Variations in Mental Health Problems, Substance Use, and Delinquency between African American and Caucasian Juvenile Offenders: Implications for Reentry Services

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Juvenile Justice in the U.S.

- Recent statistics indicate the current juvenile justice population at approximately 900,000 (Mauer & King, 2004)

- Overrepresentation of minorities in every state, especially in those with smaller populations of minorities (Lieber, 2002)
Juvenile Justice in the U.S.

- African American youth are more overrepresented than Hispanic youth (Lieber, 2002)
- Black male youth 4x as likely to be in residential placement as compared to White male youth (Pope, Lovell, & Hsia, 2002)
- Research found that half of the incarcerated youth had a substance use disorder (Teplin, Abram, McClelland, Dulcan, & Mericle, 2002)
- 2/3rds fulfilled DSM-IV criteria for a mental disorder (Teplin et al., 2002)
Sample

- Interviewed 723 youth at the residential rehabilitation services of the Missouri Division of Youth Services
- Study focused on African American and White youth (90% of the total population)
Method

45-minute interview included the following measures:

- Brief Symptom Inventory- 53 item scale to assess psychiatric symptoms
- Massachusetts Youth Screening Instrument (MAYSI-2) Traumatic Experiences Subscale- 5 items to assess trauma and suicide ideation
- Multi-item polysubstance use matrix & MAYSI-2 Alcohol and Drug Problems Index- assesses lifetime substance use an substance related problems
Method (cont'd)

• Self-report of Delinquency (SRD)- measures type and frequency of offending

• Antisocial Process Screening Device- measures lifetime substance use and general delinquency

• 4-item victimization index to measure personal victimization
## Significant differences in mental health, substance use, and delinquency

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<tr>
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<th>African American participants</th>
<th>White participants</th>
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<tr>
<td><strong>Mental Health</strong></td>
<td>Witnessing someone injured or killed</td>
<td>Anxiety</td>
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<td>Depression</td>
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<td>Suicide Ideation</td>
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<td>Lifetime polysubstance use-stimulants and depressants</td>
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<td><strong>Delinquency</strong></td>
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<td>Violence</td>
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<td>Weapon carrying</td>
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<td>Gang fighting</td>
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<td>Personal victimization</td>
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Major Findings

• African American youth reported higher levels of overall delinquency, violence, personal victimizations, gang fighting, weapons carrying, and witnessing of severe injury and death.

• White youth reported higher levels of mental health distress, suicide, substance use, and substance related problems.
Major Findings (cont'd)

- Significant predictors of delinquency
  - White youth-impulsivity and prior mental health diagnosis
  - African American youth-traumatic experience and general delinquent involvement
Additional Findings

• White youth tended to initiate substance use earlier
• African American youth less likely to use substances to the point of not remembering what happened
Additional Findings

• African American youth were twice as likely to have witnessed someone being injured or killed, 5x more likely to be involved in gang fighting, & 65% more likely to carry a hidden weapon

• Prior victimization was a predictor mental health symptoms for African American youth but not for White youth
Discussion

• African American youth may reside under adverse environmental conditions where violent encounters are common
• White youth report earlier substance use and offending yet both groups reach the juvenile justice system around the same time
  ○ Smaller "margin for error" for African American youth?
Discussion

• Juvenile delinquency problem origins
  o Sociopathological for African American youth
  o Psychopathological for White youth
Limitations

- Cross-sectional design limiting a fuller understanding of the temporal order of variables
- Only self-report data with no administrative or clinical case data for back-up
- Collected minimal data concerning youth family and neighborhood background
Implications

- Policy - Those that ameliorate concentrated disadvantage in urban areas will likely prevent future incarceration and recidivism
- Adapt post-release services to patterns of risk factors

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Implications

- Individual level interventions may be less successful for African American youth who require neighborhood change
- White youth may benefit more from individual level mental health and substance abuse services
- Recognize and confront racial disparities
References