Stereotype or Reality: Another Look at Alcohol and Drug Use Among African American Children

LINDA E. BASS, MA, MPH
EDNA KANE-WILLIAMS, MA

Ms. Bass, a Public Health Analyst, is Project Officer of the Urban Youth Public Education campaign in the Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, Public Health Service. Ms. Kane-Williams formerly served as Project Director of the Urban Youth Campaign at Global Exchange, Inc. She is currently an independent consultant.

Synopsis...

The Center for Substance Abuse Prevention's Division of Communications Programs launched its Urban Youth Public Education Campaign in late 1990 to target African American youth in 14 cities with prevention messages about alcohol and other drugs.

During the market research phase of the campaign, the Center sought to determine the extent inner city African American children are impacted by alcohol and other drugs and how widespread the use of these substances is among younger children. Is it rampant and universal, as some press accounts have it, or are the images portrayed by the news media, by popular movies, and by other communication outlets fueling harmful stereotypes?

The campaign's market research consisted of in-depth reviews of the literature, of personal communications, conference proceedings, grant and contract reports, monographs, newspaper and magazine articles, and of national survey results, and the analysis of findings from focus groups conducted with 143 African American children living in several urban environments.

Although information and conclusions gleaned from the market research revealed a longstanding trend of comparatively lower rates of alcohol and drug use by African American youth, also disclosed was a need for an expanded framework to address the problems of substance abuse within the African American community. An expanded framework acknowledges the dimension of substance use and abuse but also addresses three other dimensions — involvement, exposure, and victimization — that unfold as having major significance for this population of youth who live in urban, high-risk environments.

T HERE ARE APPROXIMATELY 10 MILLION African American children age 18 and younger in the United States today (1). How many are trapped in a sticky web created by alcohol, crack cocaine, and other illegal substances, either by way of actual use or involvement in the trade surrounding these products? For how many does life imitate the art that is being dramatically played out on movie and television screens across the country?

Society in general, and the media in particular, describe African American children living in high-risk environments in overwhelmingly negative or pessimistic terms —"children under siege," "endangered species," "lost generation," and so on. The situation has been presented persuasively as approaching crisis proportions, and the inference is that most African American children living within low-to-moderate income inner-city communities are forced to contend with a hostile environment that is permeated by alcohol and other drugs and related problems.

The stigma attaches to the community at large as well.

Many see African American communities in general, and inner cities specifically, as being "devoid of basic decency, devoid of hope, where the citizens are so consumed by the deviance and social disorganization around them that most of their energy is used up simply trying to cope with the instability" (2). Poignant accounts in nonfiction bestsellers paint vivid pictures of what life is supposedly like for inner city African American adults and children (3) :

But the neighborhood, which had hungrily devoured its children, had taken its toll on LaJoe as well. In recent years, she had become tired as she questioned her ability to raise her children here. She no longer fixed her kids breakfast every day - and there were times when the children had to wash their own clothes in the bathtub. Many of the adults had aged with the neighborhood, looking as worn and empty as the abandoned stores that

lined the once thriving Madison street. By their mid-thirties many women had become grandmothers; by their mid-forties, great grandmothers. They nurtured and cared for their boyfriends and former boyfriends and sons and grandsons and great-grandsons....To LaJoe, the neighborhood had become a black hole.

How do these accounts match the experiences of most urban African American children? In particular, how accurate are these descriptions in portraying the experiences of African American youth with alcohol and other drugs? How close to the truth are popular movies such as "New Jack City," "Boyz in the Hood," and "Juice?"

Although the impact on both children and adults of alcohol and other drugs in the African American community is undeniable, the communications media have helped create a public sense of urgency that something be done about the related crime and violence (4). There is concern, however, that the African American community and young African American children in particular are being stigmatized. The picture most Americans have of a typical drug dealer or user is that of a young black male and the impression is that drug use is rampant and universal in the black community. Increasingly, the African American community is expressing resentment towards the media and journalists who "pad their resumes with sensationalistic accounts" (5), without attempting to present a more balanced picture of community existence.

Limited African American Youth Research

What does the research literature say about alcohol and other drug use among African American youth? Although the level of research has grown substantially in recent years (6), it is still meager. Much of the emphasis has been on the adult population and has focused primarily on individual use and on the psychological effects of drug abuse. This research has been largely descriptive, and findings are often based on subjective and anecdotal information that does not provide an adequate understanding of the nature and extent of the problems of the African American youth (7). Additionally, most of the literature focuses largely on alcohol, with limited discussion of other drugs. Research studies taking into consideration environmental factors have been virtually nonexistent.

In general, African Americans have seldom been surveyed about drug use in a way that appropriately acknowledges cultural values and social practices, family and peer influences, and socioeconomic factors such as family income and residence. The literature that does exist on African American alcohol and other drug use is problematic for a number of reasons. Although African Americans may have been included in the study sample, findings are not always stratified by race. Comparison of results across studies is difficult because of differences in the size, racial distribution, geographic location, and other variables of study samples, definition of terms, measures of drug use, and method of data analysis (8).

The literature consistently reports that a sizable portion of poor, inner-city African Americans are "at risk." The notion of risk and risk factors as important components in the etiology of alcohol and other drug use was first advanced in the pioneering work of David Hawkins and his colleagues at the University of Washington during the mid-1980s. Much of the research cited in defining risk factors does not appear to include specific references to African American youth or involve studies focusing on African American youth. Although the impact of such problem behaviors as juvenile delinquency, teenage pregnancy, school misbehavior, and dropping out cannot be denied, there is a need for a body of literature that addresses more specifically how these behaviors may manifest themselves differently, taking into consideration cultural and other environmental factors within African American communities. The impact of these behaviors, especially as they affect alcohol and other drug use, may also be different.

An indepth look must be taken particularly at the extent to which external, environmental risk factors such as the excessive presence of alcohol and tobacco advertisements and other related media messages, proximity to high crime areas, poor housing, and urban blight may influence drug and alcohol use. These so-called macro-level or contextual factors, albeit acknowledged in the risk factor literature, are seen as less important, particularly when contrasted with individual or meso-level factors.

Of equal importance is a determination of how protective factors are manifested within the African American community. These factors, including relationship to parents, commitment to schooling, regular involvement in church activities, and belief in the generalized expectations, norms, and values of society, as outlined in an unpublished 1990 report of the Institute on Black Chemical Abuse, also need to be investigated to clarify the potential impact of race and culture on adolescent drug use.

A New Framework

It may be too simplistic to view the alcohol and other drug experiences of African American youth solely in terms of individual drug usage. Although the level of

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actual usage is an important component to consider in describing these experiences, market research conducted by the Center for Substance Abuse Prevention revealed it to be only one dimension of the problem. A more complete analysis of the alcohol and other drug experience necessitates a broader framework, one which delineates four levels of alcohol and other drug familiarity — use, involvement, exposure, and victimization.

Use refers to the actual intake or ingestion of these substances, covering both casual use and addiction. Involvement refers to working in some aspect of the drug trade — manufacturing, processing, selling, serving as a courier or lookout. Exposure encompasses environments permeated by alcohol and other drugs and exposure to drug sales and use and other behaviors that surround these activities. Finally, victimization refers to the impact of crime, violence, abuse, and neglect brought on by use and abuse of alcohol and other drugs in immediate families and communities.

Levels of use. It is difficult to generalize about patterns of alcohol and other drug use among African American youth. However, the results of three national surveys in recent years have documented trends and patterns. These surveys include the annual National High School Senior Survey, the Parents Resource Institute for Drug Education Survey, and the National Household Survey of Drug Abuse. These surveys are designed so that the respondents are asked to self-report their drug and tobacco use within specified periods of time.

Data from these surveys have consistently shown that African American youth use drugs at lower rates than white or Hispanic youth (9-12). These surveys also noted that the lowest rates of drug use often are found among African American females, when compared with their male peers (7).

The relatively low usage pattern among African American youth has been consistently documented in other national, State, and local surveys. The low usage rate remains the same in surveys that focus on alcohol use only, drug use only, and both. In addition to the three national surveys, other State and local surveys indicating lower African American youth usage of alcohol and

other drugs include Statewide surveys in New York and California, local school district surveys in the South, the Midwest, Philadelphia, Texas, and New York City, and surveys in alternative school settings, Job Corp Centers, and a juvenile detention center (13-24).

Levels of involvement. Selling drugs is often described as one of the few growth industries in poor African American inner city communities (23). Drugs are seen as the root cause of urban America's violent, unpredictable, volatile, and unsafe environment. Yet, in some accounts, families are seen as simultaneous victims and participants in the drug lifestyle. The drug dealer paradoxically emerges as a model of someone who has been able to create an alternative economic activity that provides the material vestiges of power (24).

The extent to which young African American adolescents are involved in the drug trade is undocumented. It is hypothesized that many more African American youth are involved in the sale of drugs than are actually using drugs. The theory is that use would be detrimental to the realization of profits. Such involvement with drug sales can range from the actual sale and distribution to more ancillary activity. One study delineates five different levels of actual drug selling (25):

1. serving as processors or adulterators of drugs (cutting, weighing and packaging),
2. dealing (selling any amount),
3. distributing (providing wholesale amounts),
4. supplying (providing smaller amounts to sellers), and
5. selling (involved in actual retail transactions with the public).

Ancillary roles include such tasks as counting money, serving as lookout, ferrying drugs or information between dealers, recruiting customers, and so on. Youth have historically been used in such roles (25).

Those who recruit teenagers are following a tradition that dates back almost twenty years, and was the direct effect of the harsh "Rockefeller laws" mandating a prison term for anyone over eighteen in possession of an illegal drug. This led heroin dealers to use kids as runners, and cocaine importers have followed this pattern: young people not only avoid the law but are, for the most part, quite trustworthy; they are also relatively easy to frighten and control.

As with the issue of use, it is important for researchers to develop a more precise picture of the exact extent and nature of African American youth involvement in the

drug trade. Questions remain about the extent to which African American youth are involved in the types of activities described. More research is needed to determine how typical such behavior is in inner city high-risk environments, and in which roles, if any, do adolescents or youth predominate. Additional research also could serve to explore and distinguish between roles of young males and females in the drug trade.

Crime and violence. The African American community is victimized by the drug trade in any number of ways — in the violence and other crime it spawns, in the increase of child abuse and neglect, in the surge in the numbers of babies born to mothers on crack who are abandoned at inner city hospitals.

Violence, particularly African American on African American crime, is another type of victimization that occurs as a result of the drug trade. The homicide rate for African American males ages 15-24 has risen by more than two-thirds in recent years; 40 percent of all deaths in this age group are homicides. Homicide is the leading cause of death for African American teenagers, mostly attributable to gunfire (26).

Very few studies have focused on the relationship between crime and violence and alcohol and other drugs. Despite the common sense connection between crime and alcohol, a direct causal relationship has not been established. One study, however, has indicated that alcohol was present in 40 to 60 percent of all homicides (27).

Drug use, however, is another matter. The literature does show a relationship between abuse of drugs and homicidal violence. And studies of combined alcohol and drug related homicides indicate a positive relationship, particularly among males (27,28).

At present, existing knowledge is not adequate to make definitive statements identifying the most important causal factor.

Although the violence perpetuated by drug sellers against each other is cause for concern, researchers and practitioners are increasingly alarmed by the extent to which the children of these communities are caught up in this vicious cycle. In one small study of mothers with children living in a Chicago Housing project, it was found that "virtually all of the children had a first hand encounter with a shooting by age five, and the majority of those incidents appeared to have involved witnessing someone get shot." Another study of 536 African American school children in grades two, four, six, and eight, found that 26 percent of the respondents reported that they had seen a person being shot, and 29 percent reported having witnessed a stabbing. A followup study of 1,000 high school students documented similar findings (29).

Focus Group Findings

What does all of this tell us about the lives of typical African American children living in high risk inner city areas? How are their lives affected, day in and day out, by alcohol and other drugs? To what extent are they using drugs or involved with drugs? How are urban African American communities coping, or have they given up? What communication strategies can best be used in addressing these problems?

These and other questions are addressed in the following discussion of results of a series of focus groups that were conducted as a part of the Center for Substance Abuse Prevention's Urban Youth Campaign.

Methodology. In the spring 1991, 21 focus groups, consisting of a total of 143 African American children ages 9–13 were conducted in seven target metropolitan areas (Atlanta, Baltimore, Chicago, Houston, Los Angeles, Raleigh-Durham, and Washington, DC). A variety of facilities within high-risk inner city areas were used for the sessions, such as a community center in far southeast Washington, DC, a shelter in Atlanta, a recreation center in Raleigh. Most sessions lasted an average of 2 hours. The groups were separated by sex. A professional moderator led the participants through a battery of interactive techniques, including brainstorming, word association, storytelling, role playing, and pen and paper activities. The community facilities and all participants were compensated with a modest stipend.

In many ways, the findings of these focus groups tend to document the concerns and conflicting images described in the literature. The children, although toughened and in some ways scarred by their inner city lifestyles, are overwhelmingly abstaining from alcohol and drug use. The patterns of involvement, victimization, and exposure are clearly evident.

Experiences of most of the participants were remarkably similar, regardless of locale, age, and sex. Although the circumstances under which most of these children live put them at risk for developing addictive behavior, their responses also belie a spiritual and imaginative mindset commonly found in children everywhere.

Good and bad news about alcohol and drugs. Few of these children suffered any illusions about the consequences of drug and alcohol abuse, and many found the behavior of abusers abhorrent. Comments about the positive aspects of drug and alcohol use invariably centered on the positive social side of such use, such as holiday celebrations.

Who do you trust? To determine whom children respect and trust, participants were asked "who or what... talks to you." All groups named immediate family,

extended family, and friends and peers. School personnel, television and radio personalities, and health care providers were also named. Police and other members of the judicial system were occasionally named. Pastors and other clergy and religious figures emerged as one critical source of trust and assurance for many children.

Wishes and worries. When asked to imagine their lives 2 years hence and their wishes and worries for that time, these children responded as one might expect children to respond. They wished for fame and fortune, long lives, good grades at school, and an end to societal ills, especially crime and violence. Many also expressed wishes to move out of public housing projects, "stop the violence," and for a loved one to stop abusing drugs or alcohol. Their worries centered on and reflected their wishes and concerns about their environment. Worries included becoming a victim of the violence in their communities, failing in school, the death of a parent or another loved one, and bearing children while they themselves are still children or teenagers.

Perceptions of the value of money. The children varied considerably in their perception of the value of money. The younger children particularly felt that $100 gives them greater buying power than it actually does—some said they would buy a house or car with $100. The majority did acknowledge the link between drugs and money and that drugs are an easy—albeit, dangerous—way to make large amounts of money. All added that they themselves would not become involved with drug trafficking to make money.

Exposure to friends who drink. Many of the focus group participants did not have overwhelming exposure to people who drank excessively. Many of the children had, however, tried alcohol at one time or another. None of the participants appeared to be regular drinker.

Reasons young people drink. The two overwhelming reasons about why young people drink are peer pressure and problems in the home, according to the focus group participants. Many children said that others drink to escape stressful problems at home, including abusive parents and parents who are substance abusers.

Exposure to people who have had too much to drink. Although many of the children do not have friends who drink, they are often in situations in which adults drink irresponsibly. Many described these incidents as having made them feel sad, angry, or embarrassed. Some children described tragedies resulting from excessive drinking that they had witnessed.

Difference between alcohol and drugs. Many of the children described the differences in terms of the physical properties of the substances (that is, alcohol is a liquid, drugs are solids; one drinks alcohol but smokes or injects drugs). They recognized the debilitating physical and mental effects of each, naming a variety of physical ailments that affect substance abusers. Many also noted the fact that there is a minimum age before one can purchase alcohol, while there is none for drugs. They also noted that alcohol can be purchased legally, while drugs are purchased illegally on the streets. Most participants viewed drugs as the more dangerous substance.

Exposure to friends who use drugs. When asked about the number of people they know who use drugs, most answered either none or only one or two people. Despite this answer, other comments made in most of the focus groups indicate that drug use is prevalent in these children's lives and in their communities on a daily basis.

Time and place of drug use. Most of the children said that drugs are used all day, every day, and in every conceivable location, on the street, in private homes, hallways and alleys, in places called crack houses, and abandoned buildings, as well as in parks and other public places. The only places not mentioned were schools and community facilities such as those in which the focus groups were conducted.

Drugs being used and their availability. Cocaine and its derivatives (crack and ice), as well as marijuana are recognized as the most used and readily available drugs. Other drugs mentioned include LSD, PCP, speed, heroin, and glue.

How people became involved in using drugs. Peer pressure and a desire to make money were the reasons most frequently mentioned for becoming involved with drugs. Some felt that people started using drugs after trying alcohol, while others began using drugs after losing their job or experiencing some other life crisis.

Involvement without use. Most participants believed that it was relatively easy to be involved with drugs without becoming a user, primarily by working in some aspect of the drug trade. The children described such involvement as selling drugs, holding drugs or money

for others, acting as a lookout during a transaction, and running errands.

Statements children knew to be untrue. Children were asked if they had ever heard information about drugs that they didn't believe. Many had been told that only black people use drugs, but they found that not to be true. They also repeated information they have heard, such as drugs are not addictive, and that simply trying a drug once wouldn't harm them, and drugs don't kill. Some disagreed when it was suggested that drugs make you happy. Some mentioned their disbelief in anti-drug messages like "drugs fry your brain," commenting that drugs do not cause that actual physical effect.

Sources of information about drugs and alcohol. Participants' primary sources of information about drugs and alcohol include television, school, parents and families, and street life.

Impact of television. Television is the primary medium for these children. Most spend several hours watching every day. They all watch the most popular programs, particularly "The Cosby Show," "The Simpsons," "Fresh Prince of Belair," and "In Living Color." The boys watch sporting events and the girls watch soap operas, which they call "stories."

Radio and music. Children reported listening to FM stations in their cities that feature urban contemporary music, rap, jazz, and "oldies." None listened to talk-radio or all-news formats.

Newspapers and magazines. Newspapers and magazines are not primary sources of information for most children. Those who mentioned reading the paper tended to read the features, such as the comics and horoscope, rather than hard news. Some mentioned reading the Metro or the obituary sections to learn of the latest killings in their neighborhoods. Books were never mentioned as sources of information.

Favorite entertainers or celebrities. Favorite entertainers include DJs (DJ Jazzy Jeff, DJ Smurf, and DJ Quick), television personality the Fresh Prince, musicians MC Hammer, Whitney Houston, Sting, and Michael and Janet Jackson, and professional basketball player Michael Jordan.

Commercials and public service announcements. The participants were asked to rate the types of anti-drug and anti-drinking commercials that most appealed to them. This was one of the few instances where the responses of the boys differed from those of the girls.

The boys rated the humorous and musically oriented commercials as the most popular. The girls tended to prefer the use of peers or celebrities. Most found ads that relied on fear tactics to be the least appealing.

Conclusion

A review of the literature and these focus group findings support an image of African American children that serves to refute popular stereotypes. The evidence indicates, that while alcohol and other drugs pose a serious threat to this community, the children's resilience and ability to resist the lure of drug use and involvement, at least until well into their teen years should be acknowledged and highlighted.

The role played by the media in perpetuating negative stereotypes and images of these children and their communities is a major issue to be addressed as part of alcohol and other drug prevention efforts. Such daily portrayals serve to feed despair and nurture a sense of hopelessness among people about their ability to face the alcohol and other drug problems prevalent in their communities. It also encourages society to place the blame for its alcohol and other drug related problems such as violence and crime on the shoulders of those who live in inner city environments while ignoring the existence of the problem in suburban and rural communities.

In essence, it is too simplistic to view the alcohol and other drug experiences of African American youth solely in terms of individual use. Increasingly, it has become evident that the environments of inner cities are in themselves a major risk factor for those who live there. Involvement in the various aspects of the drug trade places youth at risk for the violence that often drives the trade, as well as for developing hardened views and values with respect to their lives and the lives of others. The pain and suffering caused by victimization can become the source of stress that drives them to start using drugs in order to self-medicate.

Prevention campaigns should place emphasis not only on the importance of avoiding and abstaining from use of alcohol and other drugs but also should focus attention on other facets that come into play. Messages should target both youth and adults and stress their interdependence on one another. Most importantly, prevention campaigns must stress that children, especially African Americans, need help from adults to navigate successfully the high-risk realities of their day-to-day environments.

Based on the information gained from this market research, guidelines for the development of the central themes and subsequent messages of this prevention campaign targeting African American youth ages 9–13

years were established to refute and challenge negative images and stereotypes of African American youth; be supportive of these youth, highlighting the positive aspects of who they are; and share information about the lower usage rates for this population as well as address the other ways that African American youth are affected by alcohol and other drugs.

Specifically, it was decided that the following messages should be delivered:

• African American youth are valued by their communities.
• African American youth demonstrate daily resiliency and personal strength in the face of great adversity.
• African American youth need the support and protection of adults to remain alcohol and drug free.

Tying these messages together is the slogan "We have better things to do than drugs." Its emphasis is to focus on African American involvement in positive nondrug related activities. It also serves as a public acknowledgement of their inner strengths and self-esteem; and finally, it serves to challenge the normative beliefs held by many about these youth and their world.

The approach used in this prevention campaign is unique because it places emphasis on the strengths of the African American community and focuses on the need to reinforce the inherent resilience of African American children. In doing so, it provides innumerable opportunities for communities, families, and the children themselves to be involved meaningfully in the prevention of alcohol and other drug abuse in their personal and community environments.

All indications are that this approach will prove to be an effective strategy with many implications for addressing alcohol and other drug and related problems in the African American community.

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