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Journal

AAPI Nexus: Policy, Practice and Community, 9(1-2)

ISSN

1545-0317

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Publication Date

2011

DOI

10.36650/nexus9.1-2_230-240_UmemotoEtAl

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Peer reviewed

Policy Recommendations to Prevent Youth Violence and Substance Abuse and Foster Positive Youth Development among Native Hawaiian and Pacific Islander Adolescents

Karen Umemoto and Earl S. Hishinuma

Summary

Native Hawaiians and other Pacific Islanders represent diverse groups with unique histories and rich cultural traditions. They also confront significant challenges in health and education, experiencing disproportionately higher rates of violence and substance abuse. Policy recommendations regarding youth delinquency, substance abuse, and positive development include: (1) application of a socio-ecological approach; (2) utilization of a positive youth development and restorative approach; (3) development of culturally based interventions; (4) the building of capacity for youth-serving organizations; (5) development and strengthening of collaborations; (6) juvenile justice reforms; and (7) encouragement of research that disaggregates ethnic groups and gives greater consideration to community perspectives.

Introduction

The United States is projected to have no majority racial group by the year 2042 (Frey, 2008). Asian Americans and Pacific Islanders (APIs) constitute one of the most diverse ethnic groups in the United States and is the fastest-growing racial category (Day, 2010). Native Hawaiians and other Pacific Islanders (NHOPIs) (full and part) number 1,225,195 persons or 0.4 percent of the U.S. population (U.S. Census Bureau, 2010).¹ More than half (55.9%) of those reporting to be NHOPI were of mixed racial background (U.S. Census Bureau, 2011). Although numerically small relative to other groups, they are among the fastest-growing groups.

The number of NHOPIs (full and part) increased from 874,414 to 1,225,195 between 2000 and 2010, a 40 percent increase throughout the past decade (U.S. Census Bureau, 2001, 2011).

Socio-economic data for NHOPIs are often aggregated with Asian American groups. Subsequently, they suffer from a persistent myth regarding AAPI adolescents—that AAPI youth do not require attention and resources because they are well off in comparison to the other racial adolescent groups. This “model minority” myth is typically perpetuated by using census and other data indicating that AAPIs collectively have comparable rates of educational attainment, employment, and poverty as non-Hispanic whites (Reeves and Bennett, 2003).

Violence and Substance Use among Native Hawaiian and Pacific Islander Youth

When disaggregated from other Asian American groups, NHOPI adolescents are at a much greater risk for negative outcomes than Asian American youth on many educational, psycho-social, and health-related indicators, including violence and drug use. According to the 2009 Youth Risk Behavioral Survey (YRBS) results, NHOPI youths are at higher risk of violence victimization and perpetration (see Table 1) (Centers for Disease Control and Prevention, 2009). These trends have been consistent for the past decade (Sugimoto-Matsuda, Hishinuma, and Chang, 2011; Wong et al., 2011).

They are also at greater risk of alcohol and other substance abuse. According to the 2009 YBRBS, NHOPI youths begin marijuana use at an earlier age than the general population. They are also at higher risk of substance use for marijuana, cocaine, heroin, methamphetamines, and ecstasy as well as have greater access to illegal drugs at school (see Table 2) (Centers for Disease Control and Prevention, 2009).

Cultural considerations are critical when developing and evaluating interventions with NHOPI youth, families, and communities. Factors related to the role of culture include cultural identification, collectivism, interdependence, religion and spirituality, acculturative stress, help-seeking behaviors, and stigma of mental health (Goldston et al., 2008). These factors do not necessarily explain the disparities in risk of violence and substance use, but they are important to understand in formulating effective strength-based interventions.

Table 1. Comparison of U.S. and Native Hawaiian and Other Pacific Islander Youth Violence

Question	Total U.S. Population	Native Hawaiian and Other Pacific Islander
Did not go to school because they felt unsafe at school or on their way to or from school on at least 1 day (during the 30 days before the survey)	5.0 (4.3–5.7) 16,371	10.6 (6.2–17.4) 180
Threatened or injured with a weapon on school property one or more times (e.g., a gun, knife, or club during the 12 months before the survey)	7.7 (6.9–8.5) 16,367	12.5 (7.5–20.3) 179
In a physical fight on school property one or more times (during the 12 months before the survey)	11.1 (10.0–12.2) 16,089	14.8 (10.6–20.2) 175
Attempted suicide one or more times (during the 12 months before the survey)	6.3 (5.7–7.0) 14,609	11.9 (8.0–17.3) 155
Carried a gun on at least 1 day (during the 30 days before the survey)	5.9 (5.1–6.9) 15,664	10.4 (5.2–19.9) 145
Injured in a physical fight one or more times (injuries had to be treated by a doctor or nurse during the 12 months before the survey)	3.8 (3.3–4.3) 15,749	7.3 (3.8–13.4) 164
Ever physically forced to have sexual intercourse (when they did not want to)	7.4 (6.7–8.3) 15,735	11.9 (7.3–18.6) 175

Note: Table shows percentages with margins of error followed below by the number of survey respondents. Rows with shading show where NHPs approach or exceed twice the overall U.S. rate.

Source: Centers for Disease Control and Prevention, 2009.

Policy and Research Recommendations

Recommendations on policy research and policy orientation for issues of violence, substance abuse, and positive youth development are as follows:

1. *Apply a socio-ecological approach to addressing youth violence and substance abuse.*

Research has shown that comprehensive approaches that address multiple domains—the individual, peer and family relations, schools and community organizations, and larger societal influences—have greater promise in reducing negative youth behaviors (Bronfenbrenner, 1979; Dahlberg and Potter, 2001; Garbarino, 1985; Thornton et

Table 2. Comparison of U.S. and Native Hawaiian and Other Pacific Islander Youth Alcohol and Other Drug Use

Question	Total U.S. Population	Native Hawaiian and Other Pacific Islander
Drank alcohol for the first time before age 13 years	21.1 (19.6–22.6) 16,207	23.9 (18.3–30.6) 176
Tried marijuana for the first time before age 13 years	7.5 (6.7–8.3) 16,134	15.0 (10.6–20.8) 173
Used marijuana 1 or more times (during the 30 days before the survey)	20.8 (19.4–22.3) 16,112	24.8 (15.4–37.4) 172
Ever used any form of cocaine 1 or more times during their life (e.g., powder, crack, or freebase)	6.4 (5.7–7.1) 16,204	8.5 (5.2–13.6) 174
Ever used heroin 1 or more times during their life (also called “smack,” “junk,” or “China white”)	2.5 (2.2–2.9) 15,731	6.1 (2.4–14.5) 144
Ever used methamphetamines 1 or more times during their life (also called “speed,” “crystal,” “crank,” or “ice”)	4.1 (3.6–4.6) 16,289	7.7 (4.6–12.5) 175
Ever used ecstasy 1 or more times during their life (also called “MDMA”)	6.7 (5.8–7.6) 15,887	12.0 (6.6–20.8) 161
Offered, sold, or given an illegal drug by someone on school property (during the 12 months before the survey)	22.7 (20.7–24.9) 16,261	27.6 (18.5–38.9) 174

Note: Table shows percentages with margins of error followed by the number survey respondents. Rows with shading show where NHPs approach or exceed twice the overall U.S. rate.

Source: Centers for Disease Control and Prevention, 2009.

al., 2000). These domains constitute the dynamic social ecology that helps to shape and explain the prevalence and forms of youth delinquency. Research and policy interventions that are most useful are those that address individual challenges such as substance abuse or mental health problems, family issues such as domestic violence or language barriers, negative peer influences, school climate, and societal influences such as mass media in a more comprehensive, integrated manner (Umemoto et al., 2009). As examples in one of the settings—namely

schools—interventions could be related to course curriculum (Strong Makaiau, 2010), school connectedness (Chung-Do, 2010; Wegner et al., 2010), cross-cultural understanding (Strong Makaiau, 2010), and antibullying and anticyberbullying (Goebert et al., 2010). In addition, no national strategy or agenda exists to address youth delinquency and positive youth development. AAPIs need to be “at the table” for such major and necessary efforts.

2. *Utilize a positive youth development and a restorative rather than punitive approach.*

The juvenile justice system has historically alternated between the use of punitive and restorative approaches. Research has shown that harsh, zero-tolerance approaches tend to trap increasing numbers of youth within the juvenile justice system, with high rates of recidivism (Bernard and Kurlychek, 2010). Meanwhile, funding has been increasing throughout the past decade for school security measures while it has decreased for behavioral interventions (Community Matters, 2009). This trend needs to be reversed. Programs incorporating restorative approaches for NHOPI youth are needed to expand opportunities for healing and transformation that may lead to successful livelihood and development. As with other groups, punitive measures may be most useful in delinquency prevention and intervention when selectively used within a carrot-and-stick approach that emphasizes opportunities for pro-social growth and development (Baker, Sigmon, and Nugent, 2001; Umemoto, 2006).

3. *Develop culturally based programs and interventions addressing the unique conditions of NHOPIs.*

Funders have been placing increasing emphasis on “evidence-based” programming, favoring those programs that have been proven through research to be successful (e.g., Centers for Disease Control and Prevention, 2010). However, few programs serving NHOPI youth have undergone the rigorous study required for designation as “evidence-based” (Irwin, 2008; Substance Abuse and Mental Health Services Administration, 2011). This has threatened the development of culturally based programs that, among NHOPI populations, allow for greater engagement of youth and families in youth-development activities. Programs that are culturally grounded in traditional knowledge and practices as well as cultural competence among practitioners are important for youths from NHOPI communities (Fong and Furuto, 2001;

McGregor, Minerbi, and Matsuoka, 1998; Meyer, 1998; Mokuau, 1990, 2002). Policies are needed that encourage the innovation of culturally based programs, including the evaluation of such programs, so that they can be better informed by research as well as become recognized by various national agencies as evidence-based.

4. *Expand funding and organizational capacity for violence and substance abuse prevention and intervention programs serving NHOPI youths.*

AAPI youth-serving organizations constitute the community-based infrastructure of “first responders” who address violence and substance abuse-related problems day to day. They provide counseling, translation, referrals, outreach, gang intervention, recreation, employment and training, tutoring and academic support, mediation, family reconciliation, drug treatment, mental health services, and leadership development, among other vital programs and activities. Major federal funding has decreased throughout the past decade for youth-development programs, including funds for youth-violence prevention (Community Matters, 2009; Department of Education, 2007, 2008). In addition, organizational capacity varies widely, with some stable and established AAPI youth-serving organizations; however, many of these organizations are underfunded, understaffed, and in need of technical assistance and training to increase their organizational capacity in order to meet the challenges they face (Rehuher, Hiramatsu, and Helm, 2008; Substance Abuse and Mental Health Services Administration, 2011; Sugimoto-Matsuda and Onoye, 2010). A need also exists for many mainstream youth organizations to develop the capacity to better serve NHOPI clients.

5. *Develop and strengthen collaboration and partnerships that are purposeful, strategic, and systematic across sectors, organizations, and communities.*

Collaboration among community-based organizations, schools, juvenile justice agencies, health and mental health organizations, and civic organizations is critical for a comprehensive approach to positive youth development (Miao et al., 2011; Umemoto et al., 2009). Many AAPI youth are among those who get “tangled” or “lost in the system,” as they confront challenges at school, at home, in their neighborhood, or with the law. We need to manage the provision of services and “handling” of youth within and between systems and sectors better, so that the needed array of available services can be received

in a timely and effective way (Rehuher, Hiramatsu, and Helm, 2008; Substance Abuse and Mental Health Services Administration, 2011; Sugimoto-Matsuda and Onoye, 2010). Particularly in times of financial hardship, the ability to coordinate initiatives or to manage services and care for AAPI youth across sectors is vital.

6. *Participate in juvenile justice reforms to decrease youth confinement and disproportionate representation.*

Similar to adults, youths in the United States are involved in the criminal justice system at high rates compared with other industrialized nations and particularly youths of color (Federal Bureau of Investigation, 2008; Snyder and Sickmund, 1999). Some AAPI groups are among those that experience disproportionately high rates of contact with the juvenile justice system, such as Native Hawaiians and Samoans in Hawai'i (Bradford and Perrone, 2001; Kassebaum et al., 1995a, 1995b). Research is needed to identify the extent and nature of AAPI involvement in the juvenile justice system and to examine the causes for overrepresentation. Research and policy initiatives to reduce this disproportionate representation in the juvenile justice system while protecting public safety are also critical.

7. *Encourage research that disaggregates ethnic groups and considers community perspectives.*

Research and policies that lump AAPI ethnic groups into combined categories mask important distinctions and variations among them. This has historically led to the neglect of specific needs among the more disenfranchised or marginalized AAPI groups in the United States, such as Filipino, Southeast Asian, and NHOPI youths. Disaggregation of immigrants and nonimmigrants is also important, as many NHOPI groups show a bifurcated socio-economic distribution, with new immigrant youths from throughout the Pacific facing unique, often-harsher conditions compared to their American-born counterparts. Such disaggregation can reveal problems such as overrepresentation in the juvenile justice system or ethnic-specific patterns of youth delinquency as well as reveal new opportunities to address these issues effectively.

Conclusion

Despite the rich cultural traditions of our NHOPI children and adolescents, they are presented with significant challenges to their overall health and well-being in that they experience higher

rates of violence and substance abuse than the overall U.S. population and most other ethnic groups. Policies should incorporate an approach that is comprehensive, positive and strength-based, and culturally appropriate with a strong focus on capacity building, collaboration, and systemic institutional reforms. Accompanying research should be cognizant of the need to disaggregate that data based on substantive factors, including ethnicity.

Acknowledgments

This article was supported by the Centers for Disease Control and Prevention (R49/CCR918619-05; Cooperative Agreement #1 U49/CE000749-01). The contents of this article are solely the responsibility of the authors and do not necessarily represent the official views of the funding agencies. The authors would also like to express their appreciation to the researchers and administrators of the Asian/Pacific Islander Youth Violence Prevention Center of the University of Hawai'i at Mānoa, with particular gratitude to Deborah Goebert, DrPH, and Jeanelle Sugimoto-Matsuda, MSFS, for their comments regarding this article.

Notes

1. The U.S. Census category of "Native Hawaiian and Other Pacific Islander" includes persons who indicate their race as "Native Hawaiian," "Guamanian or Chamorro," "Samoaan," and "Other Pacific Islander" or provide other detailed Pacific Islander responses.

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