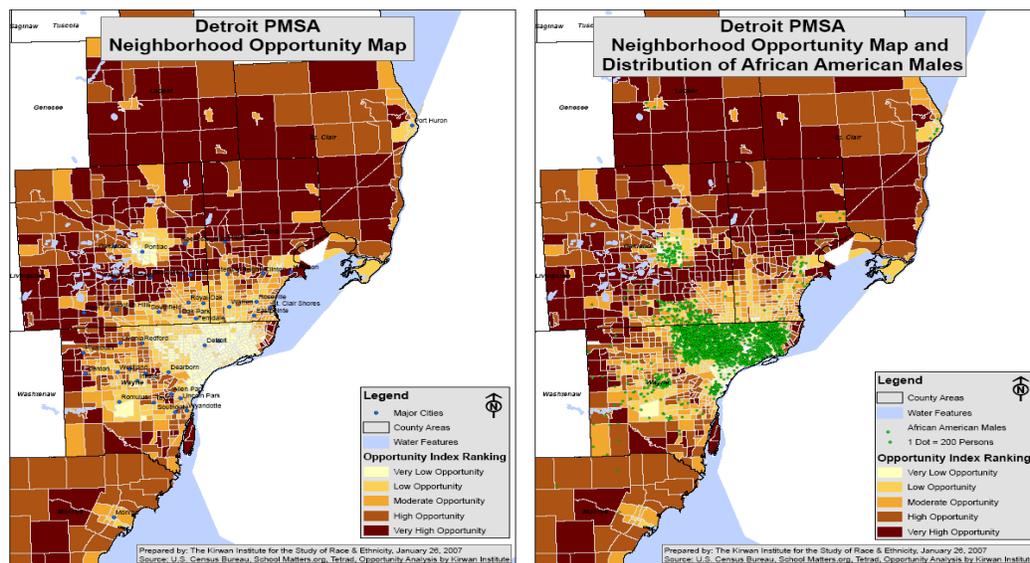


Figure 3 shows the metropolitan area of Detroit, MI. In this area, the total population was 4,441,551, and the number of African American males age 14 and under was 140,652. Of this sample, more than nine out of ten (92%) African American boys resided in an area of low or very low opportunity. This was the highest proportion of African American males out of any of the regions in areas of low opportunity. In contrast, only 3% of males were in areas of high or very high opportunity. Black females were equally represented in areas of low to very low opportunity, with 92% of females present in these areas and only 3% present in places of high to very high opportunity. In contrast, only 18% of white males lived in areas of low to very low opportunity, while 59% lived in contexts of high to very high opportunity.

Figure 4: Houston, TX Metropolitan Area

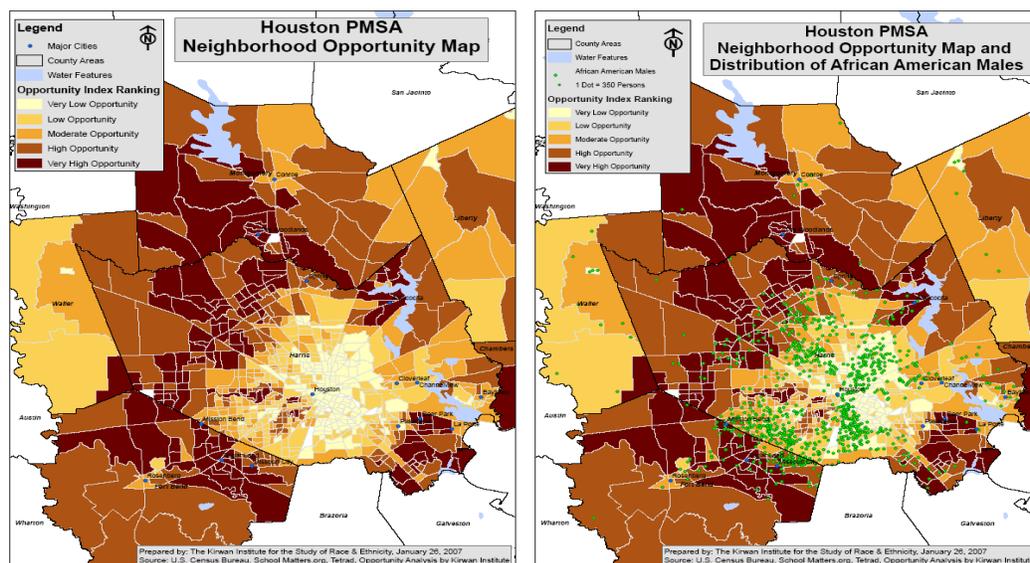


Figure 4 shows the metropolitan area of Houston, TX. In this area, the total population was 4,177,646, and the number of African American males age 14 and under was 98,760. Of this sample, more than half (56%) of African American boys lived in areas of low or very low opportunity; 24% lived in areas of high or very high opportunity. Again, black females were equally represented in areas of low to very low opportunity, with 56% residing in these areas and only 24% residing in places of high to very high opportunity. In contrast, 25% of white males were present in areas of low to very low opportunity, while 57% were present in contexts of high to very high opportunity. This number barely exceeds half of white males, a stark contrast to other regions where the proportion of white males in high opportunity areas was far higher.

Figure 5: Los Angeles-Long Beach, CA Metropolitan Area

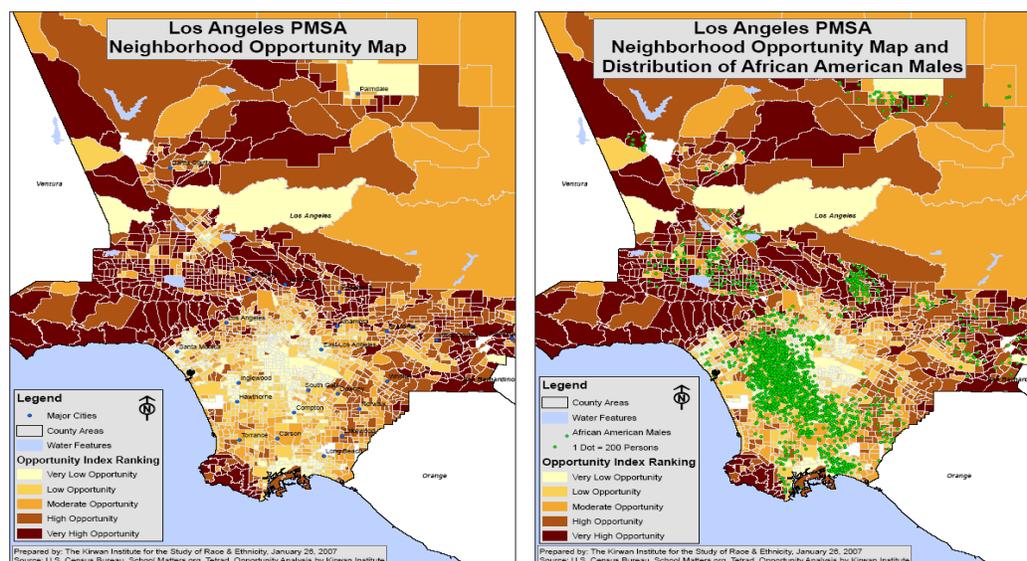


Figure 5 illustrates the metropolitan area of Los Angeles-Long Beach, CA. In this area, the total population was 9,514,009, and the number of African American males age 14 and under was 118,771. Of this sample, 62% of African American boys were concentrated in an area of low or very low opportunity, while only 19% of males were found in areas of high or very high opportunity. Black females were equally represented in both areas and high opportunity. In contrast, 32% of white males were present in areas of low to very low opportunity, while 48% of lived high or very high opportunity areas. This number is the lowest number for white males in any of the regions examined.

Figure 6: New York, NY Metropolitan Area

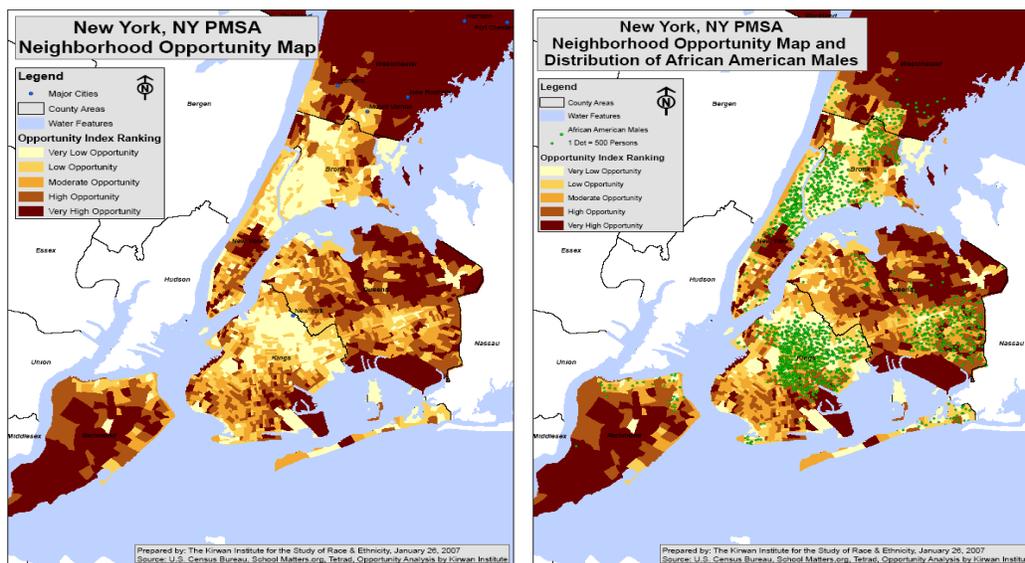
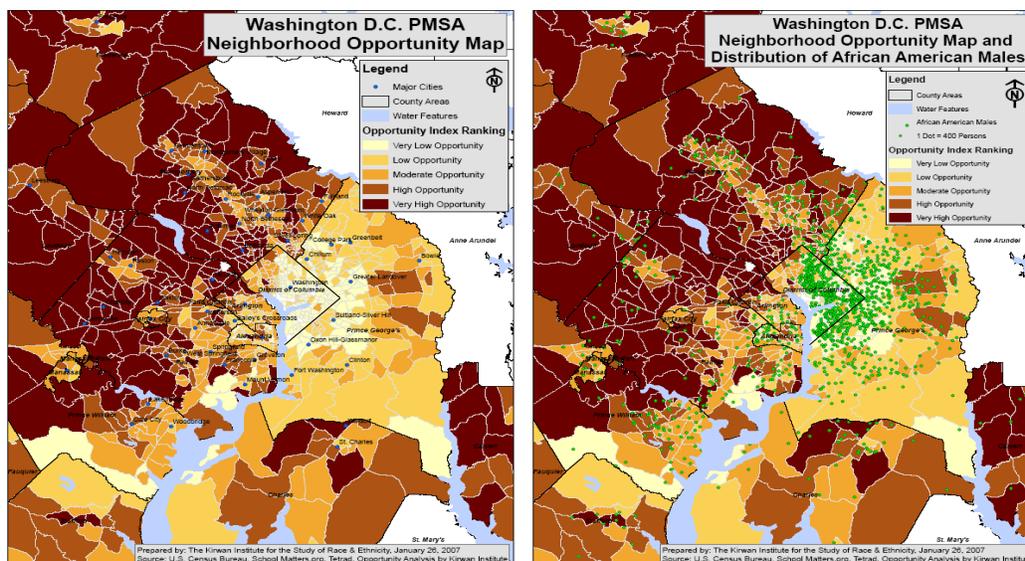


Figure 6 illustrates the New York, NY metropolitan area. In this area, the total population was 9,314,235, and the number of African American males age 14 and under was 278,439. Of this sample, 68% of African American boys resided in areas of low or very low opportunity, while 18% of males were found in contexts of high or very high opportunity. Again, black females were equally represented in both sets of areas. In contrast, 25% of white males were present in areas of low to very low opportunity, while 56% were in areas of high to very high opportunity.

Figure 7: Washington D.C. Metropolitan Area



Finally, Figure 7 illustrates the Washington DC metropolitan area. In this area, the total population was 4,923,153, and the number of African American males age 14 and under was

156,929. Of this sample, 65% of African American boys resided in an area of low or very low opportunity, while only 19% lived in contexts of high or very high opportunity. The corresponding numbers for black females were slightly *worse*: 68% were present in the low opportunity areas, 18% present in the high opportunity ones. For white males, those numbers were 14% and 66%, respectively.

Conclusion

As the data indicate, most African American males in each metropolitan area were spatially isolated from areas of high opportunity, as were African American females. In contrast, white males in each examined area lived in areas of higher opportunity more consistently than black males or females. In part, these already troubling conditions have been exacerbated by deindustrialization. Scholars suggest that black males have suffered the brunt of outsourcing effects in unskilled and semi-skilled employment as jobs migrate to outside accessible areas and increases in educational and skill requirements serve as further barriers to employment (Ferguson, 2005, Holzer, 2001, & Simpson, 2000). Michael A. Stoll (1998) advances that the drastic increase in unemployment for blacks (as well as Latinos) are due to “spatial mismatch” and job decentralization. He notes that these two groups have relatively limited access to growing employment areas and jobs closely matching their current cadre of skills. Stoll opines that spatial mismatch occurs with black males who moved to the suburbs because they are living in areas that border the inner city and job growth takes place in areas where blacks are not living, such as high opportunity exurbs. The preceding maps offer some support for the claims of these researchers.

These maps demonstrate the spatial isolation of African American males within opportunity deprived and distressed neighborhoods, communities that are devoid of the resources most Americans take for granted. Significantly, this data shows very similar opportunity representation ratios for black males and females, which should be a guide for further research.

The richness of these data provides a compelling new dimension for studying the relationship between African American males and opportunity in geographic, social, and economic terms in both the high and low opportunity areas. By understanding the mix of structural components in “very high opportunity” areas (i.e., housing stability, childcare, criminal activity) for black males, critical solutions or policies for males may be implemented. Likewise, by understanding how black males in “very low opportunity” areas still persist and become successful, policies and solutions to assist their development may also be made. Through understanding the social milieu in which black males develop and strategies they use to forge their lives, scholars can conceptualize promising interventions and solutions. For example, in Montgomery County, MD (an area of relatively high opportunity for African American males in Figure 7), more than a thousand black students passed Advanced Placement Tests in the Montgomery County High Schools (see: “Montgomery Hits a Testing Milestone for Black Students at <http://www.washingtonpost.com/wpdyn/content/article/2007/12/03/AR2007120301878.html?sub=AR>). This was the first school system to pass the one thousand test threshold in AP testing for African American students. However, since the research normally focuses on those black students who do not succeed (academically, in this example), achievements like this are often overlooked. It is also important to remember that Montgomery County has one of the longest-

running inclusive housing policies in the United States. This may explain why this area is so racially diverse, as well as why the maps (i.e., DC MSA) show a significant number of African American males in areas of high opportunity. Identifying these factors encourages the creation of more intentional and transformative interventions for African American students through cultivating the factors that lead to positive outcomes for youth.

Conducting research on areas that are better connected to opportunity illuminates how sustainable opportunity structures benefit all people, not just those in low opportunity areas. The Gautreaux Program in Chicago, a program which moved people from areas of concentrated poverty to areas of high opportunity, demonstrated that people who moved to low poverty, high opportunity suburbs were more likely to be in a college track program, more likely to attend a four-year college, more likely to be employed if not in college, less likely to drop out of school, and more likely to make more than \$6.50 an hour and have employee benefits, compared to those who stayed in the poverty-stricken city areas. The Gautreaux Program research was the catalyst for research conducted on HUD's "Moving to Opportunity Program," which found that beneficial changes resulted in families within two to four years and had differential effects for boys and girls. The HUD research was cut off about halfway through the program, however, which left the longitudinal effects on people's lives unexplored.

Future research should examine factors that contribute to African American male success across the opportunity spectrum, rather than focusing merely on males in the "very low opportunity" areas, because of the explicit links of their outcomes to the whole region. Further, research should also consider the similar proportionality between African American males and females, while remaining sensitive to gender-specific needs. Opportunity mapping may be the first step in conceptualizing future steps that contribute to the healthy development of black males.

Figure 8: Atlanta, GA Metropolitan Area

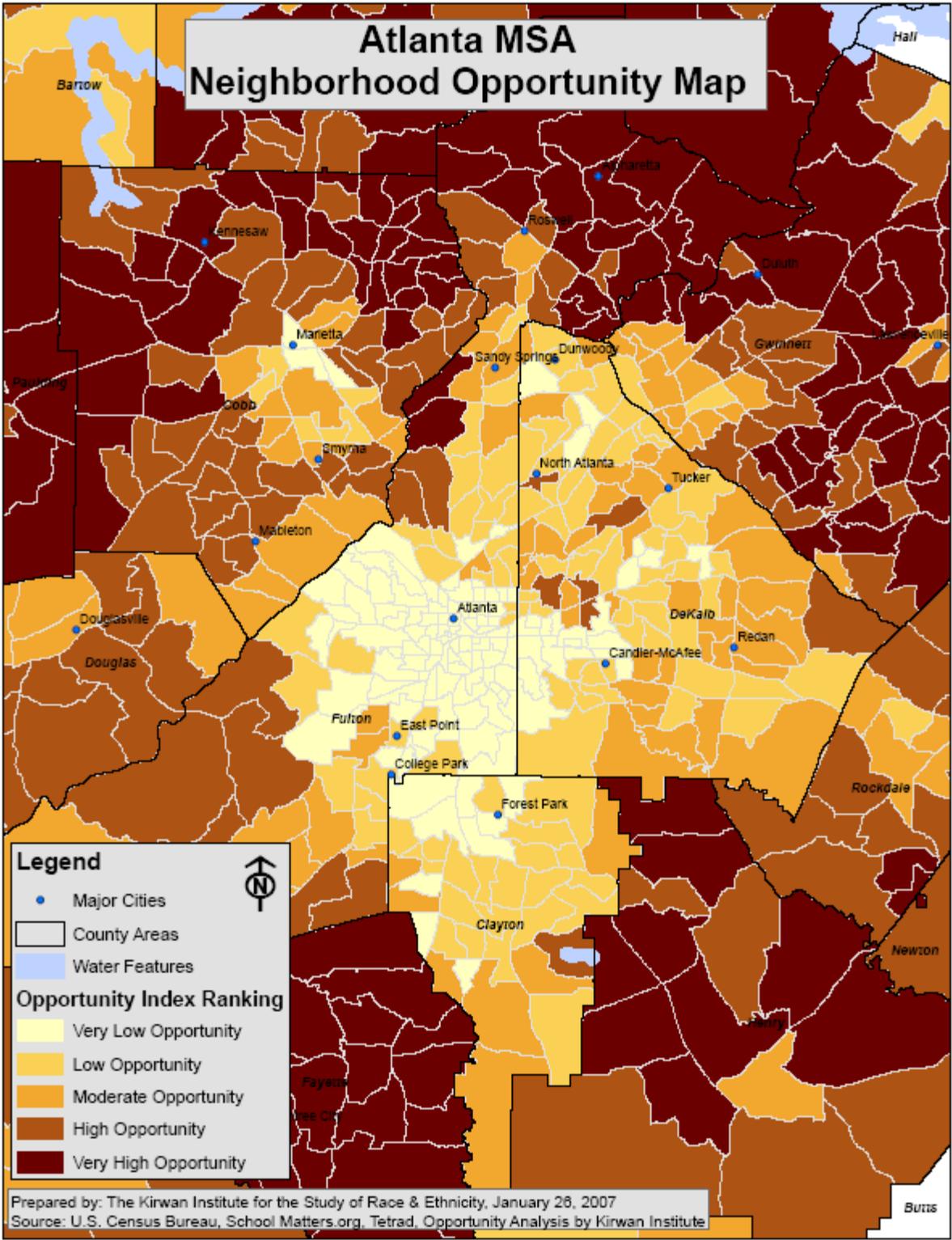


Figure 9: Atlanta, GA Metropolitan Area with African American Males

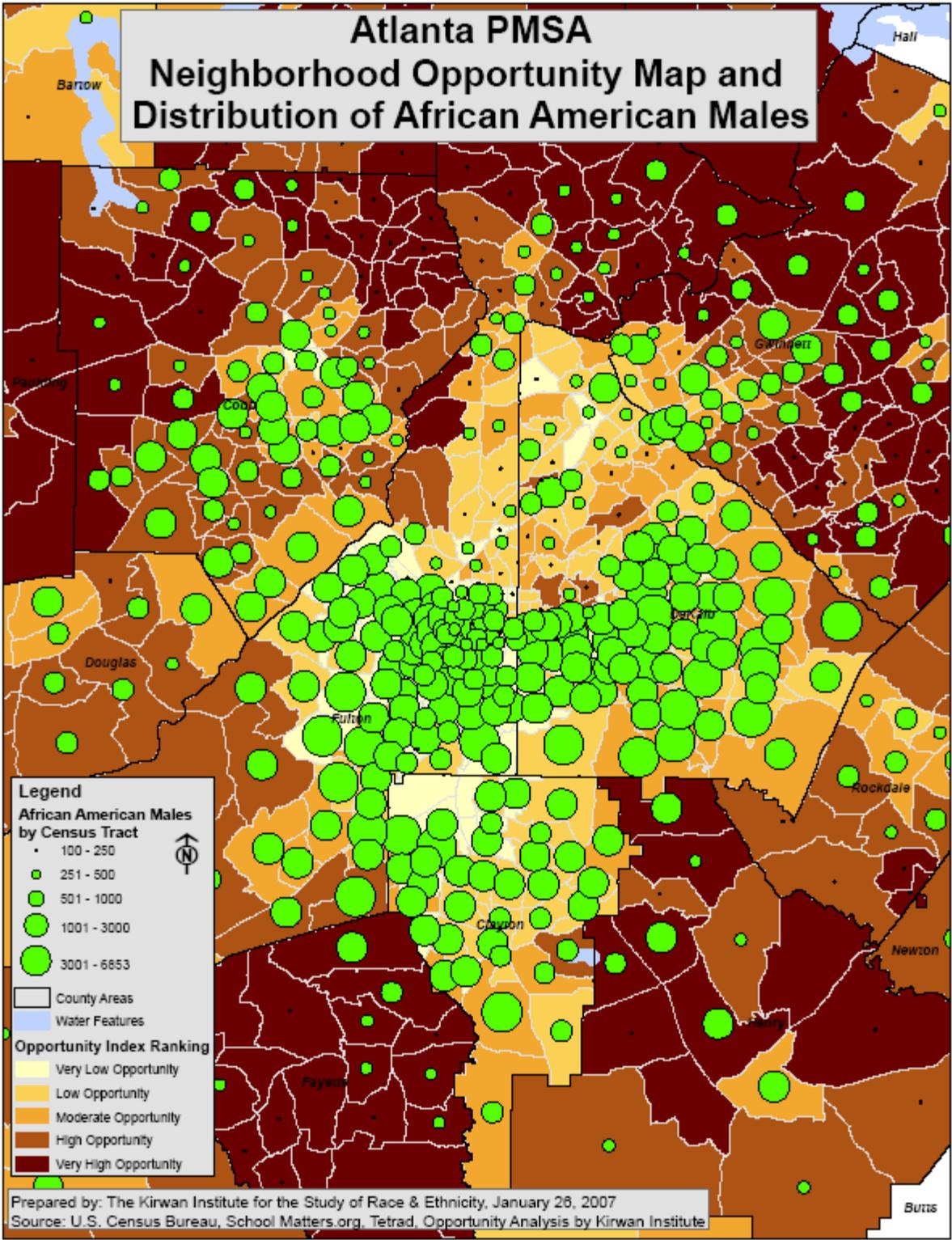


Figure 10: Chicago, IL Metropolitan Area

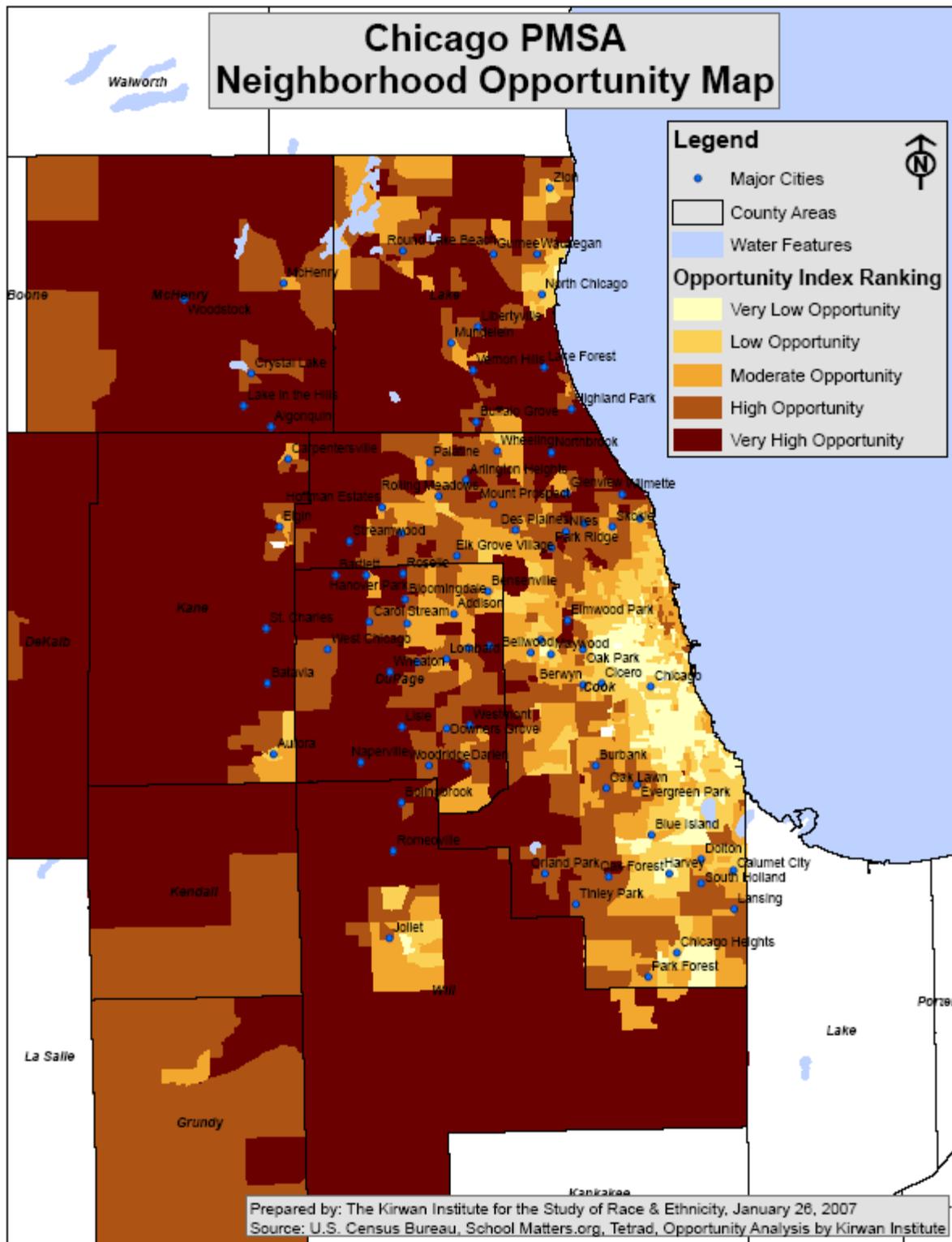


Figure 11: Chicago, IL Metropolitan Area with African American Males

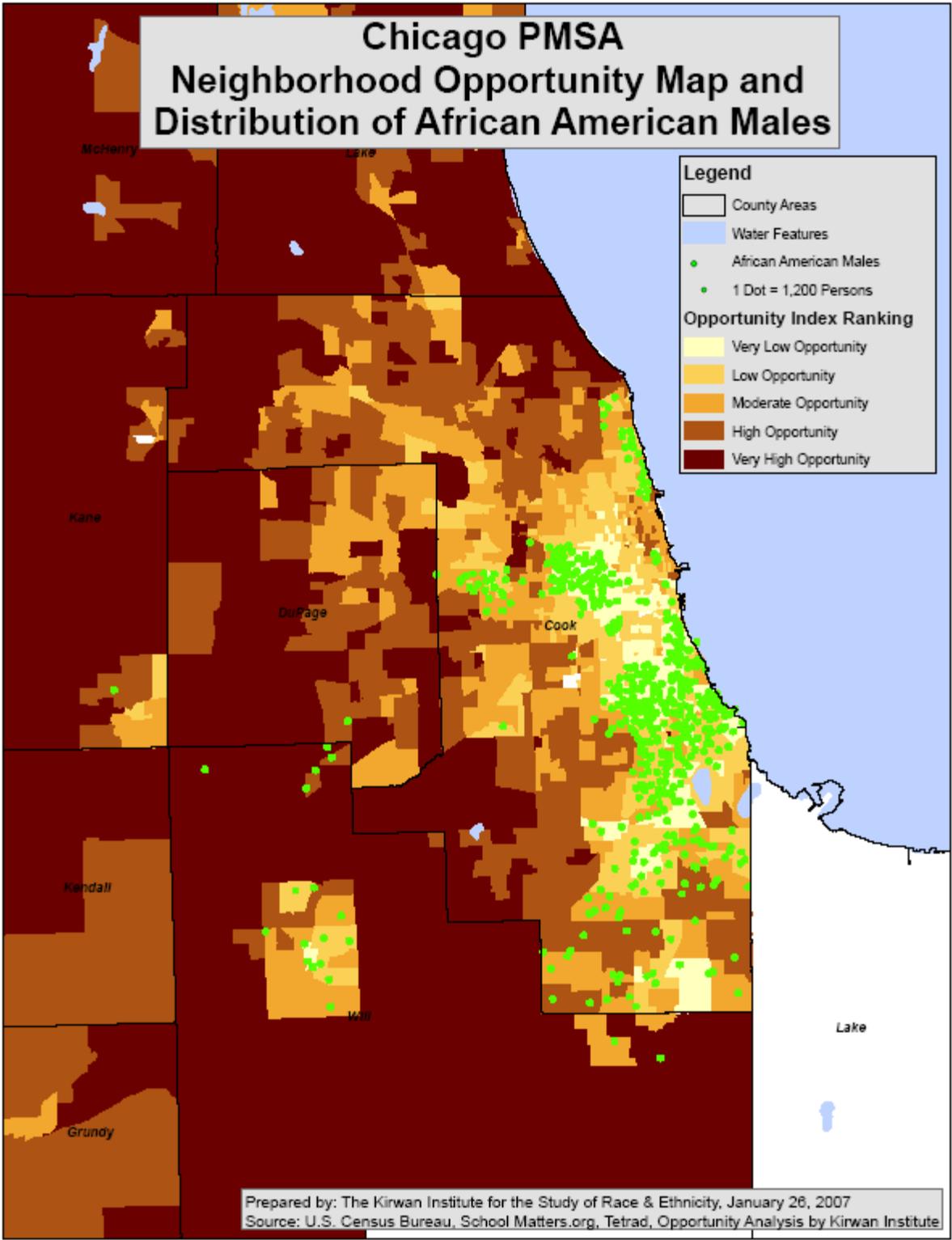


Figure 12: Detroit, MI Metropolitan Area

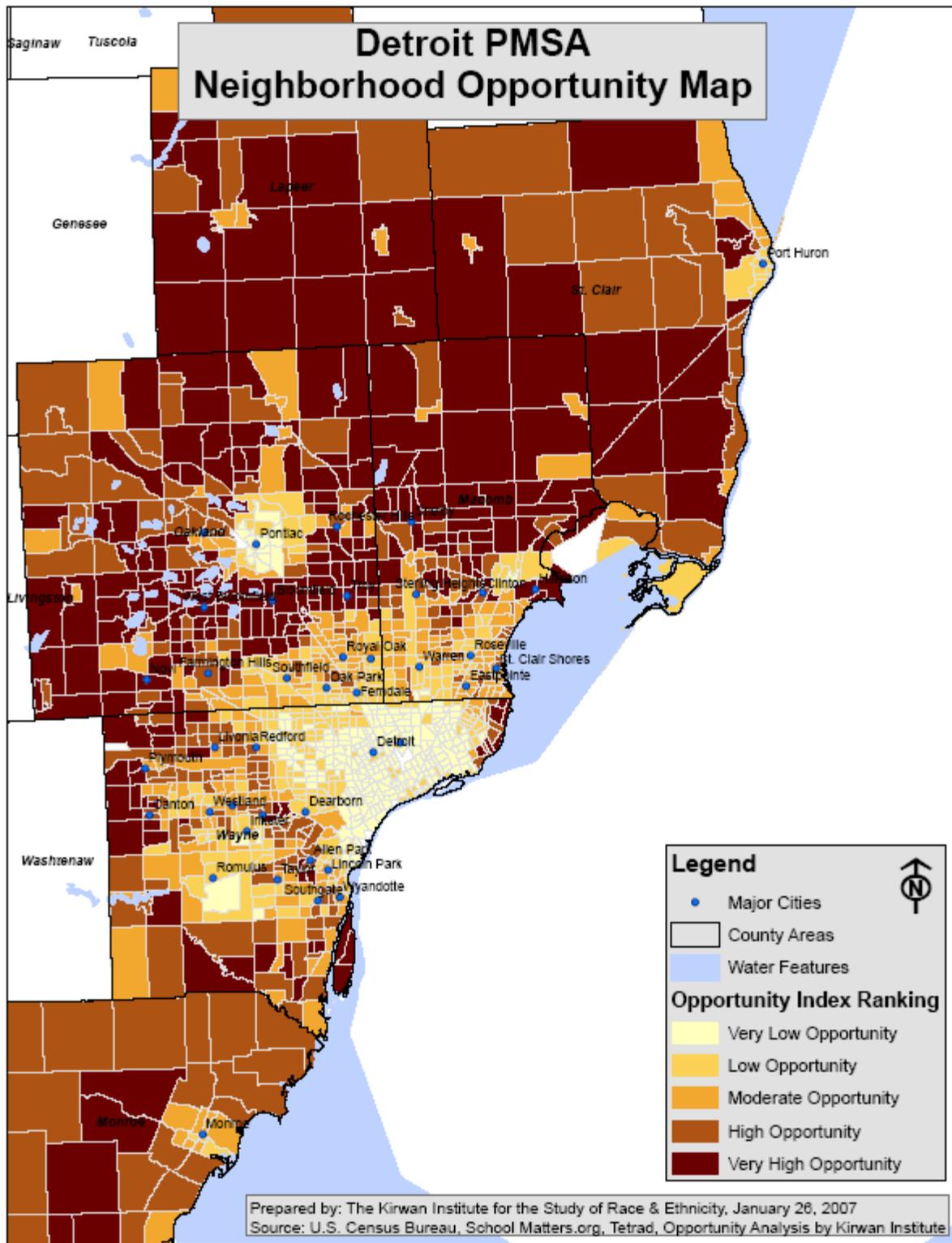


Figure 13: Detroit, MI Metropolitan Area with African American Males

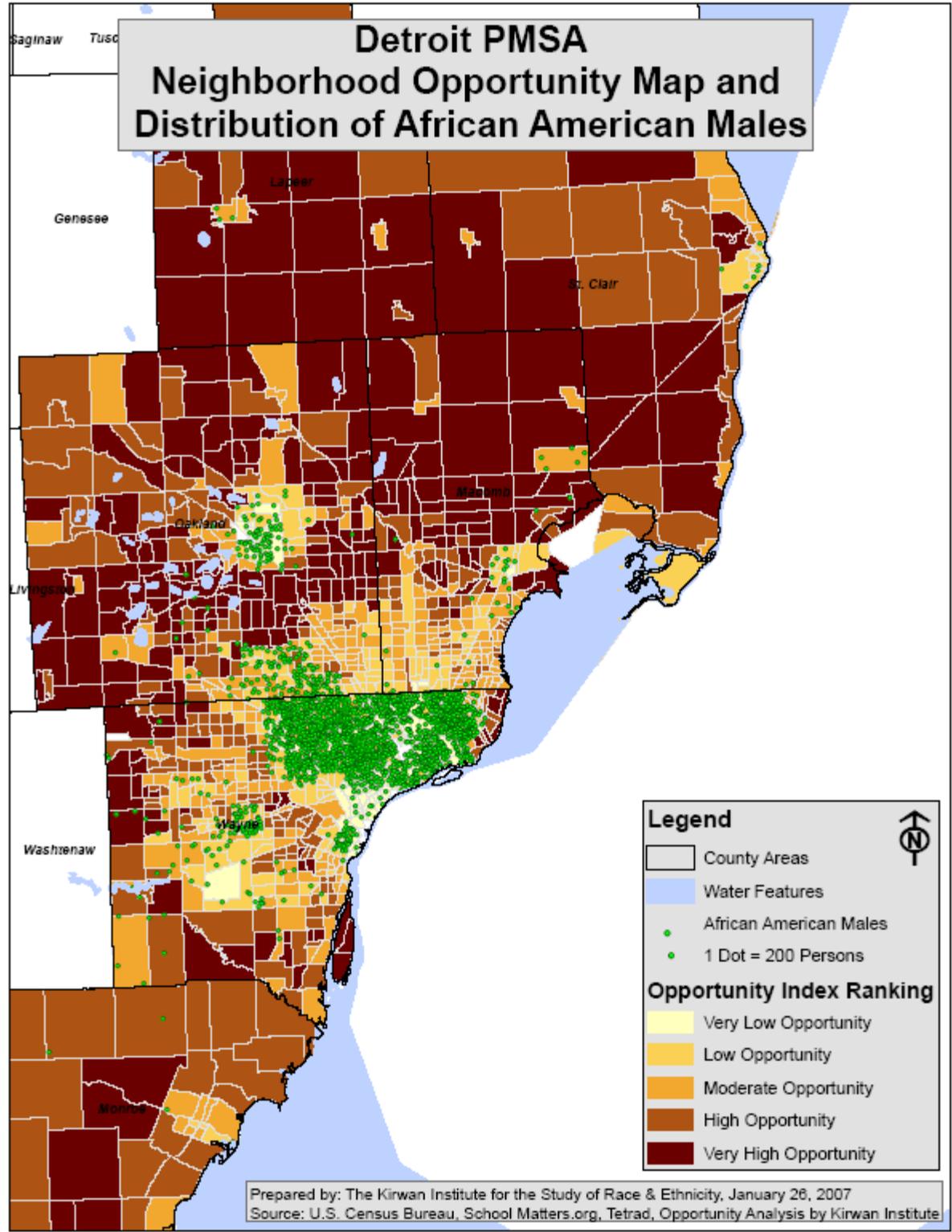


Figure 14: Houston, TX Metropolitan Area

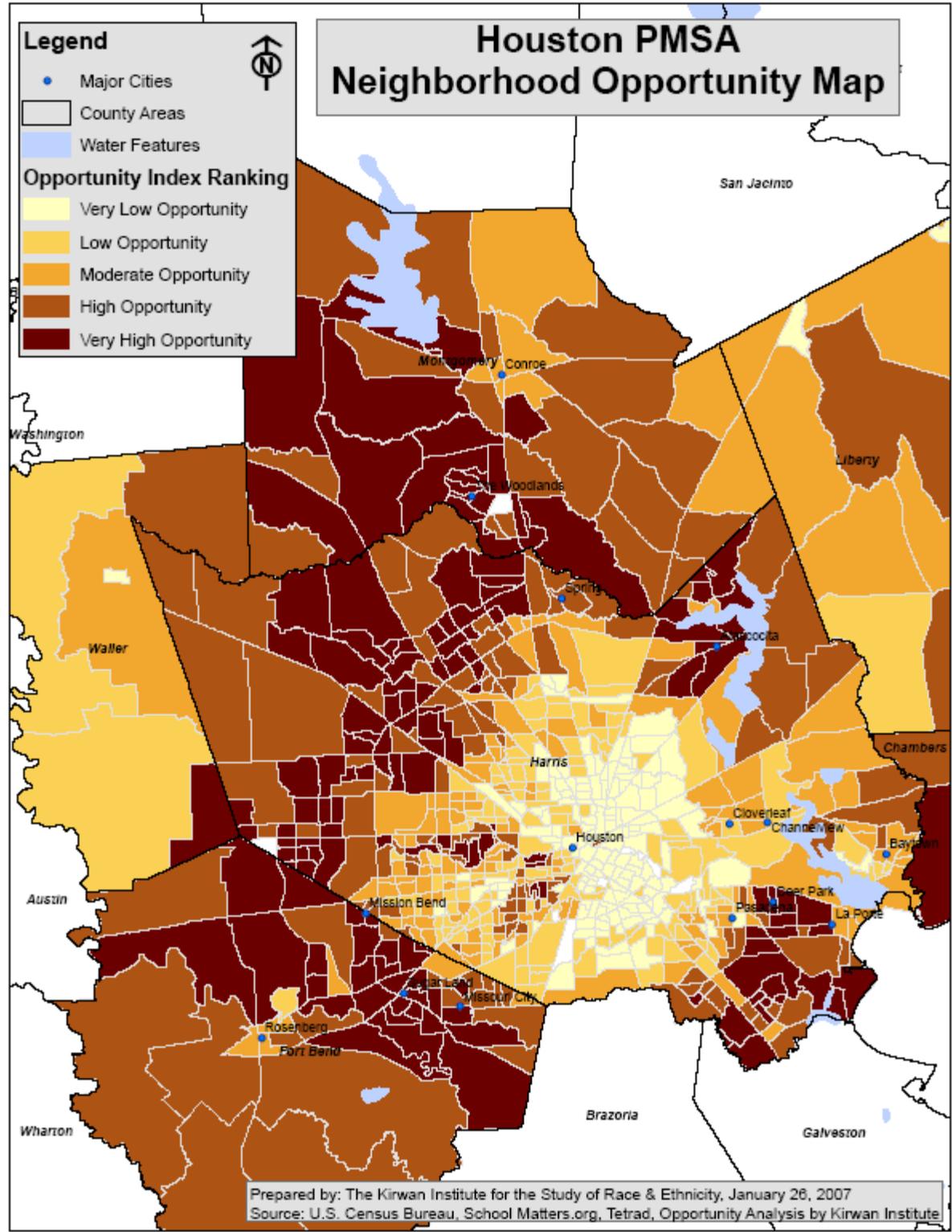


Figure 15: Houston, TX Metropolitan Area with African American Males

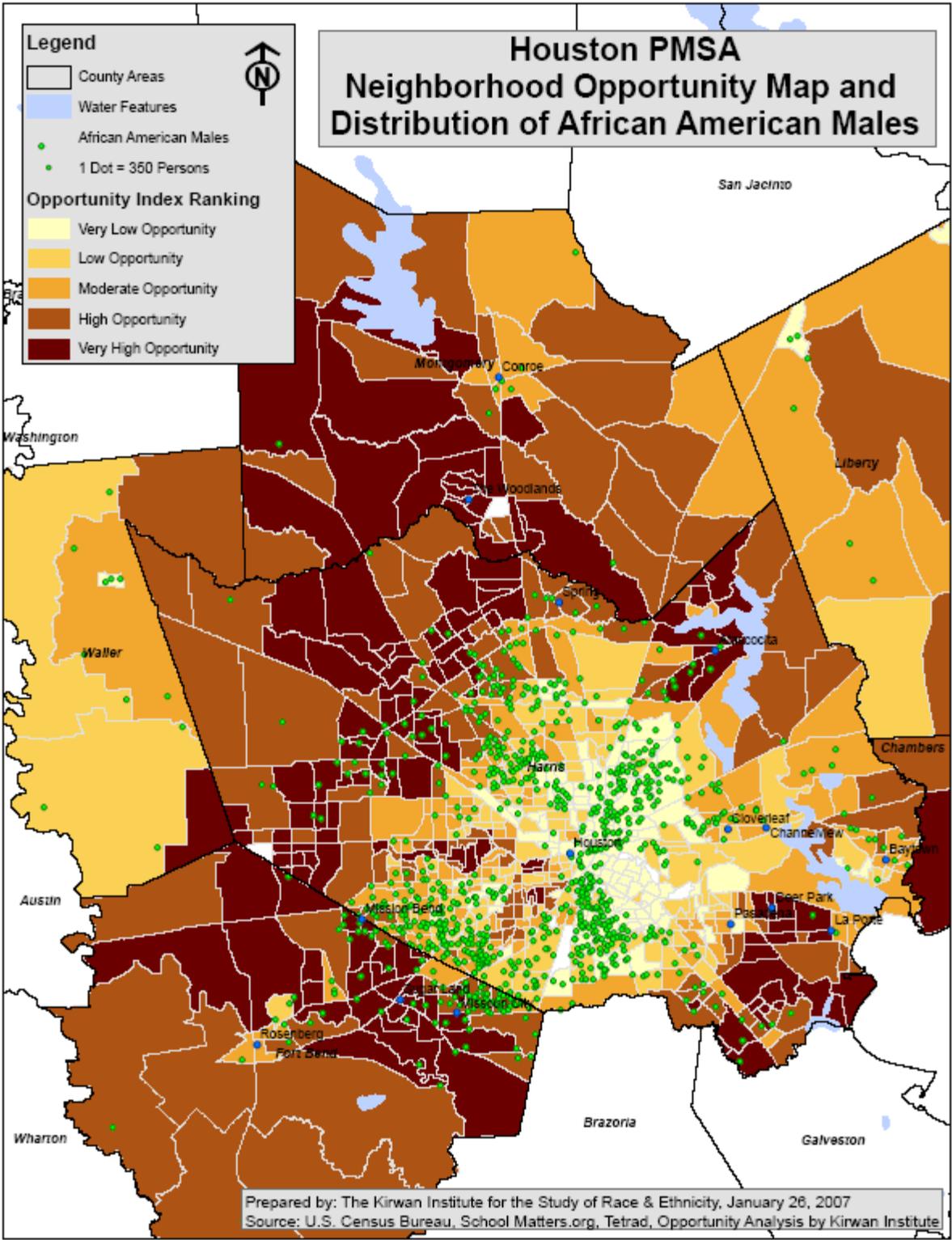


Figure 17: Los Angeles-Long Beach, CA Metropolitan Area with African American Males

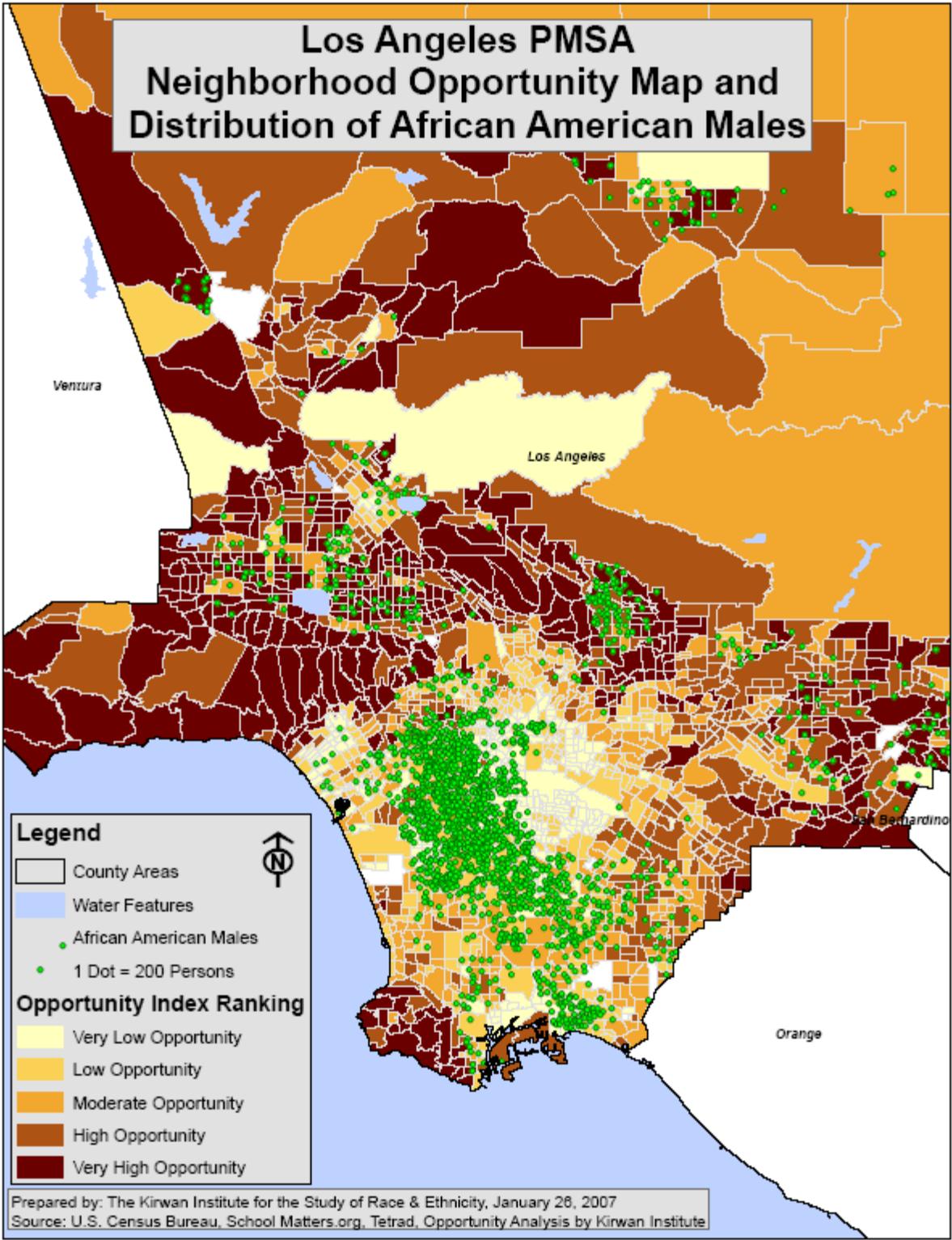


Figure 18: New York, NY Metropolitan Area

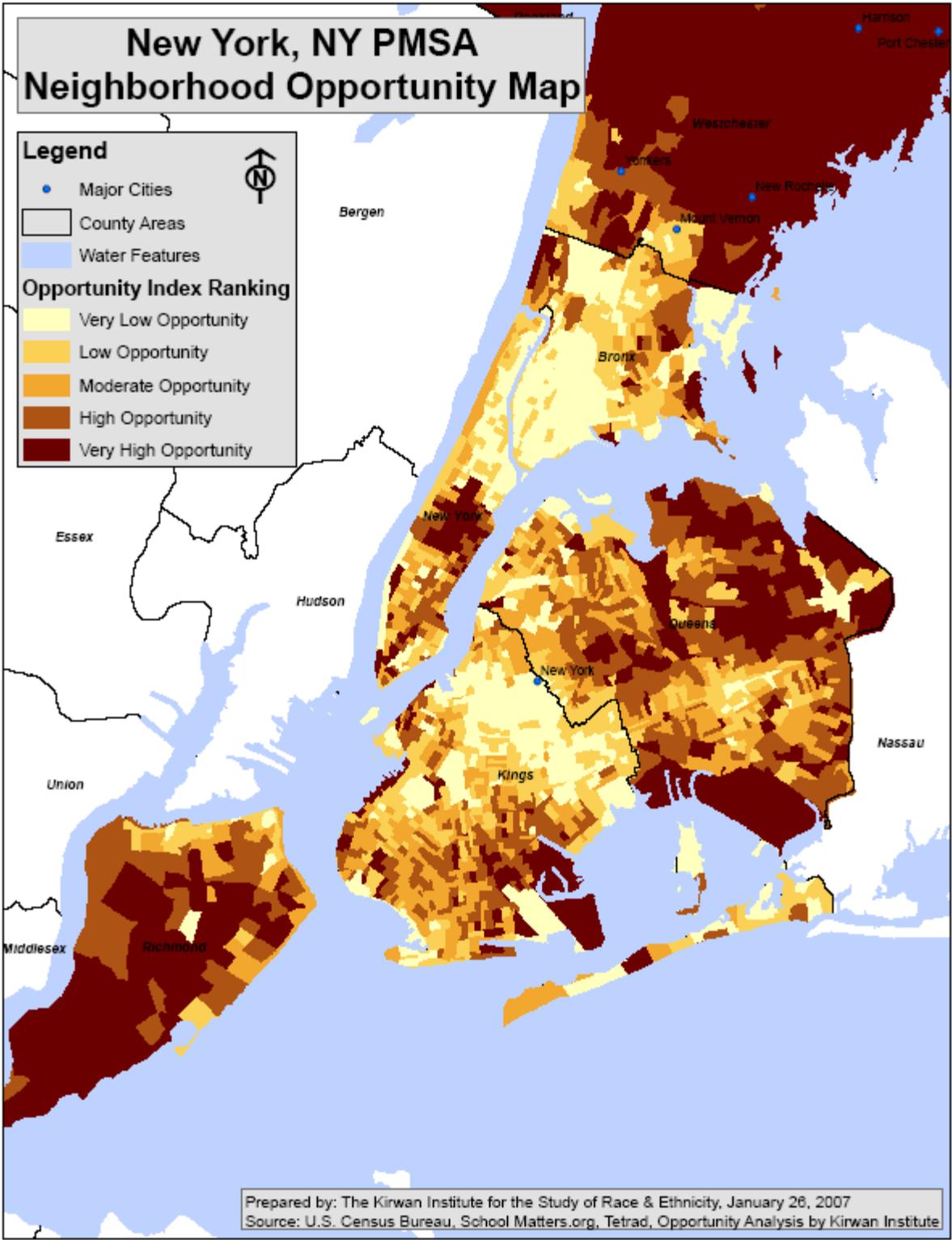


Figure 19: New York, NY Metropolitan Area with African American Males

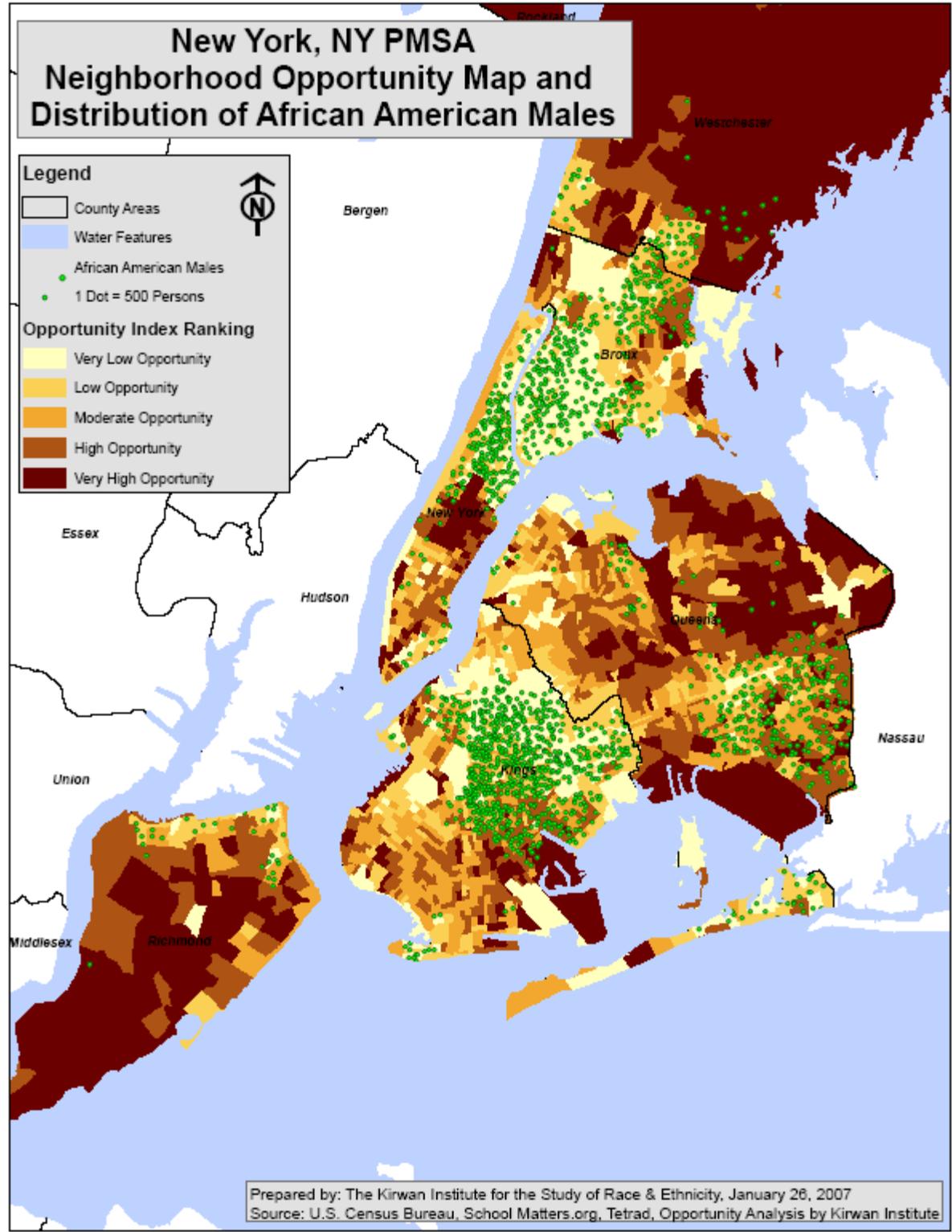


Figure 20: Washington D.C. Metropolitan Area

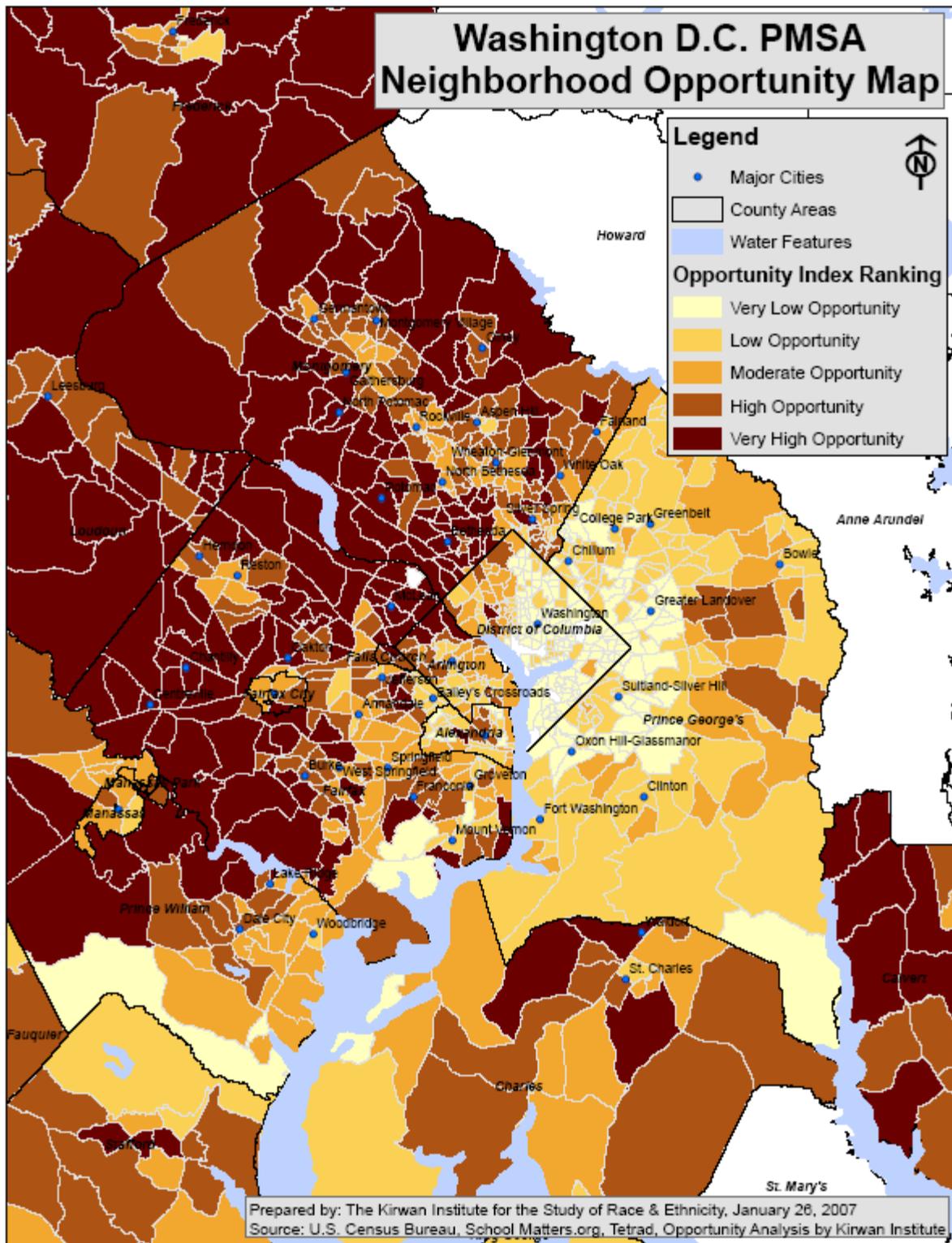
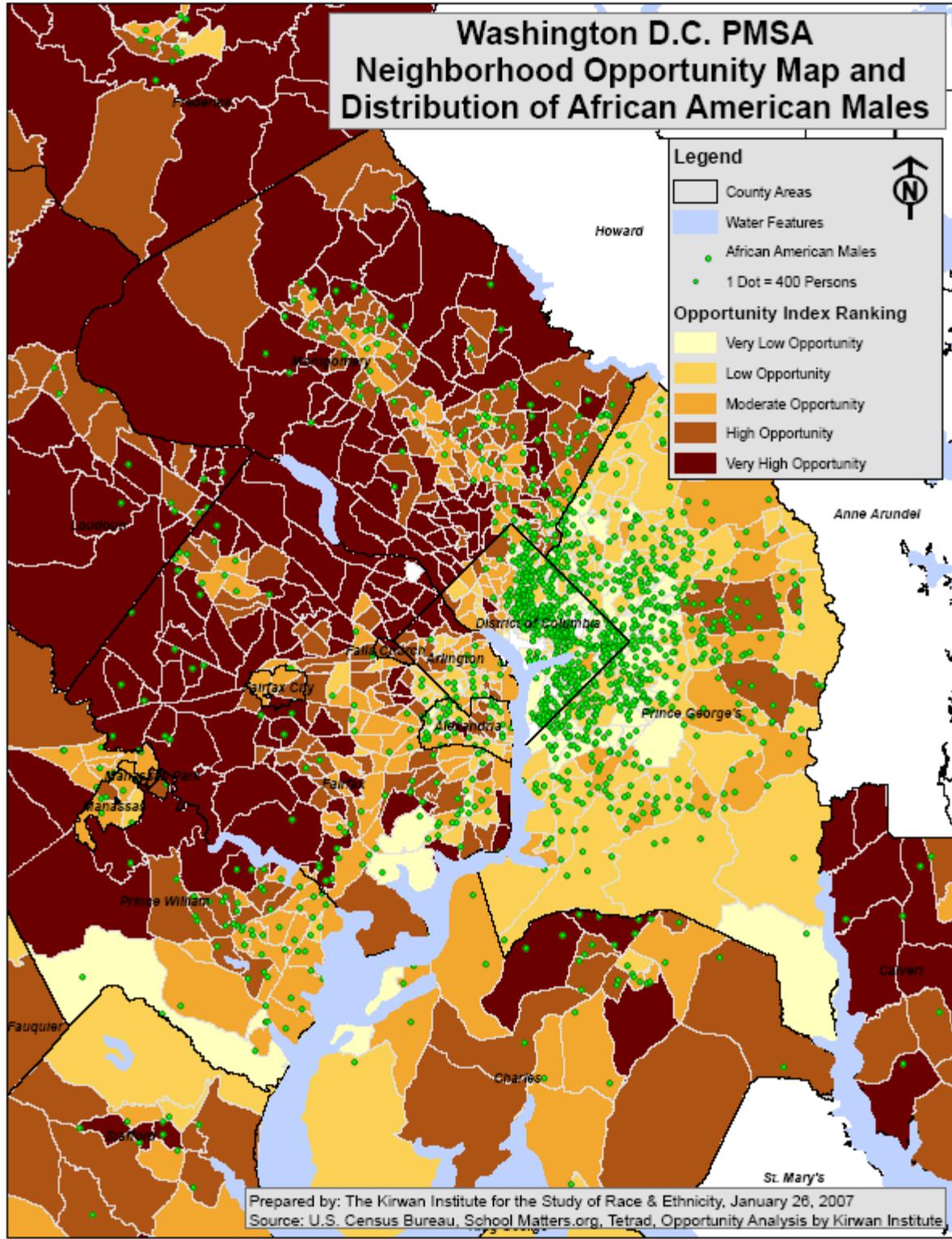


Figure 21: Washington D.C. Metropolitan Area with African American Males





*Conference and
Anthology*

D. Conference and Anthology

1. Conference

The Kirwan Institute hosted a conference on African American males entitled “African American Males: Beyond the School to Prison Pipeline and Moving towards Opportunity,” hosted at the Moritz College of Law, The Ohio State University. The conference focused on the different and sometimes subtle ways in which the education and prison systems interact to create poor outcomes for African American males. Conference panelists also identified other systems that can work together to hinder the life chances of African American males, but noted as well specific instances in which these same institutions and systems worked together to successfully disrupt that pipeline. Thus, the conference effectively not only deepened our understanding of the pressing issues black males face, but also highlighted factors that support economic, political, and social opportunity for males. To connect to the conference audiovisual files, please go to: <http://kirwan.gripservers3.com/research/the-african-american-male-initiative/conference-info.php>

The introduction: *Ohio Senator Ray Miller*

The first panel: *African American Males and the Education System*

Panelists explored how policies in the educational and juvenile justice system can sometimes create unfair and detrimental outcomes for black males (for example, the disproportionately high suspension rates of black males and their “hypercriminalization”). Panelists also examined the role of African American male identity development, classroom management techniques, teacher perception and how it influences the schooling of black males. The panelists included: Tyrone Howard, Ph.D., Graduate School for Education and Information Studies, University of California Los Angeles; Carla Monroe, Ph.D., Institute for Behavioral Research and Social Foundation of Education, University of Georgia; Victor Rios, Ph.D., Department of Sociology, University of California Santa Barbara; Miles Anthony Irving, Ph.D., Educational Psychology and Special Education, Georgia State University.

The second panel: *The Impact of Health and Economy on African American Males*

This panel explored how other systems (for example, public health and the economy) can and too often do negatively impact the pipeline and life chances for males and how these same systems may come together to promote their advancement. Panelists also attempted to answer the following questions: How do we link African American males to economic opportunity? How do both mental and public health issues impact social and economic opportunity for black males? Panelists included: William Oliver, Ph.D., Department of Criminal Justice, Indiana University; Jessica Gordon Nembhard, Ph.D., African American Studies Department and the Democracy Collaborative, University of Maryland; Kenneth Steinman, Ph.D., MPH, College of Public Health, The Ohio State University; and James Moore, Ph.D., College of Education, The Ohio State University.

The third panel: *African American Males and Incarceration*

Panelists examined the conditioning effects of structural factors, such as neighborhood conditions and socio-political realities, on the dynamics that lead to the incarceration of so many African Americans males. Discussions that ensued focused on the harmful effects, and the interactions between, policies such as “zero tolerance” and the three strikes law. The members of the panel included: Christopher Robbins, Ph.D., Department of Teacher Education, Eastern Michigan University; Daniel Losen, J.D., The Civil Rights Project, University of California Los Angeles; Adolphus Belk, Ph.D., Department of Political Science and the African American Studies Program, Winthrop University.

The final panel: *The Dynamics of African American Male Opportunity*

Panelists delved into the association between the geographic context of black males and opportunity. Seven maps from cities across the U.S. were used to show the spatial relationship between black males and economic, social, and educational opportunity. Panelists also discussed excellence and high achievement of black males in college and how programs can support academic success. Panelists included: Shaun Harper, Ph.D., Center for the Study of Higher Education, The Pennsylvania State University; Keith Harmon, The Meyerhoff Scholarship Program, University of Maryland, Baltimore County; Keith Bell, Principal, Westerville South High School; Jason Reece, Senior GIS Demographic Department, The Kirwan Institute, The Ohio State University; and Denis Rhoden, GIS Demographic Department, The Kirwan Institute, The Ohio State University.

Closing remarks: *Judge Yvette McGee Brown*

2. Anthology

We have gathered the following papers that emerged from the conference, which we are preparing for publication:

- *Predicting Educational Risks in a Sample of Court-Involved African American Males: The Significant Influence of Family Processes, Delinquent Peer Associations, and Mental Health Issues* by Steven M. Gavazzi and Christiana M. Russell;
- *Schools and Prisons: How Far Have We Come Since Brown V. Board of Education?* by Marc Mauer and Ryan S. King;
- *Student Discipline and the School-to-Prison Pipeline in the U.S. South: Implications for Research, Policy, and Practice* by Carla R. Monroe and Jerome E. Morris;
- *Structural Racism and Street Socialization: Contextualizing the School-to-Prison Pipeline* by William Oliver; and
- *Assaulting Life Chances: The Criminalization of Youth and the Militarization of Schooling* by Christopher G. Robbins.

The image features a decorative header section. On the left, there is a solid orange rectangular block. To its right is a larger green rectangular block. A thin black crosshair is centered on the green block, with the word 'Recommendations' written in a dark red, cursive font across it.

Recommendations

E. Recommendations

Strategies to Support Best Practices and Next Steps for African American Male Advocacy and Scholarship

Efforts to advance racial and ethnic justice, in general, and the welfare of African American males, in particular, have been too fragmented, disjointed and sometimes counter-productive. If we, as change agents, are to negotiate that complexity more effectively, we must pool the considerable talents, but limited resources we bring to bear, on the tasks at hand, and those yet to come. There are a number of best practices drawn from our comprehensive review of the literature on black males, our interviews with advisory board members, and convening with policymakers and advocacy groups that we include below.

We suggest organizing these strategies around the creation of a vibrant national African American Male Network, which would facilitate more purposeful knowledge production, consensus building, and strategic collaboration within the universe of individuals and organizations already engaged in this work. Such a network would also create a welcoming community for those who would contribute to this work and facilitate substantive interactions between researchers, policymakers, and advocacy groups, as well as a broader audience of potential allies, including the general public.

To realize these vital objectives and create such a Network, we see a critical need for at least five components: 1) Models of, and support for, collaboration within the African American Male field of research and advocacy; 2) a research-advocacy database; 2); support for racial justice research and advocacy centers devoted to this work; 4) attention to transformative structural approaches; and 5) more widespread and rigorous program evaluation of African American male initiatives. We close with one final recommendation for the development of more research-based pilot programs aimed at improving the life outcomes of African American males.

1. Models of, and Support for, Stronger Collaborations Within the Field of African American Male Research/Advocacy

It is imperative that we create more formalized and systemic sharing of information, ideas, resources, and activities between organizations doing work in this field. The objectives in doing so would be to reduce duplicative efforts, strengthen areas of expertise within each organization, ensure that all critical issues are covered comprehensively, and, where appropriate, to join forces to more effectively meet the long-term needs of the field. Additional objectives might include:

- a. Developing a shared, long-term vision for what an equitable multiracial society in the United States could and should look like;
- b. Creating an inventory of major issues addressed by participating organizations, and inventory methods for addressing these issues;
- c. Identifying major gaps that continue to exist in advocacy along with emergent opportunities for policy reform;

- d. Recognizing and working toward critical, actionable points of consensus on overarching goals by analyzing ways in which groups could more effectively harness and align their talents, resources, and areas of strength to advance the larger racial justice movement, and produce more equitable policies and practices;
- e. Building a robust and coherent body of information and knowledge to transform the structures that marginalize African American males and mark needs for additional data and research;
- f. Convening at least one and possibly two meetings where representatives from each organization can gather to discuss past, present, and future projects and goals;
- g. Developing new models of joint fundraising that can reduce the resources each organization devotes to this task, and that can minimize competition for the same dollars from the same sources; and,
- h. Developing effective new models for collaboration/partnerships/dissemination with civil rights and other advocacy groups at the regional, community, state, and national levels that are working to influence and inform public policy debates and legislation.

2. Research-Advocacy Database

One promising idea to advance social justice work embraced by leaders at the NAACP, MALDEF, and the National Urban League, among others, is to create and actively manage an interactive, well-indexed, searchable web-based database that would allow policymakers, advocacy organizations, and journalists to:

- a. Connect with other advocates quickly and efficiently, facilitated by the descriptions of their missions, priority issues, and products of advocacy that impact the African American male and by the identification of those organizations with demonstrable short, medium, and/or long-term needs;
- b. Efficiently access an extensive range of relevant empirical data and research, including annotated bibliographies of and critical essays on work applicable to particular fields of inquiry (e.g., black males, prisoner reentry, the school-prison pipeline);
- c. Map the field of researchers working in, or interested in, actively supporting the work of advocates and policy-makers, along with the interests, skills, and expertise that researchers bring to their work;
- d. Share policy-related materials; and
- e. Post a calendar listing events of importance to them.

3. Support for Racial Justice Research/Advocacy Centers

Our nation's colleges and universities contain many talented people working on racial justice issues (e.g., in racial and ethnic studies departments; at Historically Black Colleges and Universities, tribal colleges, and at Hispanic Serving Institutions). Few of them are organized to make the kinds of policy-relevant contributions their skills, expertise, and geography otherwise well position them to make. Well-established centers such as the Kirwan Institute, the Charles Hamilton Houston Institute at Harvard University, and the Chief Justice Earl Warren Institute on Race, Ethnicity and Diversity could draw on our substantial experience, and those of other university-based research and advocacy organizations, to help reduce these and other

transactions costs, and thereby help strengthen and enlarge the network of people and organizations doing consequential African American male and racial justice work.

4. Attention to Transformative Structural Approaches

In order to foster effective responses it is essential to:

- a. Sharpen and share our insights about the structures, practices and conditions that encourage disproportionately poor outcomes for African American men;
- b. Conduct future research and mapping that examine factors that contribute to African American male success across the opportunity spectrum, rather than focusing merely on males in the “very low opportunity” areas, because of the explicit links of their outcomes to the whole region.
- c. Consider strategies that create communities of opportunity; and
- d. Make the structures that maintain or promote racial and ethnic hierarchy visible and intelligible to the broader public, and thereby create a public more supportive of racially progressive policy and practice.

5. Program Evaluation of African American Male Initiatives

Despite the development of new initiatives to improve the quality of life outcomes for males, very few of these initiatives have received any sort of program evaluation. We propose that all such initiatives be evaluated on their effectiveness for improving outcomes for males. Attention should be given to whether initiatives address the structural context – the cumulative effect of the interaction of systems and institutions – that African American males experience.

Conclusion

While much research is being conducted around African American males, the field is still emerging, particularly in the context of the psycho-social development of black males. We have to keep in mind the growing diversity within the group we think of as “African-Americans” as we develop research questions and recommendations. Are we talking about men and boys in northern urban centers or about those living in the rural south? Are we looking at those in the slowly shrinking middle-class, at members of the so-called “underclass,” or at the sons of corporate executives and university professors? What are the immigrant experiences of African-American males, particularly those recently arriving from Western and Eastern Africa? From a systemic and developmental perspective, no one influence on black males eclipses the potential influence of others. In the area of family development, for example, we need to explore the various familial experiences black males have throughout childhood and adolescence, in addition to the roles they may assume as biological fathers. There are also important areas of research that have not yet yielded dependable findings, and a number of questions remain unanswered (the implications for black boys of “acting white” in the education context). If we are not careful in the formulation of our research questions, we will produce poor answers and poorly formulated policies.

With this in mind, we make one final recommendation:

We call on foundations to lift up this complex but approachable work around African American males within the next year or two by supporting the development of pilot programs that are well-grounded in the research literature and have been carefully evaluated over time.

We must continue our efforts to effect substantial structural change and improvement in the lives of African American males. The African American community, and indeed all communities, will benefit from this increasing vitality.

The image features a decorative header section. On the left, there is a solid orange rectangular block. To its right is a larger green rectangular block. A thin black crosshair is centered over the green block, with the word "References" written in a dark red, cursive font across it.

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Appendix

*Final Narrative
Report*

APPENDIX:

Final Narrative Report to the W.K. Kellogg Foundation

This section responds directly to questions posed by the W.K. Kellogg Foundation to enable Foundation staff to evaluate the effectiveness of the grant to The Kirwan Institute. It draws upon the Executive Summary and other findings within the report itself.

A. Project Summary

For nearly two years, the W. K. Kellogg foundation has funded the Kirwan Institute to expand the knowledge base and academic scholarship on African American males. The major goals we have met in this work include: A) updating the social science literature on African American males; B) assembling and learning from a national advisory board of scholars on African American males; C) completing a mapping project on the isolation of African American males from opportunities, a goal not explicitly recorded in our grant proposal; and D) convening a national conference on African American males that will culminate in a published anthology of emergent research and literature on African American males. We hoped through this work to identify gaps in the research literature, as the last such review took place more than a decade ago. We also looked to identify areas of research that needed greater energy, focus on literature and scholarship that was concerned with the successful outcomes of black males, and identify promising responses to the largely structurally induced crises that males face.

A major component of this work was to conduct a comprehensive review of the literature on black males in the areas of education, mental health, employment, juvenile justice, incarceration, etc. The last such review took place more than a decade ago (Gordon, Gordon, and Nembhard, 1994). Scholars in the original review determined that research on black males was situated in four main areas: 1) education; 2) psychological issues; 3) politics and economics; and 4) demographical and statistical data.

Although these issues remain salient more than ten years later, several emergent themes have broadened the research field. The first theme considers the influence of music on the racial identity and academic achievement of black males. Recent research has found that black male college students who listen to rap music that contains socially conscious lyrics had healthier male self concepts and racial identities than black males who listened to rap music that contained violent lyrics (Jamison, 2006). Another emergent theme was investigations into the identity construction of black males as both racial and gendered selves. These studies focused on the negative perceptions of black males by school personnel and other students. The negative perceptions of others were often internalized by black males, which led to problematic behavioral outcomes. Homelessness is another new category in the literature. Research on homeless black males is a relatively new area. However, the literature on homelessness illuminates the strong association between homelessness, job loss, and mental and public health factors.

There is also a growing body of research labeled “community/environment/geography” which links developmental outcomes for black males to neighborhood and community factors. Crowder, Tolnay, and Aldeman (2001), for example, have demonstrated that black males from

low opportunity areas in northern cities who migrated south increased their economic and job opportunities and had better social networks in their new communities of residence. Lastly, the previous review revealed that research on single-female-headed households showed that black males who resided in mother-only households have poor social and academic outcomes. New research in the current review shows that this finding still holds true in current research studies, but there is a growing body of research that examines the broader constellation of family structures. Constellation studies account for the fact that single-female-headed households may include extended family members and non-resident fathers. Therefore, research may begin to compare outcomes for males in mother-only households and mothers raising males with non-resident fathers, which acknowledges the diverse family structures of households with black male children (Zimmerman, Salem, & Maton, 1999).

Research on the family structures that black males reside in has also begun to examine the role of “other fathers” or “social fathers” which are male relatives or family associates who act as a role model by sharing their values and displaying father-like or appropriate behaviors on black male development. The long-neglected influences of divorced fathers and single-parent-father households have also garnered critical attention in the literature.

Our analytic review of the literature has revealed that much of the research and scholarship on black males has been rooted in a “cultural” or “deficit” model. In other words, the lens used to explain black male disparities in education and employment outcomes or their overrepresentation in the juvenile justice system was largely rooted in a framework that construed black males as the source of their own problems, giving little consideration to contextual or structural factors. In light of the overuse of the deficit framework, less research is available that explains how structural factors impact outcomes in the areas of education, employment, and mental/public health for males. Because of this framework, we are under-informed about how some black males manage to avoid the pitfalls and hardships that beset other black males, despite structural constraints (Noguera, 2003). Furthermore, much of the research also concentrates on “young black males,” ignoring inquires regarding older males or the early adolescent growth period for males. This gap in the literature is especially critical in the preadolescent years for male development because the dearth of such research limits the development of interventions that may promote key substantive and transformative changes for this population. In addition, without studies on older males, the research loses the critical voices and experiences of mature males.

Another critical part of the project was to assemble a national advisory board to assist the project team with guiding the social science literature review and to identify new directions for research, initiatives, and policies that would improve male outcomes. The board includes representation by individuals from various social science disciplines who examined research on African American males. While reviewing the literature on Black males, there were several common themes that became apparent in the social science literature.

Based on the findings of the literature review and the conversations with the advisory board members, the project team hosted a conference that examined the school to prison pipeline using a multidisciplinary approach, entitled “African American Males: Beyond the School to Prison Pipeline and Moving Toward Opportunity.” The conference focused on the different and

sometimes subtle ways in which the educational and prison system interact to create disparate situations for African American males. Also, the conference identified other systems that may work together to hinder the life chances of African American males, and more importantly, show how these same systems may come together to interrupt the pipeline for males. This was a highly successful conference that was attended by nearly four-hundred people. Panels from the conference included: 1) African American Males and the Educational System; 2) The Impact of Health and the Economy on African American Males; 3) African American Males and Incarceration; and 4) The Dynamics of African American Male Opportunity.

Papers from the conference are being assembled to constitute a book for future publishing. The following is a list of proposed papers to be published in this book: 1) *Predicting Educational Risks in a Sample of Court-Involved African American Males: The Significant Influence of Family Processes, Delinquent Peer Associations, and Mental Health Issues* by Steven M. Gavazzi and Christiana M. Russell; (2) *Schools and Prisons: How Far Have We Come Since Brown V. Board of Education?* by Marc Mauer and Ryan S. King; (3) *Student Discipline and the School-to-Prison Pipeline in the U.S. South: Implications for Research, Policy, and Practice* by Carla R. Monroe and Jerome E. Morris; (4) *Structural Racism and Street Socialization: Contextualizing the School-to-Prison Pipeline* by William Oliver; and (5) *Assaulting Life Chances: The Criminalization of Youth and the Militarization of Schooling* by Christopher G. Robbins.

B. Progress towards Goals

1. What policy targets should be developed at the local level and state level to promote “success” models for African American males at pre-school, elementary, secondary and post secondary?

The following are our policy recommendations:

Pre-school

- ❖ Efforts should be made to increase the involvement of fathers in the pre-school activities of their children, at the local level. School activities for fathers should be both formal and informal opportunities and should be structured to develop relationships between black males and school personnel.
- ❖ Parents should be engaged in pre-school level activities that offer opportunities to increase their academic skills so they are better prepared to help their children. Studies have shown that low-income black parents tutored in mathematics have improved the academic outcomes of their children.
- ❖ The components of highly successful programs should be examined and replicated. For example, the Perry School Program and the Abecedarian project included early-education, evaluation design, family support, home visits, group meetings with parents and activities focused on social, emotional, cognitive and language areas for children.

- ❖ Develop alternative ways to select students for placement in AP courses to increase the number of black males.
- ❖ Develop greater institutional support for black males in PWIs.

Elementary School Policies

- ❖ Mandatory cultural competency courses and in-service training for teachers should be put in place that would include information on the learning styles and cultural background of many African American male students. Training should also include assisting teachers in recognizing and understanding their own biases and prejudices against African American males (and other historically marginalized groups).
- ❖ Strategic plans should be made to recruit and retain more black male teachers. Currently, black males represent 1% of the teaching force (Lewis, 2006). Some suggestions offered to help with recruiting and retaining male teachers include assigning male teachers a mentor, targeting black male high school students for recruitment into the teaching profession, increasing collaboration with 2-year institutions since most males attend community colleges, and using teacher preparatory programs to increase black male PRAXIS scores.
- ❖ Culturally specific programming that pays attention to cultural specificity and learning styles.
- ❖ After-school funding should be provided for academic competency and social activities for black males in the non-school hours. Research has shown that in the non-school hours black males spend more time watching television than their white peers.

Middle School Policies

- ❖ A “safety valve” process should be installed in schools with predominately African American male students to track the number of males being recommended for suspensions. When the suspension rates of black males reach a critical level, school personnel should be alerted and should enact policies to reduce the number of black males being suspended.
- ❖ School social workers should take a more active role in questioning recommendations by teachers and administrators in order to reduce the overrepresentation of black males in special education (Mills, 2003).
- ❖ Comprehensive reevaluation of the use of zero tolerance policies in middle schools should be undertaken.
- ❖ Single sex classes should be established for black males in math and science.

High School Policies

- ❖ Schools should place equal focus on improving academic competency and high school graduation rates for black male students.
- ❖ A drop-out prevention program that specifically targets African American male students should be established.
- ❖ School counselors should make sure that students and their families are aware of the college admissions process, critical aspects of the financial aid process, and how to prepare for successful college outcomes. In addition, viable alternatives should be presented to males who are not college bound.
- ❖ Black male students should be strongly encouraged to enroll in gifted and AP classes, with efforts made to ensure the presence of a critical mass of black male students in those classes.
- ❖ School personnel should maintain detailed records on how many black male students are enrolled in gifted and AP classes and how many persist in those classes.

College

- ❖ College programs and interventions that support males beyond their first year of college should be established. Studies have shown that males disidentify with college as they move through their college years, which may contribute to high attrition rates.
- ❖ Measures must be taken to ensure that black males are both academically and socially integrated into college.
- ❖ Supportive measures for African American males enrolled in two-year colleges should be developed and implemented.

2. What are the communication and distribution strategies for your findings?

There are several plans to distribute the findings from the literature review and the interviews into newspaper and journal articles. These findings will also continue to be presented to the general public, researchers, juvenile justice workers, and community members at conferences. The findings will also be used in practical ways; the project director has already begun to work with juvenile justice workers and magistrates in Ohio to develop a cultural curriculum for juvenile justice staff working with incarcerated youth. This process to develop a curriculum is based on the research findings and interviews with advisory board members. The papers from the African American male conference are being organized for publication as an edited volume. Currently, proceedings from the conference and the interviews of the project's advisory board can be found at the Institute's website located at www.kirwaninstitute.org.

3. What are the recommendations for the next steps?

The following are our recommendations for next steps:

- a. The State of Ohio will be investing in several initiatives to stimulate the economy to create high-wage jobs. One of these initiatives is to produce skilled employees in the STEM fields. Efforts should be advanced to link black males into these new reforms in a meaningful and substantial way.
- b. There are several initiatives for black males in the State of Ohio, with many projects focused on improving educational opportunities for black males. Efforts should emerge that would allow key members from these initiatives to work together to alleviate key disparate educational outcomes for black males, i.e., suspension rates. This would allow Ohio to serve as a national model or test site on how initiatives on black males may interact together.
- c. Efforts should be made to move the dialogue on black males. Many of the discussions on black males are centered on mentoring and role models. Mentoring and role models for black males are essential, but other key policies for black males should also be included in the discussion.

4. Summarize your achievements.

The following are achievements that have not been discussed previously in the body of this report:

- a. The GIS staff at the Kirwan Institute used a GIS mapping strategy to visually represent the environmental factors affecting African American males. Research on opportunity indicators was collected from seven large, culturally historically diverse metropolitan regions: New York, NY; Chicago, IL; Detroit, MI; Houston, TX; Atlanta, GA; Los Angeles, CA; and Washington D.C. The maps and written report have been included with this report.
- b. The African American Male Project Team has presented at several conferences including the Indiana Commission on African American Males, Black History Month at OSU-Marion Campus, United Way's Juvenile Justice Collaborative Meeting and for a meeting with judges and magistrates in the State of Ohio on black males in the juvenile justice system. The research team also interviewed with the Pittsburgh Gazette for their newspaper series on black males.
- c. The Project Director has also been invited to participate on several boards for initiatives concerning black males, including those of the United Way, the Urban League, and the Ohio Board of Regents.

5. Describe activities undertaken and lessons learned during the life of your project.

- a. Literature Review – There are a large number of studies on African American males. To limit the amount of information and not to become cumbersome, studies were limited to journal articles and research methodology sections had to explicitly identify that black males were included in the study. Further, there were several studies in the literature that included sample studies of a handful of males. These studies were included on a case by case basis. Even though there is a large database of studies, many studies are examining the same issue. In several cases, we used representative studies to frame the research on black males.
- b. Book – we have had difficulty securing a publisher, but continue to consider ways to enhance the value of the planned volume for publishers (including inviting additional top figures in the field to contribute to the volume). We would also welcome the opportunity to work with the Foundation to pursue publishing possibilities.
- c. Mapping project – The mapping research brings to light a new area of untapped research potential and ways to study structural issues facing males.
- d. Presentations – The research from the literature review provides a useful and informative discussion for presentations but it also provides very few viable solutions and policies to improve black male outcomes.

6. If some intended activities were not undertaken, please note them and explain why they were not pursued.

Instead of convening a gathering of the national advisory board, we conducted individual interviews with members. This was largely due to the difficulty of scheduling a large number of very busy people. Further, we believed that individual interviews would prove to be more valuable to the project, because it would allow us to interact on a more meaningful level with individual scholars on their research concerning black males.

C. Future Plans

1. Has the project become self-sustaining? What activities are being continued?

The project director will continue attending conferences and symposiums to inform the general public, academics, and community members about the current research on African American males. The project director will also continue to pursue having the African American male book published based on the conference proceedings. Finally, the project director will modify this report for release to the general public.

2. What structure has been established for the continuation of this project?

By identifying future areas for research, this project has laid the foundation upon which strong research directions can be explored and developed. The book and future journal articles provide

a sound foundation to continue the work as well. Furthermore, the project leader's relationships with top scholars and researchers in the field allow for a strong base to continue the project.

3. *What indications are there that this project can (or cannot) be adopted elsewhere?*

Given that the majority of this project is a comprehensive review of the literature, this project can be easily replicated. The relationships were established through contacting scholars directly. Cooperation from members of the advisory board and other partners shows there is great interest in this topic area, and therefore, future scholarship and research is a viable path to pursue.

D. Project Director's Opinion

1. *What do you think are the most important outcomes and "lessons learned" from this project? What recommendations would you make to other project directors working in this area or to the Foundation?*

Relevant outcomes and lessons learned from this project consist of recognizing the importance of examining structural and cultural outcomes to depict the problems black males face as well as to prescribe solutions for those males placed at-risk for educational failure, lower economic opportunities, and mental and public health concerns. Far too often, research solutions and policies to help males are focused only on solutions that are rooted in black male culture. These solutions only blame males and do not account for structural constraints.

The lack of interdisciplinary approaches to examine issues faced by males is also a critical problem. It is clear that crises in one system for black males may create multiple problems for them in others. Thus, for example, homeless black males are not only at-risk for unemployment, but are also at-risk for mental and public health issues, including depression and HIV/AIDS.

There are also too few studies that point to deep structural solutions to the difficulties so many black males face. For example, the substitution of "caring environments and teachers" for destructive ones, as articulated in the school literature, is an unobjectionable goal, but hardly one that implements itself. Why do we not link more studies and policy solutions for black males to NCLB policy?

Another important outcome was the recognition of the need to move the public dialogue on African American males. A lot of the discussion of black males points to the need for more mentors and improvements in high school graduation rates, while focusing solely on negative male outcomes. These are all critical issues. However, public discussions on black males must become more inclusive. We need better analyses of how and why African American males succeed in different arenas as well as how and why they do not.

Future project directors should make concerted efforts to connect with other individuals involved in the scholarship on black males, preferably in the early stages of the project. There is a lot of work being done with African American males and it is essential to know the key players in the field and the scholarship on males. It is also important to make the research meaningful to

community members and practitioners, as many may not see how research is connected to policy and to their everyday work with males. If we are to ensure that the studies conducted over the next generation do not reiterate the kinds of grim statistics recorded within the last generation of research on African American males, we must redouble our efforts to push and pull our collective work in the same transformative direction.

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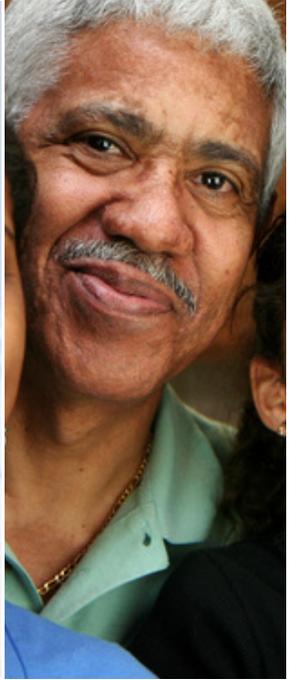
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UNEQUAL HEALTH: The Black/White Gap in Franklin County



December 2010

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With support from...



From the Health Commissioner

December 31, 2010

Health begins where we live, learn, work and play. But do we all have the same opportunities for good health?

Dear Public Health Partner:

The following report “Unequal Health: The Black/White Gap in Franklin County” provides a snapshot of some of the health differences that exist between non-Hispanic blacks and non-Hispanic whites in our community. As you will see from the data, blacks fare worse than whites for many health indicators.

Reducing and eliminating the health disparities described in this report won’t be easy. Health is more than health care. Recent research has shown that not only do education, income, and living conditions affect health outcomes, but racism and discrimination impact health as well.

As you read this report, I ask you to move beyond your comfort zone and traditional role to find new opportunities to address the root causes of health disparities in our community and join our collective efforts. It will take all of us working together over the long term to give all residents the chance to live the healthy and safe lives they deserve.

Yours in good health,



Teresa C. Long, MD, MPH
Health Commissioner
Columbus Public Health



Health disparities are differences or inequalities in the burden of disease and/or health conditions, mortality, health status and access to care. In the United States, inequalities exist based on gender, age, race and/or ethnicity, sexual orientation, geography, and socio-economic position. One of the four overarching goals presented in Healthy People 2020, the nation’s health agenda, is to achieve health equity, eliminate disparities, and improve the health of all groups



It is not in the scope of this report to address all of the health differences that exist in Franklin County. This report will focus on racial disparities, in particular the difference between non-Hispanic blacks and non-Hispanic whites. Throughout the report, non-Hispanic blacks will be referred to as black and non-Hispanic whites will be referred to as white. Health disparities cannot be measured for Hispanics/Latinos as the numbers are too small to make accurate comparisons; however, available data for Hispanics/Latinos are presented in a separate health brief.

This descriptive report will present the current state of health in Franklin County for the total population, for blacks, and for whites. A variety of data sources are used, including case reports for communicable disease and vital statistics for births and deaths. Data from the *2005/2006 Franklin County Community Health Risk Assessment* are used for health status and quality of life, chronic conditions, risk factors and health behaviors, access to care and the use of preventive services.

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HOW TO MEASURE HEALTH DISPARITY

There are several ways to measure health disparity. **Disparity ratios** and **disproportionality** will be used in this report to compare the two largest racial groups living in Franklin County, blacks and whites. Research has shown that whites typically have better health outcomes, so they will be the reference group in this report.

The disparity ratio is calculated by dividing the rate/percent for the group of interest, in this report blacks, by the rate/percent for the reference group, in this case whites. For example, the age-adjusted death rate (ADR) for diabetes for blacks is 56.1 deaths per 100,000 population and for whites the ADR is 21.5 deaths per 100,000. The disparity ratio is $56.1/21.5 = 2.6$. This means that blacks are 2.6 times more likely to die of diabetes as whites. Another way to phrase it is that blacks have a 260% increased risk of dying from diabetes compared to whites. A table showing data for blacks and whites and the disparity ratios will be presented for each section. The following legend will be used to interpret the disparity ratio:

- If the ratio is greater than one, then the prevalence or rate for blacks (numerator) is larger than it is for whites (denominator).
- If the ratio is less than one, then the prevalence or rate for blacks (numerator) is lower than it is for whites (denominator).

Disproportionality compares the actual distribution of disease to the distribution one would expect to see if it was “fair.” In a “fair” distribution, the rate/percent would equal the group’s proportion in the population. For example, for 2006-2008 blacks made up 20% of the population in Franklin County. If there was an equal distribution, blacks would make up approximately 20% of the deaths for each cause. This method of looking at health disparities/inequities is only used in this report with vital statistics data and communicable disease data.

Disparity Ratio (Black/White)*	Health Disparity Assessment
0.9 – 1.1	Little or no disparity
1.2 – 1.9 or 0.8-0.6	Disparity exists
2.0 or higher or 0.5 or lower	Large disparity exists

*See “Health Disparity Ratio” in the definitions for detailed description.

MORTALITY

This section of the report presents information on deaths that occurred to residents of Franklin County during the years 2006-2008. These years were combined to allow for comparisons between racial/ethnic groups for selected causes of death. There were 24,801 deaths between 2006-2008 and an annual average of 8,267 deaths. For most causes of death, black mortality rates are higher than white mortality rates. However, white mortality rates are higher than black mortality rates for chronic lower respiratory disease, Parkinson's disease and suicide.

Table 1

Cause of Death	Franklin County ADR ¹	Non-Hispanic Black ADR ¹	Non-Hispanic White ADR ¹	Disparity Ratio	Health Disparity Assessment
ALL	871.4	1076.3	847.6	1.3	Disparity Exists
Accidents	40.5	43.5	40.7	1.1	Little or No Disparity
Alzheimer's Disease	25.9	24.1	26.7	0.9	Little or No Disparity*
Cancer (all)	196.6	237.2	194.1	1.2	Disparity Exists
Chronic Liver Disease and Cirrhosis	10.1	12.0	10.1	1.2	Disparity Exists
Chronic Lower Respiratory Disease (CLRD)	54.5	42.4	58.0	0.7	Disparity Exists*
Conditions Originating in the Perinatal Period	6.6	13.7	4.4	3.1	Large Disparity Exists
Diabetes	26.4	56.1	21.5	2.6	Large Disparity Exists
Heart Disease	200.1	238.4	197.3	1.2	Disparity Exists
HIV disease	4.2	10.9	2.8	3.9	Large Disparity Exists
Homicide	8.7	27.5	3.6	7.6	Large Disparity Exists
Hypertension	10.1	22.0	8.1	2.7	Large Disparity Exists
Influenza and Pneumonia	19.0	22.8	18.7	1.2	Disparity Exists
Kidney Disease	17.0	30.6	14.7	2.1	Large Disparity Exists
Parkinson's Disease	9.0	3.5	10.0	0.4	Large Disparity Exists*
Septicemia	11.3	21.3	9.6	2.2	Large Disparity Exists
Stroke	47.3	66.7	43.7	1.5	Disparity Exists
Suicide	12.4	7.3	14.2	0.5	Large Disparity Exists*

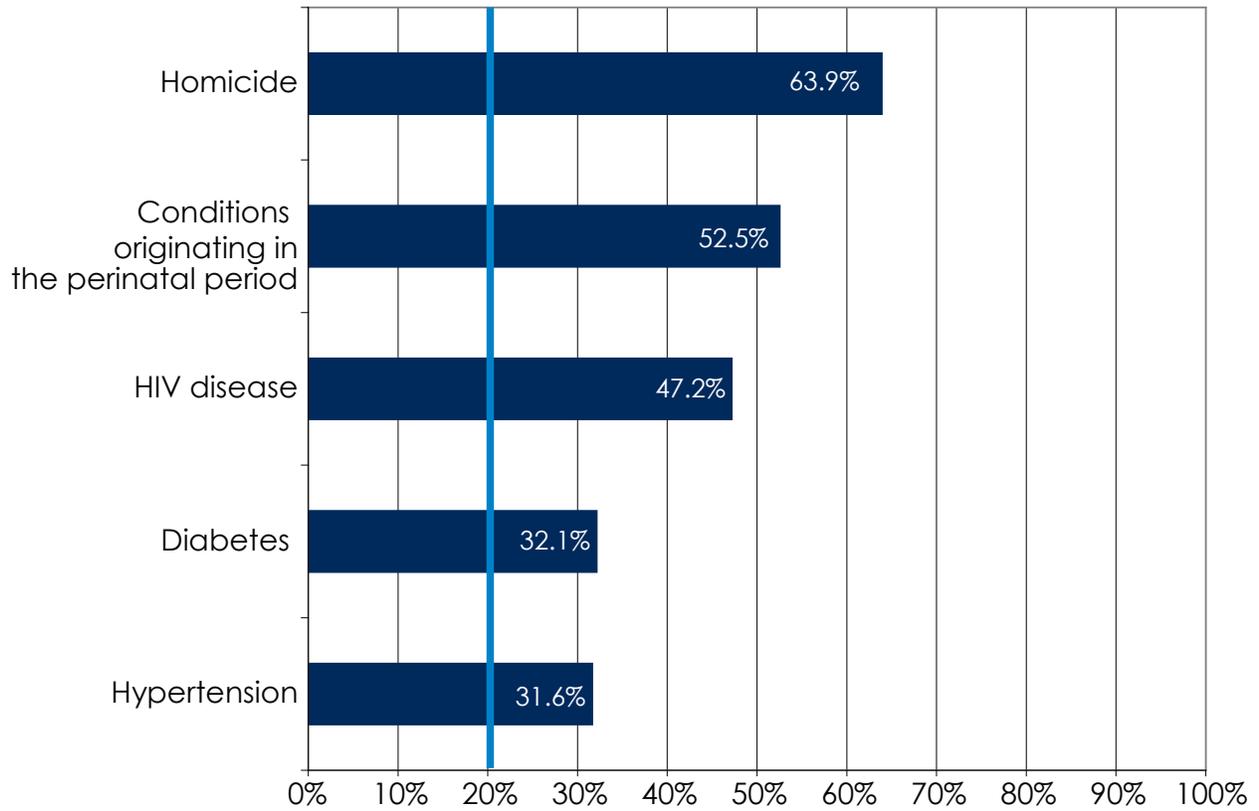
Source: Ohio Vital Statistics Reporting System, Analyzed by Columbus Public Health

Notes:

* White mortality rates are higher than black mortality rates.

1. Age-Adjusted Death Rate: the number of deaths per 100,000 population

Figure 1
Disproportionality by Cause of Death
Blacks are 20% of the population in Franklin County, yet they represent...



Source: Ohio Vital Statistics Reporting System, Analyzed by Columbus Public Health

Blacks are 20% of the Franklin County population. If there was an equal and fair distribution of disease, blacks would represent 20% of the deaths for each cause.

MATERNAL AND CHILD HEALTH

There were 54,861 births among residents of Franklin County from 2006-2008 with an annual average of 18,287 births. There were 476 deaths to infants under the age of one, making the infant mortality rate (IMR) 8.7 deaths per 1,000 live births. **If the infant mortality rate for black infants was the same as for white infants, there would have been 158 fewer deaths to black infants for 2006-2008.**

Preterm birth/low birth weight is the leading cause of death for infants in Franklin County. Infants who are born preterm or at a low birth weight not only have a greater risk of dying, but have an increased risk for complications, infection, neurological, respiratory and gastrointestinal problems, as well as other long term health and developmental problems.

Births to females under the age of 20 are also of concern. Infants born to teen mothers are more likely to be born preterm and/or have a low birth weight. In addition, teen mothers are less likely to finish high school or college and are, therefore, less likely to have adequate economic resources.

Timely prenatal care (starting in the first 3 months of pregnancy) impacts health outcomes for mother and baby. Early care provides risk assessment and intervention for medical and psychological conditions, as well as health education that can decrease the incidence of illness or death in both the mother and baby.

Table 2

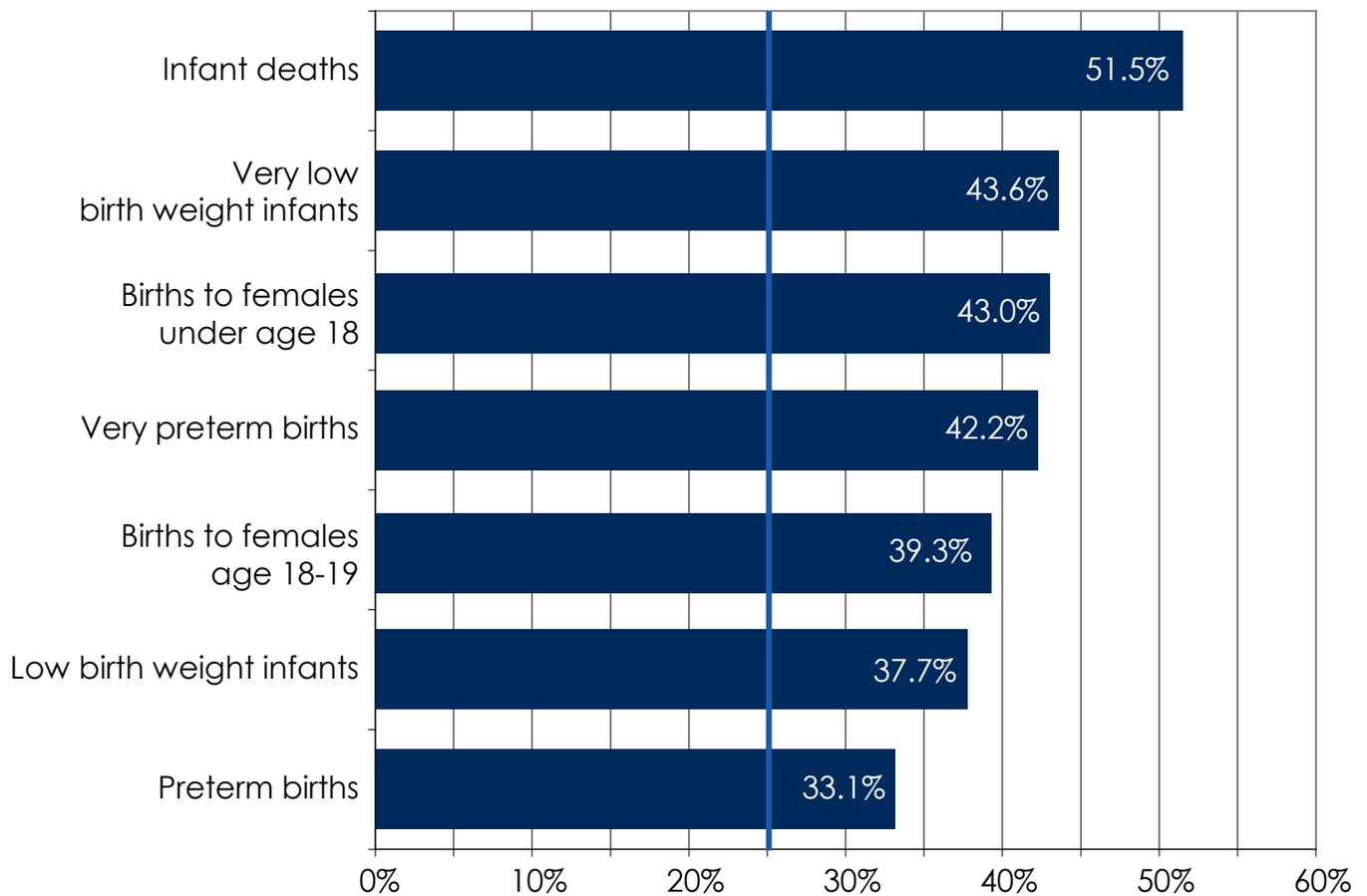
Maternal and Child Health Indicator	Franklin County	Non-Hispanic Black	Non-Hispanic White	Disparity Ratio	Health Disparity Assessment
Infant Mortality Rate ¹	8.7	17.3	6.1	2.8	Large disparity exists
Preterm	13.4%	17.2%	12.0%	1.4	Disparity exists
Very Preterm	2.5%	4.1%	1.9%	2.2	Large disparity exists
Low Birth Weight	9.6%	14.0%	7.9%	1.8	Disparity exists
Very Low Birth Weight	1.9%	3.2%	1.4%	2.3	Large disparity exists
Mother age 17 and younger	3.3%	5.4%	2.2%	2.5	Large disparity exists
Mother age 18-19	6.9%	10.5%	5.5%	1.9	Disparity exists
Late Prenatal Care (Month 4 or later) ²	10.0%	18.0%	7.4%	2.4	Large disparity exists
No Prenatal Care	1.3%	2.2%	0.9%	2.4	Large disparity exists

Source: Ohio Vital Statistics Reporting System, Analyzed by Columbus Public Health

Notes:

1. Infant Mortality Rate (IMR): the number of deaths to infants under 1 year of age (364 days and younger) per 1,000 live births.
2. Prenatal care data are for 2003-2005. For 2006-2008, 38.7% of birth certificates are missing prenatal information calling the validity into question. See Prenatal Care (Details) for complete information.

Figure 2
Disproportionality by Maternal and Infant Health Indicators
26% of births for 2006-2008 are to black mothers, yet they represent...



Source: Ohio Vital Statistics Reporting System, Analyzed by Columbus Public Health

Blacks carry a disproportionate burden of poor birth outcomes. For 2006-2008, 26% of births were to black mothers. If birth outcomes were “fairly” distributed, then blacks would make up 26% of each indicator.

COMMUNICABLE DISEASE

Human Immunodeficiency Virus (HIV) and Sexually Transmitted Diseases

HIV is the virus that causes Acquired Immune Deficiency Syndrome (AIDS). The virus is transmitted from an infected person via bodily fluids, such as blood, breast milk or sexual fluids. Currently there is no cure, although with early detection and treatment, people with HIV are living longer.



Syphilis, chlamydia and gonorrhea are three significant reportable diseases transmitted through sexual contact. All three are bacterial infections that can be treated with antibiotics. However, if they are left untreated, they can lead to complications such as infertility, and in the case of syphilis, the disease may subsequently damage the internal organs, bones, and joints and can ultimately lead to death.

Nationally, the prevalence of sexually transmitted diseases is high among the black population, meaning blacks are more likely to have an infected partner. As a result, blacks can acquire infections from both high- and low-risk behaviors. According to the Guttmacher Institute, high prevalence of STDs can be a “symptom of other problems such as a lack of access to health care, poverty, unemployment, and other persistent social and economic discrimination.”⁽¹⁾

Tuberculosis

Tuberculosis (TB) is an airborne bacterial infection that usually attacks the lungs, but can affect any part of the body. If left untreated it can be fatal. Tuberculosis is an important public health concern in Franklin County. The 2006-2008 county incidence rate (6.6 cases per 100,000) is much higher than Ohio’s (2.0) and is higher than any of the other metro counties in Ohio. This is in part due to the relatively high number of immigrants who have come to live here from areas of the world in which TB infection is endemic (more than 50% of all new cases are among the foreign-born population). However, even among the US-born cases, more than half are black.

Table 3

Communicable Disease Indicator	Franklin County ¹	Non-Hispanic Black ¹	Non-Hispanic White ¹	Disparity Ratio	Health Disparity Assessment
Living with HIV/AIDS ²	274.0	506.9	219.5	2.3	Large disparity exists
HIV Incidence ³	18.2	42.3	12.1	3.5	Large disparity exists
Syphilis Incidence ³	8.9	15.2	6.9	2.2	Large disparity exists
Chlamydia Incidence ^{3,4}	564.0	1342.5	143.6	9.3	Large disparity exists
Gonorrhea Incidence ^{3,4}	315.1	960.7	67.3	14.3	Large disparity exists
Tuberculosis Incidence ^{3,5}	6.6	21.0	1.2	16.9	Large disparity exists

Source: Ohio Department of Health (HIV/AIDS Surveillance Program, STD Surveillance and Tuberculosis Registry)

Notes:

1. Cases per 100,000 population
2. “Living with HIV/AIDS” (prevalence) represents all persons ever diagnosed and reported with HIV or AIDS who have not been reported as having died as of Dec. 31, 2007. Data reported through Dec. 31, 2008.
3. New cases diagnosed each year (all data for 2006-2008, except for HIV incidence which is for 2005-2007).
4. Chlamydia and Gonorrhea rates are for all blacks and all whites (regardless of Hispanic ethnicity).
5. Tuberculosis Incidence is among all Franklin County residents (U.S. and foreign born).

1. Guttmacher Institute [internet]. In Brief: Facts on Sexually Transmitted Infections in the United States. June 2009. Available from: http://www.guttmacher.org/pubs/2009/06/09/FIB_STI_US.pdf

2005/2006 FRANKLIN COUNTY COMMUNITY HEALTH RISK ASSESSMENT

The 2005/2006 Franklin County Community Health Risk Assessment is a telephone survey performed in conjunction with the Ohio Department of Health’s Behavioral Risk Factor Surveillance System during 2005 and 2006. The assessment provides information on health status, prevalence of health behaviors and conditions linked to the leading causes of death, as well as access to care and the use of preventive services. These data typically do not change from year to year. The 2005/2006 data represents the most recent data for which there is an adequate sample size to compare whites and blacks in Franklin County. It is important to note that the following data are for adults age 18 and older and do not include adults who are institutionalized or do not have a telephone.

Health Status and Quality of Life

Health status and quality of life information provide an overall measure of well being. Self-reported health status is a powerful predictor of mortality and morbidity.⁽¹⁾ Measures of recent physical symptoms, mental and emotional distress, and disability show the burden of acute and chronic illness and future use of the health care system. For each of these measures blacks fare worse than their white counterparts.

Table 4					
Health Status & Quality of Life Indicators (Age 18+)	Franklin County	Non-Hispanic Black	Non-Hispanic White	Disparity Ratio	Health Disparity Assessment
Self-rated fair or poor health	11.6%	18.0%	10.4%	1.7	Disparity exists
14 or more days of poor physical health (past 30 days)	9.4%	14.1%	8.7%	1.6	Disparity exists
14 or more days of poor mental health (past 30 days)	9.2%	14.1%	7.9%	1.8	Disparity exists
Disability Indicator					
14 or more activity-limited days (past 30 days)	5.0%	6.1	4.9%	1.2	Disparity exists

Source: 2005/2006 Franklin County Community Health Risk Assessment, Columbus Public Health

1. Idler EL, Benyamini Y; Self-rated health and mortality: a review of twenty-seven community studies. *Journal of Health and Social Behavior*; 1997 Mar; 38(1):21-37.

Chronic Health Conditions

Chronic health conditions impair quality of life (as seen above) and can lead to premature death. For 2006-2008, 68% of all deaths in Franklin County were due to chronic diseases. According to the Centers for Disease Control and Prevention, medical care costs of people with chronic diseases account for more than 75% of total medical care costs in the United States.⁽¹⁾ In 2005, almost half of all Americans lived with at least one chronic condition.⁽¹⁾ Significant racial disparities exist not only in chronic disease mortality (as seen in Table 1), but also in disease prevalence.

Table 5					
Chronic Health Conditions (Age 18+)	Franklin County	Non- Hispanic Black	Non- Hispanic White	Disparity Ratio	Health Disparity Assessment
Current Asthma	8.0%	11.1%	7.0%	1.6	Disparity exists
Diabetes	7.3%	11.9%	6.3%	1.9	Disparity exists
High Blood Pressure	25.0%	32.9%	24.2%	1.4	Disparity exists
High Blood Cholesterol	35.2%	25.3%	37.5%	0.7	Disparity exists *
Coronary Heart Disease	3.4%	1.2%	4.1%	0.3	Large disparity exists *
Heart Attack	3.9%	2.3%	3.9%	0.6	Disparity exists *

Source: 2005/2006 Franklin County Community Health Risk Assessment, Columbus Public Health

Notes: *The prevalence is higher among whites than blacks.

1. Centers for Disease Control and Prevention [internet]. Atlanta. Chronic Disease Overview; c2008-2009 [updated 2009 October 7; cited 2008 March 20]. Available from: <http://www.cdc.gov/nccdphp/overview.htm>

Risk Factors and Modifiable Behaviors

There are a small number of risk factors common to many of the leading causes of death in Franklin County. Smoking, overweight and obesity, alcohol misuse, poor diet, and physical inactivity are the most significant. A key strategy to improving health is to modify these risk factors.

According to the CDC, tobacco is the leading cause of preventable illness and death in the United States and obesity is the second leading cause. Alcohol is the most commonly used drug in the United States. Both excessive alcohol consumption on one occasion and the consistent high consumption of alcohol over time increase the risk of acute and chronic health issues and premature death. Proper nutrition and adequate exercise are two important behaviors that decrease the risk of many chronic diseases and help maintain a healthy weight.

The *2005/2006 Franklin County Community Health Risk Assessment* also asks about high risk behaviors. These behaviors are defined as using intravenous (IV) drugs, having a diagnosis of a sexually transmitted disease, having anal sex in the past year, or testing positive for HIV, the virus that causes AIDS.

Risk Factors and Modifiable Behaviors (Age 18+)	Franklin County	Table 6		Disparity Ratio	Health Disparity Assessment
		Non-Hispanic Black	Non-Hispanic White		
Do not Meet Leisure Time Physical Activity Recommendations	50.7%	55.1%	49.1%	1.1	Little or no disparity
Do not Eat 5 or More Servings of Fruits and/or Vegetables	76.2%	75.2%	77.0%	1.0	Little or no disparity
Currently Smoke	21.2%	25.3%	21.4%	1.2	Disparity exists
Obesity (Body Mass Index=30+)	23.3%	35.5%	21.1%	1.7	Disparity exists
Overweight (Body Mass Index=25+)	59.1%	68.7%	57.8%	1.2	Disparity exists
Chronic or Heavy Drinking	5.6%	6.2%	6.0%	1.0	Little or no disparity
Binge Drinking	16.5%	15.6%	17.9%	0.9	Little or no disparity*
One or more high risk activities in the past year (Age 18-64)	3.9%	8.8%	2.5%	3.5	Large disparity exists

Source: 2005/2006 Franklin County Community Health Risk Assessment, Columbus Public Health

Notes: *The prevalence is higher among whites than blacks.

Access to Care and Use of Preventive Services

Access to care and use of preventive services are important to maintaining an individual's health. Those who do not have health insurance often do not have access to care and tend to have poorer health outcomes. The uninsured are disproportionately from lower income and/or black households. Not having health insurance and having to pay for health care out-of-pocket often means that preventive medical care is not sought or is delayed due to cost. Sometimes, this means a minor illness is not properly managed and turns into an acute one, or an illness that could have been prevented is contracted or develops.

Access to Care & Use of Preventive Services (Age 18+)	Franklin County ¹	Table 7 Non-Hispanic Black	Non-Hispanic White	Disparity Ratio	Health Disparity Assessment
Uninsured (Age 18-64)	12.5%	23.4%	7.5%	3.1	Large disparity exists
Unable to see doctor due to cost (past 12 months)	10.9%	18.0%	8.4%	2.1	Large disparity exists
Preventive Medical Services					
Have not had routine check-up (past 12 months)	33.9%	23.4%	34.7%	0.7	Disparity exists*
Never tested for HIV	63.2%	45.0%	67.7%	0.7	Disparity exists*
Vaccination: Never had pneumonia shot (age 65+)	34.8%	51.8%	31.0%	1.7	Disparity exists
Vaccination: Did not get flu shot in the past 12 months (Age 65+)	40.5%	46.7%	39.4%	1.2	Little or no disparity

Source: 2005/2006 Franklin County Community Health Risk Assessment, Columbus Public Health

Notes:

*Whites fare worse than blacks for this indicator.

CONCLUSION

For many of the health indicators presented in this report, blacks fared worse than whites. The largest mortality disparities (disparity ratio=2+) exist for infant mortality, homicide, Human Immunodeficiency Virus (HIV), conditions originating in the perinatal period, diabetes, hypertension, and kidney disease. Rates for blacks were also at least twice as high as the rates for whites for birth before 32 weeks gestation, birth weight of less than 3 pounds 5 ounces, lack of health insurance, being unable to see the doctor in the past year due to cost, and engaging in a high risk behavior in the past year.

Blacks had better mortality rates than whites for chronic lower respiratory disease, Parkinson's disease, and suicide. Blacks also had lower rates of diagnosed coronary heart disease, heart attack, and high cholesterol. However, blacks had higher rates of stroke and heart disease mortality. This discrepancy could be due to differences in access to care or the quality of care received.

This report describes the disparities that currently exist in Franklin County between blacks and whites. There are many factors believed to contribute to these disparities. Biology tells us that humans are 99.9% the same, so how can health disparities exist by race? Studies have shown lower socioeconomic status (education, income, employment status, and living conditions) leads to poor health outcomes. The history of slavery and segregation in America has created a situation where blacks are disproportionately represented in low income neighborhoods with fewer educational and economic opportunities and less access to medical care.^(1,2,3) These neighborhood effects/social determinants of health contribute to the disparities described here. However, other studies have shown that even when controlling for these factors, a disparity persists.

Recent research shows the effect of racism and discrimination on health outcomes. According to the Institute of Medicine report *Unequal Treatment: Confronting Racial and Ethnic Disparities in Healthcare*, "bias, prejudice, and stereotyping on the part of healthcare providers may contribute to differences in care." This bias may be unconscious or conscious on the part of the individual or institution. The report goes on to document how blacks sometimes receive different medical treatment than their white counterparts, leading to worse health outcomes. It is not just that racism can lead to different treatments and subsequently poorer health outcomes,^(4,5) but the actual experience of racism itself has a negative effect on health.⁽⁶⁾ Studies have shown that the stress of regularly encountering racism can lead to adverse health outcomes. Racism is known to impact preterm delivery^(7,8,9,10), blood pressure,^(11,12,13) and mental health outcomes⁽¹⁴⁾ to name a few.

Reducing and ultimately eliminating racial health disparities is a complex undertaking. Much remains to be done, and public health cannot do it alone. All people deserve the same opportunity to be healthy and thrive.

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APPENDICES

WORKING TO CLOSE THE GAP

How do we, as individual organizations and collectively as a community, begin to narrow the gaps described in this report and others that exist in our community? There is no simple answer to this question. Many current efforts focus “downstream” at the health outcome. While we must continue to work “downstream,” this approach is not sufficient to address health disparities. Health is more than healthcare, and the conditions into which we are born, live, learn, work and play have a strong impact on our health and our ability to make healthy decisions.

These social, economic, and environmental conditions are called the social determinants of health. Some factors included under this umbrella are education, employment/working conditions, income, neighborhood, political power, racism/discrimination, and housing. It is important to note that all of these factors are intertwined.

Another concept needed to reduce health disparities is health equity. Healthy People 2020, the nation’s health agenda, states, “Health equity is achieving the highest level of health for all people. Health equity entails focused societal efforts to address avoidable inequalities by equalizing the conditions for health for all groups, especially for those who have experienced socioeconomic disadvantage or historical injustices.” This means working toward a fair and even distribution of the social determinants of health so there is equal opportunity for all people to be healthy. Unfortunately, achieving health equity will not result in equal health for all because individual choice and inherited genes lead to different health outcomes; however, health differences will be minimized. By using a social determinants framework and striving for health equity, we can improve the health of many individuals and have broad impacts on multiple health outcomes at once.

How do we move forward with our efforts to reduce or eliminate the health disparities described in this report? Many communities and health departments around the country are grappling with the same question. No one has the definitive answer, but the following recommendations are widely accepted as a good starting point. These recommendations come primarily from the World Health Organization and from the Prevention Institute.

What Organizations Can Do Internally

There are several ways in which an organization can begin to address the roots causes of health disparities internally.

1. **Assess the impact of all policies and programs on the social determinants of health including racism and discrimination.** Are we helping to close the gap or inadvertently contributing to its growth?
2. **Adopt a social determinants framework across all policy and program functions.**¹ See the World Health Organization’s Social Determinants of Health Framework (See Appendix B).
3. **Build capacity by developing a workforce that is trained in the social determinants of health including racism and discrimination.**¹
4. **Assure the standardized electronic collection and reporting of socioeconomic data including race and ethnicity by all programs.** This allows for monitoring disparities and evaluating programmatic efforts.
5. **Move beyond traditional roles.** Look for opportunities to partner with other organizations and sectors to address the root causes of health disparities (equalizing the social, economic, and environmental conditions in which we live, learn, work and play).

Policies and Actions to Support in the Community

Organizations, groups and individuals can work to affect change in Franklin County by supporting programs and policies that address the social determinants of health and strive for health equity.

The following are examples of what we can do as a community to improve the conditions in which we live, learn, work, and play. Closing the gaps in these areas will help to close the gaps in health reported earlier in this document. These recommendations are a starting point and are not comprehensive. Again, most were developed by the World Health Organization and the Prevention Institute. The details of how we move forward (priorities, tailored initiatives, etc.) requires a community process. Collaborative action has the best chance for bringing about change.

Overarching recommendations:

- Address race, racism, discrimination in institutions and policies, and socioeconomic segregation.²
- Raise awareness of the economic costs to all people in our society from health disparities. (The Joint Center for Political and Economic Studies report, *The Economic Burden of Health Inequalities in the United States*, found that racial inequalities cost the United States health care system over \$50 billion per year.)
- Ensure that routine monitoring systems for health equity and the social determinants of health are in place locally.¹
- Provide training on the social determinants of health to policy actors, stakeholders, and practitioners and invest in raising public awareness.¹ Action cannot be taken until everyone recognizes the impacts these factors have and our obligation to improve them.
- Collaborate with multiple fields, diverse government agencies to ensure health, safety, health equity are considered in every relevant decision, action, and policy.³

Education:

- Invest in early childhood development. Provide high quality, affordable child care and preschools; ensure equitable distribution of and access to preschools; provide subsidies; invest in home-visiting initiatives and in child-care providers.²
- Expand access to higher education, technical and trade schools, and apprenticeships.
- Improve access to quality education and educational outcomes by reforming school funding to equalize access; investing in retaining teachers in disadvantaged schools; providing need-based supports, facilitating positive interventions for at-risk youth²; and identifying and addressing the barriers to girls and boys enrolling and staying in school.¹

Income, Employment and Working Conditions:

- Achieving health equity requires safe, secure, and fairly paid work, year-round work opportunities, and healthy work–life balance for all.¹
- Provide quality work for men and women with a living wage that takes into account the real and current cost of healthy living.¹
- Improve the working conditions for all workers to reduce their exposure to material hazards, work related stress, and health-damaging behaviors.¹

Access to Health Care:

- Institute culturally and linguistically appropriate screening, counseling, health care treatment for high-risk groups and for all, e.g., train providers; ensure effective communication, patient-system concordance for patient adherence, security, safety.²
- Monitor health care models/procedures for reducing inequities in health and data documenting racial and ethnic differences in care outcomes, e.g., standardize, coordinate, and disaggregate data; apply data practices that account for equitable health care.²
- Provide health care resources in the heart of the community, e.g., support community-based and school-based clinics; provide support groups for behavior change; promote community health workers; reform reimbursement; expand business hours.²
- Strengthen the diversity of the health care workforce, e.g., train clinical providers to conduct culturally appropriate outreach and services; offer incentives to work in underserved communities; diversify through community health workers.²
- Enhance quality of care; improve availability and affordability of critical prevention services, e.g., immunizations; growth monitoring; prevention assessment; safety behaviors; medical testing and screening; patient education; oral health care.²
- Language interpretation services should be provided for customers with limited English proficiency (LEP) receiving health services. Display notices informing limited English proficient customers of the availability of language assistance services.³
- Provide registration forms and customer marketing materials written at the 5th to 8th grade reading level according to the SMOG or Fry methods.³

Neighborhood, Housing, and the Built Environment:

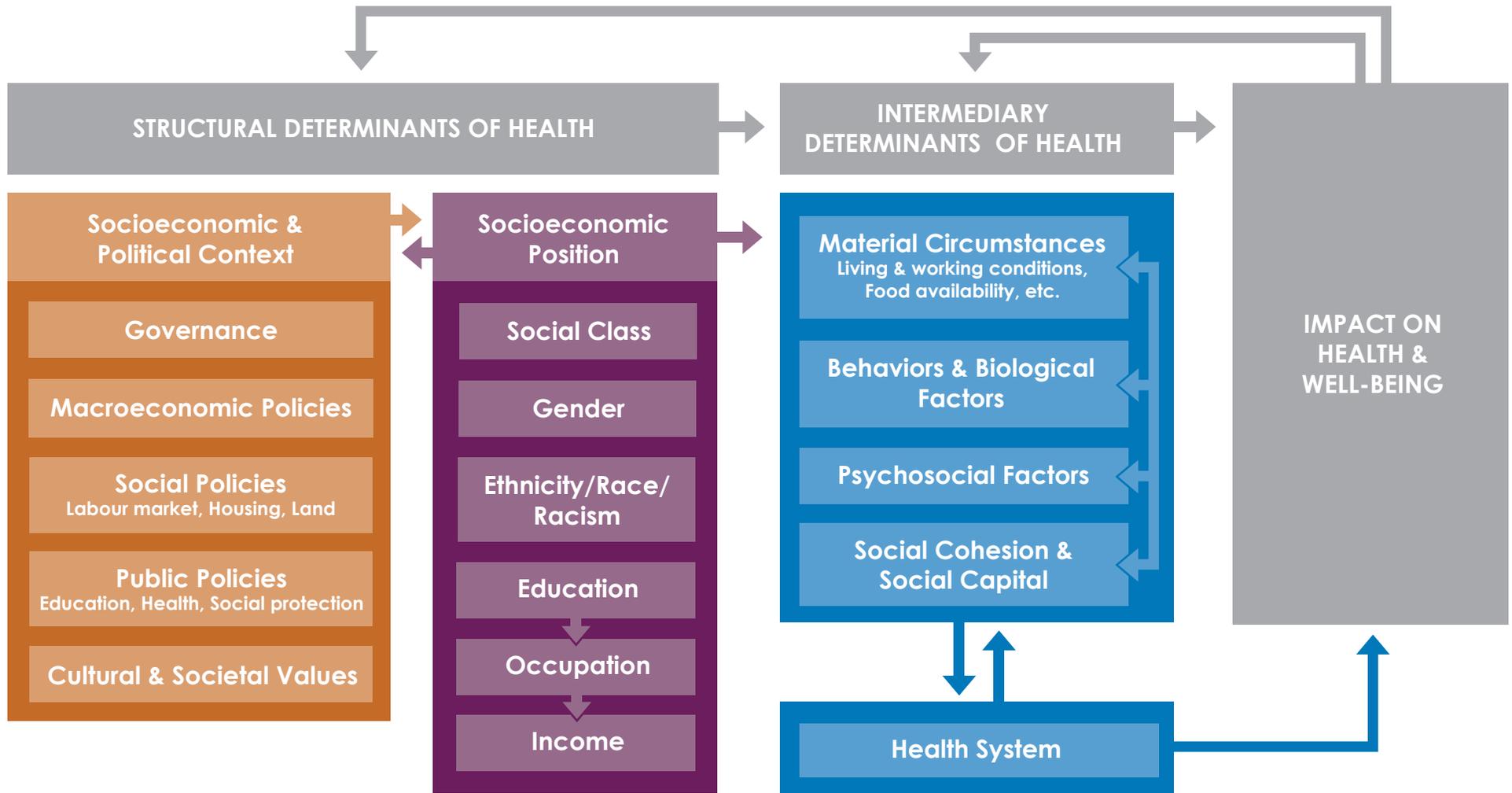
- Improve safety, accessibility of public transportation, walking, bicycling by implementing high density, mixed-use zoning, transit-oriented development, interconnected streets strategies; adopt complete streets policies.²
- Encourage opportunities for physical activity from an early age to prevent chronic illnesses and promote physical and mental health by providing safe access to parks, open space, recreational facilities, and school recess.²
- Ensure urban planning promotes healthy and safe behaviors equitably, through investment in active transport, retail planning to manage access to unhealthy foods, and through good environmental design and regulatory controls, including control of the number of alcohol outlets.¹
- Expand access to affordable fresh fruits and vegetables invest; in fresh food financing initiatives; incentivize neighborhood stores; promote acceptance of WIC benefits.²
- Increase housing quality, affordability, stability, proximity to resources, e.g., support transit-oriented, density, mixed-use, mixed-income development; ensure safe, healthful housing standards and materials; protect affordable housing, home ownership.²
- Perform Health Impact Assessments to evaluate the potential health effects of a project or policy before it is built or implemented.⁵
- Help families improve indoor air quality and reduce exposure to lead.⁴

The root causes of health disparities are deeply embedded in our society. Reducing health disparities in Franklin County will require long-term commitment not only from Columbus Public Health, but from agencies and community partners in a variety of other sectors including education, employment, housing, banking, city planning, private industry, social services, and from the residents themselves. We must be willing to look beyond traditional roles and explore innovative interdisciplinary programs and policies to ensure equal health for all.

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SOCIAL DETERMINANTS OF HEALTH FRAMEWORK



Source: Amended from the World Health Organization's Commission on Social Determinants of Health - A Conceptual Framework for Action on the Social Determinants of Health; April 2007 Draft.

SOCIAL DETERMINANTS OF HEALTH AND HEALTH EQUITY

ONLINE RESOURCES:

Courses:

World Health Organization's (WHO) online course on the social determinants of health (SDoH). This is a four module course, including an introduction to the social determinants of health and political strategies for action, a unit on the approaches for action on the SDoH, a unit on the policies and interventions to address the SDoH, and finally WHO recommendations on how to address the SDoH. Several of these are listed in this report's recommendations section.

<http://dds-dispositivoglobal.ops.org.ar/curso/cursoeng/contexto.html>

Alameda County public health training curriculum. Topics covered include: cultural competency; undoing racism; social and health equity; community capacity building; and public health history and core functions. More information is available on their website, particularly on the Social and Health Equity home page.

<http://www.acphd.org/healthequity/training/index.htm>

Prevention Institute's Health Equity and Prevention Primer. There are seven modules. Topics covered include: community factors and how they influence health equity; creating a framework to address health equity; enhancing community partnerships; the importance of local policy; and measurement and evaluation for health equity.

<http://www.preventioninstitute.org/tools/focus-area-tools/health-equity-toolkit/hepp-test.html>

Other Resources:

The **Virginian Department of Health's** health equity resource page links to numerous other sites on health disparities, achieving health equity and understanding the social determinants of health. This page is a good starting point for exploring what is available on the internet. <http://www.vdh.virginia.gov/healthpolicy/healthequity/resources.htm>

Boston Public Health Commission's Center for Health Equity and Social Justice provides valuable resources for working on health equity at the local level. <http://www.bphc.org/programs/healthequitysocialjustice/Pages/Home.aspx>

Unnatural Causes website developed to support the seven-part documentary series that explores the racial and socioeconomic inequalities in health. Video clips of the series are available, as well as other resources on health equity, educational opportunities, and an action center. <http://www.unnaturalcauses.org/>

PRENATAL CARE (Technical Note)

Timely prenatal care (starting in the first 3 months of pregnancy) impacts health outcomes for mother and baby. Early care provides risk assessment and intervention for medical and psychological conditions, as well as health education that can decrease the incidence of illness or death in both the mother and baby. Nationally, there are more black mothers who initiate prenatal care after the first trimester or receive no prenatal care. In Franklin County for 2006-2008, nearly 30% more white mothers entered prenatal care in the first trimester than black mothers. However, a large percentage of birth certificates are missing prenatal care information for 2006-2008 (2006 =41.8%, and 2007=38.2%, 2008=36.3%). The percentage of women who entered prenatal care in the first trimester is called into question due to the high proportion of missing. For this reason, prenatal care data for 2003-2005 is presented in this report. During this time period, only 11% of birth certificates were missing prenatal care information.

Prenatal Care Reporting Data Issues

Since 2006, prenatal care information is taken from the mother's actual medical record and is not comparable to previous years when prenatal care information was reported by the mother. For 2006 thru 2008, there is a data quality issue as over one-third (38.7%) of the records are missing prenatal care information (see table below).

The data for Franklin County also show a disparity in missing data. Birth certificates for black mothers are more likely to be missing prenatal care than birth certificates for white mothers (see table below).

Do the women for whom prenatal care information is missing follow a different pattern of prenatal care utilization than women for whom there are complete records? This is unknown, so one cannot rely on the known records to accurately describe the population of pregnant women in Franklin County.

	Franklin County		Non-Hispanic Black		Non-Hispanic White	
	Count	Percent	Count	Percent	Count	Percent
2008	6,704	36.3%	1,936	40.2%	3,544	32.5%
2007	6,936	38.2%	1,942	41.6%	3,729	34.5%
2006	7,614	41.8%	2,352	50.2%	4,037	36.7%

DEFINITIONS

Activity Limited Days:

These are the number of days in the past 30 days that a person's physical or mental health kept him or her from doing his or her usual activities such as self-care, work or recreation. This is a measure of disability.

Age-Adjusted Death Rate:

Age adjustment is a statistical technique that standardizes the age distribution of different populations so that they can be compared to each other. The rate is expressed as the number of deaths per 100,000 population.

Alcoholic Beverage:

One alcoholic beverage is defined as 1 bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail or 1 shot of liquor.

Asthma:

Asthma is a chronic disease with symptoms that include tightness in the chest, shortness of breath, coughing, and wheezing (a whistling noise when one breathes). Asthma makes a person's airway (bronchial tubes) swollen and inflamed, which makes breathing difficult. There is no cure for asthma, but it is controllable.

Binge Drinking:

Binge drinking is drinking 5 or more alcoholic drinks on one occasion, one or more times in a month.

Body Mass Index (BMI):

Body mass index is a measure of overweight status that relates weight (in kilograms) to the square of height (in meters). Survey respondents were asked their current height and weight. The BMI was calculated by dividing the reported weight in kilograms by the square of the reported height in meters. Because the weight was collected in pounds and height in feet and inches, the following formula was used to convert to kilograms per meter squared: $\text{Weight (pounds)} / \text{Height (inches)}^2 \times 703$.

When interpreting data on overweight based on the BMI, it is important to remember that these data underestimate the true prevalence of overweight respondents, because of the tendency of most people to understate true weight in an interview. Also, individuals with a high proportion of muscle mass relative to their height may be classified as overweight when they are not truly overweight.

Underweight: BMI of less than 18.5 for adult females and males

Normal Weight: BMI of 18.5 – 24.9 for adult females and males

Overweight: BMI of 25 – 29.9 for adult females and males

Obese: BMI of 30 or greater for adult females and males

Cholesterol (Blood Cholesterol):

Cholesterol is a soft, waxy substance that is needed for key body functions. Humans make their own supplies of cholesterol in the liver. The body usually makes enough cholesterol for its needs, and any dietary cholesterol (from animal products) is considered excess.

Chronic Drinking or Heavy Drinking:

Chronic or heavy drinking is consuming an average of 2 or more alcoholic beverages per day for men. For women it is defined as consuming an average of more than 1 alcoholic drink per day.

Conditions Originating in Perinatal Period:

Conditions that have their origin in the perinatal period, week 28 of pregnancy through the first 28 days after birth, even though the death occurs later in life.

DEFINITIONS (CONTINUED)

Diabetes: Diabetes is a disorder of carbohydrate (glucose) metabolism in which the pancreas does not produce a sufficient amount of insulin, or the ability to use insulin is decreased. Insulin, produced by the pancreas, is necessary for glucose (sugar) to enter cells for conversion to energy, the synthesis of protein, and the storage of fat. In persons with diabetes, glucose and fat concentrate in the blood and result in damage to the vital organs. Severe long-term health complications that are associated with diabetes include limb amputation, renal failure, blindness, nerve damage, dental disease, and cardiovascular disease. Early detection of diabetes and proper disease management can control blood sugar levels and reduce, delay, or prevent the severe complications associated with diabetes. In this report, being diagnosed with diabetes does not include gestational diabetes.

Disparity Ratio: see health disparity ratio

Health Disparity: Health disparity is the difference or inequality in the burden of disease and/or health conditions, mortality, health outcomes and access to care between different segments of the population.

Health Disparity Ratio: A measure of health disparity. It examines the rate of one group relative to the rate of the comparison or reference group. The ratio is calculated by dividing the rate for the group of interest by the rate for the reference group. In this document the group of interest is non-Hispanic blacks and the reference group is non-Hispanic whites. If the ratio is greater than one, then the prevalence or rate for non-Hispanic blacks (numerator) is larger than it is for non-Hispanic whites (denominator). If the ratio is less than one, then the prevalence or rate for non-Hispanic blacks is lower than it is for non-Hispanic whites.

Health Equity: Fairness in the distribution of resources between groups with differing levels of social disadvantage; provides an environment where everyone has a good chance to be healthy.

Health Inequity: Differences in health status and death rates across populations groups that are systematic, avoidable, unfair and unjust. These differences are sustained over time and generations, and are beyond the control of individuals.

High Blood Cholesterol: Adults are considered as having high cholesterol if their health care professional has diagnosed them with high blood cholesterol. Blood cholesterol is measured as milligrams per deciliter (mg/dL) of blood. Usually a measurement of blood cholesterol includes total cholesterol, low density lipoprotein cholesterol (LDL) and high density lipoprotein cholesterol (HDL). Total blood cholesterol of over 200 mg/dL is considered high.

High Risk Behaviors: High risk situations are defined as using intravenous (IV) drugs, having a diagnosis of a sexually transmitted disease, having anal sex in the past year, or testing positive for HIV, the virus that causes AIDS.

Hypertension (High Blood Pressure): Hypertension is having been diagnosed with high blood pressure by a health professional on multiple occasions. Blood pressure is measured as millimeters mercury (mmHg). A blood pressure reading over 120/80 mmHg is considered above normal.

Incidence: Number of new cases of a disease or health condition occurring in a population at some designated time.

Infant Mortality Rate (IMR): A standardized measure of the yearly rate of death for infants under one year of age (364 days and younger). It is presented as the number of deaths per 1,000 live births.

DEFINITIONS (CONTINUED)

Low Birth Weight: Infant born weighing less than 2,500 grams or 5 pounds 8 ounces.

Physical Activity Recommendations (leisure time): At the time of this survey, adults met the recommendations if they reported engaging in moderate exercise for 30 or more minutes per day on 5 or more days per week or reported engaging in vigorous activity for 20 or more minutes per day on 3 or more days per week.

Poor Physical Health Days: These are the number of days in the past 30 days that a person's physical health was not good, such as suffering from illness or injury.

Poor Mental Health Days: These are the number of days in the past 30 days that a person's mental health was not good, such as suffering from stress, depression, or other emotional problems.

Preterm Birth: Infant born before 37 completed weeks gestation.

Prenatal Care: Prenatal care describes the health and supportive services provided to a woman while she is pregnant. The American College of Obstetricians and Gynecologists (ACOG) recommends early entry into prenatal care (during the first trimester). ACOG also recommends that pregnant women see their health professional at least once a month thru the seventh month of pregnancy, then every other week until 36 weeks, and weekly thereafter until delivery.

Prevalence: Number of existing cases of a disease or health condition in a population at some designated time.

Routine Medical Exam: A routine medical exam is a regular exam which enables a health care professional to assess the general health status of patients, to determine the need for screening tests and to counsel the patient regarding perceived issues that might affect the patient's health. To benefit the patient, medical exams should be performed, ideally, once a year. Routine medical exams are part of preventive medical care/services.

Social Determinants of Health: The conditions in which people are born, live, learn, work, play and age. Some examples of these economic, social and environmental conditions are income, food quality, schools, air quality, working conditions, housing, parks, discrimination, etc.

Smoker (Current): A smoker is someone who has smoked at least 100 cigarettes in his or her lifetime and who reports currently smoking every day or some days.

Uninsured: Uninsured is not having health care coverage at the time of the survey. This includes, but is not limited to, health insurance, prepaid health care plans, such as health maintenance organizations (HMO's), and governmental plans, such as Medicare. For this report, uninsured is measured for adults 18 to 64 since all adults age 65 and older are eligible for Medicare.

Vaccination: Vaccination is a well known public health measure to prevent communicable disease. Influenza and pneumonia are the 8th leading cause of death in Franklin County (2005-2007). Older adults are at the greatest risk for complications and death compared to younger adults. Receiving a seasonal flu and pneumonia vaccines are particularly important for adults age 65 and older.

Very Low Birth Weight: Infant born weighing less than 1,500 grams or 3 pounds 4 ounces.

Very Preterm Birth: Infant born before 32 completed weeks gestation.

A FIRST LOOK AT REACTIONS TO RACE

As mentioned in the conclusion, recent studies suggest that the experience of racism contributes to a range of poor health outcomes. In 2002, Dr. Camara Jones [research director on social determinants of health at the Centers for Disease Control and Prevention (CDC)] and the CDC's Measures of Racism Working Group developed six questions for the Behavioral Risk Factor Surveillance System (BRFSS) to try to measure racism. The module, called Reactions to Race, includes questions about how often the respondent thinks about his or her race, whether they have been discriminated against at work or in a health care setting, and if the respondent had physical or emotional symptoms as a result of experiencing racism or discrimination.

Race is a social and not a biological construct; therefore, Dr. Jones uses two measures of race in her research: self-identified race (how you classify yourself) and socially-assigned race (how others classify you). She combines these two measures creating new categories such as "black-white" (self-identified black and socially-assigned white) and "black-black" (self-identified black and socially assigned black).

In 2004, Dr. Jones used these combined race categories to assess the impact of socially-assigned race on health status. She found that socially-assigned white was associated with excellent or very good health. She states that differences found by socially-assigned race are due to racism because a person who self-identifies as black, but is perceived by others as white will not face the same prejudice as someone who is perceived as black by others in our society.

Franklin County Findings

The Reactions to Race module was included on the 2005/2006 Franklin County Community Health Risk Assessment. Columbus Public Health analyzed the questions in the reactions to race module by socially-assigned race, because Dr. Jones' research has shown this is more significant than how a person classifies herself/himself.

Compared to adults who are socially-assigned white, more adults who are socially-assigned black report:

- having fair or poor health
- being treated worse than other races at work
- being treated worse than other races when seeking health care
- thinking about their race daily/constantly.

Experiencing racism or discrimination can affect both physical and mental health. Over half of adults who are socially-assigned black reported physical or emotional symptoms as a result of experiencing racism.

A complete report on Reactions to Race will be coming in 2011.

Franklin County Urban Coalition Strategic Prevention Framework Store Observation Project

Final Report

January 16, 2013

Introduction

Franklin County Urban Coalition (FCUC) requested that Community Research Partners (CRP) create an observation protocol and sampling plan to examine access to and advertisement of alcohol and drug-related paraphernalia in Franklin County. This observation research is a supplement to the larger FCUC Needs Assessment.

About CRP

CRP is a unique nonprofit research center located in Columbus, Ohio, with a mission of strengthening communities through data, information, and knowledge. We connect theory with practice and bring clarity to complex issues, creating high quality products and resources for funders, clients, and communities. CRP is a partnership of the City of Columbus, United Way of Central Ohio, the Franklin County Commissioners, and The Ohio State University.

Results

Alcohol and Drug-Related Paraphernalia Presence by Target and Comparison Zip Codes n=132

Observation	Target (n=68)	Comparison (n= 64)
Coolers with at least one alcoholic beverage¹	35.6%	34.4%
Presence of drug or alcohol-related products at register/ point-of-sale	95.6%	90.6%
Black & Milds	88.2%	68.8%
Cigars/Cigarillos	89.7%	60.9%
Blunt Wraps	80.9%	42.2%
Lighters	88.2%	65.6%
Bottle Openers	19.1%	10.9%
Pipes	36.8%	9.4%
Alcohol-related Accessories/Apparel	19.1%	3.1%
Marijuana-related Accessories/Apparel	25.0%	7.8%
Rolling Papers	58.8%	20.3%
Prominent Advertisements on Front Door of Store		
Alcoholic Beverages or Alcohol-related Products	41.2%	21.9%
Tobacco, Marijuana, or Drug-related Products	36.8%	21.9%
Other	22.1%	56.3%

¹ A t-test was performed on the beverage cooler data ($p > 0.22$). Results indicate no significant difference between target and comparison sample groups.

Strengthening communities through data, information, and knowledge.

Sampling Method

Population and Age by Target and Comparison Zip Codes

	Total Population	Age 0 – 17 yrs	Age 18 – 24 yrs	Age 25 +yrs
Target				
43204	42,104	25.3%	10.7%	64.0%
43205	12,272	24.6%	10.0%	65.4%
43206	21,864	20.9%	10.0%	69.1%
43211	21,600	30.5%	9.5%	60.0%
43223	27,366	25.8%	10.6%	63.7%
Comparison				
43201	35,495	7.2%	60.1%	32.8%
43202	20,251	10.9%	29.9%	59.2%
43209	27,228	21.6%	13.4%	65.0%
43212	18,551	13.7%	15.7%	70.6%
43213	30,444	23.4%	9.1%	67.4%

Source: U.S. Census Bureau, 2010 Decennial Census

- The Ohio Liquor Control database was used to locate establishments with the following alcohol permits:
 - **C1:** Beer only in original sealed container for carry out only,
 - **C2:** Wine and mixed beverages in sealed containers for carry out.
 - **C2X:** Beer in original sealed containers for carry out.
 - **D8:** Sale of tasting samples of beer, wine, and mixed beverages, but not spirituous liquor, at retail, for consumption on premises.
- Removal of non-convenience, gas station, pharmacy, or corner stores from sample:
 - Large grocery store chains and fast food establishments
 - Stores with keywords including “Beer,” “Wine,” “Beverages,” “Liquor,” “Tobacco,” and “Drive- thru”
- Final population of eligible stores
 - Target: 128
 - Comparison: 119
- 75 Stores were randomly selected to be included in each group

Appendices

A: Observation Protocol

B: Observation Protocol Guide

C: List of Sampled Stores

Appendix A: Observation Protocol

Franklin County Urban Coalition

Strategic Prevention Framework - Store Observation Protocol

First Name of Observer: _____

A: Store Information

Store

Name:

Address:

Type of Store:

Convenience Store

Convenience & Gas

Drive-thru/Kiosk

Drug Store/Pharmacy

Other (please explain)

B: Observation Information

Final Disposition of Observation:

Observation Completed

Store Not Found

Store not open at time of observation

Out of business

No alcohol sold

Unsafe environment

Staff suspicious/asked to leave

Other (please explain):

C: Cooler Counts of Alcoholic / Non-Alcoholic Beverages

Total number of coolers in store:

Total number of coolers with at least one alcoholic beverage:

D: Counter / Point-of-Sale Survey

Check the box for each product available at the counter/point-of-sale:

Black & Milds

Cigars / Cigarettes

Blunt Wraps

Lighters

Bottle Openers

Pipes

Alcohol-related Accessories/Apparel

Marijuana-related Accessories/Apparel

Rolling Papers

E: Advertisements

What product category best represents the predominant advertisement on the front door of the store?

Alcoholic Beverages or Alcohol-related Products

Tobacco, Marijuana, or Drug-related products

Other

Appendix B: Observation Protocol Guide

FCUC Store Observation Project Guide

This guide will instruct you on how to (a) conduct store observations and (b) input the store observation data into the SurveyMonkey questionnaire.

A. How to conduct the store observation

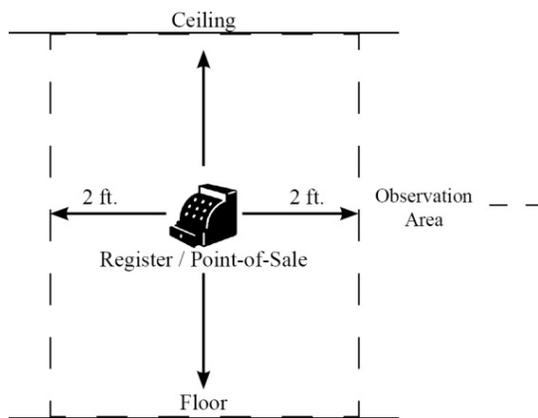
- Before each observation
 - Fill out protocol items you already know: Your name, store name, store address including zip code.
 - Re-review the observation protocol
- During observation
 - Keep hoods down and hands out of pockets
 - Walk at a regular pace. Look at items as if you are intending to buy but are uncertain of what you want.
 - Avoid obstructing the aisles or customers waiting in line to pay.
- Observation steps to take in the store
 - a. Front door advertisement
 - Identify the MOST PROMINENT advertisement on the front door. Most Prominent:
 - Largest advertisement
 - If all the same size then select the one closest to your eye level
 - Identify which category best fits:
 - *Alcohol-related* products such as beer, malt liquor, or wine coolers.
 - *Marijuana/Tobacco-related* products such as Black & Milds.
 - Exclude cigarettes and smokeless tobacco
 - *Other* such as food, not alcoholic beverages, or automotive parts.
 - b. Counting the number of coolers
 - Count total number of coolers around the perimeter of the store and any free-standing coolers.
 - Free-standing coolers include ANY refrigerated cooler or freezer in the store.
 - Retrace your steps and count ONLY the coolers with at least ONE alcoholic beverage.



- c. Survey the register / point-of-sale area
 - The observation area is from:
 - Floor to ceiling
 - Within two feet on each side of the register

Appendix B: Observation Protocol Guide

Figure 1: Observation Area Diagram



The items you may be noting as present are:

- *Black & Milds*
- *Cigars/Cigarettes*
- *Blunt Wraps*
- *Lighters*
- *Bottle Openers*
- *Pipes*
- *Alcohol-related Accessories/Apparel*
- *Marijuana-related Accessories/Apparel*
- *Rolling Papers*

- *ONLY include items visible within the observation area. Items behind counter SHOULD be counted.*

- Document the observation
 - Immediately record observation upon leaving the store
 - Note which stores were not observable for someone else to complete
- FAQ
 1. How long should the observation take?
 - The observation should take anywhere between 1-5 minutes.
 2. What should I do if a store employee speaks to me?
 - If a store employee speaks to you, let them know that you are just looking and if you require assistance you will notify them. If they ask you what you are doing or make you feel uncomfortable, it is OK to leave. Be sure to make a note to have someone else complete the observation.
 3. What if I can't remember one of the observation questions?
 - Record your observation as you can best recall it and have someone else go in to observe the outstanding items.
 4. What counts as a cooler?
 - A cooler is any refrigerated section of a store including individual ice chests or freezers. Coolers may have food as well as beverages.
 5. Can I use a notepad or smartphone to take notes?
 - Yes. If you can do this discretely with a SMALL notepad or smartphone, it is OK to write down the cooler counts and register items to remember.

B. How to input observation data into SurveyMonkey

1. Log on to: <https://www.surveymonkey.com/s/FCUC>
2. Enter:
 - a. Your First Name
 - b. Store Name
 - c. Store Address
 - d. Store Zip Code
3. Answer questions
4. Select "Done" to complete

Appendix C: List of Sampled Stores

Target

43204

Store Name	Store Address	Store Name	Store Address
United dairy farmers 670	1188 wilson rd	LA Bodega SuperMKT	3018 Sullivant Ave
DOLLER GENERAL	1260 DEMOREST	Lindo Mexico Restaurant	3203 Sullivant Ave
CERTIFIED	1421 DUBLIN RD	certified oil corp388	3204 west broad st
JERRI AND BARRI INC	1536 W BROAD ST `	julian food llc	3277 west broad st
SAVE A LOT	154 N WILSON RD	BRIGGS STOP MART	3452 BRIGG RD
WEHDAT	192 EUREKA	dba marathon	3464 sullivanta
BEEES FOOD MART	2516 W BROAD ST	UNITED DAIRY FARMER	530 S HAGUE AVE
STEELE AVE MKT	2552 STEELE AVE	SAN MARGHERITA MKT	55 MCKINLEY
SAVEWAY MINI MART	2585 W BROAD ST	SPEEDWAY	799 N WILSON RD
MOBIL MART	2635 W BROAD ST	SHELL	845 WILSON RD
no name listed	2714 Sullivant Ave	DUCHESS	850 WILSON RD
Walgreens 06378	2770 west broad st	CERTIFIED OIL	980 DEMOREST RD
Energy Mngt LLC BP	2800 Sullivant Ave	Lucs Asian MKT	Sullivant Ave

43205

A & M	1065 E Livingston Ave	Save Way	1410 E Livingston Ave
OAKWOOD MKT	1081 E IIVINGSTON	ARMOR INC	1768 E LIVINGSTON
Kims MKT	1327 E Livingston Ave		

43206

WOODY FOOD 11C	1081 WHITTIER ST	J & N MKT	1541 WHITTIER ST
BUSHMAN MKT	1145 PARSONS	LITTLE VILLAGE IGA	704 PARSONS AVE
HIGH STOP	1290 S HIGH ST	MARATHON FOOD CENTER	830 PARSONS
MARATHON	1509 LOCBOURNE RD	PARSONS SUNOCO	959 PARSONS
CONVENIENT PLUS FOOD	1541 FREBIS AVE		

43211

MCGUFFEY MKT	1066 E HUDSON ST	GFS MKT	2207 Parkwood Ave
HUDSON MKT	1080 HUDSON ST	FAST AND FRIENDLY	2460 PARKWOOD AVE
eagle superMKT	1464 cleveland ave	E& EMKT	778 HUDSON AVE
RAY SUPERMKT	1547 CLEVELAND	Weber Road MKT	900 E. Weber Rd
HUDSON EXPRESSN CARRYOUT	1818 HUDSON		

43223

Gleason MKT	1004 Rich St.	New Doren MKT	1971 Doren Ave
Shamrock	1010 Harmon Ave	C-Town	1975 West Mound St
Herberts MKT	1121 Sullivant Ave.	Circle V	2124 W Mound St
Walgreens	1162 Harrisburge Pike	eakin road MKT	2220 Eakin Road
Certified	1270 Harmon Ave.	N&N SuperMKT	2240 Sullivant Ave
Sonoco	1305 Harrisburg Pike	Roscoe's	2500 Sullivant Ave
Save Way MKT	1370 Sullivant Ave.	Shop N Save	329 Central Ave
Mound ST Food MKT	1690 West Mound ST	Speedway	715 Brown Road
M & J Carryout	1958 Sullivant Ave.	Carniceria brothers	977 Harrisburg Pike

Appendix C: List of Sampled Stores

Comparison

43201

Store Name	Store Address	Store Name	Store Address
High Five Carryout	1178 N. High St	CVS/Pharmacy #2518	2160 N. High St
Natalias Carryout	1293 Summit St	United Foodland	2218 Summit St
14-0 Express Carryout	1481 N. High St	Las Maravillas	233 W 5th Ave
7 Eleven Store 222	1551 N High St	Ziggy's	350 W. Third Ave
Star Carryout	1565 N 4th St	Camps Carryout	447 E 17th Ave
United Dairy Farmers	1680 N. High St	G&L MKT	54 E 5th Ave
Dairy Family	184 W 5th Ave	Express Mart	900 E 5th Ave
Go CO	1866 Summit St	Certified	955 E 5th Ave
Soussy MKT	1950 N. Fourth St		

43202

Clintonville Community MKT	200 Crestview	North High St Get-Go 3512	2845 N High St
Speedway 9281	2510 N High St	Weber MKT	2991 Indianola Ave
Buckeye Fuel	2570 N High St	Pace HI Carryout	3197 N High St
CVS Pharmacy 6950	2680 N High St	United Dairy Farmers 656	327 E Hudson St
Turkey Hill 704	2685 N High St		

43209

SHELL	1937 LIVINGSTON AVE	DAIRY LAND EXPRESS	2555 PETZINGER RD
EXXON	2097 LIVINGSTON AVE	DOLLAR GENERAL	3000 E BRAOD ST
LUCKY LOTTERY	2220 E LIVINGSTON	WALGREENS 06273	3015 LIVINGSTON AVE
SPEEDWAY 5194	2240 E LIVINGSTON AVE	CHUCKS CARRY OUT	3140N ALLEGHENY AVE
CIRCLE K STORE 5686	2481 PETZINGER RD	aary king	3245 e braod st
CVS PHARMACY 6153	2532 E MAIN ST	DAIRY MART #5-7355	490 N CASSADY AVE

43212

United Dairy Farmers 609	1281 W 5th Ave	Grandview Get-Go 3509	1825 W. 5th Ave
Rife's MKT & Carry Out	1417 W 5th Ave	Walgreens	3583 E. Broad
CVS Pharmacy 6147	1495 W. 5th Ave	Walgreens	6201 E. Broad
Speedway 9371	1626 W. 5th Ave	Speedway 6202	744 W. 5th Ave
Corner MKT	1717 Northwest Blvd	Campus Pit Stop	868 W Lane Ave

43213

Speedway	1055 S. Hamilton	United Dairy Farmers	4890 E. Maint St
CVS Pharmacy	3307 E. Broad	Speedway	4901 E. Maint St
Shawns MKT	3309 E. Main St	Yearling MKT	516 Yearling
R&M Carryout	3477 E. Main St	Super Saver	555 S. Hamilton
United Dairy Farmers	4374 E. Broad	True North	5989 E. Maint St
United Dairy Farmers	4374 E. Broad	Turkey Hill	6977 E. Broad St
CVS Pharmacy	4548 E. Main St	Walts Carryout	81-3 S. Hamilton
Shell	4751 E. Main St	La michoacana Mexican MKT	S. Hamilton

Appendix II: Additional Community Readiness Information

Community Readiness Survey Results Report

Franklin County, Ohio

May 2012

Prepared by the
Invitation Health Institute
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Phone: 763.427.5310



BACKGROUND

For years, prevention professionals have worked with communities with the goal of preventing alcohol, tobacco, other drug (ATOD) abuse and problem gambling among young people and adults. Armed with expertise, strategies, training, and good intentions, they would go into Community A and achieve some degree of success. That is, the community would embrace their efforts and make changes. However, they would go into Community B, armed with exactly the same skill set, and flop. What made the difference? After having done this “enough times,” they began to learn.

Perhaps we needed to consider the community itself and residents’ level of readiness to accept both the problem and our suggested strategies. Maybe one community is at a different level of readiness than another. Perhaps we need to match strategies to the community, instead of using a “one size fits all” approach.

Hence, the development of the Community Readiness Survey. Its purpose is to assess attitudes of residents in a community to ascertain their level of readiness for prevention services regarding alcohol, tobacco, other drug abuse, and problem gambling.

The Science Behind the Survey

Development of the Community Readiness Survey began in the late 1990s. Originally, the survey was about 100 items in length, focused on ATOD, and was validated with 15,000 residents in 30 Minnesota communities. This validation process is described in a manuscript entitled “The Community Readiness Survey: Development and Initial Validation” published in the February 2001 issue of *Evaluation Review*.

Since that publication, survey development has continued. In 2001, prevention professionals from ten states were asked to rate data from 50 communities using the ATOD items. Using a technique called Q-sort, they determined which communities were low and high on five domains, or scales of readiness, on the ATOD items. Using their ratings, we were able to empirically establish low and high levels of readiness to serve as benchmarks for future communities conducting the survey. This process is described in a manuscript entitled “Community Readiness Survey: Norm Development Using a Q-Sort Process” published in Volume 16, Number 1, 2006 issue of the *Journal of Child and Adolescent Substance Abuse*.

In 2005, the survey was expanded to include gambling. Experts in problem gambling prevention reviewed the survey. The survey was also tested in three focus groups: (1) young adults aged 18-30, (2) adults aged 31-55, and (3) seniors aged 56 and older. The survey was then field tested in three communities with varying levels of gambling activity.

The prescription drug section was added to the survey specifically for Ohio in 2011. The questions contained in the survey are pilot-tested and validated questions used in other national surveys to assess prevalence of prescription drug abuse in communities. The prescription drug section is reported separate from the original survey components because it was not included in the validation process of the core survey. Results and recommendations can be found on pages 26-34 of this report.

The Components of a Community Assessment

Think of a community assessment as a three-legged stool. The first leg is comprised of data on actual use rates: To what extent do young people and adults in the community actually use alcohol, tobacco, and other drugs? To what extent do they gamble? We typically obtain these data from school, adult, or household surveys. This information lets us know to what extent alcohol, tobacco, and other drug abuse and gambling problems (ATODG) actually exist in the community.

The second leg is an “infrastructure” assessment: What agencies exist in the community to deal with ATODG? What resources are in place? How do community leaders view these issues? When meetings are held in the community to discuss ATODG, what sectors are represented, and what are their views?

The third leg is an assessment of resident attitudes and community norms. How do residents view ATODG in the community? How prepared do they feel to take action? How much support would they lend to dealing with these issues? This is where the Community Readiness Survey comes in.

A stool is not complete with only one or two legs, and the same goes for the community assessment. If we gather data on actual use rates, conduct a formal or informal infrastructure assessment, and have information on resident attitudes and community norms, we have a fairly complete picture of the community regarding ATODG.

What the Survey Measures: The Five Domains

Domain I: Perception of an ATODG Problem Within Community

To what extent do residents perceive alcohol, tobacco, other drug use, and gambling by teens and adults to be a problem? To what extent do they see teens smoking in public? Adults and teens drinking in public? Teens and adults gambling? How able are they to connect crashes or injuries and violent crimes to alcohol and drug use? Do they perceive a link between problem gambling and financial problems or crimes? In other words, what is the level of awareness among residents regarding these issues?

Domain II: Permissive Attitudes Toward ATODG

Even if residents perceive a problem, they may feel it is “no big deal” or “okay” for such problems to exist among teens and adults. What are the community’s norms regarding ATODG? To what extent do residents endorse beliefs such as “Kids who experiment with alcohol or other drugs almost always grow out of it,” or “It’s okay for teens to play poker for money.” How much do they believe it’s okay to provide alcohol to their own children and other young people?

Domain III: Support for ATODG Policy and Prevention

To what extent do residents believe in the basic concept of prevention? Who should take responsibility for prevention? Would they be willing to increase taxes or volunteer time to support prevention efforts?

Domain IV: Access to Alcohol, Tobacco, and Gambling

How difficult do residents believe it is for young people to get access to alcohol, tobacco products, and gambling in the community? Are commercial or social sources perceived as providing easier access for young people?

Domain V: Perception of Community Commitment

Would this community mobilize around any issue, let alone ATODG? What is the level of overall community commitment or apathy?

METHODS

Survey Procedures

A random sample of 600 residents was drawn from postal route addresses in Franklin County. Each resident was mailed a pre-notification letter, individually addressed and signed by Franklin County Community for New Direction President/CEO Gregory A. Jefferson. The purpose of this letter was to inform residents that the survey would be coming to them, that it was important, and that the results would be used to help the community reduce problems associated with alcohol, tobacco, and other drug abuse and problem gambling.

A week later, a survey packet was mailed to each member of the sample. It contained:

- The survey instrument
- A self-addressed postage-paid envelope
- A cover letter from the Invitation Health Institute (formerly the Minnesota Institute of Public Health)
- An incentive in the form of a \$1 donation to a local charity

One week following the mailing of the survey packet, a reminder postcard was mailed to each member of the sample. If a potential respondent had lost or misplaced their survey, they were invited to call the Invitation Health Institute's 1-800 number and request a second survey.

Eleven percent (n=63) of the eligible sample responded to the survey. Three surveys were returned as undeliverable by first class mail. This number was subtracted from the sample of 600 and deemed ineligible. Franklin County's response rate of 11% was very low compared to the response rates typically seen in other communities conducting the Community Readiness Survey. This low response rate itself can be interpreted as a sign of low community commitment.

To address the low response rate to the mailed survey, prevention leaders in the community distributed the survey instrument to additional potential respondents. This boosted the total number of responses to 235, and although respondents were not chosen as part of a random sample, the addition of the second, non-random sample can be seen as increasing the meaningfulness of the survey.

Based on the county population size and the response rate, the confidence interval or margin of error for a question with a 50/50 split would be 6.4%. For example, a finding that one-half of respondents supported prevention efforts would be within plus or minus 6.4% with a 95% confidence level. Furthermore, the margin of error is smaller for a question response with a larger difference in percentages of response options. In this example, the 67% who agree or strongly agree that ATODG problems can be reduced through prevention has a margin of error of 6%. In other words, if we repeated the same survey one-hundred times with different samples of Franklin County residents, 95 out of the 100 survey responses to this question would be within plus or minus 6%; or between 61% and 73%.

Sample Characteristics

Historically, it has been our experience that older residents respond to mailed surveys at higher rates than their population numbers. In contrast, Franklin County had only 21% of first sample respondent's aged 65 and above. The majority of the respondents (48%) were between the ages of 45 and 64. The second sample taken in Franklin County compliments the initial mail-based random sample well with 41% of the respondents under the age of 24. The respondents to the Community Readiness Survey reflect the overall make-up of Franklin County. The median age of Franklin County, Ohio residents is 33.1 years old, with 56% of residents between the ages of 25-64 (US Census Bureau, 2010).

Franklin County, Ohio is racially and ethnically diverse. Sixty-nine percent of residents are White; 21% Black/African American; 5% Hispanic; 4% Asian; 0.2% American Indian/ Alaska Native; and 0.1% Native Hawaiian and Other Pacific Islander (US Census, 2010).

The Community Readiness Survey respondents were also racially and ethnically diverse. Fifty-three percent were Black/African American; 28% White; 13% Hispanic/Latino; 4% American Indian/Alaska Native; and 3% Asian or Pacific Islander.

Combined, (sample one and sample two) males represented 53% of responses and females (47%). Franklin County at-large is 49% male and 51% female (US Census, 2010).

In terms of level of education, a majority of the respondents (32%) have high school/GED; 25% have less than a high school degree; 19% have some college; 16% have a college degree; and 8% have a vocational/technical degree. It is important to keep in mind the 41% of respondents under the age of 24 when interpreting these results, as many of those young respondents may not have completed their education.

Forty-nine percent (49%) reported being parents or primary caregivers of child(ren) under 21. Of these, 6% are parents of adolescents (ages 13-17), while 56% have younger children aged 0-6 years. Again, parents are a group, not surprisingly, that tend to respond to this survey in greater numbers than their population numbers.

In summary, when comparing the age, gender, race/ethnicity, and parental status of respondents who participated in the Community Readiness Survey to the Franklin County Census allows the results of this survey to be applicable to the community at-large. The table below compares the demographics of Franklin County residents who responded to the survey to the demographics of Franklin County residents based on the 2010 Census data.

Demographic Measure	Mail Survey Respondents	Community Survey Respondents	Survey Respondent Total	Franklin County 2010 Census Data*
Gender				
Female	54.1%	44.4%	47.1%	51.3%
Male	45.9%	55.6%	52.9%	48.7%
Age				
24 and younger	3.3%	41.2%	31.0%	35.8%
25 – 44 years old	27.9%	41.2%	37.6%	29.9%
45 – 64 years old	47.5%	17.6%	25.7%	24.2%
65 years and older	21.3%	0%	5.8%	9.9%
Education				
Bachelor degree or more	38.7%	7.3%	15.9%	16%
Some college	19.4%	18.3%	18.6%	19%

Vocational/Technical degree	8.1%	7.9%	8.0%	8%
High School or GED	27.4%	34.1%	32.3%	32%
Less than High School degree	6.5%	32.3%	25.2%	25%
Race/Ethnicity				
American Indian	4.6%	3.5%	3.8%	0.2%
Asian or Pacific Islander	3.1%	2.3%	2.5%	3.9%
Black or African American	24.6%	63.6%	52.9%	21.2%
Latino or Hispanic	0%	17.9%	13.0%	4.8%
White	67.7%	12.7%	27.7%	61.2%

* Source: United States Census Bureau. 2010. Available at www.2010.census.gov

RESULTS

ALCOHOL, TOBACCO, OTHER DRUGS, AND GAMBLING

Domain I: Perception of an ATODG Problem within Community

To what extent do residents perceive alcohol, tobacco, and other drug use and gambling by teens and adults to be a problem? Higher scores on this domain mean residents have a higher perception of problems associated with alcohol, tobacco, other drug use, and gambling.

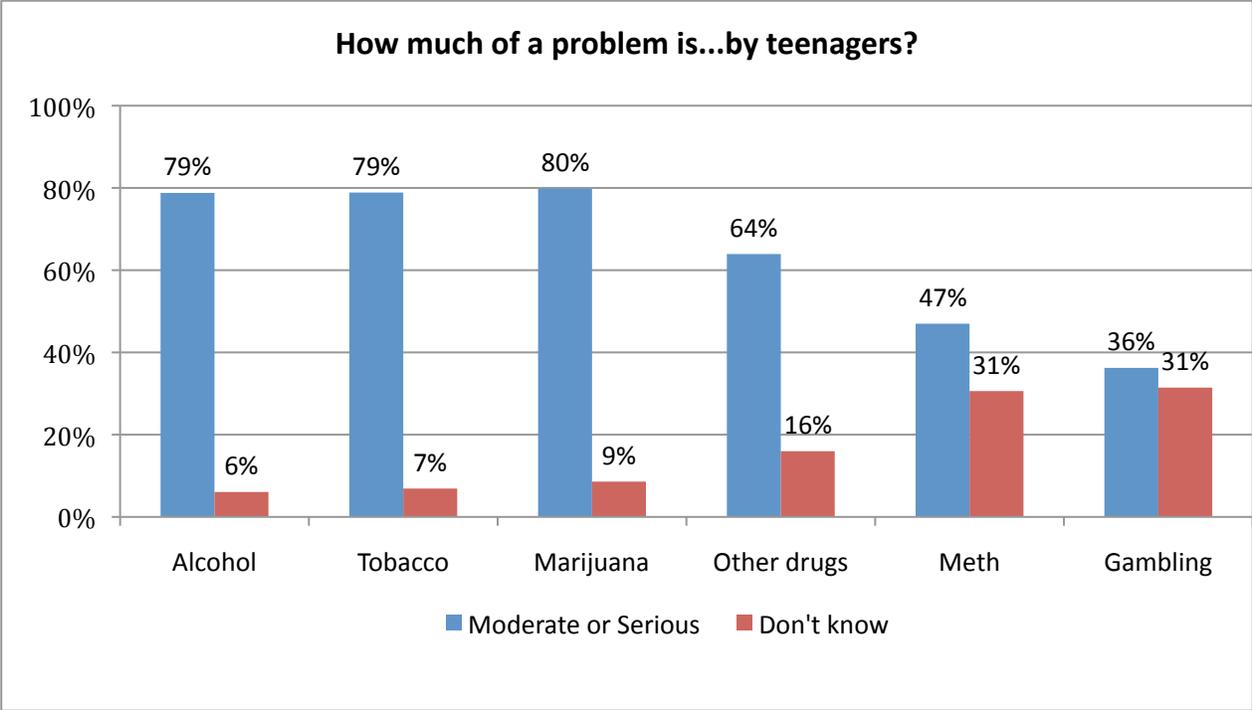
Higher score = more perception of a problem

Lower score = less perception of a problem

Sixty-six percent (66%) of the sample say they recall an alcohol or drug related youth death in the community in the last 12 months. Fifty-four percent (54%) of the sample responded that they recall a prominent person embezzling money or participating in other illegal activities to support a gambling problem in the community in the last 12 months.

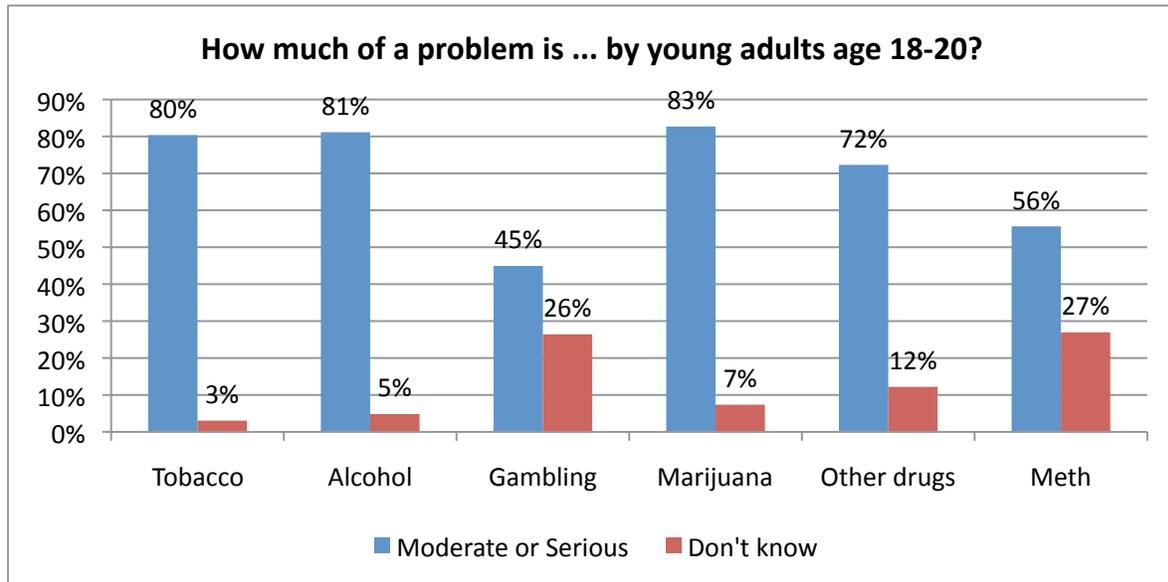
How much of a problem is ... by teenagers?

In general, we see that community members view marijuana (80%), alcohol (79%), and tobacco use (79%) as the top three moderate or serious problems among teenagers in Franklin County. Followed by other drugs (64%), methamphetamine use (47%), and gambling (36%). Also important is the relatively high (31%) of respondents that indicated that they “Don’t Know” the extent of the problems as they pertain to methamphetamine use and gambling among teenagers.



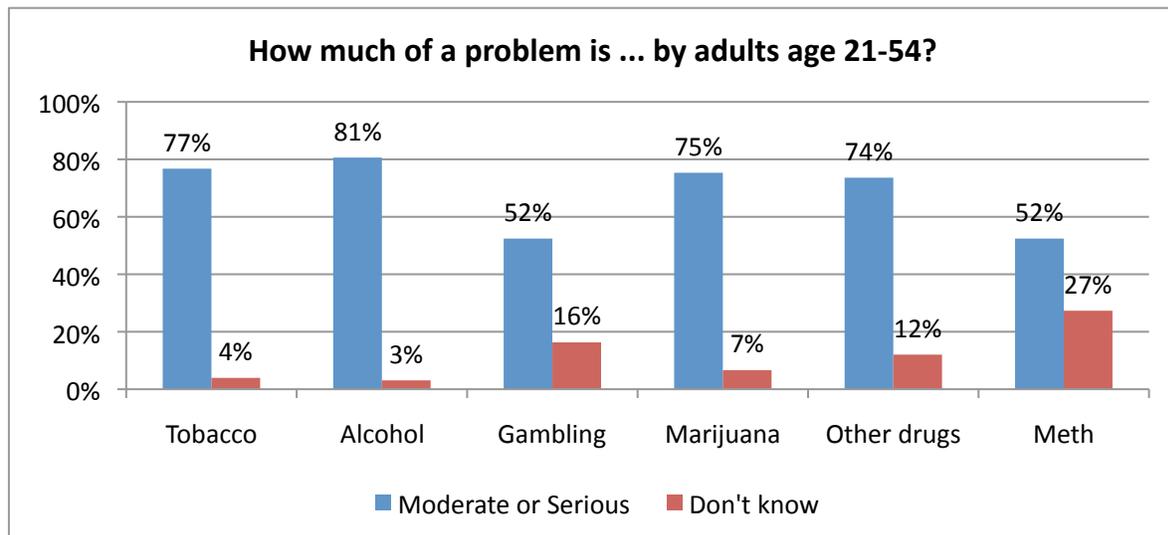
How much of a problem is ... by young adults age 18 – 20?

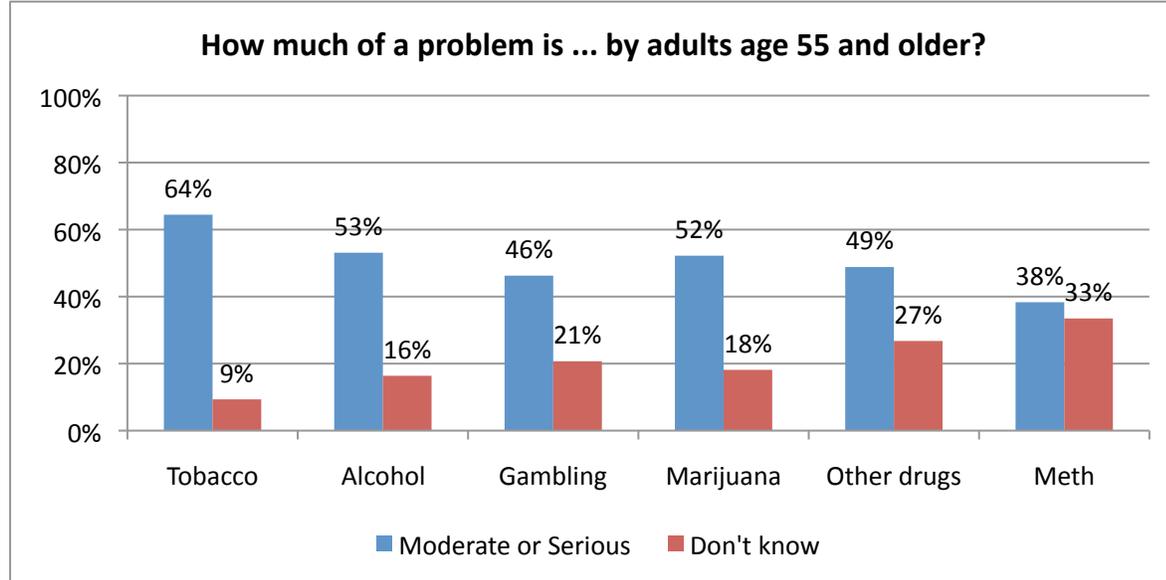
When we examine the percentages asking how serious these problems are for young adults age 18-20, respondents reported the following to be a moderate or serious problem. We see that marijuana (83%) use was ranked highest in terms of seriousness, followed closely by alcohol (81%), tobacco (80%), and other drug use (72%).



How much of a problem is ... by adults age 21 – 54?

Among adults age 21-54, respondents reported alcohol (81%), tobacco (77%), marijuana (75%), and other drugs (74%) as moderate to serious problems within the community. Methamphetamine use (52%) and gambling (52%) were identified less often, as a moderate or serious problem.



How much of a problem is ... by adults' age 55 and older?

Among adults age 55 and older, tobacco use (64%) was found to be the most serious problem, followed by alcohol use (53%), and marijuana (52%). Historically, marijuana is not viewed as a moderate or serious problem among adults aged 55 and older. This finding is unique to Franklin County. SAMHSA has identified some key research related to long-term health effects of chronic marijuana abuse and the aging society. Co-occurring mental disorders and/or chronic diseases may accompany the marijuana dependence among adults aged 55 and older. This can interfere with chronic disease self-management, mood disorder treatment, as well as increase susceptibility of self-harm due to the difference in metabolism and absorption of the drug by older adult users.

Where does your community rate the seriousness of this issue and what does it all mean?

The lower the percentages, the fewer residents in Franklin County believe ATODG to be a problem for teens and adults. The higher the percentages, the more they view it as a concern, and, perhaps, the more willing they will be to tackle the issue.

Lower percentages may occur for a variety of reasons. In some situations, the community has been actively working on ATODG prevention, and the survey results reflect those efforts. For example, we have conducted the Community Readiness Survey in communities that have had active anti-tobacco coalitions for a number of years. Results show that residents believe tobacco use to be a minor problem, not because they are in denial, but because community-wide efforts, individual programs and environmental changes, have been in place long enough to reflect fewer perceived problems. This reinforces the value of coupling your Community Readiness Survey results with measures of actual use rates.

In other communities, residents are simply not aware of ATOD use and gambling problems among teens and adults. In these communities, efforts to increase public awareness are especially important.

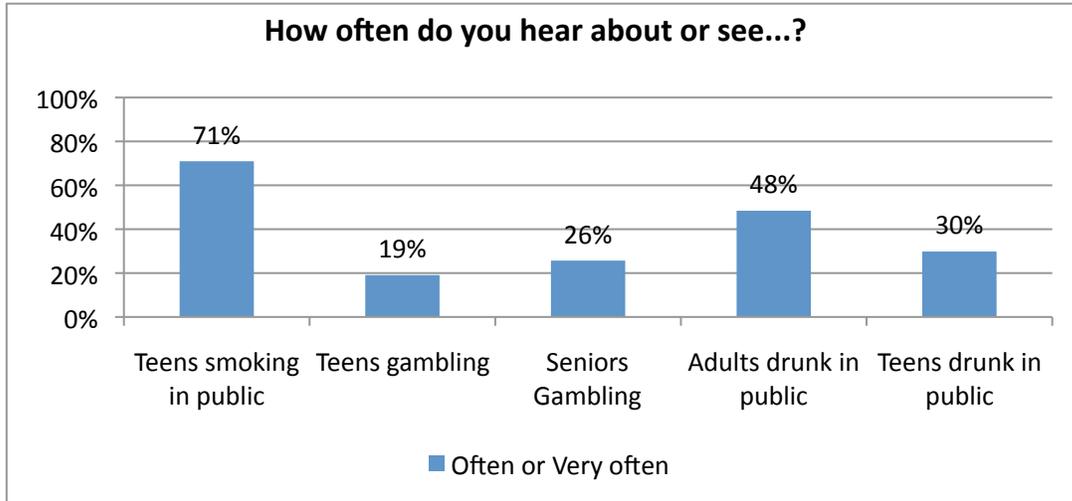
What about those cases in which use rates have gone down, but perception of a problem remains high? Then, it's time to tell community members and youth that our efforts have made a real difference. Sometimes we are afraid to believe our own success. It may be easier to continue focusing on eradicating a problem, instead of moving in a new and tentative direction. The danger, though, of not doing so is that community members will become discouraged. If successful efforts are not recognized as such, then people begin to wonder what does constitute "success." So, if use rates have declined but perceptions lag behind, let people know! Also, pay attention to the percentage of respondents who said they "don't know" the extent to which substance use and gambling are a problem. The percentage of respondents who respond, "don't know" to these items is what we call the "room to grow" group. Awareness efforts in your community can help bring knowledge to those who currently say they "don't know."

How often do you hear about or see...?

The most common phenomenon noted by respondents is that of teen smoking (71% said they see this often or very often in your survey). In many communities, tobacco use by teens is judged to be commonplace. Yet, we know that tobacco is often a gateway to alcohol and other drug use for youth. Perhaps we need to pay attention to public smoking by teens and find some means of making it less acceptable.

How common is public drunkenness in your community? Forty-eight percent (48%) of respondents reported that they often, or very often see, adults drunk in public. Teens drunk in public was reported by 30% of respondents.

It is helpful to keep in mind that "public" does not necessarily mean on the street; it most often occurs in bars, sports arenas, or even private parties. If your community's percentages are relatively high, then it could mean that such behavior is accepted or at least tolerated. Even if your percentages are low, it is wise to ask if the results reflect levels of use that are tolerable in your community. For example, in most communities, gambling by seniors is visible (26% said they see this often or very often). However, gambling by teens is hardly seen at all (only 19% said they see this often or very often). One reason this may be is that persons under the age of 18 are not allowed in casinos, which is a very visible form of gambling. Additionally, teens may gamble in the privacy of a friend's home rather than out in the public eye. Perhaps this is also one reason why gambling is viewed as the least problematic of the substances on the charts we just examined for the younger age groups (see pages 7-8).

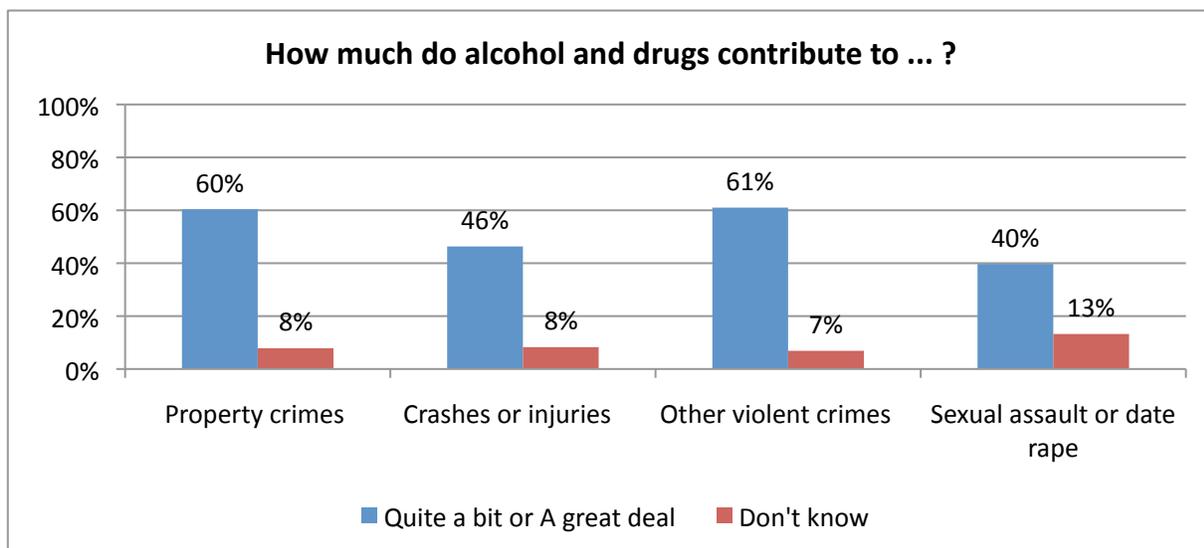


How much do alcohol and drugs contribute to...?

Often times, communities do not see the connection between substance abuse and negative consequences like crashes, injuries, property and violent crimes, sexual assault, and date rape.

Respondents in your community have made a link between alcohol and drug use and crime, with 61% indicating that they believe that alcohol and drugs contribute “quite a bit” or “a great deal” to violent crimes such as theft, armed robbery, physical assault; 60% believe it contributes to property crimes (such as vandalism), and 46% believe they contribute to crashes or injuries. Fewer respondents have connected drug and alcohol use to sexual assault or date rape (40%).

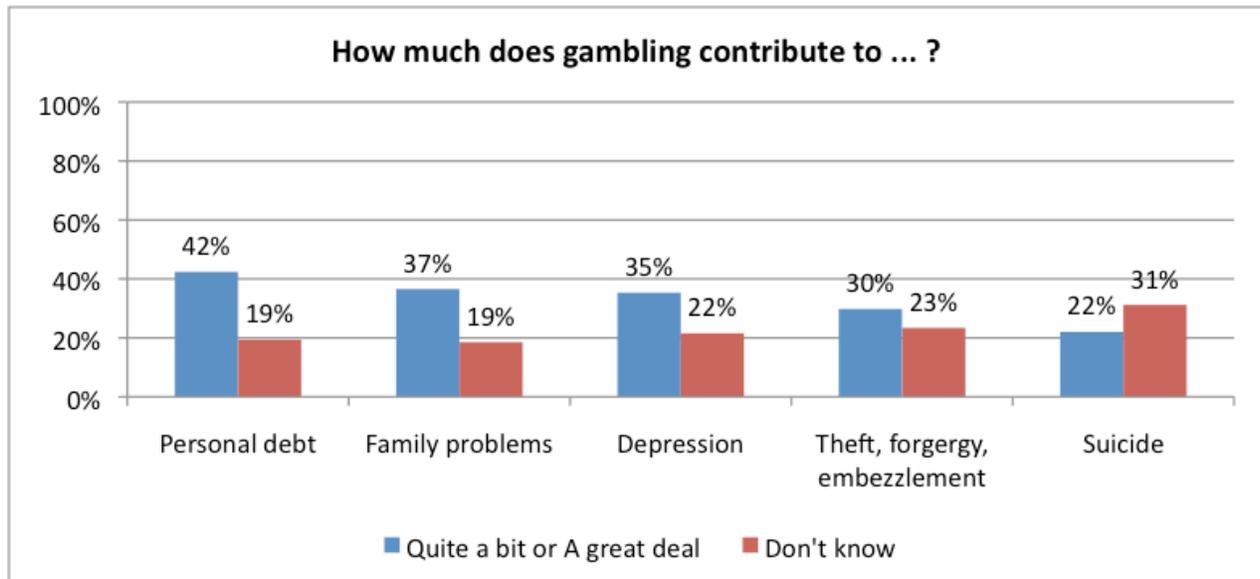
It often proves helpful to spend time with community residents making the link between ATOD use and its consequences for the general community. Using crime-related outcomes, as they relate to drug and alcohol abuse, will generally have more of an impact on community members, as no one is exempt from harm.



How much does gambling contribute to...?

With regard to gambling, 42% indicated gambling contributes quite a bit or a great deal to personal debt, 37% said it contributes quite a bit or a great deal to family problems, and 35% said the same about depression. Only 30% said gambling contributes quite a bit or a great deal to theft, forgery, and embezzlement as well as suicide.

On every item, the percentage of respondents who indicated that they “don’t know” the extent to which there is a connection exceeded the percentage who stated that gambling contributes quite a bit or a great deal. In your community the “don’t know” responses were gambling contributes to personal debt (19%), family problems (19%), depression (22%), theft, forgery, and embezzlement (23%) and suicide (31%). Clearly, there is room for improvement in educating the community about the consequences of problem gambling on an individual, family, as well as the entire community.



Domain II: Permissive Attitudes Towards ATODG

To what extent do community members view ATODG as “okay” or “no big deal”? Higher scores on this domain mean residents hold permissive attitudes toward ATODG.

Higher score = more permissive

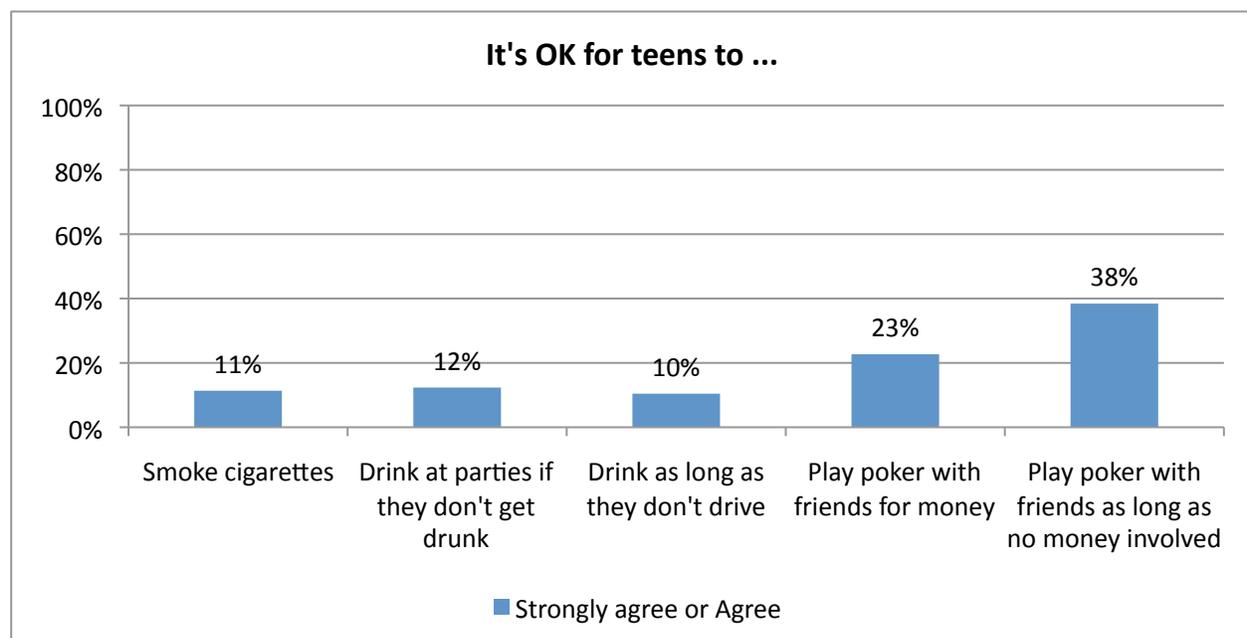
Lower score = less permissive

A special note about this domain: The percentages on this domain tend to be low relative to scores on other domains. This could reflect a “response bias” toward knowing the “right” or socially acceptable answer. Examine your community’s responses bearing in mind that the total range for scores on these items tends to be more restricted (e.g., 10-20 range as opposed to 50-90) than in other domains.

It’s OK for teens to....

There was very little endorsement by community members for teens to smoke (only 11% agreed or strongly agreed with this statement), drink at parties as long as they don’t get drunk (12%), or drink if they don’t drive (10%).

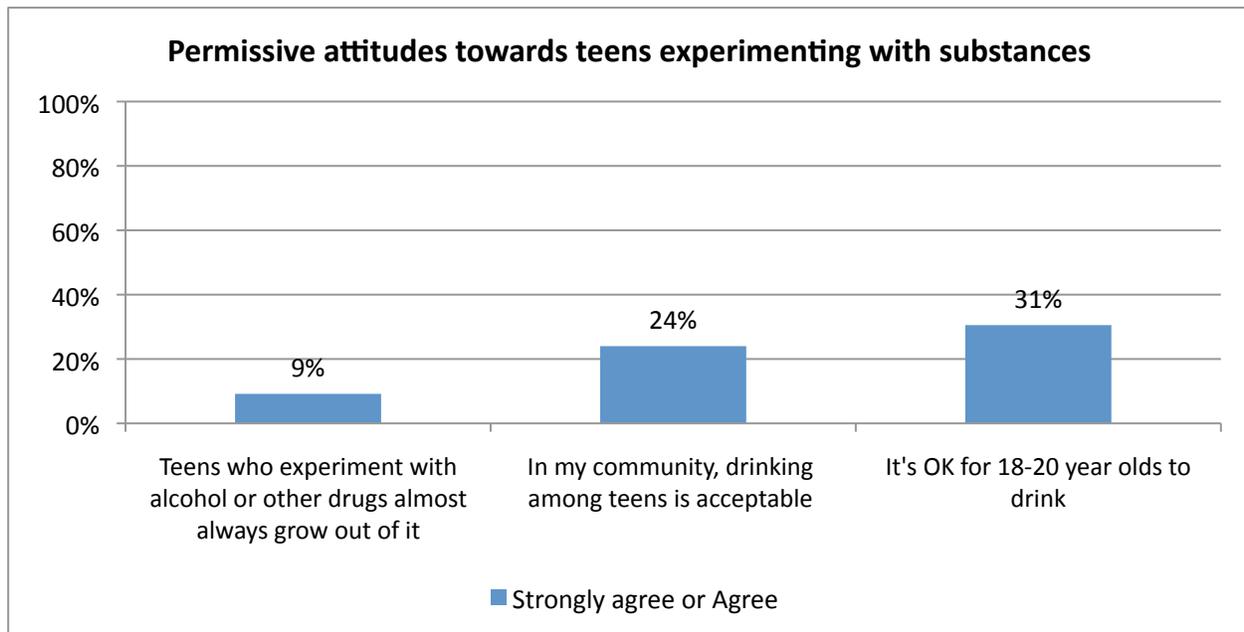
Playing poker with friends for money was more acceptable than smoking, drinking, and drinking and driving. Your survey found that 23% agreed or strongly agreed that it is okay for teens to play poker for money, while playing poker for no money was viewed as non-problematic by 38% of the respondents.



*Kids will be Kids...*Alcohol and Other Drugs

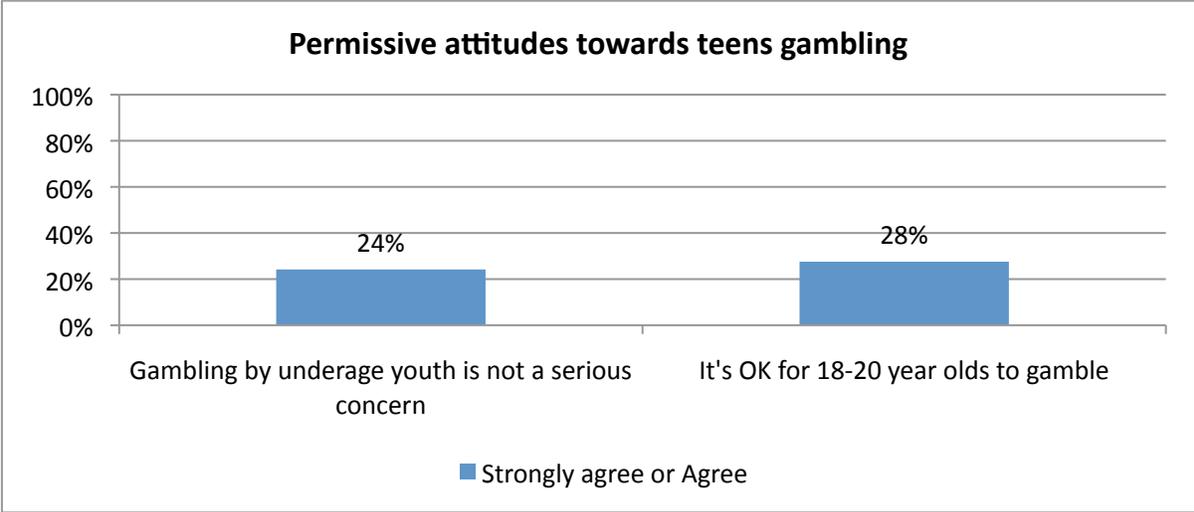
Items in this section represent comments that we hear frequently, such as “Kids who experiment with alcohol or other drugs almost always grow out of it.” They may reflect norms that need to be addressed. In your community, though, few respondents (9%) agreed with this statement.

More alarming is the fact that 31% of respondents agreed or strongly agreed that “it’s OK for 18-20 year olds to drink” and 24% felt as though within the community, drinking among teens is acceptable.



Gambling

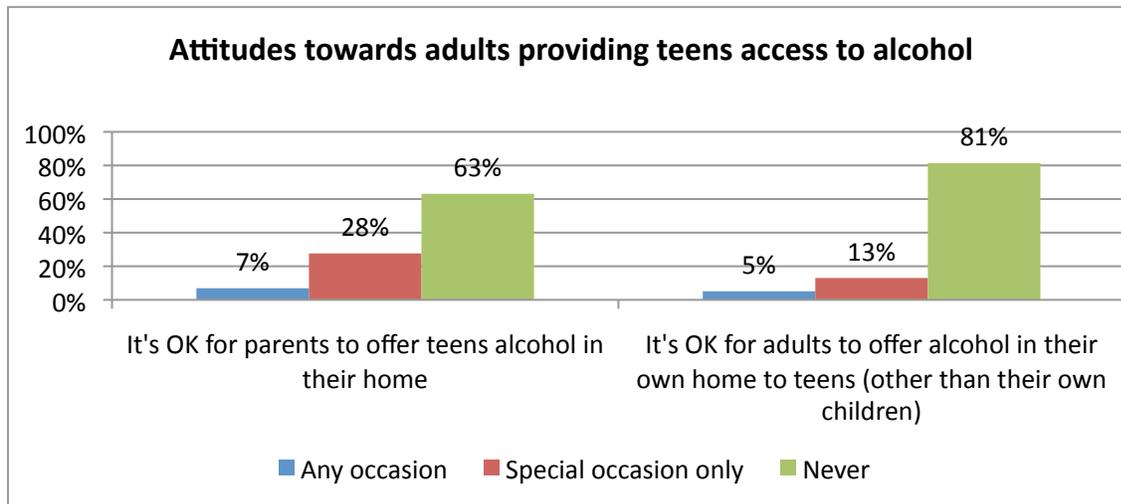
With regard to gambling, 24% of respondents agreed or strongly agreed that gambling by underage youth was not a serious concern, and 28% agreed or strongly agreed that it is okay for 18-20 year olds to gamble. If you choose to tackle certain “kids will be kids” norms, this information can serve as a beacon regarding which norms to address.



What About Parents?

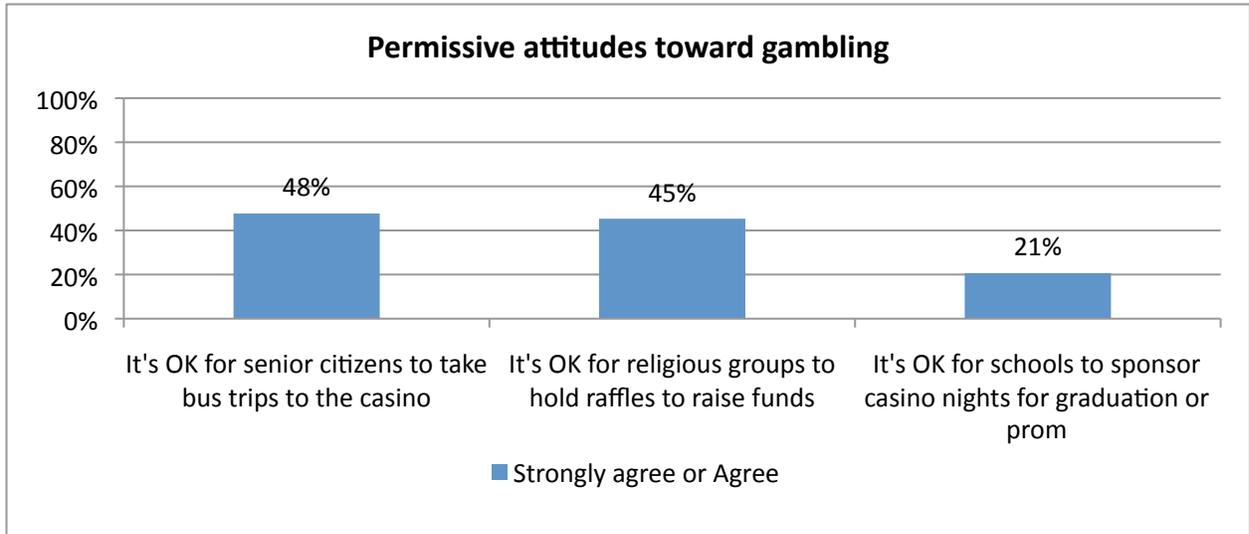
Twenty-eight percent (28%) of respondents in your community thought that it is okay for parents to offer alcohol to their own children, in their own home, on special occasions only. In contrast, 13% of the respondents said it was okay for adults to offer alcohol in their own home to teens other than their own children on special occasions. Five percent (5%) of respondents thought it was okay for parents to offer teens alcohol in their own home on any occasion. Few respondents agreed with the statements that parents prefer their teen drink with them than elsewhere (10%) and that parents tell their teen to use alcohol carefully and not let it interfere with schoolwork (8%). A low percentage of respondents thought purchasing lottery tickets or pull-tabs for their underage child was acceptable (9%).

Reporting these percentages to community members may help foster discussion among parents and other adults about the risks and consequences of providing alcohol and gambling access to minors, including liability issues.

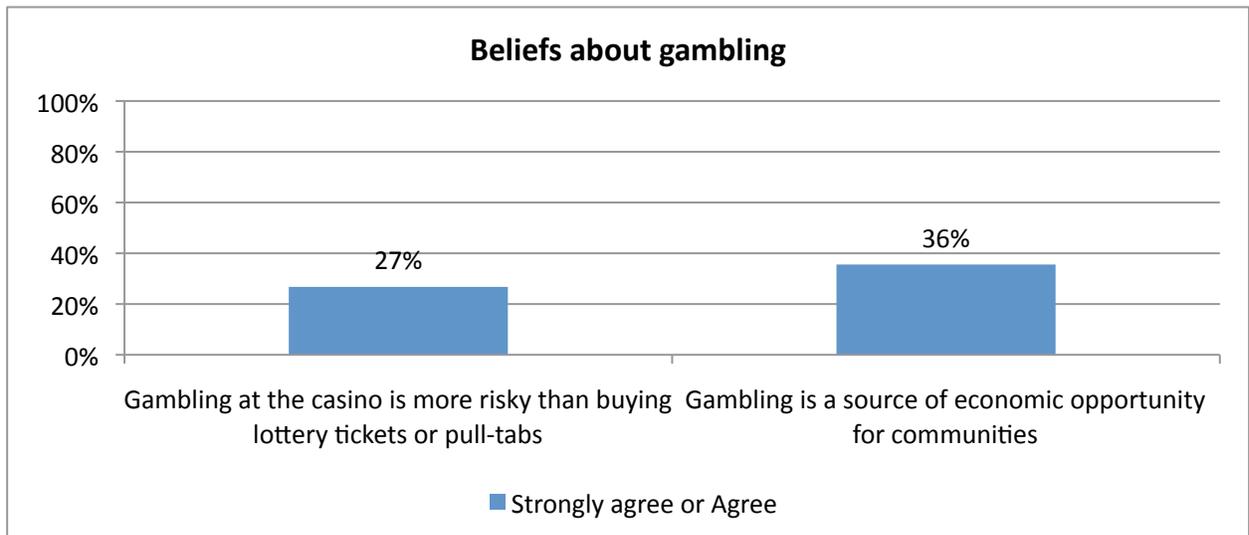


How OK is it? Attitudes and Beliefs about Gambling

It was reported that 48% of the respondents believed it is okay for senior citizens to take bus trips to the casino, 45% stated it is okay for religious organizations to hold raffles to raise funds, and 21% stated it is okay for schools to sponsor casino nights for graduation or prom.



What about perceptions regarding type of gambling? It was reported that 27% of respondents believed gambling at casinos is more risky than buying lottery tickets or pull-tabs. In your community, 36% believed that gambling is a source of economic opportunity.



Domain III: Support for ATODG Policy and Prevention

How much support would community members give to alcohol, tobacco, other drug, and problem gambling prevention? Higher scores on this domain mean residents would offer more support for alcohol, tobacco, other drug, and problem gambling prevention.

Higher score = more support

Lower score = less support

Law enforcement should spend more time enforcing...

The majority of respondents indicated they strongly or somewhat favored using local law enforcement for the following issues:

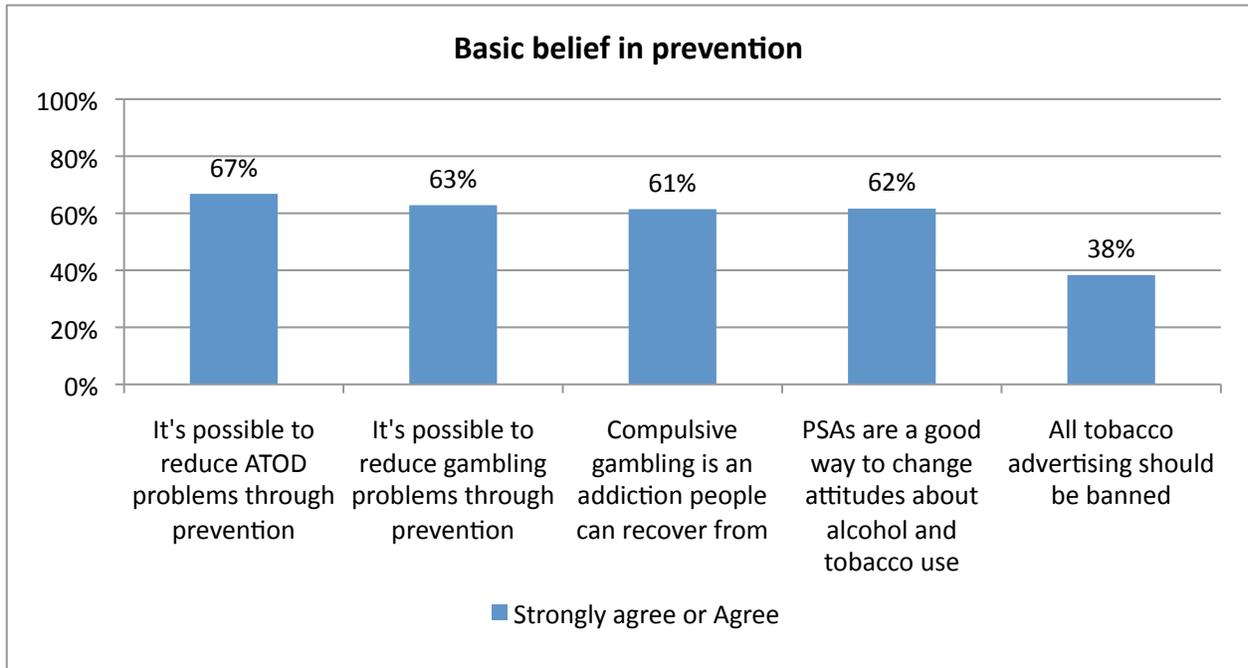
- Spending more time enforcing minimum drinking age (65%)
- Spending more time enforcing laws prohibiting sales of tobacco to teens (62%)
- Spending more time enforcing minimum gambling age (55%)
- Cracking down on illegal sports betting by either adults or teenagers (48%)

Be sure to offer these data to law enforcement—it may come as a surprise to them. We often hear from law enforcement that they believe the community wants them to go after “hard crimes, not bust kids.” This can give them a sense of community support that, in fact, residents do value law enforcement imposing alcohol, tobacco, and gambling violations, especially when underage youth are involved.

Basic Belief in Prevention

Those of us in the ATODG prevention field think we believe in it, but that the rest of the world lags behind. This may not always be the case. A moderate percentage of respondents in your community endorsed a basic belief in prevention—67% reported that it’s possible to reduce ATOD use through prevention and 63% reported it’s possible to reduce gambling problems through prevention. Sixty-two percent (62%) of respondents indicated that public service announcements (PSA) are a good way to change attitudes about alcohol and tobacco use.

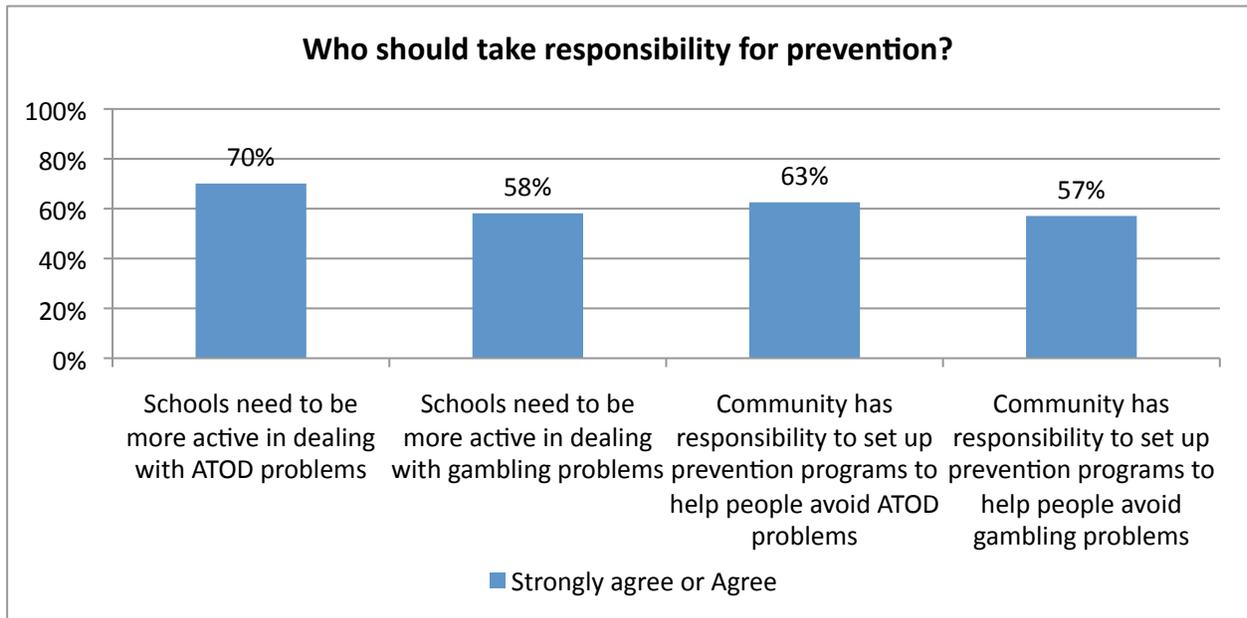
You can use the following data to support prevention programs from a “basic belief” standpoint. Perhaps your community is ready to form a coalition or strengthen efforts already in existence. Maybe, in competing for funding, you can emphasize the support already in place in your community.



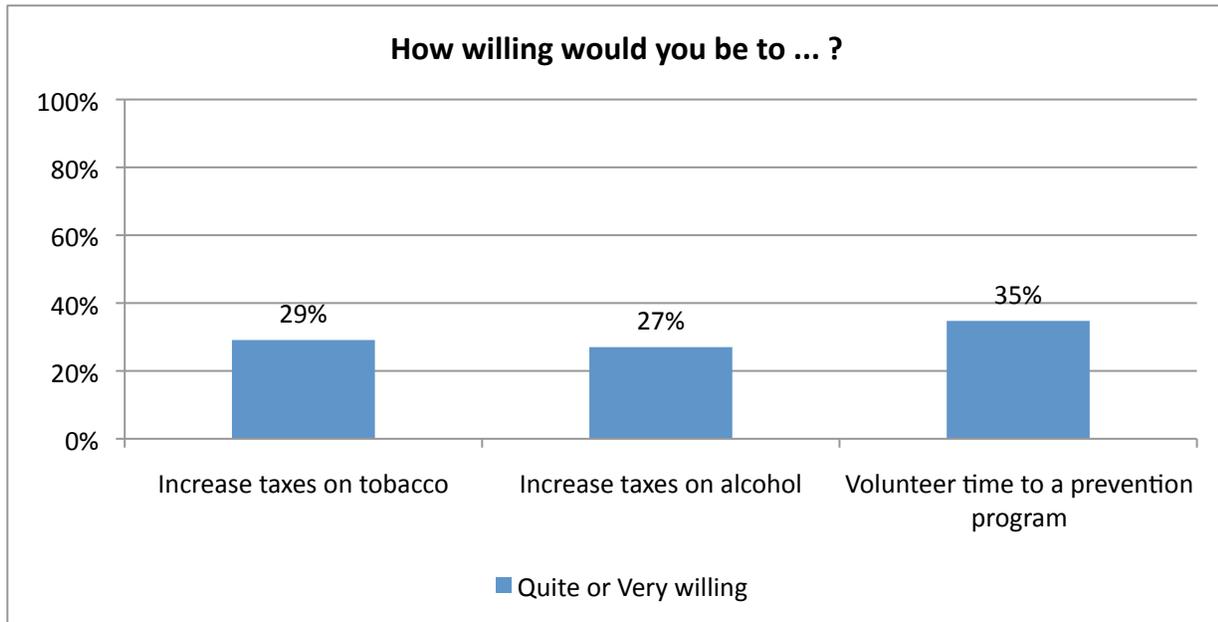
Who Should Take Responsibility for Prevention?

Franklin County residents indicated that schools should be more active for ATOD prevention (70%) and gambling prevention efforts (58%). A majority of respondents indicated that the community has the responsibility to set up prevention program to help people avoid ATOD and gambling problems. These percentages represent those who agreed or strongly agreed with these statements. School staff sometimes feels discouraged when they hear this; they say that they are doing so much already, or at least trying to. On the other hand, when budget cuts threaten prevention efforts in the school, it may be helpful to have these data on hand to show community support for prevention in schools.

Residents also believe that community members share in the responsibility. Your survey found that while 63% of residents believed the community has responsibility to set up ATOD prevention programs; 57% believed the same about gambling prevention programs. Forty-five percent of respondents (45%) indicated that legalized gambling should help pay for compulsive gamblers' treatment, while 20% stated that the public should not get involved if someone has a gambling problem.



To help pay for prevention services, how willing would you be to...?



One-fourth of all respondents supported increasing taxes on tobacco and alcohol, and 35% of respondents would be willing to volunteer their time to a prevention program. You may want to consider ways to recruit these people to help with your prevention efforts.

Domain IV: Access to Alcohol, Tobacco, and Gambling

How easy do residents believe it is for young people to get access to alcohol and tobacco products in the community? Higher scores on this domain mean residents think adolescents have easier access to alcohol and tobacco products.

Higher score = more perceived access

Lower score = less perceived access

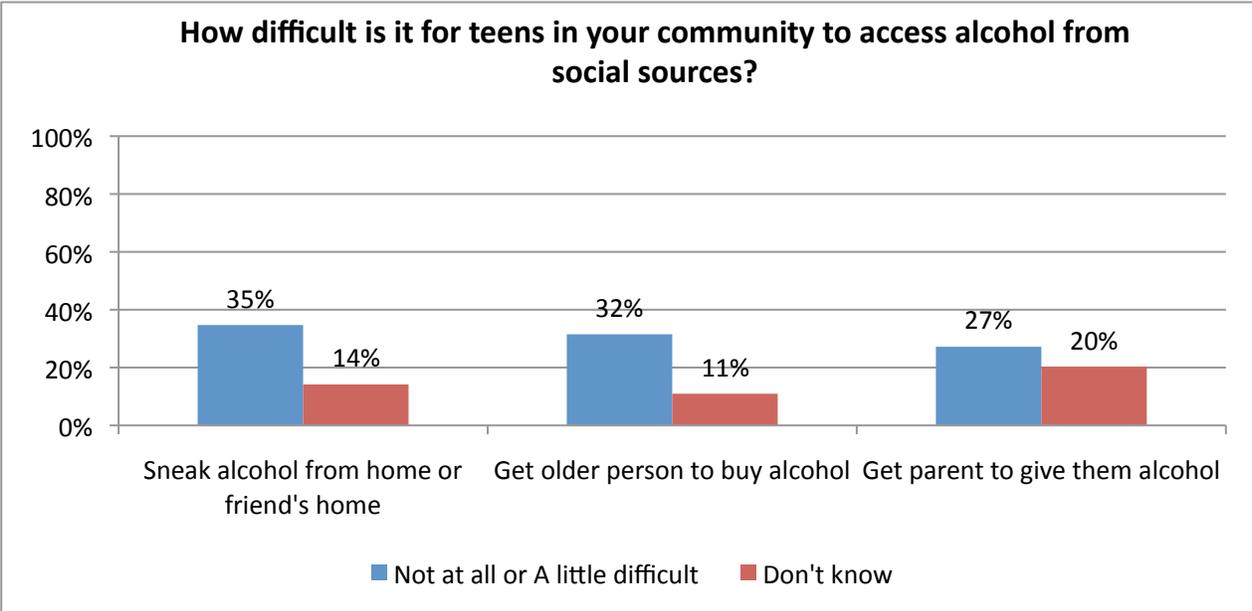
A special note about this domain: Remember, this is about perceptions only. We measured how easy people *think* it is for adolescents to gain access to alcohol, tobacco, and gambling, not how easy it *actually* is. You will want to check with your local law enforcement agency and obtain information about the extent to which your local tobacco and alcohol retailers have passed or failed actual compliance checks. It is also critical that you talk to youth to get their perspectives on access to alcohol, tobacco, other drugs, or gambling. Their comments can add some depth to the results of your Community Readiness Survey.

Also, lower scores could mean that residents are unaware of how easy it is for adolescents to gain access to alcohol, tobacco, or gambling. Or, they could mean that there has been substantial activity in this area, and access has actually been reduced. If your community has conducted compliance checks or implemented environmental policies, then perhaps lower scores are reflective of that progress.

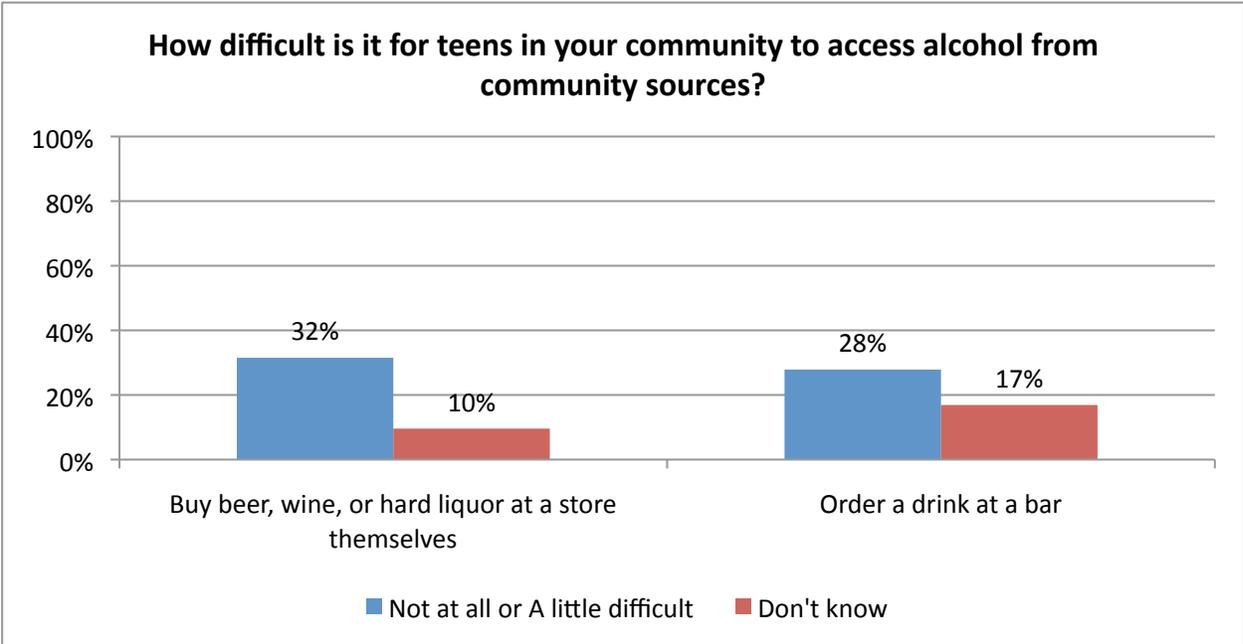
We've grouped the items separately by alcohol, tobacco, and gambling so that you can examine perceived access to each substance separately.

Adolescent Access to Alcohol

Similar to other surveys on youth access, this survey found that social sources (older person, home or a friend's home, parents) are judged to be somewhat easier than commercial sources (ordering at a bar, buying from a retailer). Respondents reported that sneaking alcohol from home or a friend's home (35%), getting an older person to buy alcohol for them (32%), and getting parents to give them alcohol (27%), as not at all or a little difficult. The item on parents is noteworthy—apparently, some respondents believe adolescents can get parents to give them alcohol. Very likely, two groups of parents are being referenced—parents of adolescents themselves, as well as parents of their children's friends. Respondents in your community indicated that 20% “don't know” the extent to which teens get their parents to give them alcohol.

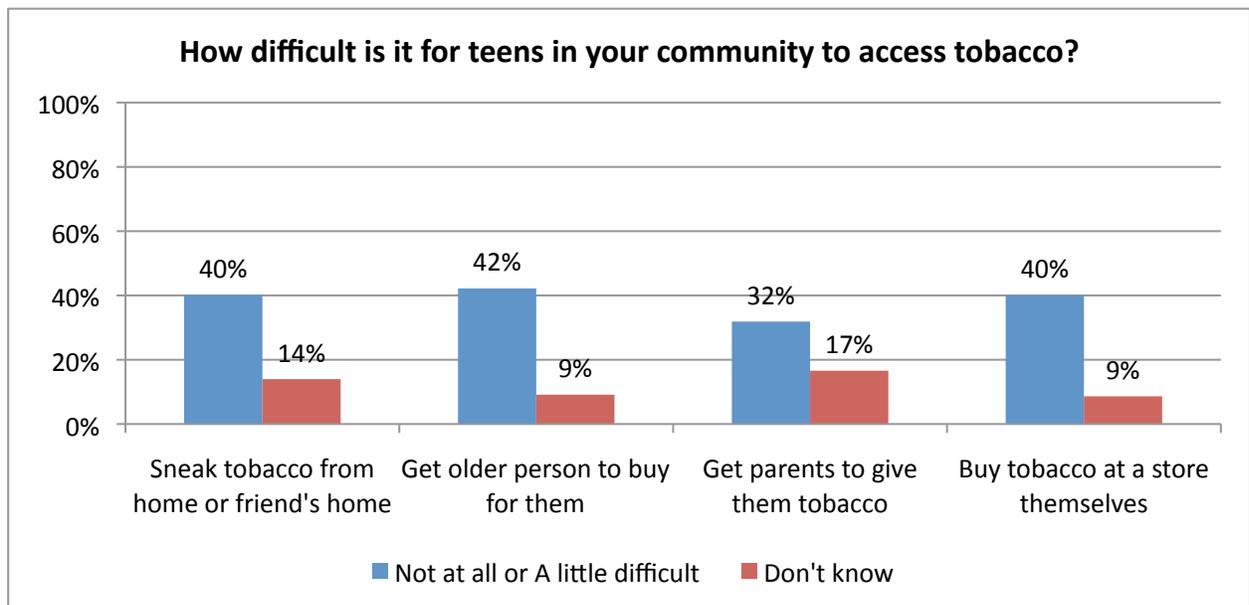


On the commercial side, 32% said it is not at all or a little difficult for teens to buy alcohol at a store themselves, and 28% stated that it is not at all or a little difficult for them to order a drink at a bar. Respondents said that 10% “don’t know” how easy it is for teens to buy alcohol at a store themselves, and 17% said they “don’t know” how easy it is for teens to order a drink in a bar.



Adolescent Access to Tobacco

Respondents reported the following to be not at all difficult or a little difficult. The most commonly perceived source of access to tobacco is for teens to get an older person to buy for them (42%), followed closely by sneaking tobacco from home or a friend's home and buying it at a store themselves. These sources are followed by getting parents to give them tobacco (32%). On the item asking about parents providing tobacco, 17% of respondents indicated that they “don’t know” the extent to which teens are able to get their parents to give them tobacco.



Adolescent Access to Gambling

Respondents reported the following were not at all or a little difficult. Community members believed the easiest access underage youth have to gambling is to gamble on the Internet (30%), get their parents to buy them lottery tickets (28%), or buy lottery tickets for themselves (30%). The least amount of access, according to respondents is, entering a casino (24%) or betting at a track (23%).

On all of these gambling access items, the percentage of “don’t know” responses greatly exceeds the percentage of those who judged gambling to be easily accessible. In your community the “don’t know” responses were the following:

- Bet at a track (40%)
- Gamble on the Internet (30%)
- Enter a casino and play games (33%)
- Get their parents to buy them lottery tickets (29%)
- Buy lottery tickets for themselves (25%)
- Again, these findings suggest an opportunity to increase public awareness and create educational campaigns about problem gambling

Domain V: Perception of Community Commitment

Would this community mobilize around any issue, let alone substance use or problem gambling? What is the level of overall community commitment or apathy? Higher scores on this domain mean residents are more committed.

Higher score = more commitment

Lower score = less commitment

This domain is particularly important in measuring readiness. According to our data, it is highly indicative of a community's ability to make change occur. When reviewing perception of community commitment, it is helpful to consider the data from three points of view:

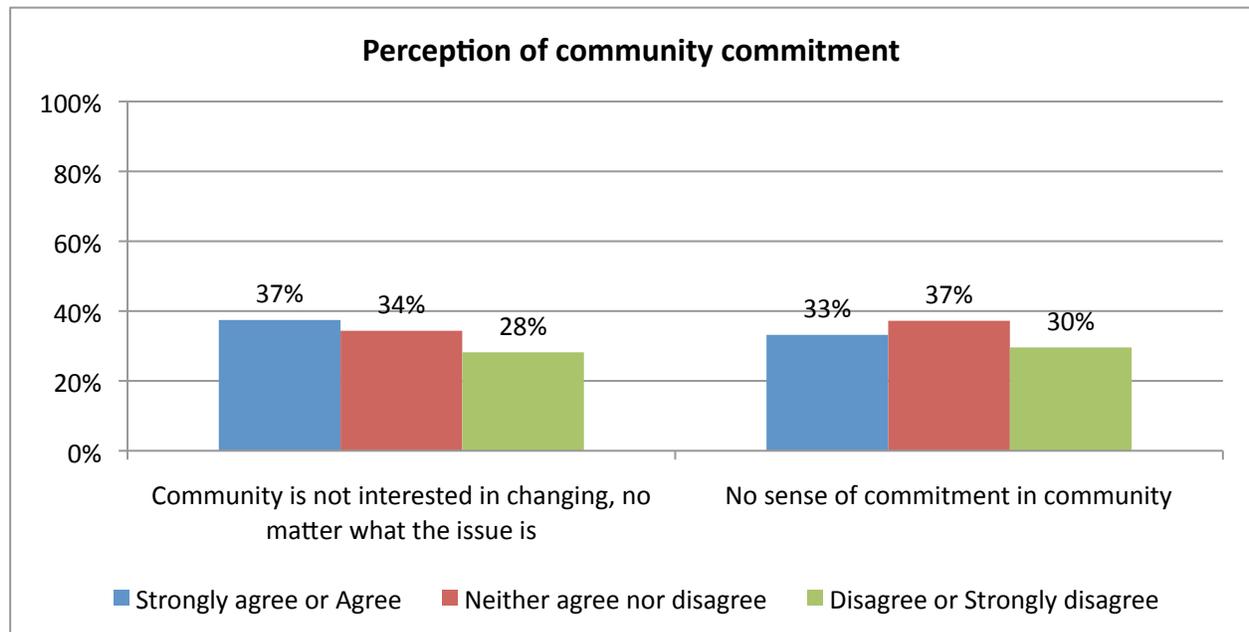
- 1) Those who believe the community is ready and willing to change.
- 2) Those who do not believe the community is ready and willing to change.
- 3) Those who are uncertain about readiness and willingness to change.

Ready and Willing

In your community, 28% of respondents believed that they are interested in changing. An even greater percentage (30%) believed that there is a sense of commitment in the community.

Not Ready and Willing

Thirty-seven (37%) of respondents indicated that they believe the community is not interested in changing, no matter what the issue, and 33% believe that there is no sense of commitment in the community.



Unsure About Readiness and Willingness

And what about the “swing vote”? These are the respondents in the middle, namely the 34% who indicated that they neither agreed nor disagreed with the statement that the community is not interested in changing, and the 37% that neither agreed nor disagreed that there is no sense of commitment in the community. These respondents represent those in the community who may be willing to join community mobilization efforts if they see evidence of success. These persons, along with those who believe the community is able to change, represent potential for increased prevention efforts. To garner support, it may be useful to follow the lead of successful campaigns, that is, to count on those that already believe in the issue, and also go after the “swing vote” for further commitment.

PRESCRIPTION DRUGS

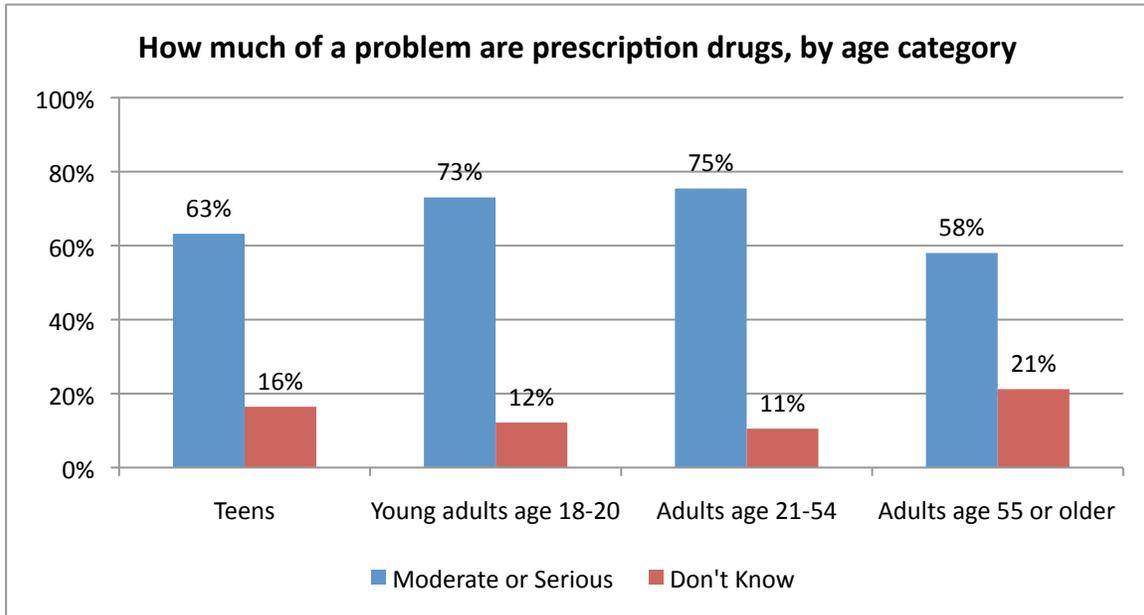
Prescription drug abuse is the use of a prescription medication in a way not intended by the prescribing doctor. Prescription drug abuse includes everything from taking a friend's prescription painkiller for your backache to snorting ground-up pills to get high. Every day, approximately four Ohioans die because of drug-related overdose. In 1999, there were 327 fatal drug overdoses in Ohio. In 2010, there were 1,544, an increase of 372% (Ohio Department of Health Office of Vital Statistics, 2010). Prescription pain relievers are associated with more overdose deaths than heroin and cocaine combined in Ohio (Ohio State Board of Pharmacy, 2010). Specific to Franklin County residents, there were 70 prescription opiates dispensed per person, compared to 67 statewide (Ohio State Board of Pharmacy, 2010).

So how much of a problem is prescription drug abuse in your community? Do community members feel it's acceptable to share prescription drugs? Do community members support policy and prevention efforts that address prescription drug abuse? How do community members access prescription drugs not prescribed to them? This section of the survey seeks to answer these questions.

Domain I: Perception of a Prescription Drug Problem in the Community

How much of a problem are prescription drugs?

Prescription drugs are perceived to be a similar level of a problem for teenagers, young adults age 18-20 and adults age 18-54 than seniors. Fifty eight percent (58%) of survey respondents indicated it is a moderate or serious problem in adults age 55 and older compared to 63% who indicated it is a moderate or serious problem in teens, 73% for young adults age 18-20, and 75% for adults age 21-54. Only 41% of respondents have heard about prescription drug drop-off programs.

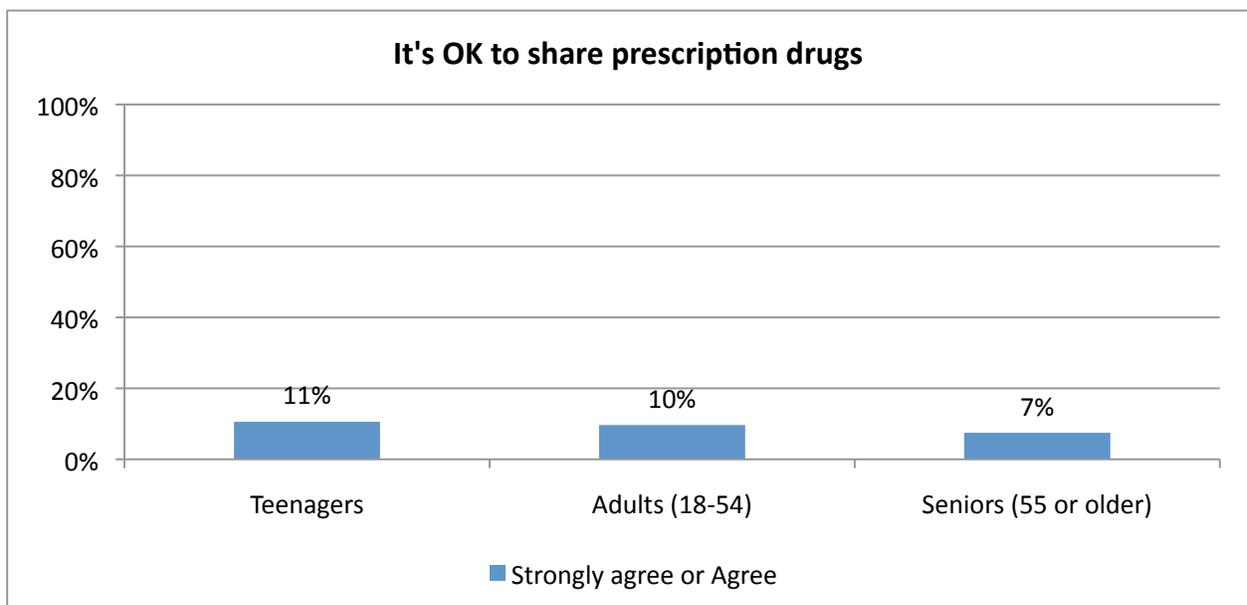


Domain II: Permissive Attitudes Towards Prescription Drug Use

Kids will be Kids...

Forty respondents (18%) agreed with the statement that teens who experiment with prescription drugs not prescribed to them almost always grow out of it.

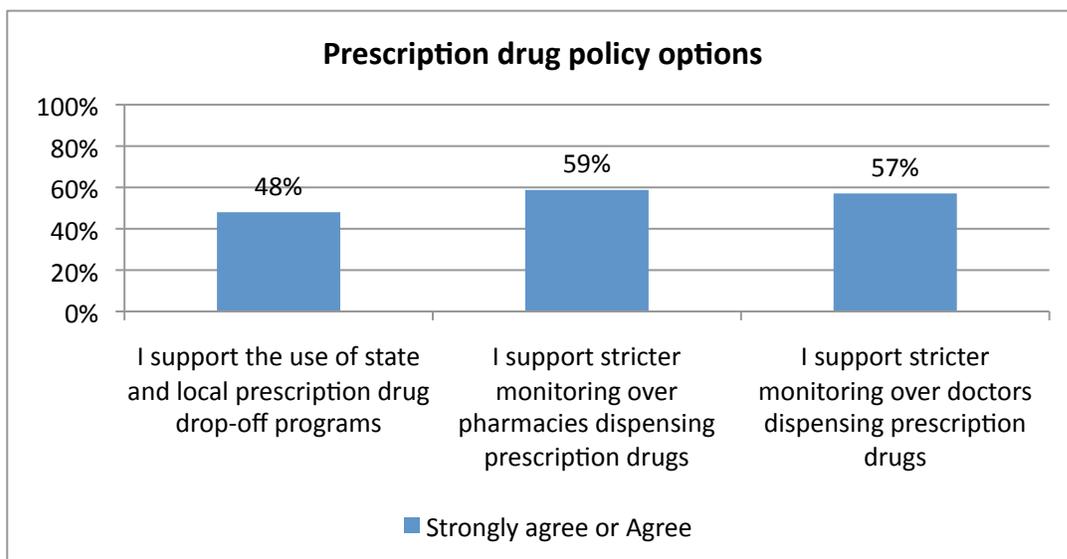
Is it Acceptable to Share Prescription Drugs?



Primary care providers, such as doctors and dentists, for specific medical conditions, prescribe drugs but a growing problem is that often people to whom they are not prescribed are using these drugs. Seven percent of respondents indicated it was okay for seniors' age 55 years or older to share prescription drugs not prescribed to them (7%). This percentage was similar to those responding that it was okay for teenagers (11%) or adults age 18-54 (10%) to share prescription drugs.

Domain III: Support for Prescription Drug Policy and Prevention

Support was strong for different policy options to prevent prescription drug problems. Forty eight percent (48%) of respondents supported state and local prescription drug drop-off programs, and 44% of the respondents reported that prescription drop-off programs are effective in reducing easy access to prescription drugs. Fifty nine percent of respondents (59%) supported stricter monitoring of pharmacies and fifty seven percent (57%) supported stricter monitoring of doctors prescribing practice.

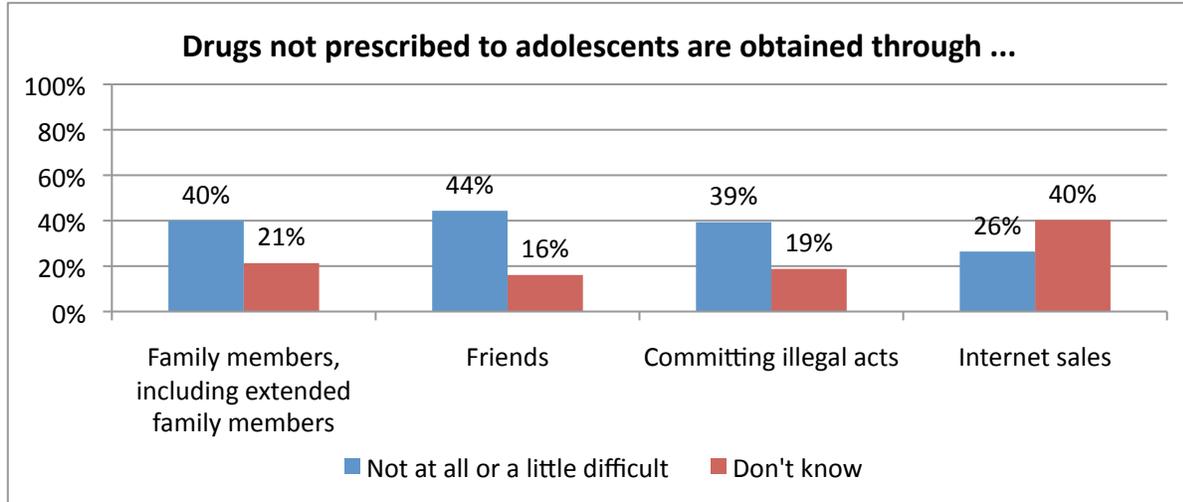


Domain IV: Access to Prescription Drugs

Adolescent Access to Prescription Drugs

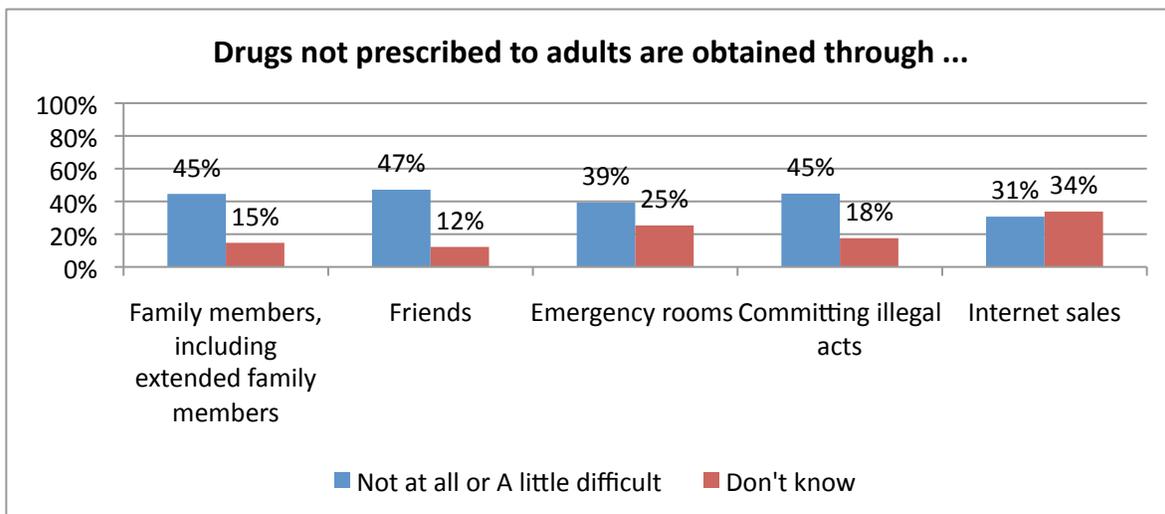
Respondents reported the following to be not at all difficult or a little difficult for adolescents to access prescription drugs. The most commonly perceived sources of access to prescription drugs for teens are through friends (44%), family members (including extended family members) (40%), through by committing illegal acts (39%), and through Internet sales (26%). It would be advantageous to conduct a PSA emphasizing that although it may seem wasteful to dispose of costly prescription medication, properly disposing of unneeded or old medication is one way to prevent prescription drug abuse among family and friends.

Internet sales had a 40% of respondents indicate that they “don’t know,” this is an opportunity to increase public awareness and create educational campaigns about teenagers obtaining prescription drug through the Internet.



Adult Access to Prescription Drugs

Respondents to the survey reported the following to be not at all difficult or a little difficult for adults access prescription drugs not prescribed to them by a healthcare provider. Respondents perceive the most common sources of access to prescription drugs for adults to be through friends (47%), family members (including extended family members), committing illegal acts (45%), emergency rooms (39%), and Internet sales (31%).



Similar to the teen access questions, these findings about adult access to prescription drugs suggest an opportunity to increase public awareness and create educational campaigns about prescription drug sources.

Senior Access to Prescription Drugs

Twenty three percent (23%) of respondents think that seniors age 55 and older visit multiple doctors, also known as doctor shopping, to obtain prescription drugs, and 21% think they share their prescriptions with one each other. Only 21% of respondents think it is okay for seniors' age 55 and older to share prescription drugs (not prescribed to them) with each other.

Domain V: Perception of Community Commitment

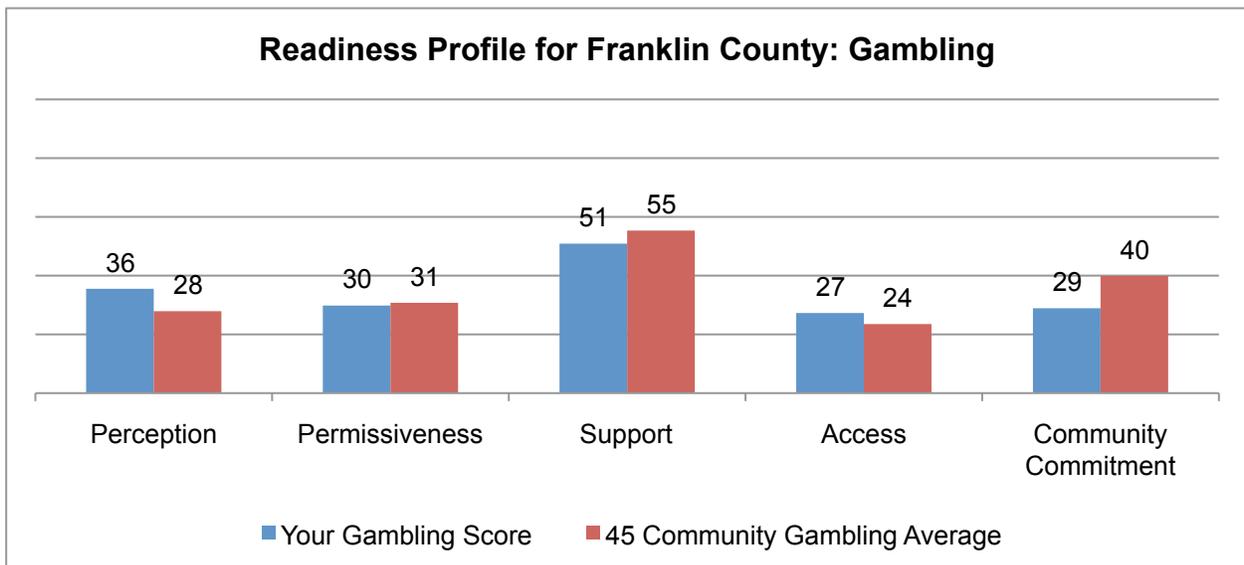
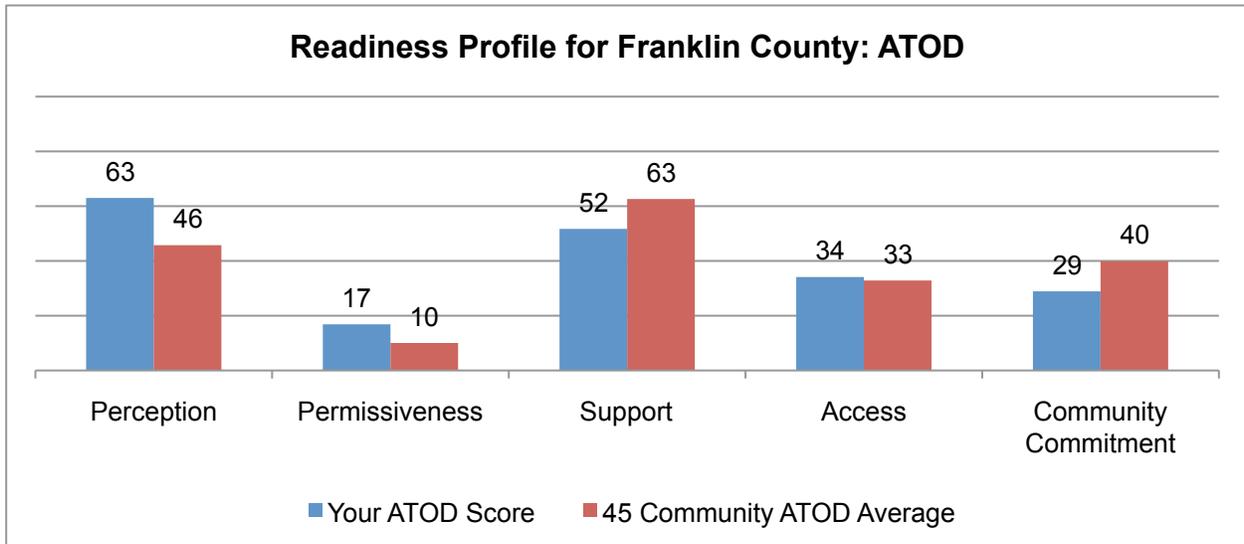
The results of this domain for prescription drugs are the same as that of ATODG. See prior sections for the results.

PUTTING IT ALL TOGETHER

Now that we've studied the trees, let's step back and look at the forest. What is your community's readiness profile? This profile suggests focusing prevention efforts on examining overall community commitment, addressing norms and attitudes about ATOD use, and increasing perception of youth access to alcohol and tobacco products. As is the case with all of the results contained in this report, it is important to keep in mind the large number of young survey respondents.

Although the five domains use the same scale on the following charts, they do vary in the direction that can be considered "good". Lower numbers for permissiveness and access are considered better, while higher readiness communities have higher scores on perception, support, and community commitment.

Your score for each domain is compared to 45 other communities that have participated in the Community Readiness Survey. Below are two bar charts that plot your community's mean scores on the five domains. We have separated the community's readiness for ATOD prevention from readiness for problem gambling prevention. On some domains, there is a noticeable difference.



The prescription drug related questions have not been used on the previous Community Readiness Surveys. Therefore, there are no scores with which to compare your scores. Furthermore, these questions were omitted from the readiness profiles above so as not to skew the data and to allow for a true comparison.

Domain I: Perception of ATOD Problem within Community

Franklin County scored 63 in the Perception domain, much higher than the historical average of 46. This can be interpreted as indicating a high level of community readiness. It means that survey respondents perceived alcohol and drug abuse to be a serious problem in Franklin County. Since community members are already aware of the alcohol and substance abuse situation, efforts to raise awareness should not be necessary.

Domain II: Permissive Attitudes Toward ATOD

In the Permissive Attitudes domain Franklin County scored 17, significantly higher than the historical average of 10. Normally this is interpreted as indicating a lower level of community readiness, however in this instance it is important to keep in mind the much younger age of Franklin County respondents relative to respondents from other communities. The Permissiveness score for the 63 individuals who responded to the mail-based survey was 12, statistically indistinguishable from the average score of 10.

The high overall Permissive Attitudes score suggests that younger respondents believe that some level of substance abuse or gambling is “okay” for either young people or adults. Therefore, it may be possible to capitalize on other norms that exist within the community. The “good news” is that prevention professionals in Franklin County may not have to fight norms and attitudes prevailing in a number of other communities.

Domain III: Support for ATOD Policy and Prevention

Franklin County’s score in the Support domain was significantly lower than the historical average (52 vs. 63). Again, it is important to consider the younger age of Franklin County respondents. When the additional responses from the non-random sample are removed, Franklin County scored 61 in the support domain, also in a statistical dead heat with the historical average.

These findings indicate that there is some level of support for prevention in the community, but that there are significant differences between different subpopulations. Going forward prevention professionals in Franklin County should take this into account. The older population, which has a moderate level of support, should accommodate prevention policies more easily. Efforts targeted at the younger population should focus more explicitly on building support before attempting to implement ambitious prevention policies.

Domain IV: Access to Alcohol, Tobacco

Franklin County scored 34 on the Access domain, statistically indistinguishable from the historical average of 33. The Access domains core did not display the sharp dichotomy observed in the Permissiveness and Support domains, indicating broad agreement between different subpopulations.

A score of 34 can normally be interpreted as representing a moderate level of community readiness, however in the unique case of Franklin County this score may suggest a higher level of readiness in the young adult population. Residents that recognize high levels of access to alcohol and other drugs may be more willing to support policies that curb such access.

Domain V: Perception of Community Commitment

Franklin County's overall score for Community Commitment was 29, significantly and substantially lower than the historical average of 40. The score for mail-based survey respondents was only marginally better at 32. This clearly represents a lower level of community readiness, which is corroborated by the initial mail-based survey's low response rate.

One reason for this may be that community members have been dealing with other social issues perceived as more pressing than ATOD use and problem gambling. Has your community been overwhelmed by unemployment, economic hard times, or even natural disaster? Do residents feel unable to make change on issues that affect the community as a whole? Or, is the population highly mobile or transient? If so, these issues need to be acknowledged alongside or even before tackling the area of substance abuse. Possibly, the community has these concerns foremost on its collective mind.

Prescription Drugs

Prescription drugs are marketed more broadly to the general public as safe and effective when used correctly; however the counter-marketing message that they are also harmful and addictive when abused, can be a difficult to convey. Thus, the community needs to focus efforts on the overall dissemination methods of accurate awareness information, the serious health consequences involved, as well as the addiction potential.

Prescription drugs can be powerfully addictive and their abuse accompanied by toxic and sometimes fatal consequences. The community is aware of the issue and is concerned; however most community members are not aware of the drop off sites within the community, as well as the registry used by pharmacy's to track the distribution of commonly abused drugs.

Next Steps

Franklin County's community readiness profile depicts a community with high levels of readiness in some areas and low levels in others. The use of the two different sampling strategies allows us to compare the respondents from the two populations and provides a more complete, nuanced portrait of Franklin County's community readiness. Viewed in its entirety the results from Franklin County's Community Readiness Survey paint a portrait of a community that believes that it has an alcohol and drug abuse problem and supports taking actions to address that problem, but is pessimistic that any of these actions will be effective.

What do these results mean in terms of prevention policies? The survey results indicate that Franklin County young adults would likely be receptive to harm reduction approaches, such as safe rides home or needle exchanges. Such interventions, while not aiming to reduce alcohol and

substance abuse directly, but can be very effective at reducing the harm to society that results from alcohol and substance abuse. Harm reduction interventions are particularly appropriate for this age demographic given high levels of doubt and low levels of buy-in.

Older respondents to the Community Readiness Survey displayed a higher level of community readiness than their younger counterparts. Community Readiness Survey results depict a population ready to take significant steps to address alcohol and substance abuse in Franklin County, and reveal an opportunity for prevention professionals to show the community that prevention can be effective.

Prevention professionals should have much less difficulty in securing support from older Franklin County residents. Interventions that do not require buy-in from younger residents can be proportionately more ambitious. Policies that prevention professionals may want to consider include effective prescription drug drop off programs, pharmacy-based prevention efforts, and stricter monitoring of prescription pain relievers. Successful interventions will help to show community members that prevention can be effective, and may ultimately help to increase levels of community commitment.

CONSIDERATIONS

To determine how representative your sample of respondents is (and how generalizable these results are to the overall population), obtain actual census data on community residents. The demographic categories (e.g., age, ethnicity, level of education) used in the Community Readiness Survey match those used by the Census Bureau, therefore you can compare apples to apples. Examine, for example, the percentage of senior citizens that actually live in your community versus the percentage of those who responded to the survey. Doing so will help answer the question of how closely the respondents mirror the community's actual demographics.

It may also be useful to collect and review other sources of information. These may include:

- Compliance check data (from law enforcement)
- Arrests related to ATOD use (from law enforcement)
- Hospital admissions related to ATOD use (from local hospitals or public health agencies)
- Alcohol or drug related crashes, injuries, and deaths (from state department of public safety)
- School/Student surveys
- County-level data from Ohio's Department of Alcohol and Drug Addiction Services,

available at: <http://www.odadas.ohio.gov/SEOW/Counties.aspx>

- US Census data on Franklin County, available at: <http://quickfacts.census.gov>

Appendix III: Additional Individual Level Information

Tell us about you and marijuana

1. Think specifically about the past 30 days. During the past 30 days, on how many days did you use marijuana or hashish?

_____ days

2. How do you feel about someone your age trying marijuana or hashish once or twice?

___ Approve

___ Neither approve nor disapprove

___ Somewhat disapprove

___ Strongly disapprove

3. How do you feel about someone your age using marijuana or hashish once a month or more?

___ Approve

___ Neither approve nor disapprove

___ Somewhat disapprove

___ Strongly disapprove

4. How old were you the **first time** you used marijuana or hashish?

_____ years old ___ never used

5. How much do people risk harming themselves physically and in other ways when they smoke marijuana one or twice a week?

___ No risk

___ Slight risk

___ Moderate risk

___ Great risk

6. During the past 12 months, do you recall hearing, reading, or watching an advertisement about the prevention of substance use?

___ Yes ___ No

7. In the past 30 days how many days have you used marijuana at the same time you were drinking alcohol?

_____ days



Because We're All In This Together—
We Want To Know

Please check or write in the answer that is most true for you. No names, please. We hope you feel free to be completely honest since your answers are not attached to you personally. Your answers to the following questions will help us get a better understanding of some of the things facing young adults in Franklin County and a better understanding of young adult substance use.

Tell us about you

1. How old are you? _____ years old

2. Are you: Male ___ Female ___

3. Are you a parent? Yes ___ No ___

4. Highest grade of school completed:

___ Less than high school graduate

___ High school graduate or GED

___ Some Technical/Vocational School

___ Some College

___ Technical / Vocational School

degree

___ College Graduate

5. Are you registered to vote?

___ Yes ___ No

6. How many people live in your household? _____

7. How many people in your household are Children under 18? _____

8. What is your race?

___ White or Caucasian

___ African American or Black

___ Native American

___ Asian

___ African

___ Latino

___ Mixed

___ Other

Thank You!



Tell us about you and work

1. If you are employed full- or part-time, how many hours do you work per week?
_____ hours

2. In the last 3 months, have you been disqualified for employment or lost a job because you failed a drug test?
_____ Yes _____ No

3. Would you be more likely or less likely to want to work for an employer that tests its employees for drug or alcohol use on a random basis?
_____ More likely
_____ Less likely
_____ Would make no difference

4. When looking for a job, have you used any of the following sources?

Public Library Yes _____ No _____

COWIC Yes _____ No _____

On line lists of jobs Yes _____ No _____

Job Readiness Program
Yes _____ No _____

Applied for a job on line
Yes _____ No _____

5. Are you looking for a job right now?
_____ Yes _____ No

Tell us about you and housing

1. Do you think your neighborhood is safe?
_____ Yes _____ No

2. Are you friends with some of your neighbors?
_____ Yes _____ No

3. Is your housing in decent shape?
_____ Yes _____ No

4. What kinds of things are in your neighborhood?

Carry out store Yes _____ No _____

Full grocery store Yes _____ No _____

Park or green area Yes _____ No _____

Gas station Yes _____ No _____

Library Yes _____ No _____

Church Yes _____ No _____

Streetlights Yes _____ No _____

School Yes _____ No _____

Daycare Yes _____ No _____

Tell us about you and health

1. When was the last time you saw a doctor or nurse for a check-up (when you were not sick or injured)?

_____ During the last 12 months

_____ Between 12 and 24 months ago

_____ More than 24 months ago

_____ Never

_____ Not sure

2. When was the last time you saw a dentist for a check-up, exam, teeth cleaning or other dental work?

_____ During the last 12 months

_____ Between 12 and 24 months ago

_____ More than 24 months ago

_____ Never

_____ Not sure

3. On an average night, how many hours of sleep do you get?
_____ hours

4. Where do you get most of your health care?

_____ Free or low cost clinic

_____ Private doctor's office

_____ Emergency room

5. How do you describe your weight?

_____ Very underweight

_____ Slightly underweight

_____ About the right weight

_____ Slightly overweight

_____ Very overweight

6. How many cigarettes do you smoke a day?

_____ None

_____ Up to 1 pack

_____ 1 - 2 packs

_____ More than 2 packs

Tell us about you and music

1. What is your favorite kind of music?

_____ Gospel / Inspirational

_____ Hip Hop / Rap

_____ Jazz

_____ Rock

_____ Rhythm and Blues / Soul

_____ Reggae

_____ Spoken Word

_____ Latino

_____ Blues

_____ Other

Tell us about you and electronics

1. Do you have access to the internet?
 Yes No
2. Do you have an e-mail account?
 Yes No
3. Do you use Twitter?
 Yes No
4. Do you post on YouTube?
 Yes No
5. Do you have a Facebook page?
 Yes No
6. Have you ever taken a course on line?
 Yes No
7. What electronic devices do you have access to?
 Desktop computer Smart phone
 Laptop computer Cell phone
 iPad or similar
8. How often do you visit a social networking Web site like Facebook or MySpace?
 Never
 A few times a year
 Once or twice a month
 At least once a week
 Almost every day
9. How often do you play electronic games?
 Never
 A few times a year
 Once or twice a month
 At least once a week
 Almost every day

Tell us about you and how you deal with problems

1. If you needed to turn to someone for advice or guidance, who would you most likely select?
(Please select your one best answer).
 Parent Employer
 Brother or Sister Teacher
 Spouse Clergy
 Significant Other Professional Counselor
 Friend

Tell us about you and things you like to do

These are some kinds of things you might do. How often do you do each of the following?

Play a musical instrument or sing

- Never A few times a year Once or twice a month
 At least once a week Almost every day

Do creative writing – poems, raps, journals, open mike

- Never A few times a year Once or twice a month
 At least once a week Almost every day

Actively participate in sports, athletics, or exercising

- Never A few times a year Once or twice a month
 At least once a week Almost every day

Do art or craft work

- Never A few times a year Once or twice a month
 At least once a week Almost every day

Work around the house, yard, garden, car, etc.

- Never A few times a year Once or twice a month
 At least once a week Almost every day

Go to a shopping mall

- Never A few times a year Once or twice a month
 At least once a week Almost every day

Spend at least an hour of leisure time alone

- Never A few times a year Once or twice a month
 At least once a week Almost every day

Read books, magazines, or newspapers

- Never A few times a year Once or twice a month
 At least once a week Almost every day

Tell us about you and alcohol

1. Think specifically about the past 30 days. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?

_____ days

2. Think about the first time you had a drink of an alcoholic beverage. How old were you the first time you had a drink of an alcoholic beverage? (Please do not include any time when you had only a sip or two from a drink.)

_____ years old

3. How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?

- Approve
 Neither approve nor disapprove
 Somewhat disapprove
 Strongly disapprove

4. How do you like to drink?

- I do not drink
 Just a glass or two
 Enough to feel the effects of alcohol a little
 Enough to feel the effects of alcohol a lot
 Until I get really drunk

5. Did a parent or care-giver have a problem with alcohol?

Yes No

6. How much do people risk harming themselves physically and in other ways when they have five or more drinks of an alcoholic beverage once or twice a week?

- No risk
 Slight risk
 Moderate risk
 Great risk

7. What was the size of the TYPICAL can, bottle, or glass of beer you drank during the last 12 months?

- I do not drink beer
 8 oz. (e.g., Budweiser mini-can, Little Kings small bottles)
 12 oz. (e.g., typical can or bottle of beer)
 16 oz. (e.g., "talls" or aluminum "bottles" of beer)
 24 oz. (e.g., double-size cans)
 40 oz. (e.g., forty)

8. What was the TYPICAL type of beer that you drank during the last 12 months?

- I do not drink beer
 Regular Beer (e.g., Budweiser, Miller, etc.)
 Lite beer (e.g., Bud Lite, Miller Lite, etc.)
 Ice Beer (e.g., Natural Ice, Bud Ice, Icehouse)
 Malt liquor (e.g., Colt 45, Olde English, Country Club, etc.)

Tell us about you and things you do for fun

These are some kinds of things you might do. How often do you do each of the following?

Watch TV :

Never A few times a year Once or twice a month
 At least once a week Almost every day

Go to movies

Never A few times a year Once or twice a month
 At least once a week Almost every day

Go to concerts

Never A few times a year Once or twice a month
 At least once a week Almost every day

Go to church or a church-related event

Never A few times a year Once or twice a month
 At least once a week Almost every day

Get together with friends informally

Never A few times a year Once or twice a month
 At least once a week Almost every day

Go to taverns, bars, or nightclubs

Never A few times a year Once or twice a month
 At least once a week Almost every day

Go to parties or other social affairs

Never A few times a year Once or twice a month
 At least once a week Almost every day

Ride around in a car (or motorcycle) just for fun

Never A few times a year Once or twice a month
 At least once a week Almost every day

FCUC USAGE SURVEY 2012 RESULTS SUMMARY

Coalition members conducted a survey of 18-25 year olds living in the urban core of Columbus. Respondents were drawn from attendees at neighborhood community festivals. FCUC obtained 537 surveys meeting this criteria.

Demographics

Gender: 276 males 261 females	65% are registered to vote
Race: 72% African-American 11% White 7% Mixed 3% African 2% Latino 2% Other 1% Asian 1% Native American	34% are parents Average household size is 3.6 Average number of children (less than 18) per household is 1.5 28% have less than a high school education 38% are high school graduates (or GED) 4% have some technical or vocational school training 19% have some college education 3% have a technical or vocational degree 6% are college graduates

Work

44% are not employed
9% work 10 hours or less per week
11% work between 10 and 20 hours per week
11% work between 21 and 35 hours per week
25% work full time over 35 hours per week
51% are currently looking for a job

8% have been disqualified for employment or lost a job because of a failed drug test (last 3 months)

30% would be more likely to want to work for an employer that randomly tests its employees for drug or alcohol use

When looking for a job:

60% have used the public library
31% have used COWIC
56% have consulted an online list of jobs
30% have participated in a job readiness program
75% have applied for a job online

Marijuana

56% have not used marijuana in the last 30 days
10% have used marijuana 1-5 days in the last 30
8% have used marijuana 6-14 days in the last 30
16% have used marijuana 15 or more days in the last 30

18% approve of someone trying marijuana once or twice
39% neither approve or disapprove of someone trying marijuana once or twice
16% somewhat disapprove
26% strongly disapprove

Respondents had the same proportional attitude about someone using marijuana once a month or more

43% report that they have never used marijuana
7% were 10 years old or younger the first time they tried marijuana
37% were 11-18 years old the first time they tried marijuana
2% were over 18

29% said that those who smoke marijuana more than once or twice a week pose no risk to themselves.
27% said there would be a slight risk
22% said there would be a moderate risk
18% said there would be a great risk

62% have heard or seen an advertisement about the prevention of substance abuse

65% said they had not used marijuana and alcohol together in the last 30 days
8% said they had used marijuana and alcohol together 1-5 times in the last 30 days
7% said they had used both marijuana and alcohol together 6-15 times in the past 30 days
20% said they had used both marijuana and alcohol together more than 15 days in the past 30

Music

79% like hip hop
30% like gospel
21% like rhythm and blues
18% like reggae
16% like jazz
13% like rock
13% like other kinds of music
9% like spoken word
7% like blues
5% like latino

Housing

57% report that their neighborhood is safe
74% are friends with some of their neighbors
82% say that their housing is in decent shape

Respondents indicated that their neighborhoods have the following:

Carry out store - 83%
Full Grocery store - 61%
Park or green area - 65%
Gas Station - 82%
Library - 72%
Church - 83%
Streetlights - 86%
School - 84%
Daycare - 66%

Alcohol

50% of respondents said they have had no alcohol in the last 30 days
21% said they have used alcohol 1-5 times in the last 30 days
14% said they have used alcohol 6-15 days of the last 30
8% said they used alcohol more than 16 days of the last 30
7% did not answer the question

21% stated they have never tried alcohol
6% said they were 10 years old or younger the first time they used alcohol
42% said they were between 11 and 18 years old
11% did not answer the question

11% approve of someone their age having 1 or 2 drinks nearly every day
31% neither approve or disapprove
24% somewhat disapprove
31% strongly disapprove

46% said they do not drink
21% said that when they drink they prefer just a glass or two
21% said they like to drink enough to feel the effects of alcohol a little
6% said they like to drink enough to feel the effects of alcohol a lot
3% said they like to get really drunk

41% said a parent or care-giver had a problem with alcohol

15% said that there is no risk if people have 5 or more drinks once or twice a week.

19% said there is a slight risk

27% said there is a moderate risk

35% said there is a gret risk

64% said they do not drink beer

7% said they drink an 8 oz beer

14% drink a 12 oz beer

3% drink a 16 oz beer

4% drink a 24 oz beer

5% drink a 40 oz beer

10% said they drink regular beer

8% drink lite beer

4% drink ice beer

6% drink malt liquor

Appendix IV: Additional Interpersonal Information

An Innovator Identifies an Alarming Trend for Young People: Listening to Rap Music Could Be Dangerous to Their Health

Denise Herd, PhD, received one of five \$300,000 awards in 2000 from the RWJF Innovators Combating Substance Abuse national program

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The Problem: Rap artists serve as trend-setters and role models for many young people, especially African Americans, making rap music an important form of popular culture. Anecdotally, many stakeholders believe that rap music has increasingly glamorized drugs, drug use and unhealthy lifestyles.

Grantee Perspective: Denise Herd, PhD, used her medical anthropologist background and rigorous quantitative methods to explore the hypothesis that rap music has increasingly glamorized the use of illegal drugs by associating drug use with wealth and high social standing.

“As a medical anthropologist, I am interested in the relationship between cultural beliefs, specifically looking at multicultural differences, and health behavior and health status. If rap music is what young blacks are listening to, we need to understand what messages are in the music,” she says. “They are getting a lot of their ideas about appropriate social behavior and health behavior from this music.”

Herd and her research team analyzed rap music lyrics of 341 songs, selected by popularity, from 1979 to 1997. They recorded the number of mentions of drug references such as snorting or injecting, selling drugs, drug paraphernalia and altered states of being. She then rated the attitudes towards drugs expressed in the songs as positive if they articulated enjoyment, sexual prowess, high social status or creativity; neutral; ambivalent; or negative if they expressed adverse health consequences, legal problems or drug addiction. She found a six-fold increase in the number of songs with drug references over the period studied: 69 percent of the songs from 1994–97 mentioned drugs compared to 11 percent from 1979–84. Some 58 percent of songs with drug mentions from the most recent three-year period examined expressed a positive attitude toward drugs.

“It is a complex issue with probably more than one explanation why there has been such a dramatic increase in songs mentioning drugs,” says Herd. “The earlier trend for rap music was to have an anti-drug song, message rap,” she says, with the lyrics drawing on the personal experience of rappers and drug addiction in their families; protesting the devastation drugs wrought in the community. “But when a rap group realized that their music became successful when they mentioned marijuana use, it became a trend. When something has a lot of commercial success, it gets repeated over and over. Commercialization of the music seems to be at least partially responsible for the increase in drugs being mentioned.”

Herd's paper, "Changes in Drug Use Prevalence in Rap Music Songs, 1979–1997," received wide media coverage when it was published this April in *Addiction Research and Theory*. She hopes that is just the beginning of a greater awareness of rap music content, and that her research is "giving people something concrete to work with."

When she was on a radio show in Chicago after the paper appeared, she says "people called in and said 'yes, we remember when rap was different.' I have documented the shift. I want to call attention to what is being promoted over the airwaves every day—and it is not positive."

A number of actions can be taken to counter the negative messages in rap music, according to Herd. "Many adults don't really listen to or understand the music. Parents need to be aware that rap music has a lot of appeal and is very compelling to very young children. They need to spend time with their children and monitor their media use—to the extent they can."

"There also is a societal responsibility here," says Herd. "Parents are not responsible for what goes on the airwaves, so regulatory bodies also need to be involved. The industry needs to make sure more constructive messages are coming out of the music."

"The glamorization of drugs and alcohol is part of the appeal for kids with few resources," says Herd. "They idealize having a career as a rapper or idealize the lifestyle of drug dealers. They need some alternatives—solid education opportunities, solid job opportunities, solid recreation opportunities—to make [those other routes] less appealing."

"Early rap was helpful for black communities, and it is possible to have rap music send out many more positive messages," says Herd.

Next on her research agenda, Herd is examining the level of violence in rap music. She also would like to study the impact of rap music on listeners and their levels of substance use.

Herd received one of five \$300,000 awards in 2000 from the RWJF Innovators Combating Substance Abuse national program. She calls the award invaluable. "I had the freedom to work on a on a topic that might not be funded through some of the traditional channels that fund health-related research. Because it was a distinguished prize, it spotlighted the importance of the work—and helped elevate and legitimize the research for universities."

RWJF Perspective: "Denise Herd is a great example of an Innovator," says Michelle Larkin, RN, MS, JD, RWJF senior program officer. "She was recognized for the contribution she made to the field and then used the grant award to do some innovative work that sparked a tremendous amount of discussion and changed our thinking about societal influences on substance use."

The Innovators program recognizes leaders within the field of tobacco, alcohol and illicit drugs and provides them with funding to do inventive projects. In addition to traditional substance abuse researchers, other Innovators include a clean-air advocate, a trauma physician, an epidemiologist, a lawyer and an artist.

“We wanted to provide grant money so that these leaders could continue to be creative and carve new paths that would advance the field and reduce the burden of substance use and abuse on this country,” says Larkin.

The program closes in 2008 as the final round of Innovators complete their projects. “We continue to actively work to disseminate lessons that emerged from our work in addiction prevention and treatment,” Larkin says. “The people who were selected as Innovators for their commitment and contributions to the field of addiction prevention and treatment deserved to be recognized; it was a way to say ‘thank you for doing groundbreaking work’ and to give them the flexibility to continue to forge new paths.

<http://www.rwjf.org/en/about-rwjf/newsroom/newsroom-content/2008/05/an-innovator-identifies-an-alarming-trend-for-young-people--list.html> downloaded 4/24/2013

African American Male Discipline Patterns and School District Responses Resulting Impact on Academic Achievement: Implications for Urban Educators and Policy Makers

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This study, utilizing a sample of more than 3,500 African American males in a Midwestern urban school district, investigates the discipline patterns of African American males and school district responses that impact their academic achievement on state standardized tests. To fulfill the goals of this study, we have four interrelated objectives: (1) to investigate all documented behavior occurrences of African American males in comparison to their peers during the 2005-2006 academic school year; (2) to detail the discipline responses recommended by the school district for these offenses; (3) to calculate the total amount of class time missed as a result of school district prescribed resolutions; and (4) to provide a connection to performance on standardized test reporting for the larger African American student population in this urban school district. As a result of the findings of this study, recommendations will be made for educators and policy makers to improve the discipline patterns and academic performance of African American males.

Over the past three decades, scholars have investigated the schooling experiences of African American students, particularly African American male students in the area of school discipline (Skiba & Knesting, 2001; Townsend, 2000). The intensity of these scholarly investigations have focused on the common phenomenon of the ‘discipline gap’ that often occurs in many K-12 educational environments, particularly in urban school settings (Lewis,

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Hancock, James, & Larke, 2008; Skiba, Peterson & Williams, 1997; Skiba, 2002). Namely, many of these studies over the past three decades have identified the most frequent targets of unfair discipline practices--African American males (Lewis, et al, 2008; Townsend, 2000). Paradoxically, the research literature underscores the fact that African American males are no more likely than their racial and ethnic peers to be discipline problems in the classroom; however, many schools and school districts, particularly in urban environments, continue to mete out harsher discipline punishments to this cohort. To further problematize this situation, limited literature exists which links the impact that harsher discipline punishments exact on the performance of African American males in the classrooms, specifically their performance on standardized tests.

To contribute to addressing the problems associated with a paucity of research, this study examines African American male discipline patterns in one urban Midwestern school district. More specifically, this study examines this school district's responses to discipline and disciplinary actions that were meted out to African American students and the resulting impact on these students' academic achievement. As a result, this study is centered on four interrelated objectives, objectives excogitated from a thorough review of the literature surrounding this topic. Specifically, this study first uncovers all documented behavior occurrences among African American male cohorts in comparison to other ethnic group peers during the 2005-2006 academic years in the Midwestern school district under examination. Second, this study details the discipline responses recommended by the school district for these behavior occurrences. Third, we provide a calculation of the academic class time missed by African American males as a result of prescribed discipline resolutions enforced by the school district under examination. Fourth, this study illuminates African American males' performance on standardized tests, extrapolated from reports of the overall African American student population. Finally, as a result of the study findings, recommendations will be made for educators and policy makers to more effectively structure disciplinary processes and procedures in an effort to promote the success of African American males.

African American Students and School Discipline

School Discipline and the Policies that Govern

Behavioral problems within United States public school contexts are generally handled by the suspension and/or expulsion of students who are deemed disruptive. These practices are in large part due to the widespread and contentious adoption of the rigid *zero tolerance* approach to discipline (Leone, Mayer, Malmgren & Meisel, 2000; Skiba & Knesting, 2001). Broadly speaking, zero tolerance refers to policies that harshly punish all forms of student misconduct and wrongdoings with little or no regard to the severity of the offense that is committed. This policy is known to have originated during the early 1980s as a response to federal policies that were developed to combat the war on drugs by imposing "immediate, harsh, and legally mandated punishments" on dealers/ drug traffickers (Wallace, Goodkind, Wallace & Bachman, 2008, p. 47). Almost a decade later, zero tolerance policies have continued to gain momentum and have subsequently spawned the Gun Free Schools Act of 1994--an Act which mandates that local educational agencies expel students, for a minimum length of one year, if they are caught with a weapon on school premises (20 U.S.C. Chapter 70 Section, 8921). The implementation of

this particular legislation has been extended and in turn has incited the widespread use and application of school-based zero tolerance policies for infractions also linked to alcohol, drugs, insubordination, and tardiness (Kaufman et al., 2000; Wallace, et al, 2008).

Past research investigations that have taken on the topic of zero tolerance have tended to focus on the implications of this policy on its most impacted victims, marginalized populations (e.g. African Americans) (Lewis et al, 2008). According to Fuentes (2003), the most nefarious implication of this policy is its negative impact on students' academic performance; students are essentially rendered incapacitated when they are suspended from the classroom setting in a time span as short as two or more days (Fuentes, 2003). Thus, one of the major criticisms of the zero tolerance policy is that it not only contributes to the loss of critical classroom instructional time but also inherently gives way to unsupervised activities that students engage in external to the school setting (Office of Special Education Programs, 2001; Townsend, 2000). It is the combination of these and other concerns that have led researchers to conduct additional investigations into this congeries of problems associated with zero tolerance policies.

Findings from these investigations yield evidence that purports a strong correlation among negative outcome variables such as: (a) dropping-out, (b) disaffection and alienation, (d) delinquency, (e) retention, (f) academic failure and (g) school suspensions/expulsions when applied to this group (Ekstrom, Goertz, Pollack & Rock, 1986; DeRidder, 1991; Bock, Tapscott & Savner, 1998; Bakken & Kortering, 1999; Brooks, Schiraldi & Zindenberg, 1999; Costenbader & Markson, 1994; Skiba, Peterson & Williams, 1997; Skiba, 2002). For all purposes, if the conclusions from these investigations accurately interpret the overrepresentation in the use of harsher disciplinary practices (i.e. corporal punishment, expulsion, etc.) for African American students, there is reason to believe that this population is more susceptible to lower classroom performance than their peers. Said differently, if African American students are removed from their educational environments for extended periods of time, there is less time dedicated towards learning. Hence, these students are not actively engaged in the classroom learning context, opportunities for their academic development become severely attenuated. In sum, it is plausible to contend that the dismal state of student performance among some African American students is potentially an unintended consequence of the zero tolerance policy.

African American Male Students and Disciplinary Practices

The disproportionate disciplinary representation of African American male students is a burgeoning topic that has permeated not only the literature on scholarship, but also the literature on pedagogy. With respect to scholarship, several researchers have repetitively asserted that African American males are dealt what Monroe (2006) calls an *uneven hand*, implying that African American males are oftentimes “targeted for disciplinary action in the greatest numbers” (Monroe, 2005, p. 46; see also Children’s Defense Fund, 1975; Gonzalez & Szecsy, 2004; Skiba, Michael, Nardo & Peterson, 2000; Skiba & Peterson, 1999; Ferguson, 2000; Skiba & Rausch, 2006). Despite the lack of conclusive evidence supporting the claims that African American males display higher levels of disruptive behavior, this group of students tends to be suspended and/or expelled at higher rates—two to three times higher- than their counterparts (Skiba, Michael, Nardo & Peterson, 2000; Townsend, 2000; Wu, Pink, Crain & Moles, 1982). Behavior, in this sense, is but a weak predictor of cross-racial variations in the imposition of disciplinary sanctions.

A more vivid picture of this disproportionality can be drawn from the following empirical findings; namely, Raffaele Mendez and Knoff (2003) found that African American children account for 17% of the student population, yet they constitute approximately 33% of all suspensions (see also Education Trust, 1998). Additionally, Gregory and Weinstein (2008) observed similar dynamics in a study they completed, reporting that while African Americans made up 58% of students referred to the office for defiance related infractions, they constituted only 30% of the total student enrollment. Contrastingly, their White peers comprised only 5% of defiance referrals and made up roughly 37% of the student body (Gregory & Weinstein, 2008). In alignment with the previous research, Wallace et al. (2008) concluded from their analysis that African Americans males represented a startling 330% of the number suspensions and expulsions, roughly 3.3 times the rate of their White male peers. Similar investigations into the overrepresentation of African American males also report findings consistent with these above mentioned studies. As it stands, according to the extant literature, African American males have the highest reported suspension rates, followed by White males, African American females, and White females, respectively (Skiba et al., 2002).

These daunting statistics can be explained at least in part by: (a) racial discrepancies in the dispensation of disciplinary measures that result in more severe consequences for African American males; (b) the proliferation of zero tolerance policies; (c) interpersonal and cultural misunderstandings; and/or (e) the attitudes of school personnel (Bireda, 2002; Tucker, 1999). A review of the last two explanations provides a forum for discussion related to the relevance of pedagogy for closing what is referred to as the *discipline gap*—a concept coined to draw attention to the disproportionate discipline policies and procedures meted out to certain student groups at rates that supersede (sometimes drastically) this group's statistical representation in a particular school population.

According to Monroe (2005), the idea of culturally relevant pedagogy- which for the purpose of her work she formally labels as cultural synchronization- has implications that extend beyond academic achievement (Irvine, 1990; Ladson-Billings, 1994); cultural synchronization spills over into other areas, such as classroom management. The theory of cultural synchronization posits that if practitioners would balance their school disciplinary practices with those that mirror the students' lived reality, particularly their home disciplinary practices, then they (i.e. the practitioners) will be more successful with these students in managing classroom engagements. This level of understanding related to cultural contexts in schools is perceived to be a necessary and sufficient condition for classroom-based learning. As a result, the more equipped teachers are to deal with student conduct in the classroom, the better positioned they are to perform their job responsibilities; in turn facilitating a more effective learning environment. As a caveat, this form of culture responsiveness is not limited to racial attributes; however, race remains particularly important when considering that the demographic composition of the nation's teaching force is 86% Anglo (Golden, 2007).

Thus, research may in fact be suggesting that the discipline policies implemented are not reflective of African American males' cultural perspectives (Brown, 2005; Monroe, 2005). Take for instance, Weinstein et al. (2004) found that several novice White teachers reported that they often perceived lively debates occurring between African American males as suggestive of aggressive behaviors, when in fact these African American males perceived their engagements to be merely culturally expressive communication. Teachers aware of commonly documented forms of behavior found to exist among African American male populations (i.e. flamboyant and

nonconformist behaviors known as *cool pose* know that these students are often simply demonstrating, through a linguistic exchange, their thoughts (Majors & Billson, 1992). Problematic is that this cool pose generally conflicts with the constructed notions that teachers embrace regarding expected behaviors of who they would classify as “good students.” And, for this reason African American males are often penalized, or punished/ sanctioned, for behaviors that are subsequently deemed to be disruptive. With students of color comprising nearly 43% of the total student enrollment in public schools—African Americans making up 17%, Latinos 20% and other ethnic racial groups constituting 5% culturally relevant pedagogy, particularly for classroom management, becomes critically significant (United States Department of Education, 2008).

Data and Methods: Disciplinary Patterns of African American Males in Cascade Independent School District

This study is part of a series of scholarly investigations focusing specifically on African American K-12 students in one Midwestern urban school district, referred to hereafter by the pseudonym Cascade Independent School District (CISD). The goal of these investigations was focused primarily on the status of African American males in CISD in an effort to improve the academic achievement of this population at both the district and national level. Another major goal of this specific investigation was to examine the disciplinary patterns meted out to African American male students within CISD as compared to their peers—this is done as a means to develop more effective discipline techniques.

To fulfill the goals of this study, the following research question was developed: *What is the resulting impact of disciplinary patterns and school district responses regarding African American academic achievement?* To further grapple with this question, four interrelated objectives have been developed to guide the analysis: (1) to investigate all behavior occurrences among African American males in comparison to their peers during the 2005-2006 academic school year; (2) to detail the discipline responses recommended by the school district for these offenses; (3) to calculate the total amount of class time missed as a result of school district prescribed resolutions; and (4) to provide a connection to performance on standardized test reporting for the larger African American student population in this urban school district. Each objective will be addressed throughout the remainder of the paper.

The first author of this paper collaborated with CISD to obtain the dataset used in this study.¹ The information that was gathered was specific to the 2005-2006 academic school year. The data reported was collected from official records derived from the district’s Research Department. Because the database is extremely extensive, the analysis that follows only focuses on a subset of the data collected, providing detailed analysis of the disciplinary roles, infractions, and sanctions associated with African American male students attending schools located within CISD.

To offer some additional background information, the following descriptive statistics have been provided for the reader to gain a better understanding of the demographic composition

¹ The authors of this study have been provided the necessary research approval from CISD to conduct this analysis.

of the school district. During the 2005-2006 academic school year, CISD had a total student population of 33,301 students (i.e. 21% African American, 25% Anglo, and 49% Hispanic) African American males totaled 3,586 of the population across at all grade levels. While the African American male population comprises approximately 11% of the total population; they make-up nearly 37% of all males students cited for disciplinary action (see Table 1).

Table 1
Gender Breakdown of CISD Student Population Cited for Disciplinary Action, 2005-2006

Students Ethnicity	Male	%	Female	%	Total	%
African American	6801	<i>36.7%</i>	3649	<i>39.0%</i>	10450	<i>37.5%</i>
Asian American	477	<i>2.6%</i>	220	<i>2.3%</i>	697	<i>2.5%</i>
Native American	205	<i>1.1%</i>	130	<i>1.4%</i>	335	<i>1.2%</i>
Hispanic	6962	<i>37.6%</i>	3616	<i>38.6%</i>	10578	<i>37.9%</i>
Angelo	4075	<i>22.0%</i>	1749	<i>18.7%</i>	5824	<i>20.9%</i>
N	18520	<i>100.0%</i>	9364	<i>100.0%</i>	27884	<i>100.0%</i>

Note: The italicized percentages represent those students, by subcategory, cited for disciplinary action

Given this overrepresentation or over inclusion of African American males cited for disciplinary sanctioning, there is a need to examine- in greater depth--the discipline patterns meted out to African American male cohorts. As a point of initiation, it is necessary to identify the most common infractions and sanctions associated with all male students, across all racial categories. Tables 2 and 3, list the top ten behavior infractions committed- and sanctions imposed upon- male students in all grade levels. In examining these tables individually, we learn that acts of disobedience are the most common infractions committed by male students- regardless of race. Subsequently, school detention is seemingly the most frequently imposed sanction used to counter these acts of disruption enacted by male students.

Table 2
Top 10 Behavior Infractions for Male Students in CISD, 2005-2006

Indicators	AA Males	Hispanic Males	Angelo Males	Event Totals	% AA Males
Disobedience	2909	2735	1827	7727	37.65%
Defiance	1032	1111	440	2623	39.34%
Truancy	533	1003	586	2263	23.55%
Fight with Student	674	623	371	1743	38.67%
Tardiness	263	394	152	855	30.76%
Improper Dress	272	174	86	561	48.48%

African American Male Discipline Patterns

Threat to Student	160	109	56	329	48.63%
Profane – Adult	137	105	74	320	42.81%
Profane – Student	102	99	51	260	39.23%
Theft	76	82	27	197	38.58%

Table 3
Top 10 Behavior Sanctions for Male Students in CISD, 2005-2006

Indicator	AA Males	Hispanic Males	Angelo Males	Event Totals	% AA Males
Assigned School Detention	1508	1906	981	4538	33.23%
In School Suspension	1155	1172	608	3032	38.09%
Out of School Suspension – 3 days	479	512	241	1262	37.96%
Restricted Lunch	462	376	269	1158	39.90%
Restricted Recess	326	362	324	1055	30.90%
Conference with Student	451	356	203	1047	43.08%
Assign Saturday School	281	480	218	1030	27.28%
Warning	272	249	220	784	34.69%
Out of School Suspension – 5 days	218	224	100	565	38.58%
Conference with Parent/Student	182	161	96	452	40.27%

Analysis

To properly investigate all documented behavior occurrences in CISD for African American males in relation to their White counterparts the *rate ratio*, also known as the *relative risk ratio* (RRR), was computed. The relative risk ratio compares the *risk index* (RI) of one group to that of the comparison group. The risk index is calculated by dividing the number of students of a particular group (e.g. African American males) in a certain category or placement (e.g. those cited for disciplinary action) by the total population of students within the group (MacMillan & Reschly, 1998; Hosp & Reschly, 2003). The formula below used to calculate this index is cited here:

$$RI = \frac{\text{Total \# of a Particular Group of Students within a Category}}{\text{Total \# of Students within the Group}}$$

$$RRR = \frac{\text{Risk Index (RI) Specific Group}}{\text{Risk Index (RI) Comparison Group}}$$

Once RRR is determined, it is possible to mathematically estimate the degree of overrepresentation. For example, if the RRR = 1, then the index can be interpreted to indicate that the individual risk of one group is *similar* to that of the comparison group. However, if the RRR < 1 (i.e. less than one), then the index can be interpreted to indicate *underrepresentation* with respect to the comparison group. If RRR > 1 (i.e. greater than one), then the index can be interpreted to indicate *overrepresentation* with respect to the comparison group.

Table 4 depicts the findings for the cumulative relative risk of disciplinary action for African American males in CISD, with White males as the comparison group. The results indicate, on average, that African American males are overrepresented for disciplinary action when compared to their White peers.

Table 4
Cumulative Risk of Disciplinary Action for African American Males in CISD, 2005-2006

Group	Risk Index	Relative Risk Ratio	Interpretation
African American Males	0.96	2.03	Overrepresentation
Anglo Males ^a	0.47	_____	

^aAnglo males’ relative risk ratio is not reported because they represent the comparison group

In an effort to detail the discipline responses recommended by the school district for behavioral offenses, table 5 highlights the findings from a cross tabulation of the relationship between the most frequently cited infraction- disobedience- and the top 10 sanctions imposed in CISD. With regard to African American students, the district referred nearly 45% of these students to a three-day out of school suspension penalty for acts of disobedience. In this group approximately 30% of African American males were recommended for in school suspension when cited for this behavioral offense. In contrast, roughly 18% of White students received recommendations for restricted recess, a less punitive sanction in comparison to the previous two sanctions leveled against African American students for acts of disobedience. Additionally, within this group, 25% of White males who were referred for discipline received the same sanction that was imposed upon the larger group, restricted access.

Findings

Findings from this study were consistent with much of the previous research assessing the disparate disciplinary practices used by schools on African American male student cohorts. In calculating the relative risk ratio it can be concluded that this group of students is overrepresented in CISD school discipline sanctions. In addition to this overrepresentation cross tabulations revealed that African Americans, as a whole, receive harsher punishments (i.e., out of

school suspension and in school suspension) than their White peers for similar acts of disobedience. As a result, African Americans are being suspended at rates higher than that of their counterparts leading to missed school days and missed opportunities to learn.

Table 5
CISD Sanction Recommendations for Acts of Disobedience, 2005-2006

Resolutions	African American Males	African American Total	Anglo Males	Anglo Total	TOTAL Reports
Assigned School Detention	24.61% (770)	35.19% (1101)	18.34% (574)	24.64% (771)	3129
In School Suspension	29.60% (615)	43.41% (902)	15.16% (315)	19.39% (403)	2078
Out of School Suspension – 3 Days	29.01% (85)	44.71% (131)	13.99% (41)	19.80% (58)	293
Restricted Lunch	28.92% (260)	42.05% (378)	18.46% (166)	23.80% (214)	899
Restricted Recess	22.63% (208)	31.12% (286)	25.03% (230)	35.58% (327)	919
Conference with Student	28.23% (188)	44.44% (296)	15.62% (104)	21.77% (145)	666
Assigned Saturday School	19.82% (87)	33.49% (147)	12.76% (56)	18.45% (81)	439
Warning	26.10% (119)	39.04% (178)	14.25% (65)	23.90% (109)	456
Out of School Suspension – 5 Days	22.03% (13)	32.20% (19)	18.64% (11)	22.03% (13)	59
Conference with Parent/Student	24.93% (102)	43.52% (178)	13.93% (57)	23.47% (96)	409
TOTAL	(2447)	(3616)	(1619)	(2217)	9347

When looking at the number of days African American males are absent from the classroom, due in large part to out of school suspensions, it is possible that a more effective metric should be utilized to address this dilemma. Table 6, shows how the total amount of class

time missed by African American males- as a result of school district prescribed resolutions- tends to exceed this group’s total student population. Although, there are 3,587 African American males enrolled in CISD, they missed 3,714 school days over the duration of one academic school year.

Table 6
School Days Missed as a Result of Prescribed Recommendations by CISD, 200506

Sanctions	Number of Occurrences	Number of School Days Missed
Out of School Suspension-20 days	2	40
Out of School Suspension-15 days	5	75
Out of School Suspension-10 days	4	40
Out of School Suspension-5 days	218	1090
Out of School Suspension-3 days	479	1437
Out of School Suspension-2 days	309	618
Out of School Suspension-1 days	354	354
Extended Suspension-5 days	12	60
TOTAL	1383	3714

Results reported from the District’s standardized tests reveal yet another problem. Fewer than 48% of African Americans within CISD performed at proficient/advanced (P&A) levels for reading. Only 36% of this group was deemed proficient or advanced for fourth grade, seventh grade, and ninth grade reading. Fewer than 36% of African Americans scored at this level for writing, with just 23% of fourth graders scoring at the P&A level. Perhaps even more daunting are the scores related to science and math proficiency. Fewer than 19% of eighth graders received a P&A score for science, and just 7% of ninth and tenth graders met P&A standards for math.

Table 7
Proficient and Advanced Levels for Reading, Writing, Science and Math in CISD, 2005-06

Grade	Number Tested	% P&A
Reading		
3 rd Grade	544	47%
4 th Grade	513	36%
5 th Grade	570	46%
6 th Grade	616	40%
7 th Grade	553	36%
8 th Grade	570	38%
9 th Grade	649	36%
10 th Grade	454	41%
Writing		
3 rd Grade	546	27%

4 th Grade	512	23%
5 th Grade	570	34%
6 th Grade	615	24%
7 th Grade	550	31%
8 th Grade	570	28%
9 th Grade	648	24%
10 th Grade	452	26%
	Science	
8 th Grade	570	18%
	Math	
5 th Grade	569	35%
6 th Grade	613	23%
7 th Grade	551	12%
8 th Grade	570	13%
9 th Grade	650	7%
10 th Grade	456	7%

Discussion

What the research in general and the CISD data in particular has revealed is the internecine warfare that is being waged between schools and African American male populations. Especially disturbing is the constant supply of weapons of mass destruction to schools in their efforts to in many ways annihilate this group—weapons often supplied by entities both internal and external to the school context. Monroe’s (2005) study, *Why Are “Bad Boys” Always Black? Causes of Disproportionality in School Discipline and Recommendations for Change* stated:

Because school trends reflect currents of the national contexts in which they exist, core causes of the discipline gap are both internal and external to schools...I discuss three conditions the contribute to current disparities. They are (a) the criminalization of black males, (b) race and class privilege, and (c) zero tolerance policies (p. 46).

This paper has treated some aspect of each of these conditions and its relative impact on African American male populations, with a concentrated focus on one condition—zero tolerance policies. The questions then become, what are the intended outcomes if schools focus on these disparities? What is the relevant story these disparities collectively and individually tell about the experiences of African American males who interface with discipline structures in schools? Is the discipline gap found to exist among African American males in CISD emblematic of the experiences that other African American males are experiencing in other ISDs across the country? By answering these questions, we risk being named culpable in this discipline disparity conundrum; however, culpability brings us a greater sense of awareness of how we can from our respective vantage points initiate change to address these issues.

Perhaps a relevant starting point to tackle the many problems associated with the disparities in disciplinary treatment and the meting out of disproportionate, inequitable, and uneven sanctions to African American males should begin with initiatives aimed at helping

schools and school districts better understand who these individuals are. For example, Hughes et al. (2006) in the article focused on debunking many of the commonly held myths about Black males in school state, "...transformation must begin with a radical attack on the myths that shape the thoughts and perceptions of individuals responsible for our educational systems; these individuals are ultimately responsible for enacting policies and procedures that are anabolic for black males" (p. 78).

Additionally, a focus on the cyclical 'catch-22' occurrences in CISD that promote the ongoing problems of African American males being sanctioned, leading to their absence from school, resulting in their lowered performance on key measures of academic importance must be circumvented. These problems in and of themselves might be viewed singularly, but their impact is absolutely multifarious (Day-Vines & Day-Hairston, 2005; Hughes & Bonner, 2006). What might portend to be the best approach at ensuring promise for African American males by way of what schools can do, is summarized in a statement by Day-Vines and Day-Hairston; these researchers state that counselors who "...understand the central features of certain culturally derived behavior and thought patterns can help promote pro-social behaviors among urban African American by developing and implementing culturally congruent intervention strategies" (p. 238).

Recommendations

While it is important to extract patterns of disproportionality in empirical assessments of school discipline practices; the mere recognition of such patterns suggest little about the practical strategies necessary to address ethnic disparities found in exclusionary discipline consequences-particularly out-of-school suspensions. To aid educators, administrators, and policy makers in their concerted effort to explore alternatives to managing student misbehavior, we have provided a total of nine- presumably germane- recommendations. The first four recommendations are applicable strategies to be considered by educators and administrators. The remaining six recommendations are applicable strategies to be considered by policy makers.

Educators and Administrators

Implement culturally relevant professional development (CRPD) for classroom management. This form of professional development should be implemented aggressively, meaning administrators should make attendance mandatory for all educators and training sessions should be held quarterly over the duration of three or more consecutive days. To derive the most benefit from CRPD, the administration should work collaboratively with professional consultants to present educators with a variety of seminars that emphasize, exclusively, specific ways in which they can effectively manage diverse classrooms.

It is important to mention that the type of CRPD recommended here, should remain separate from culturally responsive pedagogic training. Because the purpose of these training sessions is to focus on how to organize the classroom milieu and manage student behavior-without instinctively writing a referral at the first-sign of disruption or conflict- discussions of curriculum content and/or teaching strategies only appear to be distractive to the overall goal of this form of professional development. To this end, the seminars conducted during the professional development sessions should make explicit reference to academic performance only

in the context of how classroom management, not pedagogy, is a powerful influence on student achievement (Wang, Haertel & Walberg, 1993, 1994).²

Establish a discipline advisory committee. Administrators should actively recruit an ethically and culturally diverse group of educators to serve on this committee. The primary responsibility of these individuals should be two-fold. They are not only to review each of the referrals submitted to administration, but they are to determine the most appropriate consequence for the offense in question. The aim of this committee should be to ensure that each referral for disciplinary action is handled justly and that each individual receives the proper punishment for the offense committed.

Additionally, the disciplinary advisory committee should be able to present a variety of viewpoints concerning a wide-range of offenses. These varying perspectives should introduce a more subjective approach, to be used in combination with a more objective discipline policy, in assigning disciplinary consequences. This type of subjectivity can help to distinguish cultural forms of expressiveness from horseplay, as well as, horseplay from more serious and dangerous forms of misbehavior.

Enforce a 3-Strikes Rule for non-violent behavior offenses. This rule is to be implemented per academic school year by both administrators and educators. Its goal is to reduce the percentage of office referrals and out-of-school suspensions for non-violent forms of misbehavior (e.g., truancy, disobedience, profanity, disruption, etc.). With this rule, students are allowed up to three warnings- if in the classroom- or three referrals- if referred to the office- for non-violent offenses before they receive any form of exclusionary discipline consequence.³ After the third offense, if in the classroom, students can potentially face an office referral (i.e., after the third warning); or if referred to the office, students can face out-of-school suspension (i.e., after the third office referral). The option to suspend the student (i.e., out-of-school); however, is contingent upon the severity of the non-violent offense committed.

Referral for counseling/therapy. Those students who are repeatedly referred for disciplinary action are to be assigned priority to the school's counselors. They are to meet consistently for the duration of one semester. If it is determined at the end of the semester that the student needs additional counseling, administrators should work closely with parents to secure a private therapist for further treatment.

The referral for counseling/therapy is important primarily for rehabilitation purposes. Instead of excluding the student from the classroom (via out-of-school suspensions) for misconduct- which in turn, can jeopardize their ability to receive fundamental classroom instruction- administrators should seek a more rehabilitative alternative that helps students to reform their behavior. By recommending a repetitive offender to receive professional therapy, one is decreasing the odds that the student will continue to be disruptive, yet increasing their likelihood of improved academic performance. Here, we make the assumption that less

² We do not contend, in any manner, that pedagogy is insignificant. In acknowledgement of the education scholarship on the influence of cultural responsive pedagogy, we agree with scholars who assert that cultural sensitivity to teaching strategies can lead to significant improvements in the achievement of low-income students and students of color (Banks, 2000; Ladson-Billings, 1994). However, we do maintain that CRPD for classroom management is most effective when references to student achievement are positioned exclusively in terms of how performance can be enhanced when educators are able to effectively manage disorder in their classrooms.

³ It should be noted that the three referrals can, however, be sanctioned with the use of non-exclusionary discipline consequences (e.g., after school detention, Saturday school, in-school suspension, etc.) while still adhering to the principles of the 3-Strikes Rule.

disruption leads to increased instruction time, which likely results in a higher probability of learning; while more disruption is typically equated with classroom exclusion, and subsequently low achievement.

Policy Makers

Amend zero tolerance policies. As it stands, there is no legislation that prevents the use of zero tolerance for non-violent offenses. In some cases, the use of out-of-school suspensions or expulsions has been considered an excessive form of punishment- particularly when the offense is non-threatening or does not result in the physical harm of other individuals. All things considered, it is our recommendation that policy makers make an effort to amend, or revise, zero tolerance policies to reprimand only those students who commit violent offenses.

Provide an alternative means of education. Policy makers should implement legislation that requires schools to provide students- who are serving an out-of-school suspension or expulsion term greater than two days- with some type of formal education while excluded from classroom instruction. Alternative education, in this regard, can take one of two forms- access to instruction via home school or an alternative education institution. If able to garner a significant degree of community support, the utilization of substitute teachers is optimal for the former, while students enrolled in the College of Education at area/community colleges are most preferable for the latter.

Develop a universal discipline policy. Currently, several school districts make use of very different discipline practices when sanctioning student misbehavior. Although there is some level of continuity between the various policies, educators and administrators within school districts still tend to respond differently when governing student conduct. In the interest of consistency and clarity, we recommend that policy makers seek to establish a single universal discipline policy- one which can be used in all K-12 public education institutions across the U.S.

Establish a discipline database. In an effort to monitor discipline patterns, policy makers should require school districts to provide a quarterly report of all disciplinary action taken within the specified time frame. The report itself, should document specifics such as the date/location/type of offense, the name/race/gender/age/grade/GPA/SES of the offender, and the sanction imposed for the offense. This type of information, along with more descriptive data, should be reported between each quarter. This recommendation is fueled by an attempt to encourage policy makers to hold schools, and school districts, accountable for ensuring equitable disciplinary practices.

Impose fines on parents. Parents generally have a significant amount of influence on how their children behave. Unfortunately, some choose to take a hands-off approach on discipline matters that take place in school; thereby, making it more difficult for educators and administrators to manage disruptive behavior. In an effort to increase parental involvement, concerning matters of classroom management, we also encourage policy makers to hold parents accountable for their children's behavior by imposing fines for all violent and selective non-violent, offenses. This recommendation is not in any way some strategic attempt to allow districts to capitalize financially, but rather to make students think twice about being disruptive and to consider the monetary penalties that are likely to be imposed upon their parents for their individual misconduct.

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Music, Substance Use, and Aggression*

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ABSTRACT. Objective: This study investigated whether young people's substance use and aggressive behaviors are related to their listening to music containing messages of substance use and violence. **Method:** Using self-administered questionnaires, data were collected from a sample of community-college students, ages 15-25 years ($N = 1,056$; 57% female). A structural equation model (maximum likelihood method) was used to simultaneously assess the associations between listening to various genres of music and students' alcohol use, illicit-drug use, and aggressive behaviors. Respondents' age, gender, race/ethnicity, and level of sensation seeking were included in the analyses as control variables. **Results:** Listening to rap music was significantly and positively associated with alcohol use, problematic alcohol use, illicit-drug use, and

aggressive behaviors when all other variables were controlled. In addition, alcohol and illicit-drug use were positively associated with listening to musical genres of techno and reggae. Control variables (e.g., sensation seeking, age, gender and race/ethnicity) were significantly related to substance use and aggressive behaviors. **Conclusions:** The findings suggest that young people's substance use and aggressive behaviors may be related to their frequent exposure to music containing references to substance use and violence. Music listening preference, conversely, may reflect some personal predispositions or lifestyle preferences. There is also the possibility that substance use, aggression, and music preference are independent constructs that share common "third factors." (*J. Stud. Alcohol* 67: 373-381, 2006)

LISTENING TO MUSIC is the number-one rated leisure-time activity for American youth (Roberts et al., 1999a,b). Some music genres contain more references to substance use and social defiance than others. A recent study of music popular among adolescents from 1996 to 1997 revealed that nearly half (47%) of all rap/hip-hop (hereafter referred to as "rap") songs mentioned alcohol (Roberts et al., 1999b). In contrast, other genres of music were much less likely to mention alcohol in the lyrics (country-western, 13%; hot-100/top-40, 12%; alternative rock, 10%; and heavy metal, 4%). Moreover, nearly two thirds of the rap songs mentioned illicit drugs as compared with approximately one tenth of the songs from the other genres. Another study of rap music indicated that references to alcohol in rap song lyrics increased five times (from 8% to 44%) from 1979 to 1997 (Herd, 2005). Of songs that mentioned alcohol, the positive attitude toward alcohol expressed in the lyrics increased from 43% in 1970-1989 to 73% in 1994-1997. One study assessing the content of music videos revealed that twice as much violence and criminal activity were depicted in rap and rock music videos compared with country, adult contemporary, and rhythm-and-blues music

videos (DuRant et al., 1997a). Weapon carrying also was depicted more often in rap and rock music videos. Together, these studies raise an important issue: Will frequent exposure to music containing references to substance use, violence, and social defiance impact youths' behaviors?

Empirical studies suggest that alcohol and illicit-drug use among youth may be associated with listening to popular music (e.g., hard rock, heavy metal, rap, and techno; Arnett, 1991, 1992; Forsyth et al., 1997; Hitzler, 2002; Miranda and Claes, 2004). Aggressive behaviors also have been linked to various genres of music. Studies have shown, for example, that adolescents with a preference for heavy metal or hard rock music reported higher rates of reckless behaviors than those who did not like these forms of music (Arnett, 1991, 1992). In addition, exposure to rap music was positively associated with aggressive behaviors and negative health outcomes at a 12-month follow-up for black girls ages 14-18 (Wingood et al., 2003). Experimental studies consistently demonstrated that greater exposure to popular music containing antisocial content was associated with more favorable attitudes toward antisocial behaviors and a greater likelihood of performing such behaviors (Anderson et al., 2003; Hansen and Hansen, 1990; Johnson et al., 1995).

Rap music is one genre that, more than others, is identified as particularly glorifying and encouraging the use of alcohol, other substances and violence (Herd, 2005). A closer look at some features of rap music is warranted. It is the predominant musical genre of hip-hop culture. Rap music rose to American prominence in the early 1980s with

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New York disc jockeys appropriating Jamaican deejays' style of talking over prerecorded instrumental tracks (Ayazi-Hashjin, 1999; Davey D., 1984; Ogg and Upshal, 1999). It is the genre of music most listened to by black and Latino youth and the second-most listened to genre for youth of European descent (Roberts et al., 1999a). Rap music is used by many advertisers to promote products targeted for urban teens and young adults (Atkinson and Halliday, 2003; Friedman, 1992; Spiegel, 1996). Moreover, many rap musicians are involved in promoting alcoholic beverages (Alaniz and Wilkes, 1998; Allen-Taylor, 1997; Herd, 1993, 2005). Malt liquor, in particular, is portrayed as the "gangsta drink of choice, the brew of alienation" in rap music (interview with Makani Themba; Allen-Taylor, 1997) and is associated in popular culture with drug use, underage drinking, misogyny, violence, and irresponsible sex (Alaniz and Wilkes, 1998; Herd, 1993). Concerns about how marketing tactics may influence youth drinking have been raised (Alaniz and Wilkes, 1998; Allen-Taylor, 1997; Center for Science in the Public Interest, 1998; Herd, 1993, 2005), and additional concerns about rap music's influence on youth are generated by the messages embedded in the music and the violent lifestyles of the performers (e.g., Alaniz and Wilkes, 1998; Hansen, 1995; Herd, 1993). Misogynistic lyrics, profane language, and glorification of violence are hallmarks of the form of rap music known as "gangsta rap" (Rule, 1994; Toop, 2004). The undercurrents of violence and profane language of gangsta rap are criticized for potential detrimental influences on youth, resulting in calls from musicians, politicians, black church groups, music retailers, the police, and Tipper Gore's Parents' Music Resource Center (Rule, 1994; Toop, 2004) for self-discipline from gangsta rap musicians.

Individuals' listening preference for certain styles of music may be related to personal characteristics. Liking the music genres of punk, heavy metal, and reggae was found to be associated with higher levels of sensation seeking among college students (Weisskirch and Murphy, 2004). Arnett (1991, 1992) consistently reported that adolescents who preferred heavy metal or hard rock music had higher levels of sensation seeking than did adolescents who did not prefer these forms of music. More importantly, the associations between musical preference and most adolescent reckless behaviors were no longer significant when level of sensation seeking was controlled. Arnett suggested that sensation seeking underlies both reckless behaviors and music preference; adolescents with higher levels of sensation seeking are more attracted to heavy metal or hard rock music and have a greater propensity for reckless behaviors.

In summary, prior research suggests a connection between preferences for certain genres of music and alcohol and illicit-drug use, aggression, and other risky behaviors. Rap music more recently has been viewed as a genre of music that is associated more with these behaviors and is

therefore of greater concern for its influence on youth. The present study investigates whether young people's substance use (i.e., alcohol and illicit-drug use) and aggressive behaviors are related to their listening to popular music, particularly rap music. Because references to alcohol, illicit drugs, and violence are frequently shown in various forms of popular music (DuRant et al., 1997a,b; Roberts et al., 1999b), a wide spectrum of music genres are included in this study. Personal attributes (e.g., sensation seeking and important demographic characteristics) are included in the analyses as control variables. The present study addresses four research questions: (1) Is listening to music that contains messages of substance use and violence significantly associated with behaviors of substance use and aggression? (2) Are behaviors of substance use and aggression particularly associated with listening to rap music? (3) Is malt liquor use particularly associated with listening to rap music? and (4) Are relationships between music preference, substance use, and aggression accounted for by sensation seeking and other predisposing factors?

Method

Sampling and data collection

Students from a 2-year community college in the central valley of California were recruited to participate in this study. The data were collected using self-administered paper-and-pencil questionnaires. Community colleges in the United States generally have a wider range of ages among their students compared with 4-year colleges. To have a study sample compatible with the age range of students in 4-year colleges, students ages 25 or younger were the focus of the study. The registrar indicated that students in this age range mostly attended daytime classes. As all new students were required to take an English course, the surveys were therefore administered in daytime English classes (8:30 AM-5:00 PM) over a 2-week period in September 2002. One week before the survey, a letter and a fact sheet describing the study were distributed to all students enrolled in daytime English classes ($N = 1,409$; 45 class sessions) inviting them to participate in the study. Trained research staff administered the survey, and, prior to beginning, students were reminded that the survey was anonymous and their participation was voluntary. At the end, students were paid \$20 for their participation. In total, 1,226 students took part in the survey, for a response rate of 87%.

Participants' ages ranged from 15 to 65 years. Data analyses for the present study were limited to 1,056 students who were 25 years old or younger (57% of these were females). Data for 149 people were excluded because they were older than 25 years; another 21 were dropped because most data were missing ($n = 9$) or because gender or age information was not available ($n = 12$).

Measures

Music listening. Respondents indicated how often they listened to music overall, using a 5-point scale (never, less than monthly, monthly, weekly, daily or almost daily). In addition, they were provided with a list of 15 categories of music and were asked to check (yes/no) the type of music they listened to “often.” The list comprised alternative, Christian, classical, country, heavy metal, jazz, Latin/salsa, top-40/hot-100, punk, rap, rhythm-and-blues/soul/funk/urban (hereafter referred to as R&B), reggae, rock, techno/house, and world music. “Often” was not specifically defined but relied on respondents’ subjective assessment. In the data analyses, we considered a person as having a listening preference for a particular genre of music if that person (1) reported listening to music “daily or almost daily” and (2) checked that particular genre of music as a type that he or she listened to “often.” We then assumed that this person had been frequently exposed to the messages embedded in that genre of music. Respondents were allowed to check more than one genre of music, and equal weight was given to each of the checked genres.

Alcohol use and alcohol-use disorder. The survey used the Alcohol Use Disorders Identification Test (AUDIT; Babor et al., 2001) to measure alcohol use and alcohol-use disorder. The AUDIT consists of 10 questions covering three domains: hazardous alcohol use (three questions), alcohol dependence (three questions), and harmful alcohol use (four questions). Each question is scored, and a sum score over the 10 items is computed to construct an overall AUDIT score; the possible AUDIT score ranges from 0 to 40. A score of 8 or higher indicates a strong likelihood of alcohol-use disorder. Respondents who did not report any alcohol use in the past 12 months did not respond to these questions and were given a score of 0 for each of these questions in the data analyses. The internal consistency of the AUDIT scale, estimated by Cronbach’s α , was .84. For the purposes of this study, three alcohol-use measures were yielded from the AUDIT. Frequency of alcohol use in the past 12 months was measured using a 5-point scale (1 = never, 2 = monthly or less, 3 = two to four times a month, 4 = two to three times a week, and 5 = four or more times a week). The sum score was the second measure, and a higher sum score indicates a greater likelihood of having an alcohol-use disorder; the third was a dichotomous indicator of potential alcohol-use disorder (AUDIT score ≥ 8 vs < 8).

If respondents reported any alcohol use in the past 12 months, they were asked about their use of malt liquor in the past 12 months, using a 6-point scale (1 = never, 2 = less than once a month, 3 = once a month, 4 = two to three times a month, 5 = once a week, and 6 = more than once a week).

Illicit-drug use. Two types of illicit-drug use were assessed: marijuana and club drugs. Marijuana use was measured by asking respondents to indicate, on a 5-point scale, how often during the past 12 months they used marijuana (0 = never, 1 = once a month or less, 2 = two to three times a month, 3 = once a week, and 4 = more than once a week). Club-drug use was measured by asking respondents to indicate how often during the past 12 months they used each of the following three categories of drugs: (1) Ecstasy (i.e., methylenedioxyamphetamine [MDMA]), gamma hydroxybutyrate (GHB), ketamine; (2) amphetamines and methamphetamines (e.g., crystal, ice, speed); and (3) hallucinogens (e.g., phencyclidine [PCP], lysergic acid diethylamide [LSD], mushrooms), on the same 5-point scale. Cronbach’s α was .76 for the three club-drug measures.

Aggressive behaviors. Respondents indicated how often in the past 12 months, on a 5-point scale (not at all, 1-2 times, 3-5 times, 6-9 times, and 10 times or more), they engaged in each of five aggressive behaviors: being in a fist fight in which they hit someone, being in a gang fight, starting a fist fight or shoving match, threatening someone with a knife or gun, and attacking someone intending to seriously injure that person (Cronbach’s $\alpha = .80$).

Sensation seeking. Five items from the Impulsive Unsocialized Sensation Seeking Subscale of the Zuckerman-Kuhlman Personality Questionnaire (Zuckerman et al., 1991) were selected to construct a short sensation-seeking scale. Respondents indicated how much they liked or disliked, on a 4-point scale (dislike very much, dislike, like, like very much), going to wild parties, doing things that are scary, watching a sexy movie, doing “crazy” things just for fun, and doing things on impulse. These items were selected based on their relevance to young people’s lifestyle and have been used in our previous studies with youth (Cronbach’s $\alpha = .77$).

Background variables. Background variables were respondents’ age, gender, race/ethnicity, school enrollment status, employment and parents’ educational achievement.

Data analysis

The associations between music genres and behaviors of substance use and aggression were first examined through bivariate analyses. *T* test analyses were conducted to examine the associations between music genres and continuous behavioral variables. Chi-square test analyses were used to examine the associations between music genres and the dichotomous behavioral variable (i.e., potential alcohol-use disorder; AUDIT score ≥ 8 vs < 8). Music genres significantly associated with these behaviors in bivariate analyses (either positively or negatively and at $p < .01$) were then included in a structural equation modeling analysis that simultaneously assessed the associations between music preference and alcohol use (frequency of any alcohol use,

frequency of malt-liquor use, AUDIT sum score), use of illicit drugs (marijuana and club drugs), and aggressive behaviors. Gender, age, race/ethnicity, and level of sensation seeking were included in the model as control variables. The structural equation modeling analysis was conducted using a maximum likelihood method implemented with the EQS software (Bentler, 1985-2004). Latent variables were constructed to represent constructs that were measured using multiple items (i.e., sensation seeking, club-drug use, and aggression). No cross-factor loadings were allowed. No error covariances between the latent variable indicators were added into the model. The covariances between exogenous variables (i.e., age, gender, race/ethnicity, sensation seeking, and music genres) and the covariances between the residuals of the dependent variables (i.e., any alcohol use, malt-liquor use, AUDIT sum score, marijuana use, club-drug use and aggressive behaviors) were included in the model. Because the data were not normally distributed, robust estimates of the standard errors were requested. Per the recommendation of Hu and Bentler (1999), the comparative fit index (CFI) and root mean square error of approximation (RMSEA) indices were used to assess the model fit. A value close to .95 for CFI and a value close to .06 for RMSEA were considered indications of good model fit. Among the 1,056 cases included in the analyses, 37 cases (3.5% of the study sample) had some missing data. Missing data were handled through the missing data procedure (expectation-maximization [EM] imputation) implemented with the EQS.

Results

Sample characteristics

The study sample ($N = 1,056$) was 57% female. About two fifths of the respondents (38%) identified themselves as white, 27% as Latino American, 21% as Asian or Pacific Island American ("Asian American" hereafter), 5% as black, and 9% as other (Native American, mixed ethnicity or unknown). Their ages ranged from 15 to 25 years (mean [SD] = 18.9 [1.80]; 86% were younger than age 21). Four fifths of the respondents (81%) were full-time students and 82% had a paid job during the 12 months prior to the survey. For most respondents, father and mother had similar levels of education (mean = 12.5 years).

Approximately three quarters of the respondents (74%) reported drinking alcoholic beverages of any type in the past 12 months, and about two fifths (38%) reported drinking malt liquor during the same period. In addition, 29% of the study sample had an AUDIT score of 8 or higher. Two fifths of the study sample (38%) reported using marijuana, and 13% reported using club drugs in the past 12 months. More than one fourth (27%) reported being engaged in at least one act of aggressive behavior in the past 12 months.

Music listening

Almost all respondents (94%) reported listening to music "daily or almost daily." Rap music appeared to be popular among this sample of students. Of these "daily or almost daily" music listeners, 69% reported listening to rap music "often." Also popular among this sample were the music genres of alternative (65%), R&B (57%), rock (51%), top-40/hot-100 (37%), techno/house (32%), country (31%), punk (28%), and heavy metal (22%). The rest of the music genres were listened to often by less than 20% of the "daily or almost daily" music listeners: Latin/salsa (19%), reggae (17%), classical (16%), jazz (14%), world (11%), and Christian (0%). On average (SD), respondents listened often to 4.8 (2.8) genres of music. Very few of them (5%) listened to only one genre of music. Only three respondents reported listening to music "daily or almost daily" without identifying music genres that they listened to often.

Bivariate analyses

Results from t tests indicated that frequency of any alcohol use was significantly and positively associated with often listening to music genres of alternative, heavy metal, punk, rap, R&B, reggae, rock, and techno (p 's < .01), but negatively with often listening to world music (p < .01). Frequency of malt-liquor use was significantly and positively associated with often listening to music genres of heavy metal, punk, rap, reggae, rock, and techno (p 's < .01). Frequency of marijuana use was significantly and positively associated with often listening to music genres of punk, rap, reggae, and rock (p 's < .01), but negatively with often listening to world music (p < .01). Level of club-drug use was significantly and positively associated with often listening to music genres of rap and techno (p 's < .01). Level of aggressive behaviors was significantly and positively associated with often listening to rap music (p < .01), but negatively with often listening to country music (p < .01). Results from chi-square tests indicated that alcohol-use disorder was significantly and positively associated with often listening to music genres of heavy metal, punk, rap, reggae, and rock (p 's < .01). Based on these bivariate analyses, music genres of alternative, country, heavy metal, punk, rap, R&B, reggae, rock, techno, and world were included in the further multivariate analysis.

Structural equation modeling analysis

A structural equation model was specified to simultaneously assess the associations between music genres and behaviors of substance use and aggression, taking into account gender, age, race/ethnicity, and level of sensation seeking. Dummy variables were constructed for gender (1 =

TABLE 1. Measures included in the structural equation modeling analysis

Measures	Values	Mean (SD)	Latent variable factor loading (standardized)
Age	0 = 21-25, 1 = <21	0.85 (0.35)	
Gender	0 = female, 1 = male	0.43 (0.50)	
Race/ethnicity			
Black	0 = no, 1 = yes	0.05 (0.22)	
Asian American	0 = no, 1 = yes	0.21 (0.40)	
Latino American	0 = no, 1 = yes	0.27 (0.44)	
Other	0 = no, 1 = yes	0.09 (0.29)	
Sensation seeking			
Dislike/like going to wild parties	1-4	2.72 (0.97)	.62
Dislike/like doing things that are scary	1-4	2.58 (0.84)	.64
Dislike/like watching sexy movies	1-4	2.77 (0.85)	.54
Dislike/like doing crazy things just for fun	1-4	2.87 (0.86)	.75
Dislike/like doing things on impulse	1-4	2.78 (0.83)	.66
Music (genre) listening			
Alternative	0 = no, 1 = yes	0.64 (0.48)	
Country	0 = no, 1 = yes	0.31 (0.46)	
Heavy metal	0 = no, 1 = yes	0.22 (0.41)	
Punk	0 = no, 1 = yes	0.28 (0.45)	
Rap	0 = no, 1 = yes	0.68 (0.46)	
R&B	0 = no, 1 = yes	0.57 (0.50)	
Reggae	0 = no, 1 = yes	0.17 (0.38)	
Rock	0 = no, 1 = yes	0.51 (0.50)	
Techno	0 = no, 1 = yes	0.32 (0.47)	
World	0 = no, 1 = yes	0.11 (0.31)	
Any alcohol use	1-5	2.35 (1.11)	
Malt-liquor use	1-6	1.67 (1.07)	
AUDIT sum score	0-40	5.33 (5.93)	
Marijuana use	0-4	0.79 (1.27)	
Club-drug use			
Ecstasy, GHB, ketamine	0-4	0.12 (0.44)	.77
Amphetamines/methamphetamines	0-4	0.08 (0.41)	.66
Hallucinogens	0-4	0.07 (0.33)	.76
Aggressive behaviors			
Being in a fist fight where you hit someone	0-4	0.35 (0.73)	.77
Being in a gang fight	0-4	0.16 (0.53)	.79
Start a fist fight or shoving match	0-4	0.06 (0.37)	.65
Threatening someone with a knife or gun	0-4	0.05 (0.34)	.49
Attacking someone intending to seriously injure that person	0-4	0.08 (0.38)	.75

Notes: R&B = rhythm-and-blues/soul/funk/urban; AUDIT = Alcohol Use Disorders Identification Test; GHB = gamma hydroxybutyrate.

male) and age (1 = <21). Separate dummy codes were generated to represent black, Asian American, Latino American, and other, with white being the reference group. Table 1 lists the variables included in the model and presents some descriptive statistics of these variables. The structural model fit the data adequately (CFI = .090, RMSEA = .041 [90% CI: .038-.045]). Results from this analysis are summarized in Table 2 and described as follows.

Music listening and alcohol use

Often listening to rap music significantly and positively predicted frequency of any alcohol use, frequency of malt-liquor use, and the sum score of the AUDIT when age, gender, race/ethnicity, level of sensation seeking and other music genres were taken into account. Often listening to

techno music significantly and positively predicted frequency of any alcohol use, frequency of malt-liquor use, and the AUDIT sum score when all other variables were controlled. When all other variables were controlled, often listening to reggae music significantly and positively predicted frequency of any alcohol use.

Level of sensation seeking positively predicted frequency of any alcohol use, frequency of malt-liquor use, and the AUDIT sum score when all other variables were controlled. Age significantly and negatively predicted any alcohol use and the AUDIT sum score when all other variables were controlled; students under the age of 21 reported drinking alcohol, in general, less frequently and scored lower on the AUDIT than did students ages 21-25. Asian race significantly and negatively predicted all three alcohol-use variables when all other variables were controlled.

TABLE 2. Structural equation model assessing the associations between music preference and substance use and aggressive behaviors

Variable	Any alcohol use	Malt-liquor use	AUDIT score ^a	Marijuana use	Club-drug use	Aggressive behaviors
Age (1 = <21)	-.156 [‡]	-.053	-.106 [‡]	-.073*	-.095	-.109*
Gender (1 = male)	.007	-.002	.012	-.076*	-.070	.071
Race/ethnicity						
Black	-.047	-.055	-.065	.013	-.060*	.105*
Asian American	-.146 [‡]	-.092 [†]	-.156 [‡]	-.117 [‡]	-.007	.020
Latino American	-.022	-.036	-.031	-.067	-.066	.054
Other	-.044	-.010	-.041	.004	.007	.075
Sensation seeking	.397 [‡]	.273 [‡]	.415 [‡]	.272 [‡]	.198 [‡]	.187 [‡]
Music listening						
Alternative	-.005	-.040	.000	-.044	-.009	-.054
Country	.052	-.023	.032	-.062	-.080 [†]	-.013
Heavy metal	-.021	-.013	-.037	-.017	.042	.054
Punk	-.030	-.019	.008	.036	-.055	-.013
Rap	.153 [‡]	.120 [‡]	.178 [‡]	.117 [‡]	.069*	.075*
R&B	-.018	-.038	-.045	-.036	-.045	-.040
Reggae	.061*	.065	.055	.129 [‡]	.058	.023
Rock	.005	.035	-.035	.003	-.034	-.093*
Techno	.072*	.089 [†]	.064*	-.016	.118*	.049
World	-.053*	-.040	-.042	-.059 [†]	.009	-.037
R ²	.31	.15	.32	.17	.09	.11

Notes: The path coefficients are standardized coefficients. AUDIT = Alcohol Use Disorders Identification Test; R&B = rhythm-and-blues/soul/funk/urban. ^aThe score was log transformed prior to analysis because of skewedness.

* $p < .05$; [†] $p < .01$; [‡] $p < .001$.

To examine whether greater malt-liquor use was simply due to greater overall alcohol use, the equation predicting malt-liquor use was respecified by including frequency of any alcohol use as one of the predictors. This analysis showed that the associations between rap and techno music and malt-liquor use were no longer significant when controlling for any alcohol use.

Music listening and illicit-drug use

When age, gender, race/ethnicity, level of sensation seeking and other music genres were controlled, often listening to rap music significantly and positively predicted frequency of marijuana use. Often listening to reggae music also significantly and positively predicted frequency of marijuana use. In contrast, often listening to world music negatively predicted frequency of marijuana use. Often listening to rap and techno music significantly and positively predicted frequency of club-drug use, whereas often listening to country music significantly and negatively predicted frequency of club-drug use.

Sensation seeking significantly and positively predicted frequency of marijuana use and frequency of club-drug use. Age, gender, and Asian race negatively predicted marijuana use. Being black was negatively associated with frequency of club-drug use when all other variables were controlled. Because the association between marijuana use and gender was counterintuitive, further analyses were conducted. Males reported more marijuana use than did females in bivariate

analysis ($p < .01$); however, when levels of sensation seeking were controlled, marijuana use for females became significantly greater than for males. Frequency of marijuana use was thus higher among females at equal levels of sensation seeking.

Music listening and aggressive behaviors

When age, gender, race/ethnicity, level of sensation seeking and other music genres were controlled, often listening to rap music significantly and positively predicted aggressive behaviors, whereas often listening to rock music significantly and negatively predicted aggressive behaviors. Sensation seeking significantly and positively predicted aggressive behaviors. Black race significantly and positively predicted aggressive behaviors. Last, age significantly and negatively predicted aggressive behaviors.

Discussion

To investigate whether young people's substance use and aggressive behaviors were related to their listening to popular music, we conducted a survey study with a sample of community-college students. Listening to rap music, compared with other music genres examined, was consistently and positively related to general alcohol use, malt-liquor use, potential alcohol-use disorder, marijuana use, club-drug use, and aggression, even after controlling for listening to other genres of music, important demographic characteristics,

and sensation seeking. The persistent significant and positive associations between rap music and measures of alcohol use, illicit-drug use and aggression are of critical importance. Findings of other connections between music and substance use provide additional supports to the idea that substance use is associated with listening to certain genres of popular music.

These findings, however, also suggest that some situational mechanism may be involved. For example, the significant association between marijuana use and listening to reggae music seems logical, given the historical use of marijuana in Rastafarian, religious ceremonies (e.g., King and Jensen, 1995; Llosa, 2002). Reggae music, however, has been commonly played in club settings, neighborhood street parties, and open-air concerts in which, although attendants are probably not Rastafarians, the reggae music-marijuana use connection is sustained. In addition, significant associations were found between club-drug use, alcohol use, and listening to techno music, which consists of virtually no lyrics. Previous studies report that young people gather in rented settings or nightclubs to engage in late-night dance parties that feature electronically produced music (i.e., techno music), light shows, and intense physical dancing (e.g., Randall, 1992a,b; Schwartz and Miller, 1997; Weir, 2000). Drugs such as ecstasy and other amphetamines are known to be used at such parties and are believed to facilitate dancing for long hours and increase enjoyment of the event. As Hunt and Evans (2003) maintain, music listening and dancing are important activities for many young people and often occur in settings in which alcohol and drugs play a part.

Our data also showed that listening to certain genres of music was negatively associated with substance use and aggressive behaviors. Listening to world music, for example, was associated with less alcohol and marijuana use, listening to country music was associated with less club-drug use, and listening to rock music was associated with fewer aggressive behaviors when all other variables were considered. The negative associations between music genres and behavioral outcomes were, however, less consistent than the positive associations, and the music genre that was consistently related to lower risks (world music) was listened to "often" by only one tenth of the study sample. It may be premature, therefore, to conclude that listening to certain genres of music is related to lower levels of problem behaviors among youth.

Our measure of music listening is limited in many ways. We did not measure either the amount of time spent listening to different genres of music or the attention paid to the lyrics, nor did we ask the respondents to prioritize their preference for genres of music. Clear estimates of the differential influences of various music genres on behaviors were impossible to make because most respondents listened to more than one genre of music. When we assessed the

association between a certain music genre and an outcome variable, however, we adjusted for respondents' listening to other music genres and other control variables.

Consumption of malt liquor was significantly associated with listening to rap music. When frequency of any alcohol use was taken into account, the significant and positive association between malt-liquor use and rap music was no longer significant. Thus, greater malt-liquor use was due to greater overall alcohol use. This finding, however, does not ease the concern that the alcohol industry is promoting alcohol use through rap music. The evidence that often listening to rap music was consistently and positively associated with alcohol use and problematic alcohol use further underscores concerns about the potential influences of rap lyrics on youth behaviors.

Consistent with the literature, Asian-American students reported the lowest levels of alcohol and marijuana use among all racial/ethnic groups, even when all other variables were controlled. It is interesting to note that Asian students were more likely to listen to techno music than white and Latino students (42% as compared with 24% of whites and 36% of Latinos) and just as likely to listen to rap music (65% as compared with 64% of whites and 70% of Latinos), but they apparently were not at as much risk for substance use. Future studies should examine whether factors that are protective of Asian Americans regarding substance use also help lessen the connections between substance use and music preference.

Although black students reported similar levels of substance use as students in other non-Asian racial/ethnic groups, they reported significantly more aggressive behaviors (analyses not shown). This racial/ethnic difference in aggressive behaviors remained significant even when all other variables were controlled. Further investigation was conducted and the analyses showed that the β coefficient for the variable of "black" remained virtually unchanged across three models consisting of predictors (1) of only race/ethnicity variables; (2) controlling for age, gender, and sensation seeking; and (3) further controlling for music genres. This finding indicates that rap or any other music did not mediate the relationship between being black and aggressive behaviors. It is important to note that much of the aggression expressed in gangsta rap is violence against women, particularly black women (e.g., Barongan et al., 1995; Johnson et al., 1995; Wester et al., 1997), which was not measured in our study.

The short sensation-seeking scale used in our study was consistently predictive of substance use and aggressive behaviors. Bivariate analyses examining the associations between music listening and sensation seeking indicated that respondents with higher levels of sensation seeking were more likely to listen to the music genres that were positively associated with substance use and aggression (analyses not shown). Respondents with lower levels of sensation

seeking, conversely, were more likely to listen to the music genres that were negatively associated with substance use and aggression. The associations between music genres and behavioral outcomes significantly decreased, as indicated by reductions in standardized path coefficients, when sensation seeking was entered into the regression models. In contrast, the standardized path coefficients remained almost unchanged when age, gender and race/ethnicity were entered into the regression models. These findings are in agreement with Arnett's (1991, 1992) argument that sensation seeking is likely a confounder for the relationship between problem behaviors and music preference. Future studies that examine the connection between music preference and youthful problem behaviors could shed additional light on the role of sensation seeking by using a more sophisticated sensation-seeking scale.

In summary, our findings indicate that substance use and aggressive behaviors among young people were significantly associated with listening to certain genres of popular music. Findings of this study should be interpreted with caution, however. Because of the cross-sectional nature of the data, it is difficult to make causal inferences about the relationships between music listening and substance use and aggression. It is possible that frequent exposure to rap music significantly contributes to positive values toward substance use and violence. It is also possible that individuals who often listen to rap music view substance use and violence more positively prior to listening to this genre of music; thus, music listening, at most, reinforces these values. Another possibility is that substance use, aggression, and music listening may be independent constructs but share common "third factors." Last, our study sample may not be representative of all community-college students because our study focused on students ages 25 or younger, attending daytime classes. Our study findings may not be generalizable to all college students, as a large proportion of our survey sample (62%) was nonwhite. The study findings also may not be generalizable to young people who do not attend college. Studies with longitudinal designs and general-population samples are needed to better understand the causal or dynamic relations between music listening and behaviors of substance use and aggression among young people.

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Appendix V: Organizational-Level Assessment Tools

Agency Name:	Africentric Personal Development Shop	Contact:	Terehasa Lee-Mchunganji
Address:	1409 E. Livingston Ave. Columbus, OH 43205		
Phone:	(614) 253-4448	Email:	tlee-Mchunganji@apdsinc.org
Resource Type:	Program		
Resource Name:	Africentricity: Freedom From Abusive Relationships (AFAR)		
Resource Description:	To develop anger management skills in adults		
Target Population:	18 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement	X	Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School			
Individual/Peer	X		
Implementing Agency:	APDS		
Number Reached Annually:	216		
Duration:	4 months		
Frequency:	Quarterly		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
No response			
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
African American			

Agency Name:	Columbus Department of Development	Contact:	Neighboring Liaisons
Address:	S.W. Gay Street 3rd floor Columbus, OH 43215		
Phone:	(614) 645-3219	Email:	mjpuckett@columbus.gov
Resource Type:	Program		
Resource Name:	Pride Centers: Franklin, Near East Side, North Side, and South Side		
Resource Description:	House basic city services and Pride Center staff to tackle issues that concern the neighborhood.		
Target Population:	18 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement	X	Other	
Risk/Protective Factors Targeted:			
Family			
Community	X		
School			
Individual/Peer			
Implementing Agency:	Columbus Department of Development Pride Centers: Franklin, Near East Side, North Side, and South Side		
Number Reached Annually:	Unknown		
Duration:	Unknown		
Frequency:	12 months		
Prevention Strategies Utilized:			
Education		Problem Identification and Referral	
Environmental Strategies	X	Information Dissemination	X
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Unknown	If 'yes', describe below:	
Geographical Area Served:	Columbus		
Culturally Competent:	Yes	If 'yes', describe below:	
Community Residents			

Agency Name:	Columbus Area Inc.	Contact:	Susie Shipley Norwood
Address:	1410 Cleveland Ave. #2 Columbus, OH 43211		
Phone:	(614)221-7790	Email:	snorwood@columbus_area.com
Resource Type:	Program		
Resource Name:	MECCA-Prenatal Program		
Resource Description:	Screening service for pregnant women		
Target Population:	14 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School			
Individual/Peer	X		
Implementing Agency:	Columbus Area-MECCA		
Number Reached Annually:	75		
Duration:	1.5 hours per week		
Frequency:	12 months		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	No	If 'yes', describe below:	
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
African American			

Agency Name:	Columbus Public Health	Contact:	Tia Moretti
Address:	240 Parsons Ave. Columbus, OH 43215		
Phone:	(614) 724-2033	Email:	TIDoegan@columbus.gov
Resource Type:	Program		
Resource Name:	Community Prevention Program		
Resource Description:	Based on CSAP and Community Prevention Toolkit program assists for community development, engagement, and organization efforts to change conditions regarding AOD use and damage in our community. Additionally provide info dissemination and educational presentations.		
Target Population:	18 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	X
Retail Availability		Individual Factors	
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community	X		
School			
Individual/Peer	X		
Implementing Agency:	Columbus Public Health		
Number Reached Annually:	26		
Duration:	Weekly		
Frequency:	12 months		
Prevention Strategies Utilized:			
Education		Problem Identification and Referral	
Environmental Strategies	X	Information Dissemination	X
Alternative Activities		Other	
Community-Based Process	X		
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP	X	OJJDP	
Has Implementing Agency Evaluated Outcomes:	No	If 'yes', describe below:	
Geographical Area Served:	Franklin County		
Culturally Competent:	Unknown	If 'yes', describe below:	

Agency Name:	Columbus Public Health	Contact:	William Livisay
Address:	240 Parsons Ave., Columbus, Ohio 43215		
Phone:	(614) 645-6242	Email:	WOLivisay@columbus.gov
Resource Type:	Program		
Resource Name:	Leadership Resiliency		
Resource Description:	Evidence-based clinical prevention program targeting 14-18 year-old adolescents to enhance healthy positive relationships, goal setting and personal competence coping strategies.		
Target Population:	14-18 year olds		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School	X		
Individual/Peer	X		
Implementing Agency:	Columbus Public Health		
Number Reached Annually:	50		
Duration:	1 hour per week		
Frequency:	9 months		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	
Alternative Activities	X	Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP	X	OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
Conduct annual pre/post resiliency survey to customers.			
Geographical Area Served:	East Side		
Culturally Competent:	Unknown	If 'yes', describe below:	

Agency Name:	Columbus Public Health	Contact:	William Livisay
Address:	240 Parsons Ave., Columbus, Ohio 43215		
Phone:	(614) 724-2033	Email:	WOLivisay@columbus.gov
Resource Type:	Program		
Resource Name:	Leadership Resiliency APPS Project		
Resource Description:	Utilizing the Leadership Resiliency model CPH will provide AOD prevention support to the APPS prevention sites in the community. Focus on healthy relationships, goal setting, and problem solving/coping strategies.		
Target Population:	14-18 year olds		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School	X		
Individual/Peer	X		
Implementing Agency:	Columbus Public Health		
Number Reached Annually:	50		
Duration:	1 hour per week		
Frequency:	9 months		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	
Alternative Activities	X	Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP	X	OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
Conduct annual pre/post resiliency survey with customers, strength assessments.			
Geographical Area Served:	East Side		
Culturally Competent:	Unknown	If 'yes', describe below:	

Agency Name:	Columbus Public Health	Contact:	Tia Moretti
Address:	240 Parsons Ave.		
Phone:	(614) 724-2033	Email:	TIDoegan@columbus.gov
Resource Type:	Program		
Resource Name:	SAGE		
Resource Description:	Substance abuse general education program for 18 and older, based on the Prevention Research Institute PRIME for Life curriculum.		
Target Population:	18 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School			
Individual/Peer	X		
Implementing Agency:	Columbus Public Health		
Number Reached Annually:	144		
Duration:	1 week		
Frequency:	12 months		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	
Environmental Strategies		Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
Pre/Post test and completion of Personal Plan using low risk guidelines.			
Geographical Area Served:	Franklin County		
Culturally Competent:	Unknown	If 'yes', describe below:	

Agency Name:	Columbus Recreation & Parks	Contact:	Corey Leftridge
Address:	1111 E. Broad St. Columbus, OH 43205		
Phone:	(614 645-8430)	Email:	coleftridge@columbus.gov
Resource Type:	Program		
Resource Name:	Applications for Purpose, Pride, and Success (APPS)		
Resource Description:	Violence prevention/intervention program aimed at reducing the incidences of gang-involved shootings and youth homicide in four Columbus neighborhoods.		
Target Population:	14-21 year olds		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement	X	Other	
Risk/Protective Factors Targeted:			
Family			
Community	X		
School			
Individual/Peer			
Implementing Agency:	Columbus Recreation & Parks Dept.		
Number Reached Annually:	1,000		
Duration:	6 days per week, 8-11:30 p.m. Thu/Fri and 7-11:30 p.m. Saturday		
Frequency:	12 months		
Prevention Strategies Utilized:			
Education		Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	X
Alternative Activities	X	Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance		Other (No response)	X
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	X
Has Implementing Agency Evaluated Outcomes:	Unknown	If 'yes', describe below:	
Geographical Area Served:	Columbus		
Culturally Competent:	Yes	If 'yes', describe below:	
Criminal Justice Intervention			

Agency Name:	CompDrug	Contact:	Jill Smock
Address:	547 E. 11th Ave. Columbus, OH 43211		
Phone:	(614) 224-4506	Email:	jsmock@youthtoyouth.net
Resource Type:	Program		
Resource Name:	Youth to Youth Conference		
Resource Description:	AOD prevention teen leadership program, four day conference		
Target Population:	14-21 year olds		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School	X		
Individual/Peer	X		
Implementing Agency:	CompDrug, Inc.		
Number Reached Annually:	101		
Duration:	4 days		
Frequency:	Annually		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	
Environmental Strategies		Information Dissemination	
Alternative Activities	X	Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
Participant evaluations			
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
High school youth			

Agency Name:	CompDrug	Contact:	Cheryl Campbell
Address:	547 E. 11th Ave. Columbus, OH 43211		
Phone:	(614)224-4506	Email:	ccampell@youthtoyouth.net
Resource Type:	Program		
Resource Name:	Youth to Youth Advisors		
Resource Description:	AOD prevention teen leadership program		
Target Population:	14-21 year olds		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School			
Individual/Peer	X		
Implementing Agency:	CompDrug		
Number Reached Annually:	40		
Duration:	2 hours per week		
Frequency:	9 months		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	
Environmental Strategies		Information Dissemination	
Alternative Activities	X	Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
No response			
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
High School Youth			

Agency Name:	Community for New Direction	Contact:	Myia Thomas
Address:	993 E. Main St. 43205		
Phone:	(614) 272-1464	Email:	mthomascnd@gmail.com
Resource Type:	Program		
Resource Name:	Future Opportunities Created for Urban Students (FOCUS)		
Resource Description:	Winning Futures (evidence-based curriculum)		
Target Population:	14-21 year olds		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family	No response		
Community	Reward for prosocial involvement		
School	No response		
Individual/Peer	Social skill building		
Implementing Agency:	CND		
Number Reached Annually:	50-60		
Duration:	2 hours per week		
Frequency:	9 months		
Prevention Strategies Utilized:			
Education		Problem Identification and Referral	
Environmental Strategies		Information Dissemination	
Alternative Activities	X	Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
No response			
Geographical Area Served:	Columbus		
Culturally Competent:	Yes	If 'yes', describe below:	
African American			

Agency Name:	Drug Free Action Alliance	Contact:	Derek Longmeier
Address:	No response		
Phone:	No response	Email:	dlongmeier@DrugFreeActionAlliance.org
Resource Type:	Program		
Resource Name:	Youth Led Prevention Network		
Resource Description:	Fosters partnerships among youth led programs throughout Ohio.		
Target Population:	14-21 year olds		
Causal Factors Targeted:			
Social Availability		Community Norms	X
Retail Availability		Individual Factors	
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community	X		
School			
Individual/Peer			
Implementing Agency:	Drug Free Action Alliance		
Number Reached Annually:	Unknown		
Duration:	Unknown		
Frequency:	Monthly		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	
Environmental Strategies	X	Information Dissemination	X
Alternative Activities	X	Other	
Community-Based Process	X		
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	No		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Unknown	If 'yes', describe below:	
Geographical Area Served:	Statewide		
Culturally Competent:	Unknown	If 'yes', describe below:	

Agency Name:	Drug Free Action Alliance	Contact:	Emile Brown
Address:	6155 Huntley Rd. Suite A Columbus, OH 43229		
Phone:	(614) 540-9985	Email:	ebrown@drugactionalliance.org
Resource Type:	Program		
Resource Name:	Ohio Center for Coalition Excellence		
Resource Description:	Services for Ohio coalition and community-based prevention agencies		
Target Population:	18 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	X
Retail Availability		Individual Factors	
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community	X		
School			
Individual/Peer			
Implementing Agency:	Drug Free Action Alliance		
Number Reached Annually:	Unknown		
Duration:	4 hours		
Frequency:	Bi-monthly		
Prevention Strategies Utilized:			
Education		Problem Identification and Referral	
Environmental Strategies	X	Information Dissemination	
Alternative Activities		Other	
Community-Based Process	X		
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP	X	OJJDP	
Has Implementing Agency Evaluated Outcomes:	Unknown	If 'yes', describe below:	
Geographical Area Served:	Statewide		
Culturally Competent:	Unknown	If 'yes', describe below:	

Agency Name:	Maryhaven	Contact:	Register online
Address:	1791 Alum Creek Dr. Columbus, OH 43207		
Phone:	(614) 445-2131	Email:	www.maryhaven.com
Resource Type:	Program		
Resource Name:	Underage Drinking Driver Intervention Program		
Resource Description:	One-day AOD education intervention class for young adults between the ages of 18-21.		
Target Population:	Young adults ages 18-21		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement	X	Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School			
Individual/Peer	X		
Implementing Agency:	Maryhaven		
Number Reached Annually:	Unknown		
Duration:	1 day		
Frequency:	4 months		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	No		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	No	If 'yes', describe below:	
Geographical Area Served:	Franklin County		
Culturally Competent:	Unknown	If 'yes', describe below:	

Agency Name:	Rise Sister Rise Research Project	Contact:	Jill Frost
Address:	Web address: http://risesisterrise.org		
Phone:	(614) 259-RISE	Email:	jillfrost@risesisterrise.org
Resource Type:	Program		
Resource Name:	Columbus Committee		
Resource Description:	Leadership development program for African American girls		
Target Population:	14-18 year-old girls		
Causal Factors Targeted:			
Social Availability		Community Norms	X
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School	X		
Individual/Peer	X		
Implementing Agency:	Rise Sister Rise		
Number Reached Annually:	Unknown		
Duration:	Unknown		
Frequency:	Unknown		
Prevention Strategies Utilized:			
Education		Problem Identification and Referral	
Environmental Strategies		Information Dissemination	X
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
No response			
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
African American Females			

Agency Name:	Columbus Area Inc./Project Linden Inc.	Contact:	Susie Shipley Norwood
Address:	1410 Cleveland Ave. #2 Columbus, OH 43211		
Phone:	(614) 221-7790	Email:	snorwood@columbus_area.com
Resource Type:	Program		
Resource Name:	Women's ATOD Program		
Resource Description:	Intervention service for women		
Target Population:	18 year olds and older		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School			
Individual/Peer	X		
Implementing Agency:	Columbus Area Inc./Project Linden Inc.		
Number Reached Annually:	300		
Duration:	2.5 hours per week		
Frequency:	8 weeks		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
No response			
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
African American Women			

Agency Name:	Columbus Area Inc./Project Linden Inc.	Contact:	Susie Shipley Norwood
Address:	1410 Cleveland Ave. #2 Columbus OH 43211		
Phone:	(614) 221-7790	Email:	snorwood@columbus_area.com
Resource Type:	Program		
Resource Name:	Women's Pregnant Program		
Resource Description:	No response		
Target Population:	14 year olds and older		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School			
Individual/Peer	X		
Implementing Agency:	Project Linden		
Number Reached Annually:	30		
Duration:	2 hours per week		
Frequency:	15 weeks		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
No response			
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
African American Women			

Agency Name:	Project Linden Inc.	Contact:	Susie Shipley Norwood
Address:	1410 Cleveland Ave. #2 Columbus, OH 43211		
Phone:	(614) 221-7790	Email:	snorwood@columbus_area.com
Resource Type:	Program		
Resource Name:	Women's Pre-Treatment Program		
Resource Description:	Early intervention services for women		
Target Population:	18+ adults		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School			
Individual/Peer	X		
Implementing Agency:	Project Linden		
Number Reached Annually:	550		
Duration:	1 hour		
Frequency:	1 hour		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
No response			
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
African American Women			

Agency Name:	Urban Minority Alcoholism & Drug Abuse Outreach Program	Contact:	Denise Saunders
Address:	510 E. Mound St. Columbus OH, 43215		
Phone:	(614) 227-9694	Email:	dsaunders@umadaopfc.com
Resource Type:	Program		
Resource Name:	Enhanced Community Based		
Resource Description:	Life skills, wrap around services.		
Target Population:	18 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family	X		
Community	X		
School			
Individual/Peer	X		
Implementing Agency:	UMADAOPFC		
Number Reached Annually:	45		
Duration:	3-5 hours per day		
Frequency:	6 months		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	X
Alternative Activities	X	Other	
Community-Based Process	X		
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction	X		
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
Each customer is assessed quantitatively for goals reached.			
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
African American			

Agency Name:	Urban Minority Alcoholism & Drug Abuse Outreach Program	Contact:	Reggie Battle
Address:	510 E. Mound St. Columbus, Oh 43415		
Phone:	(614) 227-9694	Email:	rbattle@umadaopfc.com
Resource Type:	Program		
Resource Name:	Circle for Recovery		
Resource Description:	No response		
Target Population:	18 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	X
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement	X	Other	
Risk/Protective Factors Targeted:			
Family			
Community			
School			
Individual/Peer	X		
Implementing Agency:	UMADAOP		
Number Reached Annually:	50		
Duration:	2 times per week		
Frequency:	12 months		
Prevention Strategies Utilized:			
Education	X	Problem Identification and Referral	X
Environmental Strategies		Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Yes		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Yes	If 'yes', describe below:	
No response			
Geographical Area Served:	Franklin County		
Culturally Competent:	Yes	If 'yes', describe below:	
African American Males			

Agency Name:	Alcoholic & Drug Abuse Prevention Association of Ohio	Contact:	Jim Ryan
Address:	P.O. Box 2394 Columbus, Oh 43216		
Phone:	(614) 470-3922	Email:	ADAPO@aol.com
Resource Type:	Policy		
Resource Name:	Marijuana as Medicine		
Resource Description:	No response		
Target Population:	18 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	X
Retail Availability		Individual Factors	
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement		Other	
Risk/Protective Factors Targeted:			
Family			
Community	X		
School			
Individual/Peer			
Implementing Agency:	ADAPO		
Number Reached Annually:	Unknown		
Duration:	Unknown		
Frequency:	12 months		
Prevention Strategies Utilized:			
Education		Problem Identification and Referral	
Environmental Strategies	X	Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance		Other	
Satisfaction			
Evidence-Based:	No response		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	N/A	If 'yes', describe below:	
Geographical Area Served:	Statewide		
Culturally Competent:	N/A	If 'yes', describe below:	

Agency Name:	Franklin County Sheriff	Contact:	Sergeant Charley Brown
Address:	323 S. High Street Floor 2b Columbus, OH 43215		
Phone:	(614) 525-6317	Email:	clbrown@franklincountyohio.gov
Resource Type:	Practice		
Resource Name:	Operation Street Smart for a New A.G.E.		
Resource Description:	No response		
Target Population:	18 years old and older		
Causal Factors Targeted:			
Social Availability		Community Norms	
Retail Availability		Individual Factors	
Promotion		Provider Lack of Knowledge	
Criminal Justice/Enforcement	X	Other	
Risk/Protective Factors Targeted:			
Family			
Community	X		
School			
Individual/Peer			
Implementing Agency:	Franklin County Sheriff		
Number Reached Annually:	Unknown		
Duration:	Unknown		
Frequency:	Unknown		
Prevention Strategies Utilized:			
Education		Problem Identification and Referral	
Environmental Strategies	X	Information Dissemination	
Alternative Activities		Other	
Community-Based Process			
Type of Implementation Data Collected:			
Attendance	X	Other	
Satisfaction			
Evidence-Based:	Unknown		
Agency List Containing the Program:			
NIDA		DOE	
CDC		Drug Strategies	
CSAP		OJJDP	
Has Implementing Agency Evaluated Outcomes:	Unknown	If 'yes', describe below:	
Geographical Area Served:	Franklin County		
Culturally Competent:	Unknown	If 'yes', describe below:	

Appendix VI: Additional Policy Information

CRIMINAL JUSTICE AND LAW ENFORCEMENT FACTORS

1. State-Level Policy Scan

An offense policy scan regarding marijuana considers not only possession, driving, and sale, but also possession and sale of marijuana paraphernalia. It is important to note that for all drug convictions, except minor misdemeanors, the offender's driver's license is also suspended for a period of 6 months - 5 years. Professional licenses are also suspended. Source: <http://northohio.norml.net/law.shtml>

Paraphernalia

As of September, 2012 possession of paraphernalia intended for use with marijuana was reduced to being a minor misdemeanor from a fourth degree misdemeanor. This means police would most likely cite, rather than arrest a person in possession of paraphernalia. Driver's licenses would still be suspended for six months, however.

Driving

Officers are to administer drug tests during a traffic stop if they "suspect" intoxication. This legislation also created a "prohibitive level" of marijuana in one's system making it possible to be charged with DUI if one has smoked recently at all.

Under Ohio's law, motorists with detectable levels of THC in the blood above 2 ng/ml or detectable levels of THC-COOH in the urine above 15 ng/ml are guilty of DUID. (Ohio Revised Code Annotated Section 4511.19, Amended by Senate Bill 8).

Sale

Amount Max.	Offense Level	Sentence Max.	Fine
20 g or less (is considered possession)	civil citation	none	\$100
Less than 200 g	misdemeanor or felony	6 - 18 months	variable
200 g to 600 g	felony	1 - 5 years	variable
600 g or more	felony	6 months MMS*	variable
To minors within 1,000 feet of school, within 100 feet of a juvenile, and previous felony drug convictions	felony	increased penalty	increased penalty
*Mandatory minimum sentence.			

Sale or delivery of 20 grams or less, for no remuneration, is considered possession and is punished with a fine of \$100. Sale or distribution of less than 200 grams carries a penalty of 6 - 18 months in jail. Sale or distribution of

200 grams or more is punishable by 1 - 5 years in prison. Sale or distribution of 600 grams or greater carries a mandatory minimum sentence of six months and a possible 2 - 8 year sentence.

Sale to minors, sale within 1,000 feet of a school, sale within 100 feet of a juvenile, and previous felony drug convictions all increase the penalty for the sale or distribution of marijuana.

Since Loitering is also an offense, this is sometimes used to arrest those suspected of attempting to sell or purchase drugs.

Source: <http://northohio.norml.net/law.html>

Law enforcement: Ohio

Ohio is one of the easiest states on marijuana smokers. It is not unheard of for an officer to confiscate one's marijuana (if it's a small enough amount) and send them home. While it's technically a violation to possess drug paraphernalia, it is usually dealt with the same way as is marijuana - with a simple ticket.

However, arrests for marijuana accounted for 49% of Ohio arrests for illicit drugs. In 2007, the arrest rate was 204 arrests per 100,000 population, or 2,297 per 100,000 marijuana users. Ohio has shown a consistent proportional increase in marijuana arrests each year. Source: *Marijuana In Ohio* by Jon Gettman, PhD. In *The Bulletin of Cannabis Reform*, 10/19/2009 (www.drugscience.org)

Alcohol and Drug Abuse Prevention Association of Ohio (ADAPAO)

ADAPAO is a not-for-profit, membership-based association that serves as the voice of alcohol, tobacco and other drug prevention in Ohio. ADAPAO provides a unified voice for prevention in many ways, including:

- Providing cutting edge training and education for prevention advocates.**
- Organizing advocacy campaigns to empower Ohioans and reduce the impact of alcohol, tobacco and other drug abuse in our communities.**
- Networking community leaders dedicated to prevention.**
- Speaking to the Ohio Legislature and others on bills, initiatives and activities affecting prevention and alcohol, tobacco and other drug abuse in Ohio.**

Position Paper on Marijuana as Medicine

ADAPAO and our partner, Drug-Free Action Alliance, continue to educate prevention and treatment advocates, professionals and supporters, as well as the broader community, about the organizations' position paper addressing the issue of marijuana as medicine. To download the ADAPAO and Drug-Free Action Alliance Position Paper on Marijuana as Medicine,

[http://www.adapao.org/Marijuana as Medicine Position Paper.pdf](http://www.adapao.org/Marijuana%20as%20Medicine%20Position%20Paper.pdf)

Source: <http://www.adapao.org>

Law enforcement: Ohio Urban African American Communities

Racial Profiling: Definition

"Racial Profiling" refers to the discriminatory practice by law enforcement officials of targeting individuals for suspicion of crime based on the individual's race, ethnicity, religion or national origin. Criminal profiling, generally, as practiced by police, is the reliance on a group of characteristics they believe to be associated with crime. Examples of racial profiling are the use of race to determine which drivers to stop for minor traffic violations (commonly referred to as "driving while black or brown"), or the use of race to determine which pedestrians to search for illegal contraband." (<http://www.aclu.org/racial-justice/racial-profiling-definition> downloaded 11/09/2012)

The 40-Year War on Drugs: It's Not Fair, and It's Not Working.

June 2011 has the unfortunate distinction of marking the 40th anniversary of President Richard Nixon's declaration of a "war on drugs" — a war which has cost \$1 trillion but produced little to no effect on the supply of or demand for drugs. The war on drugs has been a war on communities of color. The racial disparities are staggering: despite the fact that whites engage in drug offenses at a higher rate than African-Americans, African-Americans are incarcerated for drug offenses at a rate that is 10 times greater than that of whites. Source: <http://www.aclu.org/blog/criminal-law-reform/40-year-war-drugs-its-not-fair-and-its-not-working> downloaded November 09, 2012

The Drug War, Minorities and the Rust Belt

[The New Jim Crow: Mass Incarceration in the Age of Colorblindness](#), former Stanford Law professor, civil rights lawyer, and current Ohio State University faculty member, Michelle Alexander convincingly paints the war on drugs as far more than just a failed multi-decade policy that has resulted in America becoming the prison capital of the world. Instead, she positions the drug war as part of a racial caste system that has imprisoned over a million African American men and disenfranchised even more. Drug arrests—eighty percent of which were for simple possession in 2005—have enormous consequences. Felony drug convictions can result in a variety of catastrophic punitive measures: one can be excluded from public housing eligibility for five years; be denied school loans, the right to vote or serve on a jury; discriminated against by potential employers; and be denied a professional license in a variety of fields.

For the cities in America's former manufacturing belt, most of which have substantial numbers of African Americans, if not outright majorities, the New Jim Crow is a catastrophe of monumental proportions. As of 2009, in Ohio—a state with several distressed cities containing substantial populations of African Americans—there are more black men in prison than there are in universities. Fifty Percent of the nearly 8,000 drug arrests in 2008 in Ohio were cases of possession and not trafficking. Black men are nearly six times more likely to be arrested in Ohio for drugs than are white men. Black males make up twelve percent of Ohio's population but constitute half of the state's prisoners.

Source: <http://rustwire.com/2011/01/25/the-drug-war-minorities-and-the-rust-belt/>

News Media Outlets:

The evening news anchors typically leads the 5:00pm news and the 11:00pm news with reports of drug related violent crimes and show a mug shot or a law enforcement officer arresting an African American as the perpetrator or a person of interest. Sometimes the station use goggle earth to show the house and surrounding block to pinpoint the location of the crime. If it is a death, family members are crying as reporters push microphones in front of them asking them questions about their friend or love one.

Kids Count Issue Brief: Rethinking Juvenile Detention in Ohio, October 2010

Racial disparities make the likelihood of being arrested for minor offenses greater by orders of magnitude for African American and other minority youth. While there is a decline in overall juvenile arrests, youth of color are arrested at significantly higher rates than white youth for *all types of crime*. The differences are at their greatest in arrest rates for person-related offenses such as assault or sexual offenses; African

American youth are nearly four times more likely to be arrested than Caucasian children. And for property and drug offenses, African American youth are twice as likely to be *arrested*.”

These disparities highlight the likelihood of youth from communities of color being placed in detention at higher rates. Unfortunately, the contrasts do not stop at arrest, race impacts whether juveniles enter the juvenile system and how they are treated once involved. *While Caucasian youth are twice as likely to be diverted; African American youth are twice as likely to be detained.* [Source: Neelum Arya and Ian Augarten, policy brief, *Critical Condition: African-American Youth in the Justice System*, vol. 2 downloaded from <http://www.campaignforyouthjustice.org/documents/AfricanAmericanBrief.pdf>]

Ohio Urban Counties Juvenile Justice Detention 2008

County	White	White %	African American	African American %	Hispanic	Hispanic %	Other	Other %
Cuyahoga	438	16.9	2068	80.0	76	2.9	4	.2
Franklin	706	24.9	2055	72.6	57	2.0	12	.4
Lucas	762	23.6	2334	72.1	138	4.3	1	.0
Montgomery	467	34.4	877	64.5	8	.6	7	.5
Summit	470	36.7	808	63.0	0	.0	4	.3

Source: Children’s Defense Fund – Ohio • www.childrensdefense.org/ohio; downloaded November 9, 2012

OHIO Legislature Passes Sentencing Reform Bill

Ohio’s new sentencing reform bill includes a range of positive changes for youth. It explicitly supports research informed, outcome-based programs and services; allows judges to consider early release opportunities throughout a youth’s commitment, including youth serving mandatory sentences; revises mandatory sentencing guidelines for youth to allow for judicial discretion in instances where the youth was not the main actor; adopts uniform competency standards for all delinquency proceedings; establishes a reverse waiver provision that makes it possible for young people automatically transferred to adult court to return to juvenile court at the discretion of the judge; and creates a temporary interagency task force to make recommendations to the legislature for addressing the needs of delinquent youth with significant mental health issues. H.B. 86, signed into law June 29, 2011; effective September 30, 2011.

Source: Balck, Annie. *Advances in Juvenile Justice Reform: 2009-2011*. Washington, D.C.: The National Juvenile Justice Network, 2012.

State Drastically Decreases Number of Youth Held in Facilities While Increasing Funding for Community-Based Programming

The Ohio Department of Youth Services (ODYS) has closed four youth facilities and downsized existing facilities since July 2009, thanks to RECLAIM Ohio—a fiscal realignment program that diverts funds from youth prisons to community-based alternatives—and reforms stemming from a 2008 class-action lawsuit (*S.H. v. Stickrath*, Case No. 2:04-cv-1206, now *S.H. v. Reed*), as well as state budget reductions. The average daily population in ODYS facilities dropped over 50 percent between December 2008 and December 2011. Through its facility closures, Ohio freed up over \$57 million in operational expenses that had previously been spent on incarceration, a portion of which has been reinvested in Targeted RECLAIM and the Behavioral Health Juvenile Justice Initiative, which aim to reduce commitments to ODYS and increase the use of evidence-based

programs in the community. Additional savings from the closures are being invested in the Annie E. Casey Foundation's Juvenile Detention Alternatives Initiative (JDAI) and a residential treatment alternative for girls.

2. Local-Level Policy Scan

Note that data after 2007 is unavailable. In 2007, Franklin County had the 4th highest arrest rate for marijuana possession of Ohio Counties, behind Hamilton, Cuyahoga and Summit. Considering the presence of Ohio State University within the county area, this would indicate that arrest percentages are not a strong focus within the county as a whole.

Nevertheless, racial differences appear (based on state data). In 2007, arrests of Whites for marijuana possession composed 66% of arrests, while arrests of African-Americans composed 34%. However, this translates to 120 arrests per 100,000 of population for Whites vs. 430 arrests per 100,000 population for African-Americans. Our target population is African Americans.

DEA: \$1 Million In Drugs Found Welded Into Heavy Machinery During West Side Raid Thursday March 29, 2012 3:08 PM UPDATED: Thursday March 29, 2012 9:00 PM

COLUMBUS, Ohio - Five people were arrested on Thursday afternoon in a marijuana bust at a vacant west side warehouse. The Ohio State Highway Patrol, the Drug Enforcement Administration and the Franklin County Sheriff's Office were at the warehouse, located at 777 Manor Park Dr., 10TV's Kevin Landers reported. Drugs worth more than \$1 million were found welded into heavy machinery at the warehouse, DEA officials said.

Source: <http://www.10tv.com/content/stories/2012/03/29/columbus-5-arrested-in-west-side-warehouse-drug-bust.html>

Criminal Justice System: Franklin County Drug Court (Adult)

The Franklin County Common Pleas Court created the "Treatment is Essential to Success" (TIES) Program in order to lessen the impact of drug and/or alcohol use on the level of crime in Franklin County. The TIES Program began operation in April 2004 by Judge Jennifer L. Brunner (ret.) after two years of planning. A steering committee was created and support was enlisted from community leaders and the Common Pleas judges. The TIES Program consists of three twelve-week Phases of decreasing structure. as participants learn to make healthier lifestyle choices. A final six-month period of more traditional probation follows completion of Phase III. Most participants complete the program in less than 18 months and are eligible for successful termination of probation. The TIES Program is under the supervision of [Judge Patrick E. Sheeran](#). Judge Sheeran heads the TIES Team which consists of representatives from Probation, the Defense Bar, the Franklin County Prosecutor's office and liaisons from each of the partner treatment agencies.

Source: [http://www.fccourts.org/gen/webfront.nsf/wp/E83AB884D5182D1385257507005DBE47?](http://www.fccourts.org/gen/webfront.nsf/wp/E83AB884D5182D1385257507005DBE47?opendocument)
opendocument down loaded 11/09/2012

Law enforcement: Franklin County Urban African American Communities

Commitments from the Franklin County Courts to the Ohio Department of Rehabilitation and Correction by Race , 2010 --

- In 2010, blacks represented 44.0% of those committed to state prison facilities from the Franklin

County court system, although they comprised only 19.3% of the population of Franklin County.
 Source: http://centralohioindicators.org/site/indicators/safety/1_PDFS/Safety%209.pdf
Homicides in Columbus, Ohio; compiled from Columbus Dispatch Article; December 11, 2012

Cols	# H Cols	# H FC	F	M	Age 01-19	Age 20-39	Age 40-59	B	W	H	Shoot	Stab	Trauma
Year													
2011	92	8	14%	86%	14%	52%	26%	63%	27%	4%	82%	9%	6%
2012	84	9	12%	88%	15%	56%	25%	70%	26%	3%	80%	4%	11%

<http://www.dispatch.com/content/pages/data/crime-safety/homicide/homicides.htm>

Juvenile Justice System: Franklin County

Juvenile Justice: The Franklin County, Ohio Disproportionate Minority Contact (DMC) Report Developed for The United Way of Central Ohio September 1, 2008 Prepared by: Stephen M. Gavazzi, Ph.D. Consulting and Clinical Services Hilliard, Ohio Amended by: Bev Seffrin, Ph.D. Franklin County Juvenile Court May, 2010; downloaded November 26, 2012

The 2000 U.S. Census figures indicate that the Franklin County overall juvenile population is made up of approximately 67% White youth and 33% minority youth mostly African American (27%) however the number youth of African American youth (64%) referred to detention is

The committee used the 2005 juvenile court data on residence of arrested youth; two geographical areas: 43211 South Linden and 43205 Near East both in Columbus contained the most youth who had contact with the juvenile justice system in both admissions and detention. The trend continues see chart below.

JDC Admissions Trend Analysis:						
Year	African American # of Admissions	African American %	White # of Admissions	White %	Other # of Admissions	Other %
2007	2,785	65%	1,330	31%	144	3%
2008	2,080	71%	684	23%	154	5%
2009	1,731	69%	607	24%	153	6%
2010	1,578	71%	540	24%	110	5%
ADAMH Early Intervention Juvenile Justice Request for Responses PowerPoint, breakout by age not available						

Source: <http://www.fccourts.org/gen/webfront.nsf/wp/E83AB884D5182D1385257507005DBE47?opendocument>

ADAMH BOARD OF FRANKLIN COUNTY

Board ACTION -APPROVED

March 26, 2013

Action Title: ADAMH System Investments – Early Intervention Juvenile Justice

Action Number: B13034

Contractor/Provider Name: The Village Network

Recommended Action: It is recommended that the ADAMH Board of Franklin County allocate up to \$598,000 to The Village Network in KY 2013 to operate the Early Intervention Juvenile Justice Program. This will be a

collaboratively funded project between ADAMH (\$200,000) and Franklin County Court of Common Pleas Juvenile Division (\$398,000).

Strategic Result Alignment: Access to Quality Care & Supports

Time Period: KY 2013: January 1, 2013 through December 31, 2013.

Population: Mental Health and Substance Abusing Adolescents who are also dully involved in the Franklin County Juvenile Justice System.

Rationale: ADAMH released this Request for Results (RFR) as part of the System Investments strategic initiative approved by the Board of Trustees in April 2012, as part of this phased process of investment. The [Title] initiative emerged as a targeted way to provide specialized treatment services for this identified underserved population and fills a clear service gap in Franklin County.

According to research youth who are detained in a juvenile correction facility are more than three times more likely to be found guilty and incarcerated than similarly situated peers. Based on the data, there may be a number of juveniles currently admitted into the Franklin County Juvenile Detention Center (JDC) who might be better served by community-based alternatives and existing programs and services in the community. This collaborative project seeks to expand the detention alternatives beyond electronic monitoring, secure confinement in the JDC, and house arrest. ADAMH and Juvenile Court have collaborated on this Request for Results (RFR) in order to address this community need. The result of this collaboration is the Reception Center Intervention which seeks to change the “front door” of the juvenile justice system and provide immediate access to services and resources.

The Reception Center Intervention is comprised of three components:

- **Reception Center-** Screening, assessment and linkage to care for youth who become involved in the juvenile justice system.
- **Shelter Care-** Short term alternative care setting for youth that cannot safely return home.
- **Evening Reporting Program-**Assessors at the Reception Center may refer appropriate youth to the Evening Reporting Program. This intervention provides structured activities and mental health and substance use groups to increase supervision during the key times of day when delinquency tends to occur.

Output: 1,000 youth receiving the Reception Center Intervention

Result Statement: 80% of the juveniles involved will not commit a new offense prior to the adjudication of the original charge(s) leading to the arrest

Result Efficiency: \$748 per client

Funding Source: ADAMH Levy and Franklin County Court of Common Pleas Juvenile Division

AVAILABILITY

Current Trends for Marijuana

Marijuana remains highly available in the region. Participants most often reported the drug's current availability as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was also '10.' Participants said marijuana use is very prevalent: *"It's like smoking a cigarette [smoking marijuana is as common as smoking tobacco]."* Treatment providers also most often reported the current availability of marijuana as '10,' and also likened the widespread use of the drug to that of cigarettes:

"[Smoking marijuana] it's like smoking a cigarette. I'd rate it a 35 [extremely easy to get]!" In addition to easily obtaining marijuana on the region's streets, a participant mentioned obtaining marijuana from Michigan's prescription marijuana program: *"[I get marijuana from] the weed clinics. You can always find some great stuff."* Media outlets in the region reported on seizures and arrests involving marijuana during this reporting period. According to *10TV News*, law enforcement arrested a Bloom Township (Fairfield County) resident after they found, *"a million dollar growing operation"* inside his home; law enforcement found hundreds of plants along with sophisticated hydroponics equipment after receiving an anonymous tip (www.10tv.com, Aug. 4, 2011).

In another incident, *10TV News* reported that Knox County law enforcement found 40 marijuana plants after an aerial search; no one was arrested in connection with this growing operation (www.10tv.com, Aug. 24, 2011).

Availability of marijuana has remained the same during the past six months. The BCI London Crime Lab reported that the number of marijuana cases it processes has decreased during the past six months.

Participant quality scores of marijuana varied from '4' to '10' with the most common score being '7' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '10.' Participants continued to explain that the quality of marijuana depends on whether the user buys "commercial weed" (low- to mid-grade marijuana), high grade or hydroponically grown marijuana. Some participants discussed high-grade marijuana: *"Once you get into the good weed ... there's different kinds of it ... the best stuff is seedless, like it don't have no seeds. It's got red hairs."* Other participants warned that dealers try to pass off low-quality product as high-grade marijuana: *"Sometimes [high-grade marijuana] it's fake. It's fake stuff. Sometimes they [dealers] spray stuff on it to make it smell. It's weed, but it's not. Weed is a tricky thing."*

A profile of a typical marijuana user did not emerge from the data. Participants and treatment providers agreed that there is no specific age or other demographic category associated with marijuana use. According to Fairfield County Municipal Drug Court, a low percentage of men and women involved in their court test positive for drugs. Among those testing positive during the past six months, 14.3 percent of the positive urine drug screens were related to cannabis. Reportedly, marijuana is used in combination with alcohol, crack and powdered cocaine, and prescription opioids, particularly Percocet®. Participants said marijuana blunts are dipped in embalming fluid (aka "sherm"). A participant reported using codeine syrup in concert with marijuana: *"You can put codeine syrup on the blunt skin and roll it up."* Marijuana also is used to "come down from" a crack cocaine high. Other participants believed marijuana to be the perfect drug to use with others: *"Weed goes with everything; Marijuana's the partner in crime to everything!"*

Synthetic Drugs

Franklin County Drug Task Force Makes 38 Buys, Executes 17 Search Warrants During Operation

Synthetic Drugs; COLUMBUS, Ohio, May 2, 2012: Seven teams of the Franklin County Drug Task Force fanned out across central Ohio Wednesday as part of Operation Synthetic Drugs. Between 2-8 p.m., teams visited 148 stores, making 38 different buys of synthetic drugs, 10TV's Kevin Landers reported. The buys included spice and K2, which are synthetic marijuana, and bath salts, a synthetic opiate that mimics cocaine and can cause violent

hallucinations and death. Eighteen search warrants were executed during three waves of the operation around the Ohio State University campus, north and south Columbus and the west side, Landers reported.

Source: <http://www.10tv.com/content/stories/2012/05/02/columbus-franklin-county-drug-task-force.html>

RESPONSE

Franklin County Response to Substance Use and Abuse in the County I

Enforcement of Policy

Franklin County

Unfortunately, crime data for Franklin County after 2007 is unavailable. There has been a major problem with data entry and structuring making the information either absent or unusable. We are forced to use with state data or data from 2007 or earlier.

Table of Policy Level Influences

Priority Substance: Marijuana

Level: State-, Local-, or IHE-level	Policy	Number of Infractions (Arrests, etc.) 2007	Number of Infractions (Arrests, etc.) 2008	Number of Infractions (Arrests, etc.) 2009	Number of Infractions (Arrests, etc.) 2010	Number of Infractions (Arrests, etc.) 2011
Franklin County	Sobriety Checkpoints	2007: 7337 checked 27 DUI arrests	Data not available	Data not available		
	Felony DUI	1	Data not available	Data not available		
	Complaints	3	Data not available	Data not available		
Narcotics	Search warrants	44	Data not available	Data not available		
	Arrests	212	Data not available	Data not available		
	OVI arrests	1	Data not available	Data not available		
	Complaints	253	Data not available	Data not available		
	Drug Buys	159	Data not available	Data not available		
	Drug cases prepared	458	Data not available	Data not available		
Marijuana	Possession Arrests	1167	Data not available	Data not available		
Ohio State Highway Patrol in Franklin Co.	Drug Arrests	4720	5226	5322	5643	6164
	OVI Arrests					1862

Note the Sobriety check points. At these, or during traffic violation stops, police also check for marijuana paraphernalia, or other evidence of drug / alcohol presence and, if found, add this to the violation.

The ADAMH Board of Franklin County Response to Substance Use and Abuse in the County

Its mission is to improve the well-being of our community by reducing the incidence of mental health problems and eliminating the abuse of alcohol and other drugs in Franklin County.

The ADAMH Board of Franklin County Provider Network

ADAMH helps Franklin County residents find the right places to turn for affordable, quality alcohol, drug addiction and mental health services. These services are provided by more than 33 not-for-profit contract agencies located in neighborhoods throughout the county. A sliding fee scale for services means any Franklin County resident can receive needed services and be charged on the basis of income and circumstance. Services are funded in part by a single property tax levy approved by voters; State, and Federal, and the City of Columbus.

Prevention Services for Youth and Adults

The program purpose is to provide alcohol, drug, and mental health education and skill-building services to children, youth, families and individuals so they can avoid the abuse of drugs and alcohol, make positive behavior choices, and improve the well-being of our community. In 2011, ADAMH invested Prevention 5 million people served by your organizations in 2011, there were 15,200 youth and 14,300 adult consumers. Services include: ATOD screening services; Coalition building services; Early intervention services: HIV, ATOD, suicide prevention, anger management, job readiness; Hotline services; School and community-based mental health services: consultation, support groups facilitation, student assistance, parental support.

Prevention & Treatment Providers serving the urban core: Africentric Personal Development Shop, Amethyst, Inc, Columbus Area Inc, Columbus Public Health Department, Columbus Urban League, Community for New Direction, CompDrug, Direction for Youth & Families, Maryhaven, Neighborhood House, Project Linden, St Vincent Family Centers, The Urban Minority Alcohol and Drug Abuse Outreach Program.

Prevention Partnerships Include:

City of Columbus Department of Development, City of Columbus Recreation and Parks Department, Ohio Department of Education, Franklin County Urban SPF SIG Coalition

Churches and Faith Based Groups: Family Missionary Baptist Church, The Greater Hilltop Shalom Zone, Ernest Hardy Center, The Heart of the City Freedom School,

Services for Adults Recovering from Substance Abuse and Addiction

The program purpose is to develop and monitor programs that provide Alcohol and Other Drug (AOD) treatment and recovery support services to adults recovering from substance abuse and addiction so they can live, work, learn, and participate in their community. Services include: Ambulatory detox services, Buprenorphine services, Case management services, Halfway house treatment services, Hospital detox acute services, Hospital detox sub-acute services, Methadone services, Outpatient and intensive outpatient services, Residential detox acute services, Screening analysis services, Short and long term residential services.

Cultural Competence

ADAMH believes that cultural competency is achieved by translating and integrating knowledge about individuals and groups of people into specific practices and policies applied in appropriate cultural settings. Cultural competence is defined as “a set of cultural behaviors and attitudes integrated into the practice methods of a system, agency, or its professionals, that enables them to work effectively in cross cultural situations.”

When professionals are culturally competent, they:

- establish positive helping relationships;
- engage the client; and
- improve the quality of services they provide.

The ADAMH system is accountable for assuring effective treatment to those in need; the adoption of cultural competency standards furthers the likelihood of effective treatment outcomes for all citizens. ADAMH strives to provide culturally appropriate services to all community groups including:

- African American
- Deaf/Hearing Impaired
- Latino Community
- LGBTQ Community
- Native American
- Somali Community

The Consumer and Family Advisory Council

The Consumer and Family Advisory Council was formed in 1997 so consumers and family members could offer input and advice to the ADAMH system of care. The Council is a voluntary group of individuals who are either recovering from mental illness or drug and alcohol addiction themselves, or have family members who are. The Council provides a network of individuals for advocacy, support to families, and advice to the ADAMH staff, Board of Trustees, service providers, as well as an educator in the community on mental health and substance abuse issues.

Source: www.adamhfranklin.org **City Of Columbus Response to Substance Use and Abuse**

Columbus Department of Development:

The city has been divided into 12 service areas and a Liaison has been assigned to each of the areas to work directly with the citizens and neighborhood organizations. Each Neighborhood Liaison also serves a specific Area Commission and/or a Civic Association by working to assist the organization with any issue involving the better delivery of City services. The FCUC target population lives in Areas 2,3,4,5,8, 9, and12. One of the goals of these service areas is to promote Block Watch activity to monitor drug use and other criminal activity.

<http://development.columbus.gov/content.aspx?id=20178&linkidentifier=id>

Columbus Department of Development: Neighborhood Pride Centers are a direct communications link between the city and community. The Pride Center is a one-stop-shop for city services and is dedicated to protecting the health, safety and welfare of the families living in the area.

Pride Centers house basic city services all in one place. The Pride Center staff includes the community liaison police officers, Department of Development code enforcement officers and solid waste inspectors, Public Service refuse collection division staff, Department of Development housing division staff and your Neighborhood Liaison. The Neighborhood Pride Center staff work together in your neighborhood to tackle the issues that most

concern your community. The Neighborhood Pride Centers are open to the public and residents are encouraged to come to the office to ask questions, receive help and talk with city representatives.

<http://development.columbus.gov/content.aspx?id=22512&linkidentifier=id>

Columbus Police Department: The Community Safety Initiative, a 12-week summer enforcement program that targets the most volatile neighborhoods in our city. Resources are based upon statistical data and intelligence as well as real-time monitoring of incidents. The goals of the program include: active targeting of violent and gang-related criminals; removal of unlawful firearms; serving outstanding warrants; ensuring safe environments within Downtown parks; responding to the concerns of community members; increasing the presence of uniformed officers; and timely deployment of resources. In 2012, the CSI addressed 2,530 hotspots; checked 944 businesses, churches and schools; made more than 220 felony arrests and 200 misdemeanor arrests; and recovered 75 guns.

Columbus Police Department: Community Response Teams work the streets year around to address violent criminal activity in specific high crime areas while maintaining a positive and professional relationship with the residential and business communities in the targeted areas. The CRT provides a visible uniform presence in those areas where there has been an increase in violent crime and provides strict enforcement of traffic and criminal laws.

Columbus Police Department: Neighborhood Safety Cameras: Columbus currently has more than 120 neighborhood safety cameras located in five neighborhoods throughout the city, which has led to significant reductions in crime—ranging from 49 percent to 14 percent—in four of the five neighborhoods.

Columbus Police Department: License Plate Readers: Many of our police cruisers are equipped with a camera that scans license plates as the cruiser drives around on routine patrols. The reader has the ability to notify an officer if a license plates number that has been scanned has been reported stolen. This does not reduce motor vehicle thefts but aids in the recovery process.

Columbus Recreation & Parks Applications for Purpose, Pride and Success (APPS) has attracted approximately 6,600 young people to city recreation centers during expanded summer hours intended to provide positive activities for youth, including sports, games, arts and classes for life skills. Last summer the program was expanded to send community intervention teams into neighborhoods and events to engage young people and prevent violence. Also, community festivals in four separate areas of the city were held, attracting thousands of additional residents on weekend nights.

Source: <http://www.cityofcolumbus.org/>

December 12, 2012

For Immediate Release

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MAYOR COLEMAN & ADAMH Board partner on Recreation Initiative

Yesterday, the Alcohol, Drug and Mental Health Board of Franklin County's Board of Trustees approved an investment of \$350,000 to partner with the City of Columbus to provide prevention services to at-risk youth in select Recreation Centers operated by Columbus Parks & Recreations

Department. This new investment is expected to serve 900 young adults (ages 18-24) in 2013.

Mayor Coleman’s vision for the Recreation Center’s Applications for Purpose, Pride and Success (APPS) program is to create a violence-free city environment for young people. This program was designed to enrich the lives of youth and young adults by connecting them to services and programs focused on building life skills, character development, jobs, post-secondary education, and other components that further enhance the recreational programs.

Columbus Public Health submitted a proposal to ADAMH to fund vital alcohol and other drug use and abuse prevention and intervention services to youth and young adult participants at four key recreation centers: Linden (north), Barack (south) Beatty (east) and Glenwood (west). This investment will increase the capacity to serve the youth and young adults by offering a range of targeted programming during evening hours (8 - 11:30 p.m.) and weekend hours (7 -11:30 p.m.) year round.

“I want to thank ADAMH for supporting our youth through this extraordinary partnership with Columbus Recreation and Parks and our APPS program,” Mayor Coleman said. “This investment will complement the efforts we have been making in recent years to intervene in the lives of our young people so that they can live successful and rewarding lives.”

“We want to make strategic investments in young adults who are exposed to high levels of poverty with an increased risk of alcohol and other drug. Partnering with the neighborhood recreation centers is a practical way to reduce the incidence of alcohol and drug related violence in our community. We are grateful for Mayor Coleman’s leadership,” said David Royer, CEO of the ADAMH Board.

ADAMH is Franklin County’s authority for planning, funding and evaluating mental health, alcohol and drug abuse prevention and treatment services. ADAMH-funded services are provided by a local network of more than 30 not-for-profit providers and offered on a sliding-fee scale, making them affordable for any county resident, regardless of income.

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Source: www.adamhfranklin.org