

Research paper

Neighbourhood structural characteristics and crack cocaine use: Exploring the impact of perceived neighbourhood disorder on use among African Americans



Claire E. Sterk, Kirk W. Elifson, Lara DePadilla*

Emory University, Rollins School of Public, Department of Behavioral Sciences and Health Education, United States

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ABSTRACT

Background: Crack cocaine use and associated negative social and health consequences remain a significant public health problem. Research that expands beyond the individual by considering the environmental context as a determinant of cocaine use is growing. The main objectives of this paper are to examine the effects of perceived neighbourhood disorder as an independent correlate of the frequency of recent crack cocaine use and whether its impact is mediated by use-related practices and social context of use among an African American adult sample in Atlanta (GA).

Methods: Cross-sectional data were collected from 461 respondents who were recruited through active and passive community outreach from 70 disadvantaged urban neighbourhoods across Atlanta. Multi-variable negative binomial regression was performed to assess the independent association of perceived neighbourhood disorder with crack cocaine use frequency and to explore potential mediation by use-related practices and social context of use.

Results: Perceived neighbourhood disorder did not remain statistically significant after accounting for use-related practices and social context of use. Involvement in drug distribution and having traded sex were associated with increases in frequency of drug use, while using in safer places and using alone were associated with decreases in frequency of use.

Conclusion: The results show that perceived neighbourhood disorder is associated with frequency of crack cocaine use independently of socio-demographics. However, its significance was eliminated when controlling for use-related practices and the social context of use. Such practices and the social context of use may mediate the relationship between neighbourhood disorder and crack cocaine use. Future research is needed to more fully elucidate the links between individual and neighbourhood characteristics that are related to crack cocaine use and strategies to reduce use must consider the salience of use-related practices and the social context of use.

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Introduction

Crack cocaine use and its health and social consequences remain significant public health problems since their initial introduction in the mid-1980s in the United States. For example, cocaine was the most commonly reported illicit drug for emergency department visits in 2011 (Substance Abuse and Mental Health Services Administration, 2013) and for arrests in 2009 (Motivans, 2011). Health consequences associated with crack cocaine use include a range of psychiatric, neurological, and cardiovascular problems (Cornish & O'Brien, 1996; Falck, Wang, & Carlson, 2008) as well as the increased risk for sexually transmitted infections, most notably HIV/AIDS (DeBeck et al., 2009; Harzke, Williams, & Bowen, 2009;

Latkin, Curry, Hua, & Davey, 2007; Logan, Cole, & Leukefeld, 2003; Sterk-Elifson & Elifson, 1993). Drug-related violence has also been related to high mortality and morbidity rates (Brewer et al., 2006; Siegal, Falck, Wang, & Carlson, 2000). Negative personal and social consequences include social degradation and economic marginalization (Bourgeois, 1995; Cross, Johnson, Davis, & Liberty, 2001; Sterk, 1999a), chaotic residential circumstances (Substance Abuse and Mental Health Services Administration, 2010; Wechsberg et al., 2003), unhealthy personal relationships (Golub, Dunlap, & Benoit, 2010), decreased personal safety (Falck, Wang, Carlson, & Siegal, 2001; Ribeiro, Sanchez, & Nappo, 2010) and increased criminal justice involvement (Sterk, Theall, & Elifson, 2005).

Crack cocaine use from an ecological perspective: neighbourhood disorder

Crack cocaine largely has been marketed in resource-poor neighbourhoods characterized by social disorder and populated

* Corresponding author at: 1518 Clifton Road, 5th Floor, Atlanta, GA 30322, United States. Tel.: +1 404 727 8749.

E-mail address: ldepadi@emory.edu (L. DePadilla).

by residents, often racial/ethnic minorities, with limited options for upward social mobility (Lipton & Johnson, 1998), providing a historical context for the link between place and crack use intensity. Studies examining the effects of neighbourhood characteristics on drug use are increasing (Boardman, Finch, Ellison, Williams, & Jackson, 2001; Crum, Lillie-Blanton, & Anthony, 1996; Galea, Rudenstine, & Vlahov, 2005), including those that focus on the neighbourhood socio-economic status (Duncan, Duncan, & Strycker, 2002; Fuller et al., 2005; Karriker-Jaffe, 2011; Wilson, Syme, Boyce, Battistich, & Selvin, 2005). Neighbourhood disadvantage has been associated with drug-related behaviors (Boardman et al., 2001). Research has also shown that social exclusion, relative deprivation and lack of economic resources more generally create environmental risk for illicit drug use (Fothergill, Ensminger, Green, Robertson, & Hee Soon, 2009; Karriker-Jaffe, 2011).

The lack of sufficient economic and social resources results in a weakening of social controls, thereby creating a place characterized by physical disorder (e.g., vacant buildings, graffiti, vandalism) as well as social disorder (e.g., crime, drug use and drug sales) (Lambert, Brown, Phillips, & Ialongo, 2004; Ziersch, Baum, MacDougall, & Putland, 2005). Neighbourhood disorder may act through other individual or social processes in influencing health or drug use behavior (Galea, Ahern, & Vlahov, 2003). For example, research shows that the association between neighbourhood disadvantage and health might be mediated when perceived neighbourhood social disorder and associated fear were included (Ross & Mirowsky, 2001).

Perceived neighbourhood disorder, the meso-system and crack cocaine use

Perceived neighbourhood disorder has been associated with illicit drug use, controlling for individual factors and other neighbourhood characteristics (Sunder, Grady, & Wu, 2007). Perceived neighbourhood condition may also be antecedent of drug use as part of a system. Bronfenbrenner's (1979) ecological model differentiates between the exo-, meso- and micro-systems. Place may be considered a facet of the exo-system and the meso- and micro-system are then processes embedded within it. In this study, place is conceptualized as neighbourhood disorder. The process of micro-system features such as family, friends, and acquaintances relating to one another is the meso-system, which in this study includes crack cocaine use-related practices and the social context of use. Neighbourhood disorder may increase crack cocaine use through norms that are supportive of use, while marginalizing those who disapprove of local drug scenes (Sterk, Elifson, & Theall, 2007). Moreover, neighbourhood disorder may allow for use in public places, public distribution and sales, and activities to support one's drug habit, ranging from pan-handling to trading sex (Latkin et al., 2007; Schönnesson et al., 2008; Sterk, 1999b; Sterk, Elifson, & German, 2000; Werb et al., 2010).

In neighbourhoods with high levels of disorder, places likely will emerge that facilitate use (Sterk-Elifson & Elifson, 1993). These range from private settings (e.g., crack houses and private residential settings), to semi-public (e.g., abandoned house or car) and public places (e.g., park or street corner). Use patterns vary by place of use. For example, in private settings, users are more likely to share the drug, maybe even buy their supply together or cook rocks from powdered cocaine, and have forms of informal social control that curtail the frequency of use. Conversely, in public settings, use and sales tend to occur at the same time, group cohesion is limited, and norms are largely undefined (Hamid, 1992;

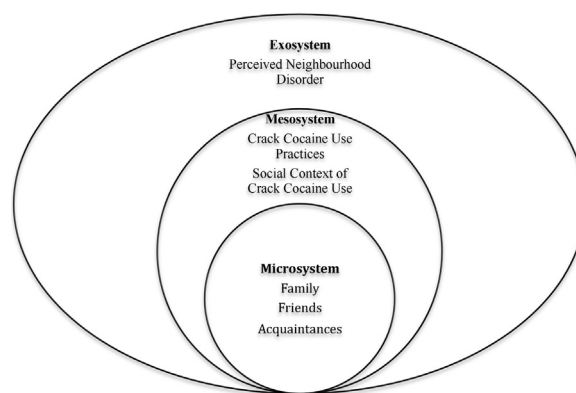


Fig. 1. Conceptual model.

Mieczkowski, 1990; Ribeiro et al., 2010; Sterk-Elifson & Elifson, 1993).

The place or setting of use and the network of people with whom one uses and other associates tend to be linked. However, some studies that have included neighbourhood disadvantage in multivariate models predicting drug use still found a significant effect for neighbourhood when controlling for social resources (Boardman et al., 2001), opinions about friends' use (Gibbons et al., 2004) or friend's acceptance of use (Sunder et al., 2007), suggesting that place influences drug use regardless of social network characteristics. For example, one study found that seeing the drug and other people using (Ehrman, Robbins, Childress, & O'Brien, 1992; Epstein et al., 2009) may lead one to use or use more often or that being at a place where the person has used or been exposed to use triggers the desire to get high (Bradizza & Stasiewicz, 2003; Crum et al., 1996). Although some researchers found that users may prefer to use alone as a means to have more control, a number also reported isolated use to reduce the negative aspects of getting high, such as paranoia (Inciardi, 1995; Ribeiro et al., 2010; Sterk-Elifson & Elifson, 1993).

At the micro-level, socio-demographic characteristics influence the social context of crack cocaine use. For example, those who are older and those who initiated use at an older age tend to be more marginalized and face more challenges in acquiring the drug and supporting their habit than those who are younger and who became socialized into the drug world at a younger age (Johnson & Sterk, 2003; Sterk, 1999a).

The present study

The resource poor environment that characterizes many areas of high crack cocaine use may exacerbate frequency of use patterns. In Atlanta, GA, where this study took place, crack cocaine users are primarily African Americans living in resource poor neighbourhoods (DePadilla & Wolfe, 2012). The objectives of this paper are (1) to determine if the exo-system characteristic of perceived neighbourhood disorder and the meso-system characteristics of crack cocaine use-related practices and social context of crack cocaine use are independently associated with frequency of use and (2) to examine whether the impact of the exo-system characteristic of neighbourhood disorder on frequency of use is mediated by the meso-system characteristics of crack cocaine use-related practices and social context of use. Given the paucity of literature about the practices and social context among non-treatment populations (Malchy, Bungay, & Johnson, 2008; Ribeiro et al., 2010), we seek to understand how these meso-system characteristics impact frequency of use from an ecological perspective that incorporates the concept of place among African American adults (Fig. 1).

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