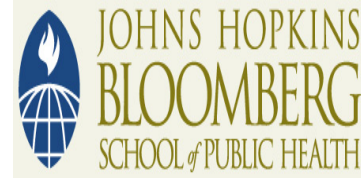




Health Opportunity Partnership (HOPE) Project



Project Description:

- The Health Opportunity Partnership (HOPE) is a community-based participatory research (CBPR) project funded by the Centers for Disease Control and Prevention (CDC), designed to implement and evaluate mental health interventions that address the needs of unemployed adolescents age 18-24 residing in Baltimore, Maryland.
- The HOPE project represents a partnership of the Center for Adolescent Health at Johns Hopkins University, the Baltimore City Health Department, the Mayor's Office of Employment and Development, Youth Opportunity (YO!) Program, and an advisory group of Baltimore residents.
- **Research is focused on determining the impact of a peer-led mental health education intervention for East Baltimore African American adolescents in order to increase mental health service utilization, encourage health promotion strategies, and reduce mental health disparities in this population.**

Background: Mental health disparities among African Americans due to exposure to violence:

- Mental health is a significant concern for many low-income, urban African American communities. Children and youth from low-income households are at increased risk for mental health problems (National Center for Children in Poverty {NCCP}, 2006). Approximately 21% of youth residing in poverty have mental health problems (NCCP, 2006).
- Exposure to violence has pervasive and profound effects on development and is a significant contributor to mental health. Ethnic minority youth, particularly African Americans, are disproportionately represented in impoverished, inner-city communities subject to chronic violence and stress. (Attar, Guerra, & Tolan, 1994). Approximately 46% of African American youth live in poverty. (Physicians for Human Rights, 2007). Youth residing in poverty are 26 times more likely to drop out of school and 18 times more likely to be killed by gunfire. (Physicians for Human Rights, 2007).
- Within Baltimore city, youth are routinely exposed to violence. Baltimore reported 5.48 times the national average of murder rates, 2.73 times the national average of aggravated assaults, and 2.9 times the national average of all violent crimes in 2003. (Federal Bureau of Investigation).
- Little systemic research has been conducted to address chronic stress and coping in the emerging adulthood population (ages 18-24 years), particularly among African American older adolescents/young adults that may drop out of school, yet still reside in these environments.

Research Intervention:

- Current research efforts focus on development of an innovative, culturally and contextually relevant intervention to address the mental health needs identified by this community. Specific issues for this intervention include depressive symptoms and violence exposure.
- In partnership with the East Baltimore YO Center and YO alumni members, researchers are working to adapt, implement, and evaluate the feasibility and acceptability of an empirically validated treatment into a peer-led model. The alumni members, referred to as the Peer Leadership Group (PLG), have worked in a participatory fashion to design an intervention that will address the mental health needs of their peers.
- Mental Health intervention groups will be facilitated by two PLG members and a study team Psychologist. Two concurrent groups will be implemented in the East side YO Center with approximately 8-10 current YO members. Researchers are currently recruiting participants.

Policy Implications:

- Improve mental health screening policies within agencies serving the emerging adulthood population.
- City-wide implementation of peer-led interventions by similar agencies.
- Innovative mental health service delivery options to increase mental health service utilization for targeted populations.

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