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The Socioeconomic, Health, Safety, and Educational Disparities Faced by Boys and Men of Color in California

In the United States, racial/ethnic disparities exist across an array of domains. A broad literature addresses how racial/ethnic disparities have developed and persisted over time in the context of historical and structural racism that has shaped policies, practices, and programs in ways that create disadvantage for certain groups.

In recognition that many of these inequities are great for boys and men of color, The California Endowment asked the RAND Corporation to examine and document racial/ethnic disparities for boys and men of color in California. The study provides detailed information for selected indicators in four broad outcome domains—socioeconomic, health, safety, and ready to learn. (The domains and indicators are shown in the table on pp. 3–4). The goal was to analyze available data and quantify the magnitude of the disparities for boys and men of color, with the aim of identifying possible starting points—or benchmarks—for addressing them.

The Context for Measuring Disparities

The researchers grounded their analysis in an existing conceptual framework that describes the contextual factors that come together to promote or inhibit specific outcomes. The framework highlights the multiple pathways by which factors in the physical, social, economic, and family domains contribute to individual well-being; researchers modified the framework to include safety and education outcomes at the individual level.

Aspects of this framework are important in considering the results. First, individual out-

Key findings:

- There are large disparities for boys and men of color in California across indicators in four broad outcome domains—socioeconomic, health, safety, and ready to learn.
- Approaches at the macro, community, interpersonal, and individual levels can diminish these disparities.
- Interventions at these different levels should reinforce and strengthen each other, and reducing disparities is likely to require a portfolio of strategies.

comes and behavior are not generated in isolation but are embedded in a social and economic environment. Second, the individual-level outcomes are likely to be related, because they are produced in the same underlying context. Third, this framework captures the complex set of factors that contribute to disparities in the odds for boys and young men of color.

Because the study is focused on California, it is critical to understand the state’s demographics to interpret disparities for boys and men of color in the state. In 2006, California was the most populous of the 50 states. However, its demographics do not match those of the rest of the nation: Californians are less likely to be white or African-American, more likely to be Latino or Asian, and more likely to be foreign-born.

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Davis LM, Kilburn MR, and Schultz D, *Reparable Harm: Assessing and Addressing Disparities Faced by Boys and Men of Color in California*, Santa Monica, Calif.: RAND Corporation, MG-745-TCE, 2009.

Measuring Disparities

The RAND team measured disparities by calculating the “odds” for boys and men of color—in this case, Latino and African-American boys and men—compared with white boys and men. By expressing the disparities in terms of odds, the researchers provide a simple way to quantify the increased risk of one group over another. They calculated the odds by dividing the rate or percentage for boys and men of color by the rate or percentage for white boys and young men.

While any disparity is a concern, the RAND study focused on those indicators for which the odds are *two times greater or more* for boys and men of color relative to their white peers. Specifically, the study reports on those indicators for which at least one group (Latinos or African-Americans) met that threshold relative to whites. Although this cutoff is somewhat arbitrary, the researchers believe that it serves as a useful starting point to help policymakers prioritize policy actions.

Whenever possible, the researchers provided male-only statistics, in keeping with the intent of The California Endowment. However, for some indicators, data by gender are simply not available. Likewise, the study focused on the odds for California only, unless only national data are available. Where such national data are available and where the differences are meaningful, the researchers compared California with the rest of the nation.

Findings About Disparities

In the four domains, the researchers found that the odds for boys and men of color are more than two times worse than for white boys and men across a number of indicators, as shown in the table and highlighted in tan. The discussion that follows highlights a selected indicator within each domain; the table and its accompanying four figures show the underlying basis for the results. (Another version of this Research Highlight will be posted where each outcome indicator may be clicked to bring up the corresponding underlying graphic and discussion, as well as the relevant sources.)

Socioeconomic Disparities. California has experienced higher child poverty rates than the country as a whole since the early 1980s, with the overall rate at about 19 percent between 2002 and 2005. African-American and Latino children in California experience the highest rates of child poverty—each at about 27 percent. African-American and Latino children are 3.4 times more likely than white children to live in poverty. California poverty rates are associated with family structure, parental education, and parental work status. Families with a single mother have the highest poverty rates, at 42 percent, while married-couple families have a rate of only 12 percent. About half the poor children in Califor-

nia live in families where neither parent finished high school, and the poverty rate in these families is 44 percent.

Health Disparities. Nationally, the risk of contracting HIV or AIDS is 6.9 times higher for African-American and 3.1 times higher for Latino male adults and adolescents than for their white peers. HIV works against the immune system and allows infections to grow and spread throughout the body; it is most commonly transmitted through sexual contact and injection drug use. In California, HIV-related mortality is the eighth-leading cause of death for African-American men and the tenth-leading cause for Latino men. African-American men have a mortality rate from HIV infection nearly four times higher than that of white and Latino men.

Safety Disparities. For most indicators in the safety domain shown in the table, the magnitude of the disparities is greatest for African-Americans. Nationally, African-American men are 5.5 times more likely than white men to go to prison in their lifetime, and the odds of Latino men experiencing this outcome are 2.9 times higher than for white men. Overall, 1 in 3 African-American men, 1 in 6 Latino men, and 1 in 17 white men are expected to go to prison during their lifetime (assuming current trends in incarceration rates). Changes in first incarceration age and mortality rates between 1974 and 2001 have had different impacts on lifetime incarceration, depending on race and ethnicity. The likelihood of African-American men going to prison over their lifetimes has increased more than that of any other group, with Latino men experiencing the second-largest increase. Based on current rates of first incarceration, an estimated 6.7 percent of African-American men in the United States will enter state or federal prison by age 20, compared with 3 percent of Latino men and less than 1 percent of white men.

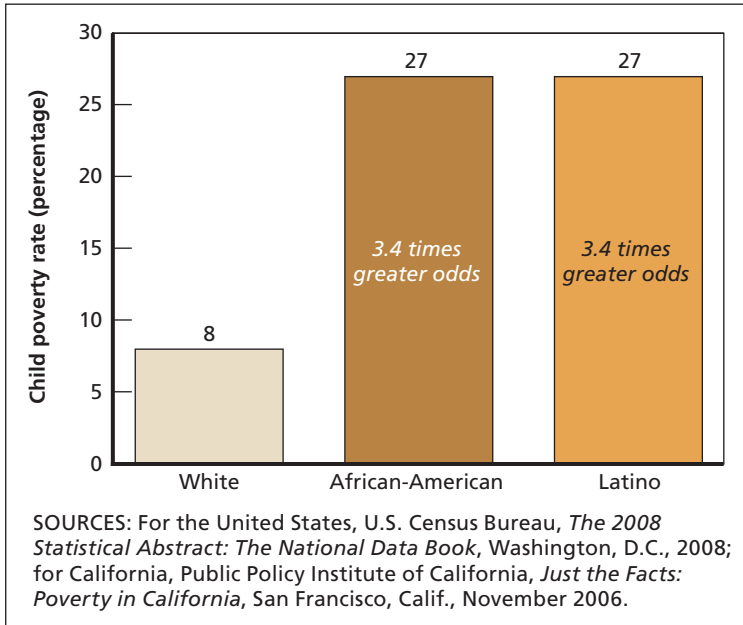
Ready to Learn Disparities. As shown in the table, the increased odds for Latinos and African-Americans are comparable and focused within the achievement and proficiency indicators. African-American Californians over the age of 25 are nearly twice as likely to be without a high school diploma as whites in that age category, while Latinos in California are almost seven times as likely as whites to be without a high school degree. This gap for Latinos is partly explained by the differences in educational attainment between native-born and other citizens. In California, about 9 out of 10 native-born U.S. citizens have a high school degree, compared with only half of noncitizens and three-quarters of naturalized citizens. High school graduation rates lead to earnings differences by race/ethnicity; high school graduation status is also linked to other outcomes, such as health status and outcomes among offspring.

Approaches to Reducing Disparities

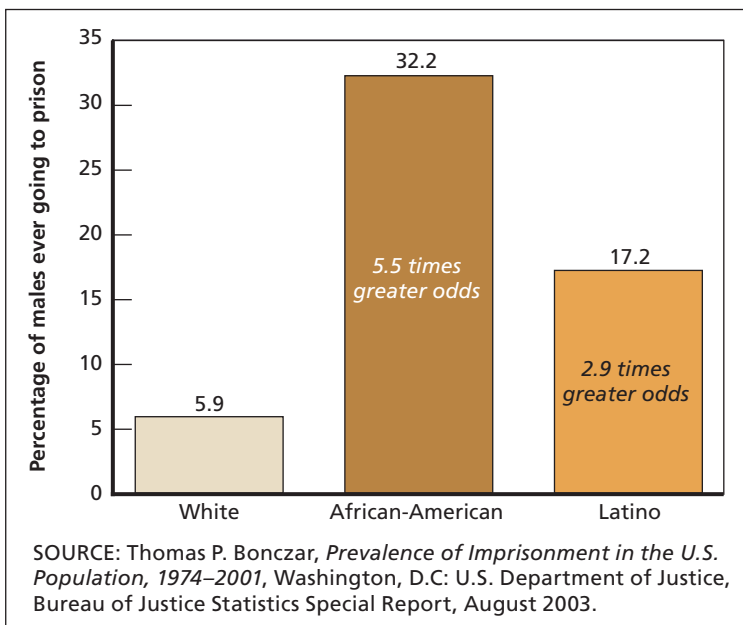
A growing body of research suggests that the disparities for boys and men of color result largely from a cumulative set

Disparities for Boys and Men Across the Indicators in the Four Domains

Children Living in Poverty



Lifetime Likelihood of Ever Going to Prison



Indicator	
Socioeconomic	
Children living in poverty	
Maternal education (less than high school)	
Children in single-parent households	
Children living with unemployed parents	
Health Disparities	
Very low birth weight	
Births to unmarried women	
Births to teen mothers	
Infant mortality	
Childhood asthma hospitalizations	
Childhood obesity	
Post-traumatic stress disorder	
Health insurance (lack of) (0–17 years)	
Access to health care (no usual source of care) (0–11 years)	
HIV and AIDS	
Safety Disparities	
Witnessing domestic violence	
Exposure to other forms of violence (shootings, bombs, riots)	
Substantiated child abuse and neglect	
Disproportional representation in foster care*	
Lifetime likelihood of ever going to prison	
Disproportional representation in prison population*	
Incarceration rate	
Children with incarcerated parents	
Juvenile arrest rate	
Juvenile custody rate	
Firearms-related death rate	
Homicide-related death rate	
Ready to Learn	
High school noncompletion	
Student achievement: below reading proficiency (grade 4)	
Student achievement: below reading proficiency (grade 8)	
Student achievement: below math proficiency (grade 4)	
Student achievement: below math proficiency (grade 8)	
School suspension	
Grade retention	

Note: For each indicator, we highlight in tan where the results are two times or more greater than the White group. *This is not an odds ratio; rather it is a disproportionality index number comparing the proportion of children in foster care when compared with that group's overall proportion in the population. For the prison population, it compares the proportion of children in the prison population compared with each group's overall proportion in the population.

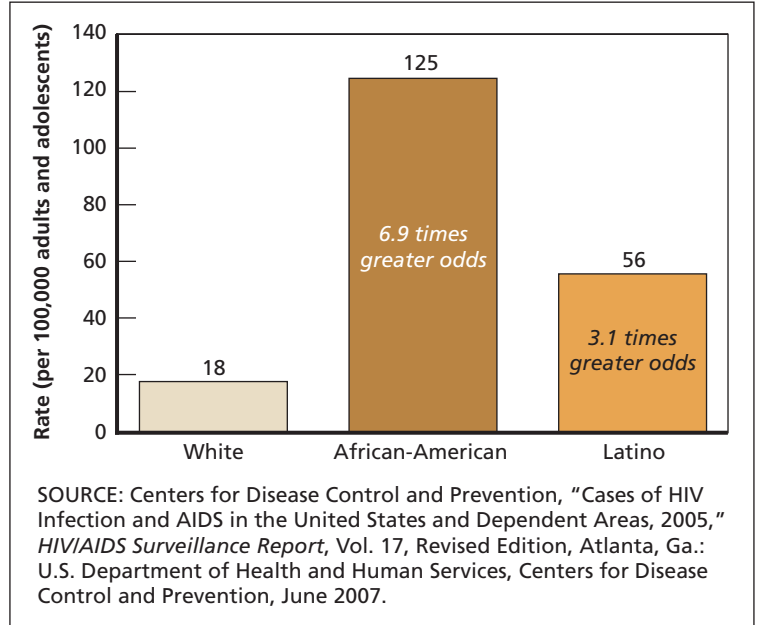
Disparities of Color Are Substantial Remains Relative to White Boys and Men

Latino	African-American
Disparities	
3.4	3.4
10.2	2.0
1.1	2.5
1.6	2.4
Disparities	
1.0	2.6
2.2	3.0
3.6	2.2
1.2	2.8
1.1	3.7
2.0	0.8
4.1	2.5
4.8	0.6
2.5	1.1
3.1	6.9
Disparities	
1.1	2.1
2.1	3.0
1.3	2.5
.89	4.05
2.9	5.5
1.07	4.3
1.5	6.7
3.3	8.8
1.2	2.5
2.1	5.7
3.3	10.1
5.1	16.4
Disparities	
6.7	1.9
2.3	2.2
2.3	2.4
3.6	3.5
2.5	2.8
1.2	2.4
1.1	2.0

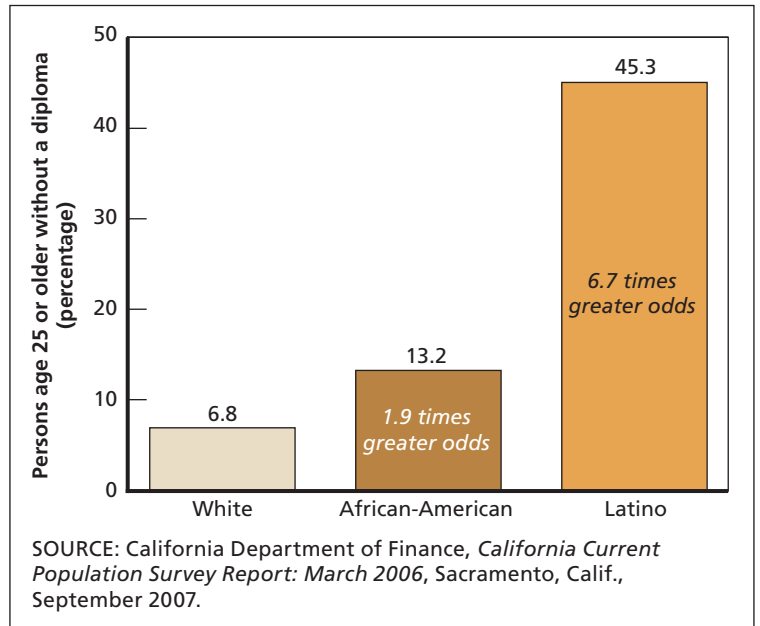
times worse, or greater, for either Latinos, African-Americans, or both.

For foster care, the index represents the proportion of children in the in the general population. An index number below 1.00 indicates an the general child population, while a number above 1.00 indicates an the index represents the proportion of African-Americans or Latinos in the general population. An index number above 1.00 indicates an

HIV and AIDS



High School Noncompletion



of factors, including adverse socioeconomic conditions and unequal access to health care, quality education, adequate housing, and employment. Thus, in thinking about reducing those disparities, it makes sense to return to the conceptual framework underlying the research. The framework provides some context for what policymakers, government agencies, philanthropic foundations, community organizations, and service providers can do to improve the life chances of boys and men of color in California.

Within this framework of macro-, community-, interpersonal-, and individual-level factors, national organizations, such as the National Urban League, the Joint Center for Political and Economic Studies, and the Congressional Hispanic Caucus—and such national foundations as the W.K. Kellogg Foundation and the Ford Foundation—have made major contributions to understanding disparities among racial/ethnic groups and developing an action agenda for addressing them. The 2006 Dellums Commission report comprehensively examined a range of policies that limit the life chances of young men of color and their communities and made a number of recommendations for policy change. Collectively, this body of work has led to important steps at the national level, such as federal legislation to establish an Office of Men's Health in the Department of Health and Human Services to examine the social determinants of health. The California Endowment has also taken a leadership role in addressing the social determinants underlying such disparities that exist in California.

At the macro level, the recommendations from various commissions and expert panels often stress identifying and addressing inequities in the systems that provide employment, educational, or service opportunities. Prisoner reentry is an area where policy-level approaches can help improve links between communities and state systems and the use of data analysis for identifying opportunities for improvement. The California Department of Corrections and Rehabilitation (CDCR) Expert Panel, in its *Report to the California State Legislature: A Roadmap for Effective Offender Programming*, offered recommendations for improving programming, the parole system, and reentry resources to help in transitioning ex-offenders back into the community.

At the community level, the public health community has increasingly recognized “social determinants” of health as primary predictors of individual outcomes. Community-level factors include access to *health-promoting* services, such as parks, or to *health-robbing* experiences, such as relentless community violence, exposure to environmental toxins, and poor school quality. Actions to improve community-level factors that can improve the odds for boys and men of color

encompass a spectrum of activities and may use many strategies to address numerous challenges. For instance, zoning laws can have an impact both on access to services and on reducing harmful environmental exposures.

At the interpersonal and individual levels, the most proximate approach generally taken to improve individual outcomes is to implement intervention programs, which operate by changing the intra- and interpersonal factors that affect individual outcomes. One example of a program with a strong evidence base is Cognitive-Behavioral Intervention for Trauma in Schools (CBITS)—a school-based intervention to help children traumatized by violence.

Implementing evidence-based “model programs” is not always practical for communities, so many individual-level interventions adapt the practices of model programs to their own context, including *mentoring*, *the infusion of behavioral health services*, *comprehensive or integrative services*, and *learning through experiential approaches*.

For example, over a dozen programs listed on the Promising Practices Network (PPN)—a collaboration between the RAND Corporation and public and private organizations to systematically review scientific evidence related to improving outcomes for children and families—use *mentoring* as a primary practice in improving outcomes for young people. Evidence-based mentoring programs operating in California include Big Brothers/Big Sisters, Achievement for Latinos Through Academic Success, and Multi-Dimensional Treatment Foster Care.

Many of the effective approaches to improving the well-being of young people recognize the need to *infuse behavioral health services*. For example, programs specifically designed to target substance abuse, gang involvement, or violence prevention are increasingly likely to include components to address behavioral health issues, ranging from post-traumatic stress to anxiety to depression. The CBITS program is one example.

Another hallmark of many approaches is the emphasis on providing *comprehensive or integrated services* that cut across outcome areas or bureaucratic functional lines. For example, early childhood intervention services are most often provided using a combination of preschool, home visiting, early screening, and case management.

Nationally, many effective program models recognize that participant learning should take place through *experiential approaches*, such as role-playing, rather than through didactic approaches, such as straight lecturing. Examples from the substance-abuse prevention arena include *Project ALERT*, which focuses on practicing resistance skills; learning the benefits of not using alcohol, tobacco, and other drugs; and recognizing that most people do not use drugs.

Conclusions

Although there are large disparities working against boys and men of color, approaches at the macro, community, interpersonal, and individual levels can diminish those disparities. Interventions at these different levels are likely to reinforce and strengthen each other, and reducing disparities is likely to require a portfolio of strategies. In sum, the unequal chances that boys and men of color face are not immutable,

and we know an increasing amount about how to improve those chances.

Beyond providing some basic facts about disparities for boys and men of color in the state, this study can help identify starting points in the policy arena for reducing the disparities for boys and men of color in California, as a baseline to measure progress in narrowing the gap over time. ■



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