Models, Methods and Concerns in Conducting Research within African American Communities

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African American Healthy Marriage Initiative
Healthy People Healthy Families Conference
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Life Expectancy at Birth - USA

- White Female
- African American Female
- White Male
- African American Male

Life Expectancy vs. Year

NCHS, 2004
Other Areas of Health Disparities

- Obesity
- Diabetes
- Cardiovascular Disease and Stroke
- Cancer
- Homicide and Unintentional Injuries
- Cirrhosis
- Infant Mortality
Racial & Ethnic Populations

Black
Hispanic
Latino
African American
Alaska Native
American Indian
Asian American
Native Hawaiian
Pacific Islander
Multiracial
White
Infant Mortality Rates per 1,000 Live Births
by Detailed Race and Hispanic Origin of Mother: U.S., 2004

Source: Health United States, 2006 Table 19, CDC.gov
Conceptual Issues

- Defining the Population
  - Subgroup distinctions
    - Gender, sex, age, SES, employment status, region, marital status
  - Ethnic heterogeneity within the Black population
- Race, Ethnicity, Gender, Class, Intersectionality
- Theoretical Considerations
  - Selection
  - Application
  - Modifications
  - Development of new theories
Methodological Issues

- Approach to Sampling
  - Distribution of population
  - Identifying sample

- Measurement Tools
  - Reliability and validity with population
  - Comprehension
    - Meanings

- Approach to Data Analysis
National Survey of American Life (NSAL)

- Principal Investigator
  - James S. Jackson

- Co-Principal Investigators
  - Cleopatra Howard Caldwell
  - Harold W. Neighbors
  - Randolph Nesse
  - Robert Joseph Taylor
  - David R. Williams
Although important commonalities exist, there are also considerable ethnic variations within the Black population.

Blacks from the Caribbean constitute the largest subgroup of Black immigrants in the United States.

Previous studies of Black mental health have not addressed the mental health consequences of this within-group ethnic variation.

Little attention has been paid to generational similarities and differences in risk and protective factors for mental disorders within Black families.
NSAL Background Information

- Funding Sources: National Institute of Mental Health, OBSSR at NIH, University of Michigan

- Field Period: February 2001 to March 2003

- Overall adult response rate = 73%; adolescent = 80.6%

- Data also were obtained from 74% of the parents/primary caretaker of the adolescents in the study

- Expands on the 1980 National Survey of Black Americans, both conceptually and methodologically
NSAL Sample Sizes

- **In-home Face-to-face Interviews**
  - **6,099** Adult Interviews
    - 3,570 Self identified African Americans
    - 1,621 self identified Caribbean Blacks
    - 891 Non-Hispanic Whites
    - English speaking only

- **1,170** Adolescent Interviews
  - 810 African Americans
  - 360 Caribbean Blacks

- **870** Parents or Primary Caretakers
### NSAL Sample by Sex and Immigrant Status

Unweighted N, Weighted Percentages

<table>
<thead>
<tr>
<th>Race</th>
<th>Percent</th>
<th>Male</th>
<th>Female</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. African Americans</td>
<td></td>
<td>1,271</td>
<td>2,299</td>
<td>44.0%</td>
<td>56.0%</td>
</tr>
<tr>
<td>2. Caribbean Blacks</td>
<td></td>
<td>643</td>
<td>978</td>
<td>50.9%</td>
<td>49.1%</td>
</tr>
<tr>
<td>3. Whites</td>
<td></td>
<td>372</td>
<td>519</td>
<td>47.3%</td>
<td>52.7%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>2,286</td>
<td>3,796</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Immigrant Status, Caribbean Blacks Only</th>
<th>Percent</th>
<th>Male</th>
<th>Female</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 3rd Gen. [R &amp; Parents U.S. born]</td>
<td>(08%)</td>
<td>49</td>
<td>75</td>
<td>53.8%</td>
<td>46.2%</td>
</tr>
<tr>
<td>2. 2nd Gen. [R U.S. Born; 1+ Parent not born]</td>
<td>(20%)</td>
<td>127</td>
<td>189</td>
<td>48.8%</td>
<td>51.2%</td>
</tr>
<tr>
<td>3. Foreign-born, &gt;20 yrs. in U.S.</td>
<td>(32%)</td>
<td>199</td>
<td>313</td>
<td>51.3%</td>
<td>48.7%</td>
</tr>
<tr>
<td>4. Foreign-born, 11-20 yrs. in U.S.</td>
<td>(22%)</td>
<td>137</td>
<td>227</td>
<td>41.8%</td>
<td>58.2%</td>
</tr>
<tr>
<td>5. Foreign-born, 0-10 yrs. In U.S.</td>
<td>(18%)</td>
<td>126</td>
<td>165</td>
<td>60.8%</td>
<td>39.2%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>638</td>
<td>969</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Caribbean Countries most Represented by Individual Adult Respondents

Unweighted N, Weighted Percentages

<table>
<thead>
<tr>
<th>Country</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jamaica</td>
<td>510</td>
<td>31.7</td>
</tr>
<tr>
<td>Haiti</td>
<td>298</td>
<td>12.6</td>
</tr>
<tr>
<td>Trinidad &amp; Tobago</td>
<td>170</td>
<td>10.0</td>
</tr>
<tr>
<td>Guyana</td>
<td>90</td>
<td>4.3</td>
</tr>
<tr>
<td>Belize</td>
<td>14</td>
<td>3.7</td>
</tr>
<tr>
<td>Puerto Rico</td>
<td>62</td>
<td>3.6</td>
</tr>
<tr>
<td>Barbados</td>
<td>74</td>
<td>2.9</td>
</tr>
</tbody>
</table>

7 Countries Represent *68.8% of adult sample*
NSAL Findings

- **Lifetime Major Depressive Disorder (MDD)**
  - Risk factors for African Americans
    - Being female, unmarried, unemployed, living in NE or Midwest, living in urban areas
  - Risk factors for Caribbean Blacks
    - Being unmarried, employed, born in U.S.
  (Williams, D.R. et al., 2007, Prevalence and distribution of major depressive disorder in African Americans, Caribbean Blacks and Non Hispanic whites. *Archives of General Psychiatry*, 64, 305-315)

- **Suicide Attempts**
  - Caribbean Black men reported suicide attempts the most (7.5%), followed by African American women (5%).
  - Caribbean Black women least likely to report attempting suicide (2.7%).
NSAL Findings

- **Use of Services**
  - 10% of both ethnic groups sought mental health care.
  - African American women with serious mental disorders used more general medical care than African American men.
  - Caribbean Black women with serious mental disorders used more mental health services, while Caribbean Black men used more general medical care.
  - **Facilitators of service use among African Americans:**
    - Being previously married or employed
    - No distinct correlates of service use for Caribbean Blacks

(Neighbors, H.W. et al., 2007, Race, ethnicity and the use of service for mental disorders: Results for the National Survey of American Life. *Archives of General Psychiatry*, 64, 485-494.)
# Severity of Disorders among African American and Caribbean Black Adolescents

Table 5. Severity of Role Impairment Using the SDS in 12-month DSM-IV/WMH-Cases in the NSAL Adolescent Sample by Race

<table>
<thead>
<tr>
<th>Disorder</th>
<th>African American</th>
<th>Caribbean Black</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean (s.e.)</td>
<td>Mean (s.e.)</td>
</tr>
<tr>
<td>Social Phobia Disorder (n=66, 33)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home</td>
<td>2.7 (0.4)</td>
<td>1.3 (0.4)</td>
</tr>
<tr>
<td>Work/School</td>
<td>4.4 (0.4)</td>
<td>2.3 (0.6)</td>
</tr>
<tr>
<td>Family</td>
<td>4.4 (0.4)</td>
<td>1.8 (0.6)</td>
</tr>
<tr>
<td>Social</td>
<td>4.9 (0.3)</td>
<td>5.1 (0.4)</td>
</tr>
<tr>
<td>Major Depression Disorder (n=20, 18)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home</td>
<td>4.5 (0.3)</td>
<td>4.9 (0.2)</td>
</tr>
<tr>
<td>Work/School</td>
<td>5.0 (0.2)</td>
<td>5.4 (0.3)</td>
</tr>
<tr>
<td>Family</td>
<td>5.2 (0.3)</td>
<td>6.0 (0.2)</td>
</tr>
<tr>
<td>Social</td>
<td>4.9 (0.2)</td>
<td>6.2 (0.1)</td>
</tr>
<tr>
<td>Oppositional Defiant Disorder (n=31, 15)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home</td>
<td>3.6 (0.5)</td>
<td>5.7 (0.8)</td>
</tr>
<tr>
<td>Work/School</td>
<td>4.7 (0.7)</td>
<td>3.7 (0.9)</td>
</tr>
<tr>
<td>Family</td>
<td>4.6 (0.4)</td>
<td>7.2 (1.2)</td>
</tr>
<tr>
<td>Social</td>
<td>3.4 (0.5)</td>
<td>3.9 (3.5)</td>
</tr>
<tr>
<td>Intermittent Explosive Disorder (n=50, 20)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home</td>
<td>3.1 (0.3)</td>
<td>3.2 (2.4)</td>
</tr>
<tr>
<td>Work/School</td>
<td>3.1 (0.3)</td>
<td>2.0 (0.5)</td>
</tr>
</tbody>
</table>

1 Unweighted number of cases included in the analyses among African Americans and Caribbean Blacks, respectively.
2 Reporting the F-statistic associated with the bivariate regression model predicting the specific SDS score. + p < .10, *p < .05
NSAL Innovations

- Conceptual
  - Distinction made between race and ethnicity
  - Allows for within group ethnic variations among Blacks
  - Theoretical expansions

- Methodological
  - Sampling based on the distribution of African American and Caribbean Black households
  - Multigenerational sample
  - Wide Area Screening Procedure (WASP)
  - Data analysis approach

- Data Availability
The Flint Fathers and Sons Evaluation Project

School of Public Health
University of Michigan
The Fathers and Sons Project
Flint Community Partners

- Flint Odyssey House-Health Awareness Center
- Flint/Genesee County Neighborhood Roundtable
- Faith Access to Community Economic Development (FACED)
- Flint Community Schools
- Genesee County Community Action Resource Department
- Genesee County Health Department
- Individual Community Representatives
- University of Michigan-Flint
Project Purpose

To develop a culturally relevant youth prevention intervention to enhance the relationship between non-resident African American fathers and their preadolescent sons using a community-based participatory research approach in an effort to:

- prevent or reduce substance use, violent behavior and early sexual initiation among African American boys,
- encourage health promoting behaviors (i.e., service use, exercise) among both fathers and sons.

Participation Criteria

- African American families
- Biological son(s) ages 8 – 12 years old
- Live in separate homes
- Geographic requirement
- Mother/guardian consent
Conceptual Model for the Fathers and Sons Program

**Outcomes**
- **Short-term:**
  - Father-son involvement
  - Father-son parenting satisfaction
  - Aggressive behavior
  - Physical activity
- **Long-term:**
  - Substance use
  - Violent behavior
  - Son’s sexual behavior

**Background**
- **Family**
  - Living arrangements
  - Children / Siblings
  - SES / Education
  - Marital status
  - Social network (i.e., size)
- **Individual**
  - Age
  - Self-esteem
  - Personal mastery
  - Stress (i.e., family, job, health, racial discrimination)

**Participation in the Fathers and Sons Intervention**
- 15 intervention sessions
- Use of community resources

**Behavioral Intentions**
- Father-son relationship
- Health outcomes

**Behavioral Capacities**
- Fathering skills
- Sons’ refusal skills

**Moderating Factors**
- **Social Networks and Social Support**
  - Network interactions (i.e., closeness, density, reciprocity)
  - Informal social support
  - Formal social support
- **Cultural Factors**
  - Racial identity
  - Racial socialization
- **Self-efficacy**
  - Father-son relations
  - Health outcomes
  - Parenting skills
  - Refusal skills

**Parenting Behaviors**
- Monitoring
- Communication
- Role Modeling

**Subjective Norms**
- Father-son relationship
- Family values re: health outcomes

**Attitudes**
- Father-son relationship
- Health outcomes

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This diagram illustrates the conceptual model for the Fathers and Sons Program, detailing the various factors and outcomes involved in the program's effectiveness.
Intervention Description

- 15 sessions over a 2-month period
- 2 times per week
- 45 total contact hours
- One booster session
Think about your Strengths

Be Proud of You!

Recognize your contributions to society!

Learn about your culture
Overall response rate was 78%.

- 158 Intervention group families:
  - Response rate of 87%
  - 77% of fathers and 80% of sons attended 11 or more of the 15 sessions

- 129 Comparison group families:
  - Response rate of 68%

- 287 Total families in study
Conceptual and Methodological Challenges in Intervention Research

- Conceptual
  - Definitions
    - Father, son, household, non-resident
  - Theories, Models, Experience

- Methodology
  - CBPR Approach (Israel et al., 1998; Minkler et al., 2004)
    - Trust, respect, power dynamics
    - Responsibilities
  - Comparison v. Control Group
  - Recruitment and Retention
# Fathers’ Profile

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Intervention</th>
<th>Comparison</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average age</td>
<td>37.4</td>
<td>37.5</td>
</tr>
<tr>
<td>% Less than HS</td>
<td>22.3</td>
<td>21.6</td>
</tr>
<tr>
<td>% Working</td>
<td>51.9</td>
<td>49.6</td>
</tr>
<tr>
<td>% Precarious economic status</td>
<td>52.5</td>
<td>59.4</td>
</tr>
<tr>
<td>% Currently married</td>
<td>25.8</td>
<td>35.7</td>
</tr>
<tr>
<td>% Ever married to son’s mother</td>
<td>17.7</td>
<td>21.1</td>
</tr>
<tr>
<td>% Child support</td>
<td>70.3</td>
<td>75.4</td>
</tr>
<tr>
<td>% Ever lived with son</td>
<td>70.6</td>
<td>79.8</td>
</tr>
</tbody>
</table>
Fathers and Sons
Preliminary Findings

- Program has been successful in influencing several key factors thought to be protective against youth problem behaviors.
  - Fathers:
    - Fathers’ intentions to communicate more effectively with their sons,
    - Fathers’ ability to teach their sons about race-related issues,
    - Fathers’ parenting skills satisfaction when compared with comparison group fathers.
    - Communication about sexual matters also improved among fathers who had lived with their sons for longer periods prior to separation.
  - Sons:
    - Sons in the intervention group who had never lived with their father showed greater improvements in their intentions to use alternative strategies toward violence than comparison group sons.
    - Sons with more siblings showed significant gains in their ability to communicate with their father about sexual matters.
Fathers and Sons Project Innovations

- **Conceptual**
  - Used a family-centered approach
  - Targeted the attitudes and behaviors of non-resident African American fathers in addition to the children

- **Methodological**
  - Used a CBPR approach to the overall study
    - Conceptualizing project
    - Curriculum development
    - Implementation
    - Evaluation
    - Dissemination
  - Recruited almost 300 non-resident African American fathers into a health intervention study lasting two months
  - Involved community residents in intervention implementation and data collection
  - Enhanced the Community’s research capacity and researcher’s knowledge of the community
The Significance of Culturally Competent Research