DEATH OF A DROPOUT:

(RE)THEORIZING SCHOOL DROPOUT AND

SCHOOLING AS A SOCIAL DETERMINANT OF HEALTH

by

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ABSTRACT

DEATH OF A DROPOUT: (RE)THEORIZING SCHOOL DROPOUT AND SCHOOLING AS A SOCIAL DETERMINANT OF HEALTH

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Jessica Ruglis

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In this dissertation I posit that *schooling* is a social determinant of health. Employing a mixed method, participatory action research design, this study examines and offers original theorizing on the ways in which schooling affects educational *and* health outcomes. This research explores *how* and *why* education is the most significant predictor of lifetime health. Grounded in critical race theory, this dissertation spans conceptual frameworks from critical theory, participatory action research, political economy, social and environmental psychology, social epidemiology and public health as a way to understand the relationship that education level has to health. It offers a detailed analysis of the relationship between education and health, the current graduation rate crisis and its historical origins, school dropout and the costs of diploma denial.

I describe the research process of the youth participatory action research collective called ProjectDISH (Disparities in Schooling and Health) formed for this study. ProjectDISH created the research questions, methodology, design, protocol and methods of analyses for this mixed-method (mapping, focus groups, and survey) research study. The purpose of our research was to investigate and document the ways in which schooling and health are related, and how racialized urban educational inequities and outcomes correlate with health disparities. Supporting literature and policy suggestions are woven throughout the findings chapters.

I end this dissertation by introducing a new theory of school dropout, *called school non-completion*, as a way to speak back to, reframe and move forward the discourse, research, policy and practices concerning school dropout. The concluding chapter also provides methodological considerations and policy recommendations for this work.

DEDICATION

For *Demeterios.* One day you will write your own.

And for *Sam.* Always.

In loving memory of *Joy Vrooman*, my other half.

by flight and song

may birds carry this to you.

may

you receive this

on a day

that feels like

y(our) painting.

with sun shining

and flowers all around

I will find you there.

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I must also acknowledge William Cross, Jr., who's thinking, along with Michelle's, has influenced my own more than any other. I am honored to have had the opportunity to take courses with him, have extraordinary discussions, and to experience his brilliance in person. Bill,

my pores actively soaked up your understanding of this world, and how I have come to understand it is obviously stamped with your influence. To you I am indebted. Thank you. I must also acknowledge Greg Dimitriadis, Martin Ruck, Carmen Mercado and Pat Allen whose support of my work has also been unparalleled. Thank you for who you have been to me.

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PREFACE

When it is genuine, when it is born of the need to speak, no one can stop the human voice. When denied a mouth, it speaks with hands or eyes, or the pores, or anything at all. Because every single one of us has something to say to the others, something that deserves to be celebrated or forgiven by others.
—Eduardo Galeano, 1992, p. 25

In the past five decades, two major developments have interacted to bring about substantive transformations in racism and the structuring of difference. First…the national liberation struggles in the third world, the black liberation movement in the United States, and the antiapartheid offensive in South Africa all effectively challenged white supremacy, overturning old racial orders, and bringing about powerful changes in how race is lived.

However, the recent consolidation of global capitalism has resulted in strikingly new racialized consequences. This most recent phase of globalization, which is driven by the deployment of capital for production around the globe, has been accompanied by continuing crises within industrialized countries. With the relocation of industrial production to non-Western countries, there is rising unemployment, as well as a precipitous decline in the redistributive functions of the state, dwindling social services and privatization of previously publicly funded institutions. These processes have their counterparts in many postcolonial countries subject to the legacies of colonialism, international debt and structural adjustment policies. In addition, contemporary global communication technologies have simultaneously created new forms of dispossession and enhanced the potential for organization across borders based on common interests. Both developments—the resistance against racism and globalized capitalism—interact to create a new form of race, making it an unstable fluid order, characterized by old and new forms of dispossession, accumulation, and resistance.
—Mullings, 2005, p. 674-675

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Chapter 1.

INTRODUCTION:

THE BIRTH OF "DEATH OF A DROPOUT"

> It's ridiculous. Michael Bloomberg says he's No. 1 on education. School is his main M.O., but yet every minute there's budget cuts. A couple of years ago, they wanted to spend how many million of the taxpayers money on a stupid Jets stadium? You gotta understand, there's no way it should take this long to improve a school.
> —Jermaine

> Do not raise the MetroCard fare higher because some children that attend school do not receive MetroCards. They will not be able to get there. There needs to be an easier way.
> —Diana

> We had no control over the fact that the psychiatric phenomena, the mental and behavioral disorders emerging from this war, have loomed so large among the perpetrators of 'pacification' and the 'pacified' population. The truth is that colonization, in its very essence, already appeared to be a great purveyor of psychiatric hospitals…Because of it is a systematized negation of the other, a frenzied determination to deny the other any attribute of humanity, colonialism forces the colonized to constantly ask the question: 'Who am I in reality?'
> —Fanon, 1963/2004, p. 181-182.

> Schools could do more than any other single institution to improve the well-being and competence of children and youth.
> —World Health Organization, 2004

Education, while widely talked about as a benchmark of health, is rarely considered as a pathway to health unto itself. In bringing the fields of education and health together my view is this: school is the only institution everyone in the United States is required to attend. It is the one blanket that cloaks us all. It is the public's communal lived experience. Given this omnipotence, education must have a larger consequence on the self than preparing to live in a democratic society or offering chances for life possibilities, acquiring knowledge, promulgating socialization, or feeding the interests of privatization. Schooling *is* the formative years in life; and so it must have an impact on one's constitution in much the same way as living in poverty; experiences of interpersonal, institutional, or environmental racism; social isolation; or environmental stressors do. Each of these social determinants of health I argue operate equally *through* schools, where there are nearly 50 million K-12 public school students, as much as they do outside school walls (USDOE, 2007). Schools likely have an impact unparalleled in society, and it is time its

embodiment was documented. Through a mixed method, participatory action research design, this dissertation investigates the effects that schooling has upon health.

The Conceptual Foundation

"Health is an encounter that can affect you mentally or physically."
--Demeterios Gould, youth researcher, ProjectDISH

At the tender young age of sixteen, Demeterios, a youth researcher for ProjectDISH (Disparities in Schooling and Health), the participatory action research collective formed for this dissertation, operationalizes health as a moment, or series of moments, which in turn has an outcome. He conceives of health as a process, not an outcome; and in this sense health is a corollary of embodiment. Health, then, is necessarily a continuum: of time and space, of subject and object, of the biological and the social. But what is even more exceptional about Demeterios's understanding of health are the following two things: 1) the existential notion that health is a meta state of being, it is not an outcome unto itself, and 2) the implication that there must be determinants of the encounters one has. Like education, so too is there a political economy of health (Doyal, 1994; Freudenberg, Fahs, Galea & Greenberg, 2006). Through our research in ProjectDISH, we explore the encounters that youth have in New York City public schools and the effects of these experiences on young people's physical and mental health.

In this dissertation I posit that *schooling* is a social determinant of health; and so one's daily and accumulated educational experiences highlight the socially, politically and economically structured sets of encounters (experiences, opportunities and constraints) that students have every day in their schools. Generally speaking, social determinants of health are defined as the social and economic conditions in which people live that influence their health (See Marmot & Wilkinson, 2006). This view upholds the belief that one's health is not merely structured by individual health choices, behaviors or exposures to risk; but rather that societal, political, socioeconomic and, I herein suggest, *educational factors* determine health.

In this document I deconstruct and architect at once. I excavate existing educational and health rhetoric, theories and data, items already thought of as well crafted, and reconfigure them as a different landscape, as a different story. In concluding this dissertation, I introduce a new

landscape of school dropout and an alternative way to think about the relationship that education level has to health.

Deconstructing the language and causes of school dropout and of urban education is urgent because of the current graduation rate crisis our nation faces. Carving a pathway to explain why education is the most salient predictor of lifetime health is equally critical. The negative, inhumane consequences to the millions of young people who are pushed out of school and denied a diploma today will directly result in exponential strains to the country's public health, health care, education, economic, social security, and criminal justice systems as these youth become adults (See Belfield & Levin, 2007e)—not to mention to our morality. Beyond the strained individual experiences of each miseducated youth, the public will ultimately carry the economic burden of today's educational policies that strip youth of their rights and aspirations. Given the collapse of the U.S. and many other national economies in October 2008, paying heed to the consequences of the political economy of education (Anyon, 2005) unto other critical infrastructures is essential.

However, while the positive outcomes of earning a high school diploma—a benchmark measure of education—are undeniable; understanding differential patterns of educational achievement (as illuminated by the graduation rate crisis) requires a conceptual bifurcation of the words *education* and *schooling*. These are not synonymous. Education is a meta-concept, a superstructure; and schooling is a process—subjective and experiential. So while education confers social outcomes that are always good, schooling can be bad. This dissertation researches this conflated nuance, through an analysis of urban schooling.

Specifically, this study addresses the following four research questions, collectively tending to different ecological levels.

1. How do youth define health?
2. Are youth aware of how schools affect health? In what ways?
    a. What school factors promote health?
    b. What school factors are bad for health?
    c. How do schools make students feel?

i. What about schools make youth feel good?

ii. What about schools make youth feel bad?

3. What are schools doing to keep students healthy?

a. What classes about health (i.e., health class, sex education, physical education) are taught in school?

i. What is being taught in these classes?

ii. In what grades are they offered?

iii. How often does the class meet?

iv. How is class/course/content/requirement enforced?

v. Does a certified teacher teach the class?

vi. What should be taught?

ii. What health and social services or supports are there at school?

4. What people experience the most "unhealthy causes" in school?

a. Do people have better health if they have a better school environment?

b. What is an ideal (healthy) school environment?

Setting the Stage: The Birth of This Study

On Health

Merleau-Ponty (1962, p. 139) states: "Our body *inhabits* space and time": our body is not *in* space, nor is it *in* time. Speaking of time and space, he goes on to say, "I belong to them, my body combines them and includes them" (Merleau-Ponty, 1962, p. 140). Given compulsory schooling laws, the space and time that youth occupy is centrally schooling. For most youth, school is the central component of their environments. School is *the* fracture that cuts across all four levels of Bronfenbrenner's (1977) model for the ecology of human development (microsystem, mesosystem, exosystem, and macrosystem) and through the four contexts (interpersonal context, sociocultural context, temporal context, and situational context) of Revenson's ecological model (1990). The ways in which youth experience, are subjected to, move between, make sense of, and accommodate the many levels, contexts, and layers of their

schooling worlds I argue are a fundamental cause (Link & Phelan, 1995; Phelan & Link, 2005) of what defines, or creates, health.

> According to the fundamental cause idea, this dynamic reproduction of the association between SES and disease occurs because the flexible nature of resources of knowledge, money, power, prestige, and beneficial social connections allows the association to be reproduced in widely varying circumstances. Flexible resources are important in at least two ways. First, they directly shape individual health behaviors by influencing whether individuals are aware of, have access to, can afford, and are supported in their efforts to engage in health-enhancing behaviors. Second, resources shape access to broad contexts such as neighborhoods, social networks, and occupations that vary in their associated profiles of risk and protective factors (Phelan & Link, 2005, p. 29).

The sum of this dissertation documents the ways in which the flexible resources of knowledge, money, power, prestige and social connections are both controlled by *and* operate through schooling. What this takes is a deepening (and widening) of the construction and unilateral usage of "education" solely in terms of educational levels one can achieve. The pathways by which higher educational levels affect health are generally explained by: the income, occupational, social support, and social network gains a higher education confers; increased access to health information, resources, knowledge, and security (food, safety and otherwise); and control over one's life (Freudenberg & Ruglis, 2007). However, operationalizing education in such a way, while beneficial for causal models, does little to get at the *fundamental causes* (Link & Phelan, 1995; Phelan & Link, 2005) of health disparities and of how and why there is still such between group variability at each educational level. That is to say, a high school diploma does not confer the same benefits to Black men as it does for White men, for instance (Western, 2006).

Using education in such a static way is the equivalent of an oversight that racism and the legacy of slavery does not impact African-American health in the United States (Leary, 2005; Washington 2006) or that colonial histories of oppression, exploitation and genocide of

indigenous communities in the US and worldwide do not deeply structure the health status of entire populations of people (Carson, Dunbar, Chenhall & Baile, 2007). This document explores the ways in which excavating educational experiences illuminates how urban schooling is a social determinant of health; in much the same way as previous research on living in poverty, racism, and experiencing environmental or social stressors has (See Hofrichter, 2003; Krieger, 1999; Marmot & Wilkinson, 2006). And in doing so, we also get a road map documenting youth schooling experiences in New York City at a time when public education is under extreme assault of privatization, criminalization of youth, the prison-industrial complex (Meiners, 2007), raced and classed consequences of gentrification, of high stakes testing regimes, and the venom of hegemony.

On Education

Most importantly, this study grew out of my experiences as an educator, my political commitment to public education and my journey to understanding what the "graduation rate crisis" really is, and what it really means. I believe deeply in the public good. Even more so, I believe that asymmetries in public education fracture beliefs in *and* outcomes unto the public citizenry. I am a product of public schooling and come from a long line of public educators. Shaped by a commitment to social justice and to radically challenging the existing social order, the data and critiques offered in this dissertation stem *solely* from my belief in public education, my empathy for teachers teaching under the current regimes of urban education (which in many ways dispossess them as much as the students), and my commitment to youth. Unmasking current policies, practices and experiences of urban education is an effort towards researching possibilities for educational renewal and for calling to task the larger systems and ideologies that shape schools, *not* for implicating and defacing educators and public schools.

The "circuits of dispossession" (Fine & Ruglis, 2009) that shape schools is a principal conceptual framework that anchors this dissertation. Rooted in political economy of education (Baker & Foote, 2006; Lipman, 2004; Anyon, 1997, Apple, 1995), dispossession brings to fore economic, housing and transportation policies that maintain poverty, residential segregation (See also Anyon 2005; Sassen, 2001) and which have increased that income gap between the haves

and have-nots (Johnston, 2007; Lui, 2009). So, too, does dispossession highlight schemes of privatization as they collide with collapsing capitalism and multiculturalism, resulting in gross intersections of social, educational, health and criminal justice systems and polices; and collectively which play out in the lives and bodies of urban youth. We are ultimately left with perversely racialized (even by socioeconomic status) outcomes (and *opportunities)* for who graduates from high school, who goes on to attend and complete higher education, who ends up in prison, who ends up on public assistance, and who ends up in intergenerational shackles of poverty. Because race is a salient contemporary *and* historic form of dispossession and miseducation (Woodson, 2000/1933; Chomsky, 2000) and because the political economy of today was forged on the backs of Blacks during slavery, I offer this dissertation primarily through a lens of critical race theory. While this theory does not supercede other critical theories or other historically marginalized groups in the United States (or globally), it does offer a clean exemplar for how to understand *manufactured* bleak life outcomes as they are so strikingly visible in graduation rates, prison sentences and unemployment rates, just to name a few.

On Time

I am writing this dissertation at a very particular moment in time.

I am writing this at a time in which the neoconservatism (Spring, 2002) and neoliberalism (Harvey, 2007; Giroux, 2004, 2008; Apple 2006; Saltman & Gabbard, 2003) have met; merging into a powerful force called the Right (Apple, 2006; Kumashiro, 2008). And the consequences of this have shaped the educational milieu in which this study is situated. Susan George writes:

> I submit that neoliberalism has changed the fundamental nature of politics. Politics used to be primarily about who ruled whom and who got what share of the pie. Aspects of both these central questions remain, of course, but the great new central question of politics is, in my view, 'Who has a right to live and who does not?' Radical exclusion is now the order of the day and I mean this deadly seriously— (George in Giroux, 2008, p. 52).

I began graduate school in Fall 2004. When I arrived in New York City during the first week of August 2004, this gorgeous city was on the brink of the 2004 Republican National

Convention. Reports of anticipated political action, marches and protests appeared in the paper from the first day I woke up in Brooklyn. George W. Bush, who others and I would call a warmonger (See LaGuardia, 2006; Escherich, 2008), who stole the election in 2000, was on the verge of stealing it again. The nation had been exalted to a fear-based, axis of evil, war on terror, color-coded security alert state of being. 9/11 was the permanent rhetoric: evoking a similarly permanent social anxiety and xenophobia. As a result of this atrocity, Bush falsely, inhumanely, unethically and immorally began wars in Afghanistan and, especially, Iraq, which was at that time just over one year into the invasion. The No Child Left Behind Act of 2001 (NCLB) had been enacted, and its deleterious policies and channeling of public funds to private companies were two years underway. Schools were now visibly morphing into entities under the Act's subversive stronghold.

Abstinence-only-until-marriage was Bush's game too. So was the defacement of science. Removing, for example, information about condoms from the *Centers for Disease Control and Prevention* website. The intelligent design movement was also fast growing—threatening securities, foundations of government and liberties all around. Prisons (and prisoners) were being created at exponential rates, as was our military. Budgets for both proportionally far exceeded those that supported humanity: education, social security, human services, and health care. And although it hadn't arrived yet, the looming racialized energy of Hurricane Katrina was palpable. We were in the midst of a social fractal: where ripples of the waves formed by going to war in Iraq collided with supercapitalism (Reich, 2007), its corporate policies and consumption practices that had long degraded the environment. And they collided with historic legacies of slavery and race that form the contours of geography and demography in the United States. As Amartya Sen, the Nobel-prize winning economist, argues that there is no such thing as a natural disaster.

Even "natural" disasters are shrouded by politics: of entitlement, of race, and of class. As Amartya Sen has long articulated, famines happen not solely for lack of food, but for inequitable distribution (Sen 1983). The 9th ward of New Orleans and the surrounding Gulf Coast were obliterated in August of 2005, not only because Hurricane Katrina hit, but because historic and

systematic policies build racialized and classed geographies, in which poor people and people of color are rendered vulnerable to the fault lines of mother nature. Closest to the levees and furthest from the resources needed to flee the drowning city. And while rural white communities in the Gulf Coast were equally obliterated, assistance and rebuilding efforts happened much more quickly in these locales. The salience of race in circuits of dispossession is not only its most overt marker; it is also its lifeblood. It is also worth mentioning that immediately following Katrina, the state legislature in Louisiana voted to fire *all 4,000* teachers from its public schools (Goodman & DeRose, 2006), and *more than half* of all schools in the city became privately run charter schools ("Teachers", 2009).

These circuits, grounded in neoliberalism (Giroux, 2004, 2008), spread equally through education nationwide. As education is now enforcement (Saltman and Gabbard, 2003). Back in New York City, Mayor Michael Bloomberg had taken control of the New York City public school system, where mayoral control expedited privatizing schools. Migrating Sen's insight into urban schools we can see the micro-politics of the systematic dispossession of poor urban youth from the very educational institutions designed presumably for their "good." This dissertation was born out of thinking about how to document how urban educational failure is being produced, and framed, as natural; and what the health costs of this are. The research presented in this dissertation documents how dispossession gets enacted and embodied, for instance, through the over-policing of public high schools, the imposition of high stakes exit examinations and the denial of quality education to urban youth of color. It also documents how these strategic moves are ingested and resisted by youth, curdling their dreams, desires and life trajectories.

Throughout Mayor Bloomberg's tenure, merit pay, teacher report cards, high stakes testing (which now even includes a proposal for K-2 standardized testing, see Gootman, 2008), budget cuts, school closings and charter school takeovers are widely in effect. The arms of privatization are clear: publishers, outside consulting and media agencies are given no-bid contracts, which then far *exceed* the contract, and which Bloomberg still pays for. For example, Continental Press budgeted for $15,000 and spent $6.5 million—an excess of 43,000 percent.[1]

[1] See http://ednotesonline.blogspot.com/

Funding for charter schools has risen steadily, and substantially, in recent years (NYCDOE, 2006). And in the 2008-09 school year, Bloomberg spent $130 million to track the performance of schools—fortifying tracking, social efficiency, standardization, scientific management, and education as an economic intention which had long been the aims of neoconservatives (Spring, 2002). “Efforts to establish accountability, like performance bonuses for principals and teachers, sophisticated student data systems and report cards that assign letter grades for schools, have been a cornerstone of the Bloomberg administration” (Medina, 2008). IBM and several subcontractors run this student data accountability program. Where in fact, accountability regimes have helped to maintain inequality (Lipman, 2004; Sleeter, 2007). In 2006, a total of $2.6 billion dollars was spent on tests, test services and test-prep in the United States. Of this, $517 million was spent *specifically* on “NCLB related test development, publishing, administering, analyzing, and reporting during the 2005-2006 school year alone” (Au, 2009, p. 64). Yet only *five* companies collect fully 90 percent of these revenues from state testing programs. This is now neoliberalism and privatization combined (See Apple 2004, 2006; Giroux 2008; Au, 2009). As House (2000) states:

> An education system that is saturated with the values of unbalanced congnitive intellectualism, anxiety-provoking surveillance, a crassly superficial definition of ‘standards’, didactic compulsion of both teachers and pupils and infantilizing deprofessionalisation cannot but be an unmitigated disaster for our obsessively monitored teachers and relentlessly over-tested children (p. 1, in Harber, 2004, p. 121).

Money is being channeled away from classrooms and into the pockets of private companies. While money has been used for corporate aims and on increasing school safety, schools, classrooms, and students are bearing the burden (NYCDOE, 2006). For instance, *in the Bronx alone,* 17,000 students attend schools that have no school library. Students from “at least 42 schools in the poorest sections of the Bronx lack library access due to budget cuts and overcrowding” (Kolodner, 2008). And as a deathly gouge in the dispossession of youth in New York City, NYC School Chancellor Joel Klein testified that for the 2009-10 school year, “New York

City schools will have to cut approximately $1.4 billion from our budget in the next school year. We project that this will force our schools to let go of roughly 15,000 school-based personnel, predominantly educators, in the next year" (Klein, 2009).[2] $500 million of this is being cut from New York City's budget directly. This however, is not the first time Bloomberg has cut the New York City public schools' budget—it has happened, in substantially increasing increments, for several years now. Perhaps if they spent public monies on public schools, we'd be in a different situation.

Situated in this context, I began graduate school in a particularly bleak time when nationally nearly one third of all students and *half* of Black, Latino, and American Indian students who entered 9th grade did not graduate (Swanson, 2004). Overall, the nation's 50 largest cities were graduating, on average, only 51.8 percent of all students. New York City, the nation's largest school district with 1.1 million students, of which 85 percent are students of color (Swanson, 2004), was graduating a mere 38.2 percent of all students (Swanson, 2004). And New York State had the *lowest* graduation rate in the nation for Black students, graduating only 35.1 percent of its students statewide. It was in this data that my dissertation was birthed.

Overview of the Dissertation

Extending the words of Nancy Krieger (2005b, p. 2), the brilliant social epidemiologist, the overall concept of this dissertation is guided by the following question: how are the contours of power and inequity revealed in schools and how do these contours of education manifest distributions of health? What are the connections that young people's bodies make and manifest everyday in schools between injustice, inequity, power, disease, and death on the one hand, and social justice, equitable schooling, educational opportunity, human rights, and well-being on the other? And why does this matter?

In other words, *in what ways do the inequities of schooling become embodied by, and what physiological, psychological, emotional, mental, sexual and social manifestations do these*

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[2] Significant budget cuts are happening in many of the nation's large and small districts alike. Last year's NYC budget was slashed by $700 million (see: http://www.gothamgazette.com/article/issueoftheweek/20080128/200/2415). In Monroe County, NY school funding was cut in *half* for all its 24 school districts (including Rochester, New York State's third largest district 84 percent Black, and Greece, the 8th largest district in NYS (Swanson, 2004, p. 75). Ironically, many believe that the "County has unjustifiably thrust its Medicaid debt onto the shoulders of its schoolchildren" (Campaign for Fiscal Equity, http://www.cfequity.org/). And in the very recent national fiscal crisis of September 2008, budget cuts in NYC are once again proposed.

inequities have upon, youth? The intention of my dissertation is to explore the ways in which youth bodies and beings reflect upon, *and take up*, the structures, ideologies, histories, systems, and policies which shape their communities, neighborhoods, families, schools and lived worlds.

It is also worth mentioning what this dissertation will *not* do. My aim is not to minimize what exists at the intersections of schooling and health and development, but to contribute to the conversation by thickening this complex relationship. While much is written, in both the fields of education and health, about the: a) impact of maternal, infant and early childhood health on educational achievement; b) relationship of nutrition and physical activity to cognitive development, school performance and adolescent health status; c) benefits of vision and hearing screenings, school based health centers, coordinated school health programs, substance abuse prevention and treatment, mental health programs and resources, and programs for pregnant and parenting teens; d) violence and conflict prevention programs; and e) HIV/AIDS and sexuality education, little information accumulates from the opposite perspective. That is, each of these bodies of literatures takes its starting point in health and reflects how health issues intervene in (or can be intervened through) education. My dissertation has an opposing origin: that the process of schooling not only affects one's educational outcomes but that schooling itself impacts one's health.

The Structure of This Dissertation

Chapter Two will discuss critical race theory (CRT) for education, health and participatory action research. Delving more deeply into the intersections of geography, race and education it presents detailed information on the segregated and racialized nature of graduation rates. It then goes on to provide an overview of critical race theory, constructions of race and racism in the United States, and critical race theory for education, health, and participatory action research. This chapter establishes a viewpoint through which to "read" the remainder of the dissertation.

Chapter Three offers a literature review on education as a social determinant of health. It begins by providing historical and philosophical perspectives on school dropout, followed by detailed data on the current graduation rate crisis. The chapter then moves on to outlining the literature on causes of school dropout, organized by factors associated with school dropout at the

individual, family, neighborhood and community, school, and education policy levels. The third section provides an overview of both educational and health interventions for dropout prevention, academic achievement, student engagement and improving graduation rates; and considers the particular role that school connectedness directly plays in adolescent health. The fourth and final section details the adverse academic, social, economic, criminal justice and health outcomes of "diploma denial" (Fine & Ruglis, 2009). The most extensive discussion in this last section centers on the health implications of school non-completion, as this body of literature conceptually formed the foundation for the dissertation research depicted in the remaining chapters.

Chapter Four details the methods of this study, which is a mixed-method youth participatory action research project. ProjectDISH (Disparities in Schooling and Health) is the name of the participatory action research collective developed for my dissertation research. This chapter will briefly discuss participatory action research before moving on to detail the entire process and research activities of ProjectDISH, which included an in depth explication of the research questions, methods, and methods of data analysis employed in this dissertation. We employ three primary qualitative methods in this study: mapping, focus group discussions, and "Advice to the Mayor" narratives. For the quantitative portion we utilize survey data from a sister participatory action research project entitled Polling for Justice, of which I and four other ProjectDISH youth researchers are members. This survey is described in detail in this chapter. This chapter then concludes with a discussion of the methods of qualitative and quantitative data analysis utilized, as well as an introduction to the eight major themes of our research findings.

Chapter Five is the first of three data analysis and findings chapters. This chapter will specifically detail findings that elucidate the structurally violent dynamics of schools and attend to our research questions concerned with what about school promotes and harms health, how school makes students feel, and what the unequal distributions of schooling experiences are. Data in this chapter is organized by Bronfenbrenner's (1977) ecological model of human development as it provides a more dynamic way to think about the data and the corporeal costs of schooling.

Chapter Six examines findings on sexuality, relationships, intimate partner violence, sex and health education in school, and the chapter begins with a detailed policy analysis of legislation that has manufactured the outcomes documented in our data. It discusses the relationship of the findings to sexual subjectivities and to social, sexual and educational outcomes.

Chapter Seven explores the physiological consequences of schooling. While discussions of the psychological consequences of schooling permeate this and the two preceding findings chapters, Chapter Seven specifically explores how the *contours of education manifest in distributions of health*. Building upon the qualitative and quantitative data presented in the previous two chapters and introducing the mapping data, this chapter considers *how* education may have come to be the most salient predictor of lifetime health and disease. To begin, I introduce four conceptual frameworks useful for grounding analyses of such work. The second section presents the mapping data. The third and final section brings to life the mapping data by integrating focus group and survey data on reported stressors and health consequences, along with the literature with which it is in conversation with.

Collectively, the three findings chapters (Chapters Five-Seven) tell a particular story. Where Chapter Five begins with students' educational and social experiences in schools and related structural variables that students identify as affecting their health, Chapter Six builds on these findings and whittles the contours of the schooling-health nexus even further, taking up findings associated with health and sexuality education, supports, programs, practices and resources in schools. Chapter Seven presents the culmination of these two chapters, turning the findings inside out, literally, by examining what and where schooling experiences get located *inside the body.* Through an investigation of embodiment using our mapping data, Chapter Seven presents the ways in which the social-psychological matrices of schooling manifest in physiological outcomes.

Chapter Eight, the final chapter, offers reflections on theory, method and policy. The first will offer reflections on theory, in which I theorize school dropout and introduce a culminating theory of school non-completion. I then discuss participant perspectives on personal responsibility

and educational and health disparities. The second offers thoughts on the use of (re)theorizing school dropout as a decolonizing methodology, methodological considerations for school resistance being health promoting, youth participatory action research, and limitations and future directions for this research. Lastly, this chapter will end with a discussion on policy. This final section will include suggestions made by the youth researchers and myself.

I will use the words “we” and “our” throughout this dissertation. They are used specifically when referring to anything that was done with, in, or that reflects the collective of ProjectDISH (or Polling for Justice). When thoughts are my own, I use the word “I.”

Conclusion

The research questions this dissertation sought to understand were the ways in which urban schools affect health, how they harm and promote health, how they make students feel, what they do to keep students healthy, and who experiences what particular conditions while there. The data yielded reflects not only on health consequences of urban schooling, but also on the *pathways and processes* of educational failure and dispossession. The data itself manages to hold youth experiences with education, health and criminal justice as angular: they all originate, overlap, and move in proportion and relation to one another. Youth experiences in and with these systems, and the subsequent bodily and life outcomes happen *at once*, as a cacophonous symphony, and not merely as isolated silos. So what is presented in this dissertation is in part an illustration of grounded theory (Charmaz & Mitchell, 2001; Charmaz, 2006; Glaser, 1994; Strauss & Corbin, 1990).

Chapter 2.

CRITICAL RACE THEORY FOR EDUCATION, HEALTH AND PARTICIPATORY ACTION RESEARCH

"The problem of the twentieth century is the problem of the color line."
–W.E.B Du Bois

Why Critical Race Theory? The Racialized Status of Urban Education

Nationally 68 percent of all students graduate from high school. Yet on this national stage ethnic disparities in graduation rates are striking. While 76.8 and 74.9 percent of Asian/Pacific Islanders and Whites, respectively, graduate from high school, American Indians, Blacks and Latinos all have graduation rates that hover right around 50 percent (Swanson, 2003, p. 28). In New York City, the nation's largest school district and the site and context within which this dissertation takes place, only 32.2 percent of African Americans and 30.1 percent of Latinos graduate from high school, while 57.9 percent of Whites and 60.9 percent of Asians do. African Americans are nearly twice as likely to *not* graduate high school as whites (Swanson, 2003 & Greene, 2001). While a more detailed discussion of graduation rates, policies and school dropout is reserved for next chapter, a brief introduction to this noticeably racialized crisis is warranted here.

Other urban districts suffer this same fate.[3] Of the nation's twelve largest city school districts (Table 2.1 below), *all* are "majority minority" districts—meaning that the majority of students in the district are students of color. For example, of New York City's 1.1 million students, 83.9 percent are students of color (predominately Black and Latino/a). Half of these districts are comprised of more than 90 percent students of color. This is segregation (See: Dumas, 2009; Street, 2005; Lipman, 2004; Ladson-Billings, 2004).

[3] This crisis is not limited to the largest school districts. Other urban districts (i.e., Buffalo, Yonkers and Syracuse, NY; Atlanta City, GA; Springfield, MA; Hartford, CT; St. Louis, MI; Cleveland, Columbus, Cincinnati, Akron, OH; Houston, TX) have similar, if not worse, graduation rates (Swanson, 2003).

Table 2.1 *Enrollment of the 12 Largest City School Districts by Race and Ethnicity*

City	Enrollment	% White	% Black	% Latino	% Asian
New York	1,091,717	16.1	36.1	37.3	10.0
Los Angeles	735,000	9.6	12.9	71.4	6.0
Chicago	438,589	9.2	50.9	36.4	3.3
Miami	374,806	10.6	30.1	57.2	>2.0
Houston	212,099	9.3	30.5	57.1	3.0
Philadelphia	204,851	16.4	65.3	13.1	4.9
Detroit	187,590	5.2	90.1	2.8	1.0
Dallas	163,327	6.7	32.9	58.9	1.2
San Diego	141,171	26.6	15.6	39.7	17.2
Memphis	118,000	9.0	87.0	0.7	1.4
Milwaukee	105,000	22.2	58.96	12.5	3.6
Baltimore	95,875	10.4	87.7	0.4	0.5

Note. These figures come from current school district websites.

Original Source: Ladson-Billings, 2004, p. 9

The graduation rates (Table 2.2 below) in these urban districts prove testament to what several scholars are appropriately calling *educational apartheid* (Hill, 2009; Street, 2005; Wishon & Geringer, 2005; Orfield & Lee, 2005), where apartheid is "a policy or system of segregation or discrimination on grounds of race." Although traditionally apartheid refers to the South African racial segregation system, in 1973 the United Nations adopted the *International Convention on the Suppression and Punishment of the Crime of Apartheid* and in doing so identified "the crime of apartheid" to be globally inclusive, not limited to apartheid South Africa. Since then, apartheid has grown to refer to any state's racialized policies that establish and maintain "domination by one racial group of persons over any other racial group of persons and systematically oppressing them" (Article II, http://www.unhchr.ch/html/menu3/b/11.htm). On these grounds, I pose that *educational apartheid* refers to the racially segregated educational system (e.g., as evidenced in the data above) that is historically generated and presently maintained through funding, educational, immigration, sovereignty, human service, urban planning, transportation, economic, criminal justice and social policies that create *segregation and discrimination in the U.S. educational system on grounds of race*.

Table 2.2 *Graduation Rates, Twelve Largest City School Districts in the United States*

City	percent Students of Color [4]	Graduation Rate (percent) [5]	Graduation Rate Rank (Of the 50 largest U.S. cities) [5]
New York	83.9	45.2	43
Los Angeles	90.4	45.3	42
Chicago	90.8	51.5	31
Miami	89.4	49.0	35
Houston	90.7	54.6	27
Philadelphia	83.6	49.6	34
Detroit	94.8	24.9	50
Dallas	93.3	44.4	44
San Diego	73.4	61.6	15
Memphis	91.0	61.7	14
Milwaukee	77.8	46.1	38
Baltimore	89.6	34.6	47

Not surprisingly, seven of these districts are located within the ten states with the largest Black populations: New York, California, Texas, Florida, Georgia, Illinois, North Carolina, Maryland, Michigan, and Louisiana (McKinnon, 2001). We must not forget that “more than half of all black families live in major metropolitan areas” (Dyson, 2005, p. 63). This all has significant implications for understanding the endemically racialized effects of such demography. When city school districts’ per pupil expenditure is *half* that of surrounding suburban districts (Kozol, 1991), and when over 70 percent of all Black students in the United States attend schools that are majority minority schools (i.e. schools in which the racial composition of students are majority students of color) (Orfield, 2001; Darling-Hammond, 2004) we are facing systematic dispossession to an extent that demands analysis through Critical Race Theory. Whites, on the other hand, primarily attend schools in which less than 20 percent of all students are non-White, while students of color largely attend schools where between 53 and 55 percent of all students are non-White. Yet more than one third of all black and brown students attend schools where 90 to 100 percent of the student population is students of color (Orfield, 2004).

Gary Orfield, co-director of Harvard University's Civil Rights Project also says that the racial disparity in special education placement “makes it less likely that black students receive high school diplomas, less likely they will be employed after leaving school, and more likely they will end up in the criminal justice system” (McNally, 2003). ‘"This is segregation within segregation," Orfield said. Currently, African-American children comprise 17 percent of total

[4] Ladson-Billings, 2004
[5] Swanson, 2008

student enrollment, of which *one third* is now labeled mentally retarded or cognitively disabled (McNally, 2003).

"Nationwide, Blacks are nearly three times more likely to be identified as mentally retarded than white students and nearly twice as likely to be labeled as emotionally disturbed." Another special education category, "specific learning disabilities, is *the category with the least social stigma attached. It had the lowest racial disparity nationally*" (McNally, 2003—emphasis added). Here, Black students are only about 30 percent more likely than whites to be categorized has having specific learning disabilities (i.e., dyslexia). It is important to question the implications for this disparity as it intersects with the labor market and economy, since schools are the gateway to future occupations.

Additionally, "African-American students were more than three times as likely as whites to be given short-term suspensions. They were 67 percent more likely than whites with emotional and behavior problems to be removed from school on the grounds of dangerousness, and were 13 times more likely than white students with emotional and behavior problems to be arrested in school" (McNally, 2003). This is a pattern that continues throughout life: 58 percent of African-American students labeled with emotional and behavior problems drop out of school; and 73 percent of all students with emotional and behavior problems that drop out are arrested within three to five years of leaving school (McNally, 2003).

Numerous studies also investigate the disproportionate number of office referrals, suspensions, and expulsions for children of color. In a study by Gordon, et al. in 2000, of the twelve cities studied, African Americans were suspended or expelled at a rate between 14 percent and *296* percent higher than their representation in the population (Skiba, 2000). Further, in 1997, while youth of color made up about 33 percent of the juvenile population in the US, they comprised almost 66 percent of "youth detained and committed to juvenile facilities." By 2000, the arrest rate for black youths was *74 percent* higher than for whites (Browne, 2003).

Why does this matter? Education is *the* predictor of most social and cultural outcomes in society—ranging from economic success and housing rights, to transportation needs and lifetime health. Urban educators must not fall prey to the belief that schooling systems are established

such that every child has full agency and opportunity. Education systems are a reflection of cultural, social, historical, political, economic, linguistic and militaristic systems in the United States, which are immersed in foreign policy and globalization. A historical lens of Critical Race Theory is central to dissecting these current disparities in education, and it has significant implications on curriculum and instruction, teacher education and counselor training, and for research.

Critical Race Theory is also the most pervasive social theory that under-girds the thinking, theorizing, research and analysis presented in this dissertation. A detailed discussion of this theory is necessary to understand the perspectives put forth as well as the findings and interpretations offered. And I believe that it is also too infrequently used as an analytic and research frame in both fields of education and health. Offering a detailed discussion of it here serves that scholarly aim. It will also give insight into the political frame within which this dissertation is conceived, written and analyzed.

It is worth mentioning here that Critical Race Theory is not meant to usurp the importance of class, gender, ableism/ablebodiness, sexuality, language, etc. as the most important dimension of diversity; rather it is merely one piece of the puzzle. Feminist and postcolonial studies (Harding, 1998; Collins, 2000; Anzaldua, 2007; Fanon, 1967, 2004), LatCrit Theory (Solorzano & Delgado Bernal, 2001; Solorzano & Yosso, 2991; Yosso, 2006), anti-oppression pedagogies in the LGBTQ (Kumashiro, 2002) and low income communities, and immigration scholarship (Suarez-Orozco & Suarez-Orozco, 2001; Suarez-Orozco, Suarez-Orozco & Qin, 2005) to provide a few examples, all play a strategic role in exposing the endemic racism, classism and sexism in society. But Critical Race Theory is here employed as a frame of critical thinking through which all of these other axes of oppression and critical theories can be seen and heard. It also provides a theoretical foundation for the type and aims of participatory action research employed in this dissertation.

A Brief History of Critical Race Theory

Critical Race Theory began in late 1970s and early 1980s as an extension of Critical Legal Studies and the Civil Rights Movement. Critical Race Theory (CRT) was developed

predominately, although not entirely, by progressive intellectuals of color. The two scholars that spearheaded the movement are Derrick Bell and Alan Freeman. Unifying the constellation of critical race work are two central tenets: “The first is to understand how a regime of white supremacy and its subordination of people of color have been created and maintained in America, and, in particular, to examine the relationship between that social structure and professed ideals such as ‘the rule of law’ and ‘equal protection’” (Crenshaw, Gotanda, Peller & Thomas, 1995, p. xiii). Here Critical Race Theory’s premise is that civil rights law has been more helpful to whites than to blacks. The second tenet is a desire not simply to understand the bond “between law and racial power but to *change* it” (p. xiii). A corollary to participatory action research: a desire not simply to understand the bond between research and racial power but to change it.

More specifically, in my interpretation, Critical Race Theory (CRT) holds several basic premises. First, “is that *racism is normal*, not aberrant, in American society” (Delgado & Stefancic, 2000, p. xvi). Second, Critical Race Theory (CRT) holds that *race is a social construction*, and results from social processes, relations and thought (Delgado & Stefancic, 2001, p. 7). Included in this is an implicit implication of the ontology, epistemology and research practices of both the natural and social sciences throughout American history. Critical to understanding this “differential racialization” (Delgado & Stefancic, 2001) and positionality is the notion of intersectionality. “Intersectionality refers to particular forms of intersecting oppressions, for example, intersections of race and gender, or of sexuality and nation. Intersectional paradigms remind us that oppression cannot be reduced to one fundamental type and that all oppressions work together in producing injustice” (Collins, 2000, p. 18) and it is a point to which I will return later, in Chapter Four.

The third premise of CRT is *storytelling (and counter stories)*, narrative, and various forms of writing which are often used to challenge the status quo of racial oppression in order to elucidate and analyze “the myths, presuppositions, and received wisdoms that make up the common culture about race”—one that renders all non-whites as “others.” Critical race theorists assert that truth and social reality are situational; that storytelling helps with “the psychic

preservation of marginalized groups"; and that storytelling "can affect the oppressor" (Ladson-Billings & Tate, 1995, p. 57). This premise is critical in examining the variety of actions of resistance that students of color perform to challenge the oppressive educational system they are entrenched in.

The fourth premise of CRT is *interest convergence*. Originally developed by Derrick Bell, one of the foremost pioneers of Critical Race Theory, interest convergence holds that elite whites (those in power) "will tolerate or encourage racial advances for blacks only when such advantages also promote white self-interest" (Delgado & Stefancic, 2000, p. xvii). A notorious example of this is *Brown vs. Board of Education* that was conceived as a landmark in equality, but in reality, was partially a façade for the political fear of the spread of communism in light of the Cold War. The implementation phase of the Supreme Court decision, *Brown II*, sincerely reflected a deliberate American governmental strategy in fighting the Cold War. "The amicus brief filed in *Brown* by the U.S. Justice Department argued that desegregation was in the national interest in part because of foreign policy issues" (Ladson-Billings, 2004, p. 4; Dudziak in Delgado & Stefancic, 2000). International press critiqued U.S. race discrimination to the extent that the American government faced a real political block to the illusion of American democracy as being better than Soviet communism (Dudziak, 2000, p. 114). This is not to say that progressives, civil rights activists and educators who pushed for desegregation were conspiring; rather, this is an historic example of "interest convergence," in which different groups supported the same reforms but for entirely dissimilar reasons (Bell, 1995; & Ladson-Billings, 2004, p. 4). This is not to dismiss the civil rights advancement achieved through *Brown* as both remarkable and groundbreaking; rather the point of Critical Race Theory is that to those in power (government and legislative officials), desegregation wasn't an expression of social reconstruction. Instead, it was a strategic *political* move to ensure a continuation of white, and Western, dominance, both domestically and internationally.

Critical Race Theory provides a point of departure needed to examine how and why students of color are marginalized and stigmatized through existing educational policies and

legislation, where as a result, the stability of the status quo is preserved and unthreatened by the oppressed groups.

Critical Race Theory, Race and Racism

> United States history reveals that race is a socially constructed category, created to differentiate racial groups, and to show the superiority or dominance of one race over another. Indeed, race can be viewed as an "objective" phenomenon until human beings provide the social meaning. The social meaning applied to race is based upon and justified by an ideology of racial superiority and white privilege. That ideology is called racism. Audre Lorde (1992) concisely defines racism as, "the belief in the inherent superiority of one race over all others and thereby the right to dominance." Manning Marable (1992) also defined racism as "a system of ignorance, exploitation, and power used to oppress African-Americans, Latinos, Asians, Pacific Americans, American Indians and other people on the basis of ethnicity, culture, mannerisms, and color. Embedded in Lorde and Marable's definitions of racism are at least three important points: (1) one group believes itself to be superior, (2) the group which believes itself to be superior has the power to carry out the racist behavior, and (3) racism affects multiple racial/ethnic groups. (Solorzano & Yosso, 2001, p. 4).

Critical Race Theory argues that racism has four dimensions: it has micro and macro components, it takes on institutional and individual forms, it has conscious and unconscious elements; and it has a cumulative impact on both the individual and group (Solorzano & Yosso, 2001, p. 2).

Despite the fact that race and racism are *socially constructed,* racism is largely an individual construct in contemporary American society (Essed & Goldberg, 2002; Lopez, 2003). Racism here is rooted in the theory of colorblindness—that skin color should simply be disregarded, and that racial discrimination and constitution have nothing to do with larger social systems. Popular American ideology holds that racism is "an individual and irrational act in a world that is otherwise neutral, rational, and just" (Lopez, 2003, p. 69). What results from this perception is: 1) the disregard for the connection of racism "to the larger distribution of jobs, power, prestige, and wealth" (Crenshaw, Gotanda, Peller & Thomas, 1995, p. xiv), and 2) that racism is "reduced to broad generalizations about another group based on the color of their skin" (Lopez, 2003, p. 69). Sociologists Michael Omi and Howard Winant posit a "racial formation theory" which is defined as:

> The sociohistorical process by which racial categories are created, inhabited, transformed, and destroyed…[It] is a process of historically situated *projects* in which human bodies and social structures are represented and organized.'

> Further, they link "racial formation to the evolution of hegemony, the way in which society is organized and ruled." Their analysis suggests that "race is a matter of both social structure and cultural representation" (Ladson-Billings & Tate, 1995, p. 50; original quotes from Omi & Winant, 1994, p. 56).

When racism is viewed through a lens of deviance and deficiency from the larger, "neutral," systemic and societal norms, structures can be established to maintain the seemingly "objective" norms while at the same time punishing deviance. These norms are referenced to Eurocentric, white, (upper) middle class culture.[6] Since race has become synonymous with skin color in popular culture, it follows that if skin color is disregarded (colorblindness) then racism will be abolished. Reducing race and racism to this incarnation has two significant consequences: 1) race is a personal (vs. systemic) issue (Lopez, 2002, p. 69), and 2) attention to the larger institutional structures that silently perpetuate oppression will be ignored. When racism becomes ahistorical, it not only becomes "natural," it is severed from its roots and origins and therefore devoid of the orders of magnitude that structure present and future social realities. As Giroux (1997) writes, "what appears as 'natural' must be demystified and revealed as a historical production both in its content and in the elements that structure its form."

These consequences can be explained in historical terms. Racial discrimination can either be analyzed from the victim's perspective or from the perpetrator's perspective. In the victim's perspective, "racial discrimination describes those conditions of actual social existence as a member of a perpetual underclass. This perspective includes both the objective conditions of life (lack of jobs, lack of money, lack of housing) and the consciousness associated with those objective conditions (lack of choice and lack of human individuality in being forever perceived as a member of a group rather than as an individual)" (Freeman in Crenshaw, Gotanda, Peller & Thomas, 1995, p. 29). Conversely, the perpetrator perspective "sees racial discrimination not as conditions but as actions, or a series of actions, inflicted on the victim by the perpetrator." The perpetrator perspective focuses more on what a perpetrator has done to an individual rather than

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[6] 'White' is used here as the representation for historical representation of the dominant hegemony. It is also what is referenced in literature. While I recognize and contest the diversity of "white" culture, this is not the focus of this paper. What is important to note is that contemporary social norms and institutions are based on *historical* notions of whiteness—largely European, Protestant, and upper class (in essence, WASP—White Anglo Saxon Protestant).

on the overall social, political, and economic situation of the victim class. *In the United States, antidiscrimination law, and subsequent Supreme Court decisions, is based upon the perpetrator perspective and is therefore largely indifferent to the social conditions of the victim*. From the perpetrator perspective, antidiscrimination law "views racial discrimination not as a social phenomenon but merely as the misguided conduct of particular actors" (Freeman in Crenshaw, Gotanda, Peller & Thomas, 1995, p. 30).

The concepts of "fault" and "causation" are central to this perpetrator perspective. The idea of fault asserts that only *intentional* discrimination is a violation of antidiscrimination law. What gets veiled here is the ability for people or *systems* to (falsely) argue and present their actions as being for good reason, while in reality they are ostensibly discriminatory (Freeman in Crenshaw, Gotanda, Peller & Thomas, 1995, p. 30). The causation notion of the perpetrator perspective calls for a legal distinction between all of the conditions that a victim perceives to be associated with discrimination and those conditions that the law will address. The idea of causation is problematic because it rests the nearly impossible responsibility on an *individual* to isolate the specific conditions of discrimination themselves or to those conditions that are linked to the behavior of a perpetrator (Freeman in Crenshaw, Gotanda, Peller & Thomas, 1995, p. 30). Again, by both popularly and legally regarding racism as an individual construct, larger social structures and hidden legal meanings are overlooked. What ultimately results, is that racism becomes covert.

Covert practices are ones hidden by their perpetrators. Covert racism exerts power "less visibly, less consciously, and *not on but through* the dominant institutional structures, priorities, research strategies, technologies, and languages" (Harding, 1998, p. 131). This institutionalized, normalized politics is centered on Eurocentrism, racism, male supremacy and class exploitation. As applied to urban education, Critical Race Theory can expose how education systems "do not develop in an evolutionary or adaptive manner—they develop out of conflicts; power struggles, especially over scarce resources; and covert and overt coercion" (Tomlinson in Skrtic, 1995, p. 124). In the twentieth century, education systems began to legitimate the disciplinary treatment of particular groups of people deemed to be potentially "troublesome"—namely ethnic minority, low

income, and special education students. This also justified the need for tracking these "troublesome" students.

"As a result of [the] disquieting silence of [race], most individuals fail to identify its magnitude and breadth and limit its scope to superficial manifestations like prejudice, discrimination, and blatant intolerance" (Lopez, 2003, p. 81). Racism has been reduced to hate crimes, name calling and graffiti, rather than a representation of the more "invisible" and yet entrenched forms of daily and systemic racism (See Feagin, 2006).[7]

This is a particularly crippling perspective in this current moment in time as public education increasingly becomes privatized, through contemporary "reforms" of merit pay, public-private charter schools, high stakes standardized testing, massive budget cuts, layoffs, threats to unions and accountability mandates (Au, 2009; Burch, 2009; Lipman, 2004; Kumashiro, 2008; Apple, 2006; Kohn, 2000).[8] Swimming in a sea of neoliberalism (See Harvey, 2007; Giroux, 2004, 2008; Fine & Ruglis, 2009) each of these "reforms" gets introduced under the guise of improving educational equality, quality and opportunity, and reducing the achievement gap. But like the ideological divide between the "achievement gap" and the "opportunity gap" (Fine, Bloom, Burns, Chajet, Guishard, Perkins-Munn, Payne & Torre, 2004), privileging these reforms *enhances* and *fortifies* nodes of systematic racism.

Critical Race Theory in Education: A Needed Framework

Education in the United States is largely a meritocratic system, (See Spring, 2004; Au, 2009; Akom, 2008a) which assumes that success is determined by merit or natural abilities. Disregarded in this belief are the structural practices that inhibit or preclude one's natural abilities from being demonstrated and the educational policies that shape the contours of pedagogies, curriculum, resources, infrastructure, and security practices employed in any given school. A white student attending a suburban school with countless Advanced Placement courses, computers and science lab materials receives a definitively different education that a student of color attending nearly any urban public school with atrociously high rates of teacher turnover and where the least prepared teachers are sent to the schools which so desperately need the highest

[7] The same could be said for sexism, classism, ableism/ablebodiness, and forms of sexuality discrimination.
[8] For an excellent commentary on this, see: (2009, February 27) "Teachers Put to An Unfair Test."

quality educators. School financing policies veil the illusion of meritocracy (See Akom, 2008a; Spring, 2004). Educational advancement and exclusion are maintained by meritocratic testing and the required cultural competence of these testing procedures, where children who possess this “cultural capital” succeed and children who “fail” are inevitably from the lower social groups and who are persuaded to think that failure “was their own fault,” without the need for coercion (See Au, 2009). This is achieved only first through systematic miseducation (Woodson 2000/1933; Fine & Ruglis, 2009). In the end, social class and cultural reproduction are maintained. Here, systemic marginalization has yet again become covert (Tomlinson in Skrtic, 1995, p. 132).

Ladson-Billings and Tate (1995) offer a framework for CRT in education that is parallel to CRT in legal scholarship (See also Dixon & Rousseau, 2006). Before outlining the new framework, it is important to identify the three defining features of CRT that Ladson-Billings and Tate use as the foundation for understanding educational inequity.

First, is that “race continues to be a significant factor in determining inequity in the US” (Ladson-Billings & Tate, 1995, p. 48). Second, “US society is based on property rights rather than human rights” (Ladson-Billings & Tate, 1995, p. 47). Democracy in its contemporary context is equated to capitalism. As such, “the ability to define, possess, and own property has been a central feature of power in America” (Ladson-Billings & Tate, 1995, p. 53). With respect to education, property is related in both explicit and implicit ways. Explicitly, people with higher property values have higher tax assessments and therefore more money goes into the school system. But property differences also manifest themselves in implicit ways. “For example, curriculum represents a form of ‘intellectual property.’ The quality and quantity of the curriculum varies with the ‘property values’ of the school” (Ladson-Billings & Tate, 1995, p. 54). This is particularly crucial for mathematics, where different curricula are marketed to different districts depending upon their socioeconomic status. Another example of “intellectual property” rights is that of course offerings. Consistently more affluent, white schools have more math courses offered than do the predominately African-American, lower class, urban districts (Ladson-Billings & Tate, 1995; Spade et al, 1997).

"The availability of 'rich' (or enriched) intellectual property delimits what is now called 'opportunity to learn'—the presumption that along with providing educational 'standards' that detail what students should know and be able to do, they must have the material resources that support their learning. Thus, intellectual property must be undergirded by 'real' property" (Ladson-Billings & Tate, 1995, p. 54). Taking from Jonathan Kozol, "schools that serve poor students of color are unlikely to have access to these resources and, consequently, students will have little or no opportunity to learn despite the attempt to mandate educational standards" (Ladson-Billings & Tate, 1995, p. 54). And the last defining feature in understanding inequity is that "the intersection of race and property creates an analytical tool for understanding social (and, consequently, school) inequity" (Ladson-Billings & Tate, 1995, p. 48).

Critical Race Theory of Education: Whiteness as Property

> Race continues to permeate capitalism's economic and social processes, organizing the hyperextraction of surplus value from racialized bodies and naturalizing a system of capital accumulation that grossly favors the global North over the global South (Melamed, 2006, p. 1).

Specifically applied to education inequity, it is once again important to remember that racism remains endemic and deeply entrenched in American life. But perhaps most important for a CRT of education is the intersection of race and property: primarily the view of *whiteness itself as a property* (Harris in Crenshaw, Gotanda, Peller & Thomas, 1995; and in Ladson-Billings & Tate, 1995). There exist four "property functions of whiteness." First is *the right of disposition.* "When students are rewarded only for conformity to perceived "white norms" [what school systems are based upon] or sanctioned for cultural practices (e.g., dress, speech patterns, unauthorized conceptions of knowledge), white property is being rendered alienable" (Ladson-Billings & Tate, 1995, p. 59). For youth in schools this translates to the capacity to dream, to have a secure future, and to the aspirations of what is possible.

The second property of whiteness is *the rights to use and enjoyment.* "In the school setting, whiteness allows for extensive use of school property" (i.e., building conditions, overcrowding in schools, etc.). Drastically overcrowded schools and facility conditions are associated with class and race. This premise is also echoed in the structure of the curriculum (i.e., scripted, mandated, rote curriculum vs. critical thinking, reasoning and logic). The third

property function of whiteness is *reputation and status property*. Urban schools (where urban has become code for Black or Brown) “lack the status and reputation of suburban (white) schools and when urban students move to or are bused to suburban schools, these schools lose their reputation” (Ladson-Billings & Tate, 1995, p. 60). In NYC this can also be seen in zoning practices, busing to more prestigious schools and school registration policies.

The last property is *the absolute to exclude.* This was historically represented by, at first, the denial of Blacks to attend schools; and later by segregation. Currently this is maintained by white flight and the increasing insistence of vouchers, public funding of private schools, privatization, schools of choice (as in No Child Left Behind), college entrance and admission policies and financial aid programs. Absolute right to exclude continued in schools after desegregation by the practices of tracking, gifted programs, honors programs and AP classes. And exclusion from education is now also maintained through the school-to-prison pipeline (Browne, 2003; Meiners, 2007) and through high-stakes testing and school promotion practices (Orfield, 2004; Au, 2009).

African Americans represent approximately 12 percent of the total U.S. population, yet they constitute the majority of student populations in 21 of the 22 largest urban school districts in the US (Ladson-Billings & Tate, 1995, p. 55). This serves to show that race plays an extremely unique role in urban environment—one that cannot be reduced to class alone. In conjunction with a political economy of how urban education systems have been historically underfunded (Anyon, 1997, 2005) and the racialized policies of control, discipline, school restructuring and miseducation that have shaped urban schools (Tyack, 1974), the intersection of white flight from urban areas has left, in many cases, urban schools hollowed out. As city demography changed in the later part of the twentieth century, whites, and the property and capital related to whiteness, migrated too. This data is also a historic remnant of school desegregation during the civil rights era—which contributed to white flight along with the loss of African-American teaching and administrative positions (Ladson-Billings & Tate, 1995, p. 56; Perlstein, 2004).

Whiteness as a property and CRT are intimately tied to dispossession, a central concept woven throughout this dissertation. As David Harvey writes, “accumulation by dispossession is

about dispossessing somebody of their assets or their rights…we're talking about the taking away of universal rights and the privatization of them so it [becomes] your particular responsibility, rather than the responsibility of the state" (2004, p. 2).

"Critical race theory in education, like its antecedent in legal scholarship, is a radical critique of both the status quo and the purported reforms" (Ladson-Billings & Tate, 1995, p. 62). In 1936, Harold D. Lasswell, a psychologist, stated that the central question plaguing educational politics is "who gets what, when and how" (Lasswell in Lopez, 2003, p. 72). Even taking into account Lasswell's notion of this crux in education, political scientists and education leaders have been more concerned with the *process* of politics than with "studying who receives what benefits from the political process" (Hawley in Lopez, 2003, p. 75). Therefore, educational politicians are more concerned with "input" and "process" and "not necessarily with the outcomes and effects of the political process" (Lopez, 2003, p. 75). Whiteness as a property gets articulated through absolute rights as well as symbolic ones. For instance, graduation rates, officially calculated and defined by completing high school in a four-year time span, symbolize a traditionally White, middle-class timetable. Yet this symbolic property equally confers racialized health outcomes.

Critical Race Theory for Health-Education Nexus

Applying the principle of whiteness as property and CRT to health, I begin with a quote from the work of Geronimus & Thompson (2004), who explain:

> The relatively longer, healthier lives of Whites are conditioned not only on greater access to material resources, but also on the psychic benefits of having their values honored in public discourse and institutional structures and timetables. Explanations for racial health inequality must encompass the impact of pervasive insults to the personal and collective integrity of African Americans. *We are here suggesting that cultural oppression is as important a structuring force in Black health as economic forces* (p. 253-254, emphasis added).

We know that schools are a substantial symbolic representation to all students who attend of the inferiority of students who live on the margins of society, to poor students and to students of color in urban school sytems. This is seen in everything from the curriculum and

school resources (Apple, 2004; Zimmerman, 2002) to advanced placement versus special education rosters (Skrtic, 1995), varying states of disrepair of school buildings, racialized school discipline actions and school military recruitment efforts (Skiba et al, 2000), the health education and resources students have access to, and the quality and retention of teachers (deVise & Chandler, 2009). This suggestion by Geronimus & Thompson—that oppression, which for me includes school non-completion—and also issues of educational fairness, justice, opportunities and resources are clearly connected to understanding the relationship between education and health. This suggestion is also a fundamental starting point for work in the impact of a miseducation on the health of youth.

Taking a CRT approach to health, like education, we can examine how inequities are *produced.* To ground this discussion, let's look at the most recent *National Vital Statistics Report* data. Blacks have an average risk of death 30 percent higher than Whites, particularly for heart diseases (30 percent higher risk), cancer (30 percent higher risk), cerebrovascular diseases (20 percent higher risk), diabetes (110 percent higher risk), kidney diseases (130 percent higher risk), septicemia (120 percent higher risk), hypertension and hypertensive renal disease (160 percent higher risk), and homicide (570 percent higher risk) (Kung, Hoyert, Xu & Murphy, 2008, p. 4).

"Public health researchers have increasingly questioned the utility of race as an explanatory research variable, urging attention be shifted toward understanding the impact of social and economic divisions of populations based on systems of racial classifications in health" (Schulz, Israel, Williams, Parker, Becker & James, 2000, p. 1640). I argue that to meet this end, attention must not be shifted *away* from race, but rather *towards* it. Although attempting to move away from the confounding of race and class, and away from a fatalistic, reducible or reifying view of African American health, I argue that a CRT framework is *necessary* for this to happen.

Social and economic divisions of populations in the United States *cannot* be divorced from its racialized, genocidal history. Researching the role of social and economic forces on "systems of racial classifications in health" is akin to merely studying social and economic forces of racial achievement patterns in education. While this will surely unmask some of the social foundations of educational (or health) inequity, it will not unearth the *historic*, ideological, racist

policies and practices that structured social and economic divisions to begin with. Again, an analogy from education: it is insufficient to simply argue that urban schools, through underfunding and inequitable teaching, are ill-preparing students to pass high-stakes exit exams *without also* understanding the deliberately racialized genesis of IQ and standardized testing (normed against White, middle and upper class men; and which are meant to *preserve* Whiteness as a property), culturally negligent question construction and psychometrics, and without understanding racialized urban planning, housing, employment and criminal justice policies that have shaped current school systems (See Au, 2009). I argue that moving away from race as an explanatory variable requires looking at race *more deeply* and more critically.

Thomas LaVeist (2005) in an article entitled *Disentangling Race and Socioeconomic Status: A Key to Understanding Health Inequalities* offers “four problems that severely complicate research efforts to understand racial disparities in health status” (p. iii26). These offer an excellent framework for how to think about a CRT for health. For each, I will suggest a perspective for how CRT can be used to address the problem. To LaVeist, the first complication in research on racial disparities is that of racial segregation. Understanding the extent to which racial disparities in health are caused by differences in social and environmental risk exposures, which are more prevalent in racially segregated areas, requires addressing white supremacy that maintains and creates segregation. The second problem is that “typically data sources sufficiently large and geographically diverse enough to statistically adjust for most confounders lack the psychosocial variables that are of great interest in understanding race disparities in health” (p. iii26). To this I offer a CRT frame that suggests a rethinking of research methodologies. Perhaps to thicken the understanding of race and health, we need to turn to more qualitative and indigenous, participatory, community based modes of research. Perhaps we need to create a new measure of *culturally grounded* psychosocial variables and then scale this up to a large-scale epidemiologic study and data source—one that is rooted in CRT and participatory action research principles. It is possible: Polling for Justice, which produced the survey component of this study, did it.

LaVeist articulates the third problem is that most large-scale studies which do include valuable psychosocial variables “lack sufficient numbers” of people of color to conduct research

on racial disparities. To this I offer that *this is* itself an exemplar of CRT. Why are there not sufficient numbers of people of color in the Framingham, Washington County or Whitehall studies? What were the methodological decisions around this? And how can a lens of CRT be used to dissect this structural outcome? The *absence* and exclusion of people of color from these studies says much more about the pervasive ideological roots of race in our nation then does the fact that we now cannot use these data sets for thickening understandings of racial health disparities. African Americans formed the backbone of medical research in this country, through exploitation, surveillance, theft of their bodies, imposed medical procedures and genocide on behalf of White doctors (Washington, 2006; Roberts, 1997); yet they are not worthy enough to be included in multi-decade studies examining *social* determinants of health? This seems blatantly suspect; but more importantly it is *revealing*. And a CRT for health should take up this problem.

Lastly, LaVeist asserts the problem of confounding of socioeconomic status (SES) and race. There is certainly an overlap between racial health status and SES health status. Because people of color are more likely to have low SES makes it difficult to determine if it is "race *and* social class" or "race *or* social class." This dissertation, through a lens of CRT, attempts, as does LaVeist's work, to research this issue, through examining how the contours of power, racism, dispossession and neoliberalism operate through urban schools—which are both majority students of color and majority low-income students—and manifest in health outcomes. This study at many times uses existing health disparity data, because as LaVeist elucidates, it's all we have. But it also introduces new health data from the Polling for Justice survey, many of the findings of which trouble existing bodies of knowledge. The theoretical and methodological approaches to this study are *intended* to try to disentangle relationships between race, SES and health—all through the prism of education.

Critical Race Theory for (Participatory Action) Research

Critical Race Theory is equally emergent and powerful when thought of as a methodological tool, and I argue, one particularly salient for participatory action research (PAR). Already, the themes presented thus far suggest so. Ladson-Billings & Donnor (2005) invite us to think about "ethical epistemologies" of scholars of color who work in the spirit of CRT, including

lenses of: double consciousness (DuBois, 1989/1903), borderlands (Anzaldua, 2007), sovereignty (Lomawaima, 1995), heterogeneity (Lowe 1996) and decolonizing psychology (Fanon, 1967, 2004) (See also Ladson-Billings, 2000). So too do they reminds us to consider the "limits of liberal ideology" which I would also extend to include the outcome of such limits, which produced a ripe political climate to grow neoliberalism in. In this context, the authors invite us to think about ethical principles of research. These ethical principles are starkly counter to traditional beliefs of research (See Shavelson & Towne, 2003). I quote in full Ladson-Billings & Donnor (2005):

> We seek a methodology and a theory that as Gayatri Spivak (1990) argues, seeks not merely reversal of roles in a hierarchy, but rather displacement of taken for granted norms around unequal binaries, e.g., male-female, public-private, White-non-White, able-disabled, native-foreign. We see such possibility in Critical Race Theory (CRT) and we point out that CRT is not limited to the old notions of race. Rather CRT is a new analytic rubric for considering difference and inequity using multiple methodologies—story, voice, metaphor, analogy, critical social science, feminism, post-modernism...Creatively and passionately engaging new visions of scholarship to do work that will ultimately serve people and lead to human liberation.
>
> Thus we argue that the work of critical scholars (from any variety of perspectives) is not merely to try to replicate the work of previous scholars in a cookie cutter fashion but rather to break new epistemological, methodological, social activist, and moral ground).

Participatory action research (PAR) is a new vision of scholarship; it is a way and habit of being. PAR too attempts to break these grounds. Ladson-Billings and Donnor's (2005) call for a revolutionary habitus in academia and research that moves towards human liberation and social justice. They state that the challenge for academics is "not to make those outside of the academy more like us, but rather to recognize the "outside the academy" identities…in order to be more effective researchers on behalf of people who can make use of our skills and abilities. We must

learn to be “at home” on the street corners, barrios, churches, mosques, kitchens, porches, and stoops of people and communities so that our work more accurately reflects their concerns and interests” (Ladson-Billings & Donnor, 2005).

But participatory action research (PAR) advances this call even further by offering a radical stance that privileges expertise in communities and people outside the academy, where people are the experts of their own lifeworlds. As Paulo Freire (2003/1970) writes, “the oppressed are not ‘marginals’, are not men living ‘outside’ society. They have always been ‘inside’—inside the structure that made them ‘beings for others.” In PAR, you must learn that being “at home” on the street corners may really mean acknowledging that you will and can never be “at home” on that street corner. Ethics and radical habitus must involve deeply fracturing the web of power dynamics that structure society. It involves putting the full self in its psychological and philosophical forms, not merely the physical self, on the street corners. It demands reflexivity. It involves ever-changing, dynamic insider-outsider states and ways of being. But PAR is also a methodological, political and epistemological ethic that argues that we must do work that more accurately *involves*, not merely reflects, the concerns and interests of people and communities. It argues that we the people and communities must be viewed and honored as experts.

In a 2001 article, Solorzano and Yosso offer five primary themes that form the foundation for pedagogy and research of a critical race theory in education. They are:

1. The centrality of race and racism and their intersectionality with other forms of subordination
2. The challenge to dominant ideology
3. The commitment to social justice
4. The centrality of experiential knowledge
5. The transdisciplinary perspective

Participatory action research (PAR) as a methodological approach takes, and must take, each of these themes as its foundation (See also Akom, Cammarota & Ginwright, 2008). They provide the conceptual and methodological frame for this study. And the outcome of these CRT research themes to participatory action research will be discussed in the following chapter.

Conclusion

The critical race movement sought and still seeks to critique and expose "the historical centrality and complicity of [American] law in upholding white supremacy (and concomitant hierarchies of gender, class, and sexual orientation)" (Crenshaw, Gotanda, Peller & Thomas, 1995, p. xi). As applied to schooling, Critical Race Theory is significant in that it exposes the "ongoing dynamics of racialized power, and its embeddedness in practices and values which have been shorn of any explicit, formal manifestations of racism" (Crenshaw, Gotanda, Peller & Thomas, 1995, p. xxix). CRT necessarily critiques the institutional, meritocratic, and technocratic arrangements of contemporary education systems.

Critical Race Theory calls for a critical interrogation of how law and policy "reproduces, reifies, and normalizes racism in society" (Lopez, 2003, p. 83) and this dissertation is concerned with its consequences. In summary, the following are the fundamental premises of Critical Race Theory that were discussed in this chapter (Lopez, 2003; Bell, 1995, Ladson-Billings & Tate, 1995, Delgado & Stefancic, 2000, 2001; Ladson-Billings, 2004).

1. *Racism is a normal and endemic component of our social fabric*. (Lopez, 2003, p. 83). "CRT aims to expose and unveil White privilege in its various permutations" and reveal a social order that is highly stratified and segmented along racial lines" (Lopez, 2003, p. 84).
2. The notion of *interest convergence.* "Such a convergence not only ensures that racism always remains firmly in place but that social progress advances at the pace that White people determine is reasonable and judicious" (Lopez, 2003, p. 84)
3. *Storytelling and counter stories*—particularly by people of color. Based on the CRT notion that there are two realities: the dominant "White" reality that appears to be natural, neutral, objective, and ordinary; and a racial reality—which is filtered, suppressed, and censored.
4. CRT holds that *race is a social construction* and seeks to make apparent that the *beliefs in democracy, equality, objectivity, and neutrality act only to maintain racism*—"relegating racism to overt/blatant and unmistakable acts of hatred, as opposed to highlighting the

ways in which our beliefs, practices, knowledge, and apparatuses reproduce a system of racial hierarchy and social inequality" (Lopez, 2003, p. 85).

School dropout remains one of the most disparate issues in education and illustrates well another aspect, and consequence of, the achievement, or opportunity, gap (Fine, Bloom, Burns, Chajet, Guishard, Perkins-Munn, Payne & Torre, 2004). Dropout provides a window into the ecology of urban public education and into the seemingly infinite intersections of both micro and macro forces that impact schooling. As American democratic government increasingly becomes an economic regime, rooted in capitalism, privatization and the global economy, a CRT of education is imperative if there is to be any transcendence of the historical hegemony of American society. For future leaders in health, education and education policy, Critical Race Theory should be one of the theoretical frameworks that is well understood in order to be effective, historically situated and socially just in urban education reform efforts.

The next chapter will further establish the scholarly foundation for this dissertation by extensively detailing the literature on school dropout, dropout prevention and the adverse consequences of "diploma denial" (Fine & Ruglis, 2009) and architecting a narrative of education as a social determinant of health.

Chapter 3.

EDUCATION AS A SOCIAL DETERMINANT OF HEALTH: ON SCHOOL DROPOUT AND THE ADVERSE CONSEQUENCES OF DIPLOMA DENIAL[9]

Introduction

This chapter weaves a narrative of school dropout. Providing a systematic and rigorous literature review of books, reports and articles using many databases (including ERIC, JSTOR, Academic Search Premier, EBSCO, Google Scholar, Health Source, LexisNexis, JAMA, Medline, PsychInfo, PsychArticles, PubMedSocial Science Full Text, SocIndex, SAGE Journals Online, Scopus, SpringerLink, Wiley InterScience Journals), selected journals and research centers and policy institutes.

This chapter first briefly depicts the backdrop of school dropout. The first section introduces philosophical and historical perspectives on school dropout as well as details data on the contemporary graduation rate crisis and how No Child Left Behind (2002) systematically *produces* the graduation rate crisis as it currently stands. The second section outlines an overview of literature on causes of school dropout, organized by factors associated with school dropout at the individual, family, neighborhood and community, school and education policy levels. The third section provides an overview of both educational and health interventions for dropout prevention, academic achievement, student engagement and improving graduation rates; and considers the particular role that school connectedness directly plays in adolescent health. The fourth and final section details the adverse academic, social, economic, criminal justice and

[9] Alternative versions of several sections in this chapter have been published elsewhere. Any text used in this chapter related to these previous publications is both updated and is original text written by the author (Jessica) herself. Ruglis, J. (2007). Dropouts. In Mathison & Ross (Eds). *Battleground Schools*, *Volume 1,* pp. 194-203. Westport, CT: Greenwood Publishing; Freudenberg, N & Ruglis, J. (2007). Reframing school dropout as a public health issue. *Preventing Chronic Disease;* 4(4). http://www.cdc.gov/pcd/issues/2007/oct/07_0063.htm; and Fine, M. & Ruglis, J. (2009). Circuits and consequences of dispossession: The racialized realignment of the public sphere for U.S. youth. *Transforming Anthropology; 17(1)*: 20-36.

health outcomes of "diploma denial" (Fine & Ruglis, 2009). The most extensive discussion in this last section centers on the health implications of school non-completion, as this body of literature conceptually formed the foundation for the dissertation research depicted in the remaining chapters.

Backdrop of School Dropout

Colloquially, the term "school dropout" refers to a young person who has not completed high school. Linguistically, the choice of the word "dropout" places the responsibility and onus of leaving school solely on the individual. It deludes the pathways by which students ultimately "choose" to leave school and the structures that lead to dropout remain blameless. School dropout reflects not on the structures of the school the youth attended, on their schooling experiences, nor on their worlds and realities outside of school.

School dropout is a term that refers to a young person who does not graduate from school with a traditional diploma. These youth either leave school, by choice or by force, or are pushed out due to "rationalized policies and practices of exclusion that organize" public high schools (Fine, 1991, p. 6). In any event, the ultimate result is the same: a young person does not finish high school. Historic educational policies and practices mask the phenomenon of school dropout such that it rears itself as an outlier: a rare dysfunction of an individual failing within a system, and, like all social outcomes resulting from structural preclusion, it carries a detrimental "blame the victim" ideology (Kelly, 1997). In the context of education, this ideology presents young people who drop out as failing to measure up to academic standards and their subsequent bleak social status and life outcomes as a natural consequence of education's ethos of equal opportunity for all.

Given that the graduation rate crisis disproportionately plagues students of color, low-income and special education students; recent immigrants; lesbian, gay, bisexual, transgender/sexual and queer/questioning youth; students with disabilities; homeless youth; and youth caught in the criminal and juvenile justice systems, school dropout has a disparate impact: affecting youth who are already lacking in resources, opportunities and voice.

A *mis*education, however we name its end results, has substantial costs. For each youth and community disenfranchised by their school system there are staggering economic and social impacts, heavy consequences for criminal justice, costs to civic and political participation and grave implications for health. Dropouts are more likely to receive public assistance, be unemployed, live in poverty, end up in prison and on death row, die earlier and suffer from a wide range of chronic and acute diseases and health problems. On average, dropouts earn $9,200 less per year that high school graduates and $1 million less over their lifetime than do college graduates. Beyond dropping out, children forced out of the school system are more likely to engage in conduct harmful to the safety of themselves, their families and communities.

The Current Landscape of Public Education in the United States

Nationally nearly one third of all students and *half* of Black, Latino, and American Indian students who enter 9th grade do not graduate (Swanson, 2004a).[10] While 76.8 and 74.9 percent of Asian/Pacific Islanders and Whites, respectively, graduate from high school, American Indians, Blacks, and Latinos all have graduation rates that hover right around the 50 percent margin. In some cases, Asian refugees, particularly Laotian, Cambodian, Vietnamese, Hmong and Pacific Islander students graduate at rates similarly as bleak. Immigration and socioeconomic status are important contextual variables in the success of immigrant students.

Overall, the nation's 50 largest cities graduate, on average, only 51.8 percent of all students.[11] New York City, the nation's largest school district with 1.1 million students, of which 85 percent are students of color (Swanson, 2004), graduates a mere 45.2 percent of all students (Swanson, 2008); ranking 43rd out of the 50 largest cities. Los Angeles Unified School District, the second largest district in the country, falls immediately behind NYC, ranking 44th. And Detroit, a school district and city historically structured by racism, exclusion and disempowerment (Mirel,

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[10] Unless otherwise mentioned, the term 'graduation rates' will consistently refer to the percentage of students who graduate in the traditional 4-year time period. This 4-year time period is the official measure as dictated by NCLB.

[11] This data is calculated using the Cumulative Promotion Index, or the CPI. The CPI was developed by Christopher Swanson of the Urban Institute, and it is the most rigorous and systematic measure of school graduation to date. Using actual enrollment data from the national dataset, the Common Core of Data (CCD), the CPI looks at dropout stepwise each year from grade 9 to 12 to calculate the probability that a student entering 9th grade will graduate. For a further explanation, See: Swanson, 2004, 2004b; Orfield 2004 & Orfield et al., 2004. For a description of the alternate ways that school dropout is calculated, see Ruglis, 2007.

1999) graduates only 24.9 percent of all students (Swanson, 2008), of which 96.3 percent are students are of color (Swanson, 2004). Detroit, with this staggering figure, ranks 50th out of the 50 largest US cities (See Appendix). And New York State, often charged as one of the best states for education, has the *lowest* graduation rate in the nation for Black students, graduating only 35.1 percent of its students statewide.

Males graduate at a rate 8 percent lower than females and youth attending high poverty, racially segregated, urban schools graduate at rates 15 to 18 percent behind their peers (Swanson, 2004). Children from low income families are twice as likely to drop out of school as children from middle income families and six times more likely than children from high income households (USDOE, 2004, p. 138). Additionally, students in special education (Advocates for Children, 2005), those with disabilities, recent immigrants (Orfield, Losen, Wald & Swanson, 2004), and those involved in the foster care (Vera Institute, 2003) juvenile or criminal justice systems (Harlow, 2003) have even lower graduation rates. Substantially, the transition from 9th to 10th grade is currently the largest leak in the education pipeline: between 1970-2000, the rate at which students disappeared from school between 9th and 10th grade *tripled*. And we don't even look at the leakage from 8th to 9th grade. (Abrams & Haney, 2004; Education Week, 2007). As William Cross Jr. (2003) reminds us, data this staggering has inherent antecedents, leaving the current graduation rate crisis to illuminate a *historical* genesis of an institution that systematically fails and manufactures asymmetrical outcomes for entire groups of youth (See also Anderson, 1988; Butchart, 1980).

Historical Controversies of School Dropout

"The prevailing systems of needs in capitalist society, or any repressive society, must be understood in terms of its historical genesis and the interests it embodies and serves." –Henry Giroux

In closely examining the history of schooling, it becomes readily apparent that school dropout is a dialectic: it is both a deliberate *and* unintended consequence of a system structured to maintain the status quo. This becomes evident through the ways by which schools ensure the development, success and privilege of the white, dominant classes at the expense of those on the margins. The process of schooling is a means to assimilate and acculturate on one hand, and to provide liberation, freedom, and educational, social and economic equity on the other. Deeply

contested, and holding these two antithetical meanings, school dropout can no longer remain invisible. It has seeped through the cracks: appearing in the staggeringly low graduation rates and real-dollar costs to the criminal justice and health care systems all at the expense of the educationally disenfranchised. The façade of “educational opportunity” and the influence of differing ideologies seem to be the interface between these two conflicting forces.

Several educational practices throughout the history of schooling have been discussed in relation to school dropout. Academic tracking, a practice that has been around since the post-Civil War era, has always had the greatest percentage of low-income and students of color occupying the lower academic tracks. These students are labeled and tracked into a marginal future, without the personal growth of one’s own soul, aspirations and spirit. With limited occupational and economic opportunity, being placed in a low academic track has always been a practice that serves as a precursor to school dropout.

One of the biggest misconceptions about young people who drop out is that they have no desire and motivation to learn, place little value on education and learning and aren’t interested in school. As it turns out, and as detailed in the following section, schools often prevent young people from enacting their desire and motivation for learning and success. In fact, history is pervasive with examples of *social movements* for education, acts which can only be explained by both individual and a collective’s desire and motivation for schooling (See Anderson, 1988; Butchart, 1980).

Underfunding, chronic overcrowding, and poor schooling conditions are also historic educational practices that contribute to school dropout. Schools and districts that serve large immigrant, low-income and communities of color have deliberately been underfunded, overcrowded and not well maintained. Subsequently, the quality of education achievable in these conditions pales in comparison to the educational opportunities and access to resources of their more privileged and white counterparts. Deliberate underdevelopment and a decrepit built environments significantly shape educational limitations. For example, it has often been reported that overcrowding schools were a way to get young people to drop out. This was achieved through the practice of double shift schooling, in which schools were filled beyond overcapacity to

the extent that they needed to run several shifts of students throughout one single day (Cross, 2003). As a result, class time and total hours spent in school for each pupil decreased, and the time spent *out of school* increased. This practice, in essence, manufactured dropouts.

School dropout is “the final stage in a dynamic and cumulative process of educational disengagement” and dispossession (Rumberger, 2004). This section provides a synthesis of the literature from the past two decades on the causes of school dropout. However, many of the themes reported here have been evidenced throughout the past century. This section also incorporates findings from several national surveys of dropouts. The controversy and conflict surrounding who is to “blame” for dropout—the individual or the school system—are embedded into each category and represented by the range and scope of the data. The research reflects a diverse array of ideological and theoretical positions. Collectively, themes of alienation, lack of school engagement and the nature of the school setting and culture emerge from the literature are presented.

Its in the Law: The Ideological and Policy Roots of the Graduation Rate Crisis

The issue of reporting data becomes controversial due to its *absence* and lack of any standardized, reliable and valid data collection formula. Until the No Child Left Behind Act (NCLB), enacted in 2002, there was no federal mandate requiring graduation rate reporting. Before this, only several states kept graduation rate data. This law, while unearthing the chasm in public education, has also positioned itself in a way that can promulgate the crisis. This NCLB mandate provides little protection for low-performing students to not be pushed out of schools. Districts, in order to meet the incentives for improving their graduation rates and for meeting the annual yearly progress requirement, *push* lower-performing students into alternative school programs, where they are not counted as dropouts.

Also undermining any real attempt by NCLB to ensure equal educational attainment are two principles of the law. First, unlike the accountability mandates which require test score and achievement data to be kept demographically—by income, race/ethnicity, special education status and Limited English Proficiency students—and for which adequate yearly progress must be made in at least one of these historically low performing groups, when calculating the

graduation rate states must only count the *overall* rate, they do not have to record by demographics. This allows young people on the margins to be practically ignored, and disparities in graduation rates to be silenced. Second, and also incongruent with the accountability mandates which stipulates that 100 percent of all students receive "proficient" test scores by 2014, states can establish their own formula for calculating graduation rates and their own graduation rate goals, *which can range between 50 to 100 percent* (Swanson, 2004c). What NCLB has effectively done is create a loophole that ensures, if not requires, students be pushed out of schools in order to meet the more stringent accountability mandates—to which funding and school takeover sanctions are attached. By giving federal permission for states to aspire a mere 50 percent graduation rate *without having to record demographic data*, the federal government has opened the doorway for *how to* achieve 100 percent proficiency while maintaining the historic class and racial structure of society.

In recent years, several reports have published studies that examine and develop more accurate, comprehensive, and representative methods for calculating and capturing the landscape of educational attainment (Barton, 2005; Greene 2001; Greene & Forster, 2002; Swanson, 2003a, 2003b, 2004a, 2004c; Haney, Madaus, Abrams, Wheelock, Miao & Gruia, 2004; Kaufman, 2004; Swanson & Chapin, 2003; Belfield & Levin, 2007). Specifically, these measures are indicators of high school graduation rates rather than of the more traditional and common statistics that measure either dropout rates[12] or high school completion rates. Each of these different measures will produce very different results. To date, most states calculate dropout rates, a figure that is *not the equivalent* of graduation rates (those reported in this chapter).

While these newer reports calculate nearly identical statistics on high school *graduation rates*, this chapter uses data from a formula developed by Christopher Swanson of the Urban Institute. This formula is the best proxy for current graduation rates, and the subsequent research details the most "extensive set of systematic empirical findings on public school graduation rates available to date for the nation as a whole and for each of the states" (Swanson, 2004a, p. 1).

[12] Dropout rates can be calculated in one of three ways: event dropout rates, status dropout rates, and cohort dropout rates.

The method developed is called the Cumulative Promotion Index (CPI) and it is applied to data from the Common Core of Data (CCD), the US Department of Education's database, as the measure to calculate high school graduation rates. The CCD database is the most complete source of information on all public schools and local education agencies in the United States. The CPI is an innovative variation of cohort dropout rates in that it "approximates the probability that a student entering the 9th grade will complete high school on time [in four years] with a regular diploma. It does this by representing high school graduation as a stepwise process composed of three grade-to-grade promotion transitions (9 to 10, 10 to 11, and 11 to 12) in addition to the ultimate high school graduation event (grade 12 to diploma)" (Swanson, 2004a, p.7). It is important to emphasize that the CPI only counts students who receive high school diplomas as graduates and not those who earn a GED or other alternative credentials. This is in keeping with the new NCLB mandate for what constitutes a diploma. This revolutionary index was created as a response to the extant methods that are commonly used to determine educational attainment.

The more common statistical measures of dropout rates and high school completion rates have significant limitations. *Dropout rates*, meant to capture only the percentage of students that actually drop out of school, are based on underreported and underrepresented data, since there is no standard mechanism for reporting, coding, or accounting for students who drop out. Districts often title students who may have indeed dropped out or been pushed out as having transferred, moved, or as missing. This false representation leads to an exaggerated picture of how well a school is doing. High school *completion rates* count General Educational Development (GED) graduates and students receiving alternative credentials as high school graduates. As such, data measuring high school completion differs greatly from those measuring graduation rates. Incorporating GEDs and other alternative credentials in graduation rates is problematic for two primary reasons. First, recipients of the GED or alternative certification are not graduates of high school; and therefore their credentials cannot be attributed to the school system. Second, the economic and higher educational returns from students with a GED is not equivalent to those with a high school diploma.

The most common “graduation” and “dropout” statistics are cited from the National Center for Education Statistics (NCES), which *calculates its data as high school completion rates but reports its data* as a high school *graduation rate* of 85 percent. The NCES statistic has very low levels of national coverage, and can only be computed using data from only 54 percent of US school districts and 45 percent of the student population. Due to missing data, the 2001 NCES measure could only estimate completion rates for 34 states (Swanson, 2004a, p. 17).

The NCES uses data from the Current Population Survey (CPS). The CPS, conducted by the US Census Bureau, is a simple self-report survey that does not include people in the military, in institutionalized settings, or people who are neither currently in school nor recently graduated. This measure surveys the general young adult population (ages 18-24), not school district information. Resultantly, students may report GED attainment as high school completion, they may misrepresent their education level, and it may underrepresent low-income youth who are disproportionately dropouts. Youth in low-income communities are often harder to find and interview. The CPS also underrepresents Black and Latino youth, who are incarcerated at high rates and are therefore excluded from participating in the Survey because prisons and jails are institutionalized settings. Collectively, this measure offers a much higher and non-reliable depiction of the state of high school graduation—one that masks the crisis.

Causes of School Dropout

Students do not graduate from school for a variety of reasons and the process leading to school dropout likely begins prior to the start of high school. Understanding why young people leave school is a first step towards creating polices, research and programs that increase school graduation rates.

Studies on school dropout reflect a variety of theoretical, ideological, conceptual and disciplinary frameworks and are seldom considered as a cohesive body of literature. While a full and systematic review of this literature is beyond the scope of this manuscript, the goal is to identify broadly reported contextual factors related to, and interventions to improve, school graduation. As such I present data below that I believe captures the most ecologic frames. Many of the works cited here are themselves comprehensive literature reviews.

Individual level characteristics

Individual attributes associated with school dropout include feelings of alienation, disliking or feeling disconnected from school, decreased levels of school participation, low educational or occupational self-expectations and an external locus of control (Ekstrom, Goertz, Pollack & Rock, 1986; Lehr, Hansen, Sinclair, Christenson, 2003; Rumberger, 1995; Wehlage & Rutter, 1986). Diminished academic aspirations may reflect the changing labor market and economic forces operating at higher levels of social organization (Fine, 1986). Compared to their counterparts who complete school, dropouts are less socially conforming; more likely to challenge openly their perceived injustice of the social system; less accepting of parental, school, social and legal authority; more autonomous; more socially isolated and less involved in their communities (Rosenthal, 1998). For some young people, dropout may be a form of resistance or critique of the educational system (Fine, 1986). And the effect of self-esteem on school dropout is contested, with some research showing an association and others not (Ekstrom, Goertz, Pollack & Rock, 1986; Wehlage & Rutter, 1986; Fine, 1986, Fine 1991).

Behaviors associated with dropout include disruptive conduct; truancy; absenteeism; lateness; substance use; pregnancy and parenting; mental; emotional, psychological or behavioral difficulties; and low participation in extracurricular activities (Ekstrom, Goertz, Pollack & Rock, 1986; Lehr, Hansen, Sinclair, Christenson, 2003; Rumberger, 1995; Wehlage & Rutter, 1986; Rumberger, 2004). Absenteeism is sometimes due to chronic health conditions, including asthma—which is regarded as the single leading cause of chronic absenteeism from school (Halfon & Newacheck, 1993; See also: Tara & Potts-Datema, 2005; Milton, 2004). These behaviors may be influenced by differing school environments (Wehlage & Rutter, 1986), again pointing to the role that inequitable schools play in shaping the production of school dropout.

The foremost cause of school dropout for adolescent women is teenage pregnancy, accounting for between 30 to 70 percent of the young women who leave school (Schargel & Smink, 2001; Brindis & Philliber, 1998; New York City Comptroller, 2003). Although alternative evidence demonstrates that often young women stop attending school and *then* get pregnant. Adolescent men are also affected by teen pregnancy, as they may drop out to earn money to

support a child (Schargel & Smink, 2001; NDPC/N, 2002). Mental illness and emotional disturbance also account for a significant percentage of high school dropouts—reports state that anywhere between 48 and 55 percent of young people with mental and emotional troubles fail to graduate high school (Goodman, Slap & Huang, 2003; Martin, Tobin & Sugai, 2002). Compared to school completers, some studies report that school dropouts are more likely to be substance abusers, and to have started substance abuse early; more likely to be involved in the sale of drugs; more likely to have friends engaging in behavior deemed to be socially deviant; and more likely suffer from psychological, emotional and behavioral problems (Lynskey & Hall, 2000; Yamada, Kendix & Yamada, 1996; Brooks-Gunn, Guo & Furstenberg, 1993; CDCP, 1994; Goodman, Slap & Huang, 2003; Martin, Tobin & Sugai, 2002). I would briefly like to mention, however, that it is worth considering the *economic* motivation for youth who sell drugs as the reason for their not being in school, and *not* that they are necessarily drug users. In this sense, the underground economy of drugs is a labor and financial cause of leaving school.

Individual school experiences greatly impact the likelihood of graduation. Students held back in school are more than *eleven* times as likely to leave school as their peers (Rumberger, 1995; Abrams & Haney, 2004), and several studies identify grade retention (being held back a grade) as the most significant predictor of school dropout (Lehr, Hansen, Sinclair, Christenson, 2003; Rumberger, 1995; Fine, 1986, 1991). Poor academic achievement, low self-expectations, low grades, lower test scores, and course failure all contribute to school dropout (Ekstrom, Goertz, Pollack & Rock, 1986; Wehlage & Rutter, 1986; Rumberger, 2004). Here too, these individual factors must be viewed as manifestations of accumulating poor educational experiences in elementary and middle schooling. Elementary school performance is strongly related to high school graduation; with early academic difficulties, poor school achievement and low attachment to school all predict later dropout (Ekstrom, Goertz, Pollack & Rock, 1986; Rumberger, 1995; Ensminger, Lamkin & Jacobson, 1996).

Economic constraints also influence dropout. Surveys of dropouts show that having to get a job, conflicts between work and school and having to support a family are important reasons for leaving school (Schargel & Smink, 2001). However, the overwhelming majority of all dropouts

report that education and graduating are important to success in life. Data indicates the strong *value* and *desire* for education, despite rhetoric on dropouts that argue the opposite.

Family Characteristics

Family characteristics associated with dropout are low levels of family support, involvement and expectations for education achievement; low parental education attainment; single parent homes; parenting style; few study aids available at home; less opportunity for non-school learning; financial problems; and low socioeconomic status (Ekstrom, Goertz, Pollack & Rock, 1986; Lehr, Hansen, Sinclair, Christenson, 2003; Rumberger, 1995, 2004; Rumberger & Palardy, 2005a; Rosenthal, 1998; Battin-Pearson, Abbott, Hill, Catalano, Hawkins & Newcomb, 2000). Low expectations for a child's academic success by adults have been shown to increase a child's likelihood of dropping out five-fold (Rumberger, 1995). And residential or school mobility are also considerably linked to school dropout (Rumberger, 1995, 2004; Rumberger & Palardy, 2005a; Rumberger & Thomas, 2000). Importantly, what often appears to be lack of parental involvement in education is actual life constraints of living in poverty, having to work more than one job, employment where parents cannot take time off of work, language barriers between the family and school personnel, and/or the symbolic representation of schools as unwelcoming institutions for parents who were not successful in schools themselves.

Many adolescents, especially young women, carry the burden of caring for their family, forcing them to leave high school due to social or health needs of their loved ones, and often forcing them into premature adulthood (Schargel & Smink, 2001; Fine 1986, 1991; Gallagher, 2002). Compared to school completers, dropouts are more likely to translate for family members, help to find health care for their family, and care for the elderly and children in their families (Fine 1986; Rosenthal 1998). Young men are often forced to economically sustain their families. Family stress, parental substance abuse, physical or sexual abuse of children, lack of health insurance, family health problems, a hospitalized or incapacitated family member, having to care for family member, or the death of a loved one can contribute to the decision (or need) to drop out (Rosenthal, 1998). In interviews with school dropouts, 12.2 percent of female and 4.6 percent of males reported having to care for a family member as a reason for dropping out of school

(Schargel & Smink, 2001; NDPC/N, 2002). Existing qualitative data supports this self-reported measure (Fine, 1986, 1991; Gallagher, 2002).

Neighborhood and Community Characteristics

Communities with high levels of crime, violence, drug related crime and arson have higher rates of school dropout than communities with fewer of these problems. Some studies indicate that communal social support promotes school engagement and improves chances for school graduation among racial and ethnic minority students. Similarly, cultural norms of schools and cultural and linguistic tensions between the home and community (and often country) from which students come contribute to educational disenfranchisement (Rumberger, 2004, Lehr, Hansen, Sinclair & Christenson, 2003; Ekstron, Goertz, Pollack & Rock, 1986; Wehlage & Rutter, 1986, Garcia-Reid, Reid & Peterson, 2005), leading to school dropout.

In a study of neighborhood effects on likelihood of school graduation, Ensminger, et al. (1996) found that even after controlling for family background, living in a middle-class neighborhood was beneficial to staying in school, although living in a high-poverty neighborhood was not necessarily harmful to school graduation. This finding held truer for males, having less of an impact on female adolescents. Although contested, some studies show that low-income communities may affect school dropout through negative peer influences or through peers that have low educational expectations (Battin-Pearson, Abbott, Hill, Catalano, Hawkins & Newcomb, 2000; South, Baumer, Lutz, 2003). Similarly, having friends or siblings that are themselves dropouts may increase the chances for leaving school (Rumberger & Thomas, 2000).

Neighborhood effects also intersect with teenage pregnancy culminating in a “double-whammy” for risk of young women dropping out. Neighborhood and school socioeconomic status have substantial effects on increasing rates of teenage pregnancy and parenting and to dropping out (Jencks & Peterson, 1991).

School Characteristics

Attributes of schools and school systems significantly influence dropout rates. Poverty again plays a central role, with a school’s mean socioeconomic status being the most significant independent influence on graduation rates (Rumberger & Thomas 2000, Rumberger, 2004). In

addition, higher levels of segregation, more students of color, more students enrolled in special education and location in central cities or larger districts are also associated with lower graduation rates (Rumberger & Palardy, 2005a, 2005b; Rumberger, 2004; Hauser, Simmons & Pager, 2004). It is neither an accidental correlation nor coincidence that race/ethnicity, class and level of urbanization are implicated in higher rates of school dropout.

School climate is a central component of school engagement and, therefore, school completion. Punitive school policies (standardized testing, changing academic standards without supports, large student-to-teacher rations, tracking, unfair/stringent discipline policies, frequent use of suspensions) all affect academic engagement and success and lead to school dropout (Lehr, Hansen, Sinclair & Christenson, 2003; Ekstron, Goertz, Pollack & Rock, 1986; Wehlage & Rutter, 1986; Rumberger & Thomas, 2000). When social support and positive relationships with adults in the school are diminished, so does a young person's connectedness to school. And school engagement and connectedness are two widely supported causes of staying in school (National Research Council, 2003; Blum, 2005).

School Policies

High stakes testing, a practice whereby student advancement is determined primarily by tests, also influences dropout. Comparing states that employ high-stakes testing to those that do not shows that states using such tests hold students back at much higher rates than states that do not (Abrams & Haney, 2004). Additionally, of the twenty one states that employ high-stakes testing, all but four use state test scores to decide grade promotion and high school graduation, and the rate at which states with high-stakes testing hold students back is much higher than states with low-stakes testing (Abrams & Haney, 2004). Six of the ten largest school districts (See Appendix) in the United States are high-stakes testing states: New York, NY; Dade, Broward & Hillsborough Co., FL; Clark Co., NV; & Houston ISD, TX) (Swanson, 2004). "For students retained under high-stakes testing, the adverse effects on dropping out from retention outweighed any beneficial effect of rising achievement" (Allensworth, 2004).

More recent studies publish findings of "school pushout", in which school dropouts are in fact forced out of school through a variety policies and practices, like policing, discipline and

educational tracking measures (Browne, 2003). *School pushout* is a naming which reframes the choice to leave school as a reflection of the larger educational systems, structures and policies that have failed youth, and which often ultimately force young people out of schools. Stemming from this phenomenon is the associated school-to-prison pipeline (Wald & Losen, 2003; Meiners, 2007), a term that refers to policies and practices that ensure when young people "misbehave" in school, they are turned over to the police and juvenile justice system.

School safety and discipline policies appear to have a strong effect on dropout (Browne, 2001; Gordon, Piana & Keleher, 2001; Morrison, Anthony, Storino, Cheng, Furlong & Morrison, 2001; Skiba, 2001; Skiba & Knesting, 2001). Student perceptions of unfair discipline, of low teacher interest in students, and of lack of attachment to an adult in the school all predict dropout (Wehlage & Rutter, 1986). "National studies of school dropout reported that students who had been suspended were three times more likely to drop out of school by their sophomore year than other students; indeed, school disciplinary contact appears to be among the strongest predictors of school dropout" (Skiba & Knesting, 2001). In fact, *being suspended or expelled is rated among the top three reasons for dropping* out (Morrison, Anthony, Storino, Cheng, Furlong & Morrison, 2001). Propensity for being a target of school discipline actions (number of office referrals, suspensions and expulsions) is overwhelmingly racialized: low-income children, children of color, those in special education and those labeled as emotionally disturbed are disproportionally impacted.

In a 12-city study by Gordon, et al., African Americans were suspended or expelled at a rate between 14 percent and 296 percent higher than their representation in the population (Skiba, Michael, Nardo & Peterson, 2000; Skiba, 2000; See also Browne, 2003). While youth of color make up about 33 percent of the juvenile population in the US, they comprise almost 66 percent of "youth detained and committed to juvenile facilities." By 2000, the arrest rate for Black youths was *74 percent higher* than for whites (Browne, 2003). Developmentally, school discipline has severe effects on a child's perception of justice, fairness, trust, capability and self-worth; and may contribute to feelings of social isolation and alienation, and to engaging in high-risk behaviors.

Other school policies that have been associated with dropout include high student-to-teacher ratios, academic tracking, and a discrepancy between faculty and student demographic characteristics status (Ekstrom, Goertz, Pollack & Rock, 1986; Lehr, Hansen, Sinclair, Christenson, 2003; Wehlage & Rutter, 1986; Rumberger, 2004; Rumberger & Thomas, 2000; Garcia-Reid, Reid & Peterson, 2005). Related, a lack of sufficient programs for pregnant and parenting teens as well as of comprehensive health and sexuality education programs and availability of social services build barriers that make the success of particular groups of students nearly impossible. Schools that adopt such programs buffer school dropout with tremendous success.

Table 3.1 *Summary of Factors Associated with Dropping Out of School*

Individual or Family	Neighborhood or Community	School or School System
• Low family socioeconomic status • Racial or ethnic group • Being male • Special education status • Low family support for education, less opportunity for nonschool learning, few study aids and resources in the home • Low parental educational attainment • Residential mobility • Low social conformity • Low acceptance of adult authority • High levels of social isolation • Behaviors such as disruptive conduct, truancy, absenteeism and lateness • Being held back in school • Poor academic achievement, low grades or test scores • Academic problems in early grades • Not liking school • Feelings of “not fitting in” and of not belonging • Perceptions of unfair or harsh disciplines • Feeling unsafe in school • Not engaged in school • Being suspended or expelled • Conflicts between work and school • Having to work or support family • Substance use • Pregnancy	• Living in a low-income neighborhood • Having peers with low educational aspirations • Having friends or siblings who are dropouts	• Low socioeconomic status of school population • High level of racial or ethnic segregation of students between schools in a district or within tracks or classes in a building • High proportion of students of color in school • High proportion of students enrolled in special education • Location in central city • Large school district • School safety and disciplinary policies • High-stakes testing • High student-to-teacher ratios • Academic tracking • Discrepancy between the racial or ethnic composition of students and faculty • Lack of programs and support for transition into high school for 9th and 10th graders

Original Source: Freudenberg & Ruglis, 2007, p. 9.

Interventions for Dropout Prevention, Student Engagement and Improving Graduation Rates

Educational Interventions

Interventions to reduce school dropout begin in the prenatal period and continue through early childhood (Karoly & Bigelow, 2005; Reynolds, Temple, Robertson & Mann, 2001; Schweinhart, Montie, Xiang, Barnett, Belfield & Nores, 2005), elementary (Statler & Petersen, 2003; NDPC/N, 2004; Prevatt & Kelly, 2003), middle (Rumberger, 1995) and high school. Here I focus on effective school and community interventions to reduce high school dropout beginning at the end of middle school. I choose this starting point because my dissertation research is on high school aged students and because the magnitude of current graduation rate crisis demands that we focus on older students with as much fortitude as we do on early childhood and elementary education interventions. We cannot wait for the next generation.

Similarly, discussions on interventions through political economy are larger than the scope of this chapter, although it is worth mentioning here that effective, ecological educational improvement will require interventions that address stable housing, employment, income equality de-racialized community policing practices, childcare and social supports, and school / community health clinics, just to name a few. Additionally, while the focus of this section is intentionally on more traditional educational interventions (so as to speak to the field at large and identify the traditional frames of school dropout), alternative forms of “dropout prevention” such as theater, arts and digital media programs; after school and early college programs; summer programs; youth activism, community organizing and participatory action research are equally important and essential to keeping kids in school. (See Rothstein, 2004).

Interventions to reduce school dropout can seek to change individuals, families, schools and school systems or less often, broader public policies on poverty, welfare or employment. Most observers agree that no single intervention can solve the nation’s graduation rate crisis and that comprehensive efforts should intervene at multiple levels. One overarching finding, however, is that social support and related efforts to improve social capital help to promote school engagement and increase chances for school graduation among students of color (Garcia-Reid, Reid & Peterson, 2005; Noguera, 2001).

Below I outline relevant essential components of keeping students in school. I organize the research by three categories: interventions aimed at changing 1) the organization, structure and governance of a school; 2) curriculum and instruction; and 3) teacher support. These categories are taken from a recent chapter by McPartland and Jordan (2004).

Effective changes to the *organization, structure and governance* of schools have included: a safe, non-threatening learning environment; small class size (Woods, 1995; Rumberger & Palardy, 2005b); systemic, comprehensive reform (Gambone, Klem, Moore & Summers, 2002); restructuring school practices and policies; community, business and university collaboration; student involvement; reducing retention and suspension (Woods, 1995); fair discipline policies (Rumberger, 1995; Woods, 1995); efforts focused on 9th grade transition (Somers & Pillawsky, 2004); small learning communities; interdisciplinary teams of students and teachers (Kerr & Legters, 2004); promotion of parent and family training and involvement (Rumberger, 1995; Montecel, Cortez & Cortez, 2004; Prevatt & Kelly, 2003; Woods, 1995); improving school/classroom culture and climate (including cultural competence) (Osher, Sandler & Nelson, 2001); violence prevention and conflict resolution programs; alternative school safety and discipline strategies (Gagnon & Leone, 2001); and early intervention (Woods, 1995; Osher, Sandler & Nelson, 2001).

Changes in *curriculum and instruction* include extended class periods/increased instructional time; advisory periods and special curricula for 9th graders; elimination of academic tracking; student-centered and culturally responsive pedagogy and practice; opportunities for "catch up" courses and for out-of-school programs; academic content that is of interest and relevance to the students; academic and social supports for students (McPartland & Jordan, 2004); fair, clear, high expectations and standards for all students (Gambone, Klem, Moore & Summers, 2002); tutoring (Somers & Pillawsky, 2004); mentoring programs (Prevatt & Kelly, 2003); behavioral and psycho-social support (Prevatt & Kelly, 2003); efforts to build relationships, foster school engagement and social support and reduce alienation (Montecel, Cortez & Cortez, 2004; Garcia-Reid, Reid & Peterson, 2005); diverse and individualized learning pedagogies and strategies; and use of instructional technologies (Montecel, Cortez & Cortez, 2004).

In sum, promoting school engagement through the “three R’s: relationships, rigor, and relevance” is central to improving student motivation and achievement (National Research Council, 2003).

Changes in *teacher support* include common planning time for teachers; integrated planning processes; professional development, support and coaching (McPartland & Jordan, 2004); comprehensive teacher training (Osher, Sandler & Nelson, 2001); support for staff risk-taking, self-governance and collaboration (Rumberger, 2004); and collective responsibility and increased autonomy (Gambone, Klem, Moore & Summers, 2002). Addressing the issue of teacher quality is also important for any holistic intervention: one only needs to look at the self-reported reasons for leaving school reported in a previous section. Many studies conclude that highly qualified, critically prepared teachers who are teaching within their field of certification have the most significant influence on student achievement (Haycock, 1998). As a result, teacher education for social justice is important to improving graduation rates (Michelli & Keiser, 2005).

Formalized Dropout Prevention Programs: Do they work?

Given the many variables of interest and the lack of consensus on the most important causes of school dropout, it is not surprising that few programs has been evaluated or that the evaluation findings differ. One national study of the U.S. Department of Education's School Dropout Demonstration Assistance Program evaluated 20 different programs serving more than 10,000 students (Dynarski, 2000) and concluded that most programs made almost no difference in preventing dropping out in general.

Similarly, although the General Equivalency Diploma (GED, also referred to as the General Educational Development test) is accepted by most postsecondary institutions and employers, its true equivalence to an actual high school diploma is disputed by some researchers; thus raising questions about promoting GEDs as a viable—and equal—alternative to traditional school completion. The economic and educational return of a GED is not the same as for high school graduates (Boesel, 1998; Smith, 2003). In fact, obtaining a GED only increases a dropout’s chance of full-time employment by 5 percent and only 2 percent of GED recipients who begin bachelor’s degree programs ever attain the degree (Boesel, 1998). Also significant is that

only one-third of GED recipients are people of color (Boesel, 1998). Considering the evidence presented in this dissertation that a majority of students not completing school are students of color, the GED provides an insignificant buffer against the existent health and educational disparities. It can be argued then, as articulated in the beginning of this dissertation, that GED recipients are disenfranchised educationally, occupationally and economically, the constellation of which is correlated with lifetime health. Even the nationwide small school movement is clouded by debate. Research on the effect of school size on student achievement and dropout have produced conflicting results (Rumberger & Palardy, 2005b). Although smaller school size is linked to student achievement, safer schools and lower dropout rates (Wasley, Fine, Gladden, Holland, King, Mosak, et al., 2000), the number of students that define a “small school” is widely debated. The one programmatic area that does prove successful for reconnecting people with education is prison-based (Fine, Torre, Boudin, Bowen, Clark, Hylton, et al, 2001) or post-prison education programs and schools.

Developing a strategy for coordinated multilevel research that can guide dropout prevention policy is an important priority.

Table 3.2 *Summary of Educational Interventions for Improving Student Engagement in School and Academic Success*

Structural, Institutional and Organizational Changes	Changes to Curriculum and Instruction	Changes in Teacher Support
• Safe, nonthreatening learning environment • Small class size • Small school size • Systemic, comprehensive school reform • Culturally proficient leadership • Community, business and university collaboration • Student involvement in school policies • Reducing retention and suspension • Efforts focused on 9th grade transition • Small learning communities • Parent / family training, engagement and involvement • Violence prevention and conflict resolution programs • Culturally competent school and classroom culture • Alternative school safety and fair discipline strategies • Alternative school models: school-to-work programs, apprenticeship, vocational, service learning • Strong counseling programs * • Competent and appropriate personnel *	• High academic expectations of all students * • High levels of personalization * • Extend class periods or increase instructional time • Opportunities for "catch up" courses and for out-of-school programs • Academic content that is of interest and relevance to the students • Academic and social supports for students • Advisory periods • Elimination of academic tracking • Student-centered, culturally relevant, and diverse pedagogy and practice • Opportunities for extra schooling: after school, summer, Saturday, or extended-day learning opportunities • Fair, clear, rigorous, and high expectations and standards for all students • Tutoring • Mentoring programs • Behavioral and psychosocial support • Efforts to build relationships, foster school engagement and social support, and reduce alienation • Diverse and individualized instruction and use of instructional technologies • Early intervention and academic supports • Interdisciplinary instruction	• Common planning times • Integrated interdisciplinary planning processes • Professional development • Coaching and mentoring • Comprehensive teacher training • Support for staff risk-taking, self-governance, and collaboration • Collective responsibility and increased autonomy from central control • Highly qualified, certified, and well-prepared teachers • Teachers teaching only in their field of certification • Education programs to help teachers promote social justice • Teacher training for effective instruction of and care for culturally and linguistically diverse learners

Original Source: Freudenberg & Ruglis, 2007, p. 10; Levin & Belfield, 2007, p. 181

While this portion of the literature review synthesized the components of successful interventions to keep youth in school and promote academic achievement, there is one specific high school dropout prevention program that is worth mentioning. Levin and Belfield (2007) conducted a systematic and rigorous review of the literature of "the overall literature on high school completion" (p. 179), particularly looking for evaluation studies of interventions aimed at improving graduation for "at-risk" students. Of the hundreds of articles that they found, only *one* high school intervention met their "criterion of showing that the intervention increased graduation rates. This program, called First Things First (FTF), reflects many of the components of contemporary urban high school reform, specifically including: small learning communities, teacher advocacy for every student, and improvement to/in instruction. Importantly, "Instructional

improvement results from high expectations and rigor in the curriculum as well as engaging approaches focused on state standards" (Levin & Belfield, 2007, p. 181). The FTF program incorporates many of the components that I found repeated in the literature; and interestingly a repeating theme throughout the data collected in my dissertation.

The FTF program not only increased graduation rates but attendance and math and reading test scores improved as well. Notably, if delivered to 100 students, the FTF program would yield 16 new graduates each year.

Health Interventions

Of additional interest to the thesis of this dissertation are interventions that have the potential to improve school achievement and reduce school dropout by improving health. These include comprehensive school health programs, school-based health clinics, special programs for pregnant and parenting teens, substance abuse prevention and treatment programs, mental health programs and school/community programs.

Coordinated school health programs, as articulated by the World Health Organization (1997) and the Centers for Disease Control and Prevention (CDC), seek to create a total school environment that promotes health. The CDC defines eight components of a coordinated school health program: health education, physical education, health services, nutrition services, counseling, psychological and social services, a healthy school environment, health promotion for the staff and family and community involvement in health (NCCDPHP, nd; Institute of Medicine, 1997; Marx, Wooley & Northrop, 1998; Bogden, 2000; Symons, Cinelli, James & Groff, 1997). While many schools have implemented several of these components, few systems have implemented this full model, especially at the high school level, and its overall impact on school dropout has not been assessed.

School health clinics provide on site primary health care to students. In high schools, these clinics can include or make referrals for reproductive health, mental health and substance abuse services (Monroe, Kilbreth & Langwell, 2001). School health clinics can also play a role in connecting children and their families to primary health care, thus reducing the burden that a chronically ill family member can impose on an adolescent. Currently about 1,500 schools in the

US have such clinics (Juszczak, Schlitt, Odlum & Barangan, 2003). While few studies have assessed the impact of clinics on school achievement, some evidence suggests that use of such clinics may help disadvantaged students to complete school (McCord, Klein, Foy & Fothergill, 1993).

Dental, vision and hearing programs address some of student's most pressing needs in school, needs that have drastic effects on children's learning and achievement. Children have trouble seeing the board and reading, hearing their teachers and difficulty paying attention due to toothaches. In fact, 50 percent of students of color and low-income children have vision problems that can interfere with their schoolwork (Rothstein, 2004, p. 37). Children with disabilities, those in the juvenile justice system and in foster care also have high rates of vision difficulties. And as Malcolm Gladwell (2005) points out, when Sered & Fernandopulle (2005) were researching and interviewing for their book, *Uninsured in America,* "they talked to as many kinds of people as they could find, collecting stories of untreated depression and struggling single mothers and chronically injured laborers—and the most common complaint they heard was about teeth."

School mental health programs offer individual counseling, family intervention, referrals, support for teachers and other school staff, and assistance in creating a school environment that supports mental health (Haynes, 2002). A study in one large urban school district found that students served by these programs have fewer discipline problems, course failures, and school absences (Jennings, Pearson & Harris, 2000). Generally, the impact of these programs on school dropout has not been assessed.

Substance abuse programs seek to prevent, reduce or treat use of alcohol, marijuana or other drugs. Evaluation studies show that some of these programs can prevent or delay onset of substance use or are effective in reducing use among existing users (Gottfredson & Gottfredson, 2002; Gottfredson & Wilson, 2003). For a variety of reasons, including political and economic ones, school-based programs sometimes use less effective program models, thereby reducing the potential impact of interventions (Elliott & Orr, 2005). Since heavy marijuana and alcohol use may contribute to school dropout, early intervention could reduce the size of this vulnerable population. Although parental addiction can contribute to school dropout, few schools have

attempted, or have the capacity, to address the family dimensions of substance abuse (Gance-Cleveland, 2004).

Comprehensive sexuality education, pregnancy prevention and services for parenting teens provide a range of educational, counseling, health and other services. Some programs have been demonstrated to reduce sexual activity and increase condom and contraceptive use as well as to reduce school dropout (Card, 1999; Kirby, 2002). School-based child care programs may also make it easier for parenting teen to finish school (Sadler, Swartz & Ryan-Krause, 2003). As in the area of substance abuse, some schools implement interventions based on political, ideological, legislative, financial, or community factors rather than evidence of effectiveness. For example, the federal government only provides funding for abstinence-only-until-marriage education. Developmentally damaging, abstinence-only programs are grounded in neither data nor evidence (SIECUS, 2005a, 2005b), yet because funding in-turn influences education policies, schools may often have little choice, or alternatives to choose from, in the matter (Perrin & DeJoy, 2003; Pillow, 2004). There is a chasm of possibilities for the public health community to become engaged in developing and funding scientifically accurate, evidence-based, developmentally appropriate comprehensive sexuality education programs.

Violence prevention and conflict resolution programs seek to prevent or reduce conflict, bullying, dating violence and fighting within schools and communities (Boxer, Godstein, Musher-Eizenman, Dubow & Heretick, 2005; Hickman, Jaycox & Aronoff, 2004; Mytton, DiGuiseppi, Gough, Taylor & Logan, 2002; Smith, Ananiadou & Cowie, 2003). Alternative strategies to existing zero tolerance and school safety polices are essential for ensuring long term solutions, youth engagement in, and completion of, high school, and also for their social and emotional development (Gagnon & Leone, 2001; Noam, Warner & Van Dyken, 2001; Osher, Sandler & Nelson, 2001). These interventions offer combinations of classroom based cognitive activities, individual and group counseling, and school and community-based peer education. Some programs also include psychosocial services such as anger management, conflict resolution and mediation. Since many young people report that feeling unsafe in school contributes to their decision to drop out (NDPC/N, 2002; Bridgeland & Dillulio, 2006), violence prevention programs

that actually make schools safer may reduce dropout. Some evaluation studies suggest that violence prevention programs can reduce violence and improve educational outcomes (Hickman, Jaycox & Aronoff, 2004; Mytton, DiGuiseppi, Gough, Taylor & Logan, 2002; Walter, 2001).

Table 3.3 *Health Interventions That May Contribute to Improved School Completion Rates*

Type of Intervention	Program Activities	How the Intervention Reduces Dropout Rates
Coordinated school health program	Health education; physical education; health services; nutrition services; counseling, psychological, and social services; healthy school environment; health promotion for the staff, family, and community; partnerships	Teaches decision-making skills for better life choices; reduces absenteeism; offers early intervention and referrals for learning, psychological, substance abuse, and mental health problems; makes school more engaging; connects students to caring adults; engages families and communities in lives of young people
School-based health clinic	Primary and preventive health care, referrals, assistance in finding health insurance and health care for family, reproductive health services, mental health counseling	Reduces family health problems; offers early intervention and treatment for psychological and physical health problems that can interrupt schooling; reduces teen pregnancy
Dental, vision and hearing programs	Provide dental, vision and hearing screenings, services and products	Enhances educational ability of students so they can see, hear and not be distracted by toothaches.
Mental health programs	Assessment and early intervention for young people with psychological, learning, or behavioral problems; referrals for children and families; counseling; staff training	Prevents problems that can interfere with school from becoming more serious; connects young people to caring adults; makes school more engaging; provides counseling or referrals for family mental health problems
Substance abuse prevention and treatment programs	Alcohol, tobacco and drug use prevention education; peer education; early intervention for drug users; support for young people with substance-abusing parents; referrals for drug treatment or counseling	Reduces or delays onset of heavy alcohol or marijuana use; offers young people with a drug-using parent a source of support; makes school more engaging
Sex, HIV infection and pregnancy prevention programs	Sex education; HIV infection prevention services; referrals for reproductive and sex health services; birth control; peer education; sexually transmitted infection prevention	Reduces or delays teen pregnancy; connects young people to caring adults or peers who encourage healthy behavior
Services for pregnant and parenting teens	Child care; parenting education; reproductive health services; continued participation in high school academics/courses	Encourages and supports teen mothers to continue schooling; delays second pregnancy
Violence prevention programs	Peer education/mediation; anger management; conflict resolution; violence prevention education; psychosocial services; individual and group counseling	Makes young people feel safer in school; makes school more engaging; connects young people to caring adults or peers who encourage healthy behavior
School climate	Policy changes to reduce stigmatization, bullying, aggressive policing, or punitive disciplinary measures; peer education; increased opportunities for close adult-student interactions	Improves student engagement in school activities; connects young people to caring adults; reduces bullying, stigmatization and distrust of authority

Modified from: Freudenberg & Ruglis, 2007, p. 11. (*Dental, vision & hearing programs added).*

Many schools offer several of these types of programs. However, these activities are frequently neither coordinated nor do they target school dropout as an outcome. While this section highlighted effective strategies for improving school completion, the next section turns to a discussion of the deleterious social and life outcomes for the millions of youth who slip, disappear or are forced through the cracks.

Considering the Effects of School Connectedness on Health

"School connectedness is protective against every negative health outcome for youths."
— Blum, 1998, p. 186

Interestingly, in a 1996 survey of adolescent health coordinators, Maternal and Child Health Directors, and regional Maternal and Child Health Bureau office staff, 15 percent responded that *strengthening schools* was what was required in order to improve youth health outcomes for violence, substance use/abuse, teenage pregnancy, HIV/AIDS and sexually transmitted diseases, homelessness, mental health, depression and suicide, and the lack of role models (Blum, 1998).

Defined as "an academic environment in which students believe that adults in the school care about their learning and about them as individuals," *school connectedness* protects against health risk behaviors as the result of two components: connection to an adult in school and a sense of being treated fairly and with justice (Blum, 1998). School connectedness may be causally related to decreasing health risk behaviors (McNeely, Nonnemaker & Blum, 2002). In a study assessing the health risk outcomes of emotional distress; suicidal thoughts and behaviors; violence; use of cigarettes, alcohol, marijuana; and age of first sexual involvement and pregnancy history, school connectedness is the *only* school-related variable that protects against all eight (Resnick, Bearman, Blum, Bauman, Harris, Jones, et. al., 1997).

Beyond dropping out, children forced out of the school system are more likely to engage in conduct harmful to the safety of themselves (including early or unprotected sexual intercourse, use of tobacco, alcohol and illicit drugs), their families and communities (Garcia-Reid, Reid, Peterson, 2005; Morrison, Anthony, Storino, Cheng, Furlong & Morrison, 2001; Prevatt & Kelly, 2003). Developmentally, school discipline actions have severe effects on a child's perception of justice, fairness, trust, capability and self-worth; and may significantly contribute to feelings of

social isolation, alienation and to engaging in high-risk behaviors (Skiba & Knesting, 2001; Morrison, Anthony, Storino, Cheng, Furlong & Morrison, 2001; Browne, Losen & Wald, 2001; Noguera, 1995).

Adverse Consequences of Diploma Denial

Aside from its assault to humanity, morality, community development and individual fulfillment, not graduating high school ends in outcomes that are grave: to both the youth who do not graduate and to our nation at large. Below I briefly detail the "consequences of diploma denial" (Fine & Ruglis, 2009).

Academic Impacts

As has been evident in many states throughout the nation, the introduction of a single high-stakes test produces, over time, a spike in dropout rates, a narrowing of curriculum, a systemic shift of resources toward test prep and a consequent diminution of intellectually engaging curricular materials and opportunities. You witness a rapid spike in dropout rates, as has been the case in New York, as admitted by the New York City Department of Education after the five Regents (the name for New York State's high stakes exit/graduation exams) requirement was implemented. For example, a 2005 report released by the Educational Testing Service indicates that in the decade *from 1992-2002, California was one of only seven states in the U.S. to have an improving graduation rate*, rising from 64 percent to 71 percent. *None of these seven states had exit exam requirements for students to receive a high school diploma* (Barton, 2005).

States that have high-stakes testing policies—policies that use a test score(s) as a requirement for graduation or grade promotion—*have significantly higher rates of both 9th grade retention and attrition between grades 9 and 10* (Abrams & Haney, 2004). The former finding is significant because it illuminates the body of literature demonstrating that being held back in school is one of the strongest predictors of school dropout (Abrams & Haney, 2004; Fine, 1986, 1991; Lehr, Hansen, Sinclair, & Christenson, 2003; Rumberger, 1995); while the latter points to what is now currently the largest leak in the educational pipeline. While over the past two decades, California has remained consistent having between 10-13 percent more students enrolled in grade 9 than were enrolled in grade 8 the previous year (a measure of retention), it

had among the lowest rates of attrition between grades 9 and 10 during the 1999-2000 and 2000-2001 school year (Abrams & Haney, 2004). “Increasing attrition of students…is clearly associated with implementation of new high stakes tests” (Haney, 2003, p. 8).

In an expert panel convened in March 2003 to discuss and review the literature on the effects of exit exams on high school dropout, it was stated that; “it is true that exit exams are more prevalent in states with higher percentages of black and Hispanic students, as well as states with the greatest degrees of poverty” (Center on Educational Policy, 2003, p. 3). Parallel data show school districts in central cities, with high percentages of English Language Learners, with high percentages of students with disabilities, and with high poverty levels are all more likely to have lower graduation rates (Orfield, Losen, Wald, & Swanson, 2004; Swanson, 2004).

But beyond this mechanism of dispossession and privatization, high-stakes testing has invariably caused test anxiety. Test anxiety is comprised of two components: emotionality and worry (Cassady & Johnson, 2002; Eccles, Wigfield & Schiefele, 1998; Elliot & McGregor, 1999). The former is evidenced through physiological responses during testing. Increased heart rate, nausea, dizziness, feelings of panic are all manifestations of test anxiety (Cassady & Johnson, 2002). The second component, worry, is referred to as “cognitive test anxiety” to better capture the range of cognitive processes associated with test anxiety (Cassady & Johnson, 2002). Listed below are the conditions/components of cognitive test anxiety:

> …high levels of cognitive test anxiety center on (a) comparing self-performance to peers, (b) considering the consequences of failure, (c) low levels of confidence in performance, (d) excessive worry over evaluation, (e) causing sorrow for their parents, (f) feeling unprepared for tests, and (g) loss of self-worth (Cassady & Johnson, 2002, p. 272)

Each of these factors contributes to poor performance due to a student’s inability to suppress these thoughts, and *realities,* during an exam. For adolescents, the path from “cognitive test anxiety” to academic achievement is significant (Cassady & Johnson, 2002; Williams, 1991).

Urban youth are astutely aware of the stark comparison between their schools and the education of white and privileged youth attending suburban schools (Fine, 2003). The inadequate

resources and instructional materials, cleanliness, space and numbers of unqualified teachers that plague the New York City public schools are illuminated evermore in comparison to the overabundance of resources in neighboring suburban districts. These structural inequities largely affect youths' perceptions of self-confidence, self-worth and ability. And high-stakes exit exams fail to account for the reality and legacy of the structural, pedagogical, curricular and staffing under-preparation of NYC youth. The impact of these contextual variables of test anxiety on academic performance is striking:

> …individuals with high levels of test anxiety will experience severe performance declines only in situations that activate the state test anxiety factor. Common situational factors include low self-confidence for the specific task, perception of the exam as posing a high level of threat, or an awareness of being underprepared for the exam (Cassady & Johnson, 2002, p. 274).

In a qualitative study of the impact on students of the Massachusetts Comprehensive Assessment System (MCAS), Wheelock, Bebell & Haney (2000a) analyzed "students' perceptions of MCAS based on students' drawings of themselves as MCAS test-takers." Beginning with the class of 2003, all high school students are required to pass "tenth grade mathematics and English tests in order to receive a high school diploma" (Wheelock, Bebell & Haney, 2000a). Compared to students in suburban and rural schools, urban students were more likely to depict themselves as anxious, angry, bored, sad, disappointed, pessimistic, withdrawn/loss of motivation and relieved when the test was over, and to portray the test as difficult or too long (Wheelock, Bebell & Haney, 2000a).

Economic and Social Impacts

Students who do not graduate from high school annually earn an average of $9,200 less than high school graduates (Bridgeland, Dillulio, & Morison, 2006); equating to approximately $270,000 less than high school graduates during their lifetime (The Civil Rights Project, 2005). The gap widens exponentially in comparison to college graduates, where high school dropouts earn roughly $1 million less over their lifetime than college graduates (Bridgeland, Dillulio, & Morison, 2006; See also Levin & Belfield). But economic benefits vary greatly across ethnic

group. Ron Mincy (2006) has found that “In 2000, 65 percent of Black male high school dropouts in their 20s were jobless – that is, unable to find work, not seeking it or incarcerated. By 2004, the share had grown to 72 percent, compared with 34 percent of White and 19 percent of Hispanic dropouts.” (cited in Eckholm 2006). With respect to Latinos, young people who finish high school have mean earnings 36 percent higher than their peers who do not graduate (The Civil Rights Project, 2005). Also in 2004, a high school dropout “earned only 37 cents for each dollar earned by someone with more education” (Rouse, 2007, p.99).

In general, high school non-completers are more than 3 times as likely to be unemployed as college graduates (Bridgeland, Dillulio, & Morison, 2006). Simply increasing college enrollment of students of color to be equal to the percentage of white students would add an additional $231 billion in Gross Domestic Product and no less than $80 billion in new tax revenues (Alliance for Excellent Education, 2003b). At the individual level, school dropouts pay on average $3,400 a year in federal, state and Social Security taxes; which is one half the contribution of people who only graduated high school and one third the contribution of those with at least a high school degree (Rouse, 2007, p. 112).

Students who do not graduate from high school are also more likely to live in poverty and receive public assistance (Bridgeland, Dillulio, & Morison, 2006; Waldfogel, Garfinkel & Kelly, 2007). Failing to complete high school has profound consequences for communities, states and the nation, stemming from losses of economic productivity, and “the higher costs associated with increased incarceration, health care, and social services” (Bridgeland, Dillulio, & Morison, 2006, p. 2). Of the nearly 1.2 million single mothers who were on the Temporary Assistance to Needy Families (TANF) program (also known as “welfare”) in 2002, virtually half (500,000) of the women had not graduated high school (Waldfogel, Garfinkel & Kelly, 2007). In fact, 40 percent of 16-24 year olds without a high school diploma receive government assistance (Bridgeland, Dillulio, & Morison, 2006), and in comparison to the one percent of single mothers who had more than a high school education who are welfare, 27 percent of all single mothers who are high school dropouts receive welfare (Waldfogel, Garfinkel & Kelly, 2007). Increasing the educational achievement of these single mothers who did not complete high school “to the level of a high

school degree would result in $1.5 to $3.5 billion in savings in TANF costs per year" (Waldfogel, Garfinkel & Kelly, 2007, p. 166). The same trends follow for single mothers receiving food stamps.

Twenty-five percent of high school dropouts are enrolled in Medicaid, as compared to 8 percent of high school graduates and one percent of college graduates. Yet these differences translate to substantial economic costs as well: "the average high school dropout consumes $2,700 in public health insurance costs per year, the average high school graduate, $1,000, and the average college graduate, just $170" (Muennig, 2007, p. 136). At a severe detriment to families and communities, failing to graduate from high school has significant intergenerational impacts—children of dropouts are more likely to attend inadequate schools and to not complete high school themselves—ultimately contributing to social problems of communities at large (Orfield, 2004, p. 2).

As a case example, take the state of California where Russell Rumberger, Professor at the University of California at Santa Barbara, reports that the 66,657 students *officially* reported as dropouts by the state in the 2002-2003 school year will cost the state $14 billion in lost wages (The Civil Rights Project, 2005). Dr. Rumberger also estimates that this one year of state reported dropouts will result in an additional 1,225 state prisoners, with an incarceration cost of $73 million (The Civil Rights Project, 2005). Conversely, high school graduation lowers the probability of incarceration for Blacks by 3.4 percentage points and for Latinos by 2.0 percentage points (The Civil Rights Project, 2005).

Criminal Justice

People who do not graduate from high school are eight times more likely to end up in prison or jail and to be on death row than a peer with a high school diploma (Bridgeland, Dillulio, & Morison, 2006). The lifetime cost to the U.S. for *each youth* who does not graduate from high school and later enters the criminal justice system ranges from $1.7 to $2.3 million (emphasis added, Bridgeland, Dillulio, & Morison, 2006, p. 2).

Fifty-nine percent of all federal prison inmates do not have a high school diploma (Harlow, 2003). Even more towering are state inmate data. An overwhelming majority, 75

percent, of all State prisoners did not complete high school (Harlow, 2003). Of these State inmates, 52 percent are ages 24 or younger, 61 percent are non-US citizens, 59 percent have a reported speech disability, 66 percent have a reported learning disability, 44 percent are Black, and 53 percent are Latino (Harlow, 2003). A single year increase in average education levels would decrease arrest rates by 11 percent (Alliance for Excellent Education, 2003a). In a 1998 report, projections estimated that by 2004-05, prisons in California would receive double the funding of colleges and universities (Hurtado, Haney, & Garcia, 1998). But this funding gap makes sterile the real human costs:

> In 1980, at the dawn of the prison construction boom, black men were three times more likely to be enrolled in college than incarcerated. In 1980, there were 143,000 black men in jail or prison and 463,700 enrolled in higher educational institutions. In 2000, there were 791,000 black men in jail or prison, while only 603,032 were enrolled in colleges or universities. Its not a matter of whether 'Junior' stole the pound cake; it's a matter of whether he can get into a school that will train him to cook rather than incarcerate him because he stole when he was hungry" (Dyson, 2005, p. 92).

But like all other indices of dispossession discussed in this section, so too does criminal justice have disparite impacts where the risk of not graduating high school has much more substantial consequences to communities of color than for Whites. While only 12.6 percent of White males in prison age thirty to thirty-four are high school dropouts, 52.1 percent of African American men in prison of the same age are high school dropouts: a rate more than four times that of whites. In fact, by their mid-30s, six in ten black male dropouts had spent time in prison (Mincy, 2006). Low-income Whites without a high school diploma fare much better than their counterparts in other demographic groups. As Table 2.4, from Pettit and Western (2004) documents, the cumulative risk of death or incarceration by ages 20–34 is deeply and increasingly affected by educational level and race–particularly for African American men without college:

Table 3.4 *Likelihood of death or incarceration by ages 20 – 24, by race, educational level and year*

	Less than high school	high school	all non-college	some college
White men				
1979	7.8	3.5	4.9	1.5
1999	14.0	5.5	7.7	1.7
Black men				
1979	23.8	11.6	17.8	8.7
1999	61.8	21.9	33.9	7.4

Petit & Western conclude "imprisonment now rivals or overshadows the frequency of military service and college graduation of recent cohorts of African American men. For Black men in their mid-thirties at the end of the 1990s, prison records were nearly twice as common as bachelor's degrees" (2004, p. 164). Yet one additional year of schooling would result "in a 0.10 percentage point reduction in the probability of incarceration for whties, and a 0.37 percentage point reduction for Blacks. To help in interpreting the size of these effects, consider that differences in average education between blacks and whites can explain as much as 23 percent of the black-white gap in incarceration rates" (Moretti, 2007, p. 144). Funding streams follow (or precede) these population trends as well, where in 1987 for every dollar that was spent on higher education, 32 cents was spent on corrections; but by 2007, for every higher education dollar spent, 60 cents was spent on corrections (Pew enter on the States, 2008).

Health

Socioeconomic status (SES) is one of the most widely used factors to predict and explain health disparities; and of all three components of SES (education, income and occupation), education is the *most* salient predictor of lifetime health and disease **(**Freudenberg & Ruglis, 2007; Deaton, 2002). In fact, when considering health-related quality of life, a 40-year-old college graduate has the *same* health status as a 20-year-old who did not graduate from high school (Muennig, 2007, p. 135). Education also independently predicts risk factors for cardiovascular disease (Winkelby et al, 1992). In fact, not graduating high school is as strong a predictor of death from coronary heart disease as having high cholesterol or high blood pressure (Fiscella & Franks, 2004).

There exists a graded relationship between years of education and mortality (Pappas, Queen, Hadder & Fisher, 1993), and fewer years of formal education predicts both early death (Liberatos, Link, Kelsey, 1988; Molla, Madans, & Wagener, 2004) and a shorter life span (Fiscella & Franks, 2004). For example, in 2002, US residents aged 25-64 with less than 12 years of education had an age-adjusted death rate—for *all* health causes—17 percent higher than people who had completed high school and almost *three times higher* than people who had finished at least one year of college (National Center for Health Statistics, 2004). Similar differences in mortality by educational attainment were observed for chronic diseases, injuries and communicable diseases.

Compared to those with more education, people with less formal schooling have been found to suffer from higher rates of a wide range of health problems including: heart diseases, high blood pressure, diabetes, asthma, cancer, obesity, infection, injury, lung disease, having low birth weight babies, higher mortality and higher health-risk behaviors (Winkleby, Jatulis, Frank, & Fortmann, 1992; Fiscella & Franks, 2004; National Center for Health Statistics, 1998; Crimmins & Saito, 2001; Ross & Wu, 1995; Sharma, Malarcher, Giles, Myers, 2004; Link & Phelan, 1995), disability (McNeil, 2001), activity restrictions/limitations (Molla, Madans, & Wagener, 2004) and being both under and over weight (Lantz et al., 1998).

In public health literature, more formal education is causally related to health: higher education contributes to better health by increasing one's income and occupation, thereby providing access to knowledge, skills and resources, insurance and enabling individuals to acquire more social support and networks to respond better to social stress (Muennig, 2007). It is related to a person's ability to gain access to health information, facilities, services, technologies, resources, support, nutrition options, exercise, safe environments (home, neighborhood & work) and food security (Link & Phelan, 1995; Adler & Newman, 2002). So, too, does it "attenuate life stressors, improve social networks, reduce behavioral risk factors, and increase the likelihood of possessing health insurance" (Muennig, 2007, p. 130). For children, school design and resources are directly linked to physical activity, and therefore education affects health (Sallis et. al., 2001; World Health Organization, 2004). Thus, people with more education have a better capacity to

protect and maintain their health. Finally, less education is associated with a myriad of social problems such as drug addiction, incarceration and social isolation, all of which contribute to poor health and community disruption and have significant costs to the public.

In the long run, not completing high school correlates to lower levels of civic and political participation (Baum & Payea, 2004; Junn, 2005). To this end, Rudolf Virchow said it best: "Economic stability and active political participation by the poor…were necessary for good health" (Waitzkin, 2005, p. 29).[13] By denying education, health and freedom get harmed in more than one way.

However, we can no longer conceive of the relationship between education and health as one of input and output, as sites of intervention and outcomes. If we fail to see education as a *process* structured by one's opportunities to participate in its system, and whereby its experience impacts health in much the same way as living in poverty, experiencing (or perceived) racism, discrimination and environmental stressors (Hofrichter, 2003); we are gravely missing out on an opportunity to drastically re-imagine and improve two of the greatest human rights crises our nation is facing: educational and health inequities. So, too, do we miss out on *opportunities* for research, interventions and reforms for educational, health and social justice. This includes imaginations of interventions across and in between the sectors presented in this chapter, such as civic engagement, voting, parental participation in school, improving school and community library use and programming, and edu-enivronmental community development and activism such as Majora Carter's Sustainable South Bronx project.

Measured by educational benchmarks (i.e., less than a high school education, high school diploma, some college, college degree, etc.), education becomes normed, in a system that by definition is not. I argue that if education level were indeed a definitive benchmark for health, there would not be such consistent between-group racial/ethnic differences in health status, lifespan, morbidity and mortality (Crimmins & Saito, 2001). Which is to say that schooling experiences moderate the relationship between race/ethnicity and health.

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[13] Rudolf Virchow (following Engels) was famous for his work in cellular pathology in the nineteenth century and sought to develop an explanation of the social and physical forces that cause disease and human suffering.

Data shows that females are more likely to graduate from high school and have longer, healthier lives. White men age 25 and over with less than a high school education had mortality rates 125 percent to 200 percent higher than white men with some college education, depending upon age (Crimmins & Saito, 2001). For Black men and women, the difference was almost 300 percent. Similar differences by educational attainment and race were found in disability rates, chronic disease, and healthy life expectancy (Crimmins & Saito, 2001; Geronimus, 2001; Geronimus & Thompson, 2004). And the connection between health and socioeconomic position is among the most vigorous findings of epidemiology and public health.

Yet racial disparities aren't stagnant either. For young Blacks living in high-poverty urban areas, such as Harlem or Chicago's South Side, the rates of morbidity and mortality are even more striking. In these areas, of young African Americans who reach sixteen, 33 percent of the girls and 66 percent of boys will *not* live to reach age sixty-five (compared to the national average where 10 percent of girls and 25 percent of boys will not reach their sixty-fifth birthday) (Geronimus & Thompson, 2004). And in some urban locales, African American young people faced a lower probability of living to age 45 than White youths, nationwide, faced for living until age 65 (Geronimus, 2000, 2001).

These health data look almost equivalent to the wide gap between the graduation rates of Whites and Blacks introduced in the beginning of this chapter. I posit that this correlation cannot be, and is not, coincidence. "Individual economic or education success does not bring the same rewards for African Americans as for Whites" (Kaufman et al, 1997 in Geronimus & Thompson, 2004, p. 256). So what is it about the *process* of education that is so different for students of color than for Whites? And what are its educational and health consequences? The remainder of this dissertation explores these issues.

Conclusion

This chapter is comprised of a brief literature review creating an empirical narrative of *education as a social determinant of health*. The remainder of this dissertation details and documents research that investigates youth schooling experiences and the ways in which schooling affects health. That is, the aim of the original research and scholarship of this

dissertation is to humanize the literature presented in this chapter by excavating schooling experiences of youth in New York City and illuminating the effects of their schooling upon health and educational outcomes. This dissertation advances, and complicates, the well-accepted finding of more education as a social determinant of positive health and invites us to pause and consider for whom, under what conditions and when schooling may adversely affect health. In the next chapter, I describe the methodology of this study.

Chapter 4.

YOUTH PARTICIPATORY ACTION RESEARCH AT THE INTERSECTION OF (MIS)EDUCATION AND HEALTH

Introduction

Youth are experts in understanding the ways in which schools and health are intertwined. Their bodies and souls yield daily, embodied experiences at school for which *no one* is more expert than they are. I believe that youth implicitly understand how the system of education and subsequent schooling operations and practices bear consequences not only to their academic achievement, but also to their mental, physical, sexual and social health and their psychological understanding of themselves and their futures. A political, epistemological and pedagogical worldview, youth participatory action research (YPAR) in this context became the only option for my dissertation research: as youth so clearly assert themselves as the foremost experts of marks, scars and sutures both seen and unseen that schools leave on bodies and minds.

As an example of how youth exert themselves as the authority in understanding education as a social determinant of health, during the very *first* meeting I held for the research collective I formed for the empirical portion of my dissertation, entitled ProjectDISH (Disparities in Schooling and Health), I began the meeting by first asking students to work in small groups of two or three and brainstorm: “how are schools and health related? Their task was to write or draw on poster paper anything that came to their minds about how something in school affects someone’s/their health. This is the list the group generated (field notes, 05/01/08):

- Knowing/learning things about health (health class, *economics*, nurse’s office, guidance counselor, school based health center)
- Fix education system
- Malnourished/poor nutrition/hunger (make school food better, school lunch times, snack break)

- Someone paying attention to abuse (or what's going on at home)—teachers, guidance counselors, an adult. Need more.
- Verbal, psychological, emotional and physical abuse
- Stress, frustration, embarrassment from not speaking English "well" or "right"
- School nurses
- Gym class (gym grade being averaged into overall grade)
- Recess: there isn't one so kids are cut off from talking, which is necessary
- Types of assessments
- Bathroom privileges
- Physical environment of school (dirty bathrooms, no fresh air, dirty water, guns on SSAs[14], limited resources, no soap, etc.)
- SSAs / metal detectors
- Exams / testing
- Racism
- Teachers that care (positively affects health)
- Food is often expired or spoiled

Included in this intuitive list of embodied schooling practices are a range of activities about school which affect health: health information and resources; the psychological consequences of educational practices (including testing, teacher quality, policing, etc.); health and social supports and training (i.e., no one paying attention to or doing things about a student who is abused); the built environment; social determinants of health (i.e., racism); health consequences of hindering developmental need (i.e., socializing and talking); school food; school organization; and health consequences of the different forms of abuse students experience at school from the teachers, SSAs, principals, etc. Without a doubt, young people not only embody but understand and *position* schooling as intersecting with and affecting their health.

The empirical portion of my dissertation is a mixed-methods, full-scale participatory action research (PAR) project. Youth were recruited to join ProjectDISH (Disparities in Schooling and

[14] SSA refers to School Safety Agents, which in NYC are what the school security and police officers assigned to schools are called.

Health) as youth co-researchers. For a timeline of our research project, please see the Appendix. It is also exciting to mention here that much of our data overwhelmingly supports these youth researchers' affirmations.

Participatory Action Research

A methodological stance, participatory action research (PAR) is grounded in challenges to ways of knowing, ways of being, expertise and power. It offers an alternative paradigm in which social and research hierarchies are dismantled through restructuring power dynamics (See: Stoudt, 2009; Payne & Hamdi, 2009). So too is PAR an alternate epistemology: uprooting beliefs in what constitutes knowledge, how and what knowledge is produced, where expertise lies and who is involved in both (See: Harding, 1998; Tuhiwai Smith, 1999, 2006). When taken as a political act, PAR is radical pedagogy—intentionally disrupting power dynamics and re-shifting the center(s) of research. Instead of researching *on*, PAR researchers move their positionality to a dynamic insider-outsider state and instead research *with.* And most importantly those traditionally researched on join the research process; researching *with.* That is, "PAR recognizes that those 'studied' harbor critical social knowledge and must be repositioned as subjects and architects of research" (Torre & Fine, 2006, p. 271. See also: Fals-Borda, 1979; Guishard, 2009; Fine, Bloom, Burns, Chajet, Guishard, Payne, Perkins-Munn & Torre, 2005; Fine & Torre, 2004; Cahill, 2004, 2007). Historically, following its South and Central American, Asian, African, European and North American roots, participatory action research aims for radical social change. It aims for fracturing and exposing deep structural violence experienced by those oppressed and on the marginal axes of society (See Reason & Bradbury, 2008). As Paulo Friere (1982) states:

> The silenced are not just incidental to the curiosity of the researcher but are the masters of inquiry into the underlying causes of the events in their world. In this context research becomes a means of moving them beyond silence into a quest to proclaim the world.

To this end, Arjun Appadurai (2006) argues that research should be regarded as a right, "albeit of a special kind" (p. 167). He goes on to say, "This argument requires us to recognise that research is a specialised name for a generalised capacity, the capacity to make disciplined

inquiries into those things we need to know, but do not know yet" (p. 167). To me, this implicates *specifically* a component of PAR that I argue is supreme when doing youth PAR (or YPAR). That is, YPAR is a politicized *pedagogical* act. Research in this view is the generalized capacity to make disciplined inquires into that we all need to know, but do not know yet and that youth *yearn* to know. YPAR is the methodological tool for this *research*.

Appadurai further introduces us to the principle of 'documentation as intervention" (2006, p. 174. See also: http://www.pukar.org.in/). This principle I believe is both foundational to doing PAR with youth and that is malleable enough to include many research designs as a form of documentation. I quote a passage in full as it so finely distinguishes what YPAR actually is *and* what it aspires to be:

> We have also begun to clarify ways of teaching young people, often with humble educational backgrounds, the best ways to use documentation as a pathway into gathering information, entering official archives, doing certain forms of systematic analysis, and disseminating their results in speech, writing and other media to various urban audiences. As we have scaled up and refined our projects, we have also had deeper confirmation of the potential of this approach to increasing the motivation of young people to approach their city and their lives as objects of study, and as contexts susceptible to change. And, finally, these experiments in documentation have opened a double path for many young people; one is a deepening of skills they desperately need; the other is the recognition that developing the capacity to document, to inquire, to analyze and to communicate results has a powerful effect on their capacity to speak up as active citizens on matters that are shaping their city and their world (Appadurai, 2006, p. 175).

With this in mind, the remainder of this chapter describes the empirical portion of my dissertation research as done in honor with ProjectDISH.

ProjectDISH (Disparities in Schooling and Health) Begins

Recruitment & Participation

Recruited through community organizations, high school teachers I had previously taught while a faculty member at Lehman College, and through *Polling for Justice,*[15] ProjectDISH is comprised of ten youth, ages 14-19, living or attending school in New York City. Although diverse by ethnicity, all youth researchers are students of color. The ProjectDISH collective met weekly for one full year, beginning on May 1, 2008, and all youth researchers were paid a stipend of $15 for each meeting they attended. Meetings lasted between two and four hours. Additionally, food and beverages were provided at each meeting. The youth researchers have varying degrees of educational success, ranging from members who: had not completed high school but went on to earn their GED, participated in CollegeNOW programs and took AP (Advanced Placement) courses at their high school, attended a local community college, were still in school but deeply struggling to pass their courses, including the need to take summer school courses. All youth researchers who were currently in high school, however, attended small schools.

Who we are[16]

Table 4.1 *ProjectDISH Researchers*

Name	Gender	Age (At start of Project)	Ethnicity	Borough
Jose	Male	14	Puerto Rican	Brooklyn
Kamille	Female	15	Jamaican / African American	Brooklyn
Keesha	Female	15	Guyanese (Black)	Brooklyn
Demeterios	Male	16	African American	Bronx
Shakira	Female	17	Jamaican / African American	Bronx
Christine	Female	17	Jamaican / African American	Brooklyn
Shadaisha	Female	17	African American	Bronx
De'Sean	Male	17	African American	Bronx
Kionnei	Female	18	African American	Manhattan
Sam	Male	18	Puerto Rican / Colombian	Brooklyn
Jessica	Female	29	White	Brooklyn

Youth researchers joined ProjectDISH for a variety of reasons, and when asked to reflect on the purpose of our research and why they joined, they responded:

[15] A related participatory action research project that provides the survey / quantitative component of my dissertation research. Polling for Justice will be described in more detail later in the chapter. Two of the youth researchers in ProjectDISH, Shakira Morris and Demeterios Gould, are also youth researchers with Polling for Justice.

[16] From this point forward, the word "we" will be used in reference to the collective of Project DISH. "I" will be used to reference myself, Jessica, solely.

"Get first hand opinions of how school affects health, make students aware about how skool effects their health, finding out what different skools do to promote health and how they promote it" (Kamille).

"To find out if students are aware of things go on in their school, to find out what schools are doing to promote health issues in their school, to find out how schools are taking the initiative to improve health among students" (Christine).

"The purpose for us doing this research is to bring out how education effects health: who does it effect? What are schools doing? Who's involved?" (Akesha).

"ProjectDISH helps young people express how important they feel health is and how much their current or former schools promote health. This program has also had a purpose for me. This program has made me more aware of my health. It also gives us the researchers a chance to be some of the leaders of society" (Demeterios).

"Our purpose is to find out how health and education is correlated and to bring awareness to students and the faculty. Which hopefully in time all schools will offer health classes" (Kionnei).

"My purpose in joining ProjectDISH is to help BE a part of making the first steps necessary to make others want to join being a part of a greater cause. As well as by conducting our research we'll make others feel as if what they've been through is being shared/acknowledged. This way they feel the need to help change the paths of others" (Shakira).

What is powerful to consider about how each of these youth identify their purpose for participation is they reflect a range of goals for YPAR: they articulate desires for the act of research, for their own self development and education, and for social change. With IRB approval, and their own and parental consent, all youth researcher names are their own, real names. In the event that the youth or parent wanted an alias, it has been changed.

The Education of ProjectDISH

I decided from the conception of this project, that to truly honor the epistemological roots of PAR, and to ensure that this study is done with full collaboration and input, that I could neither start this process telling the youth researchers how I have come to this topic of interest nor my synthesis and theorizing on the connections between education and health. Rather, I had to scaffold instruction and information for the youth researchers: providing them with the resources, information and data that began my initial critique and interrogation of this issue. What would culminate is a collective, participatory, youth-generated understanding of the ways in which schools and health were related.

Roughly, this project has been divided into quarters: with the first quarter (May-July 2008) focusing on education and team/research development, the second quarter (August-October 2008) focusing on developing research protocols and training as social science researchers, the third quarter (November-January 2009) focusing on data collection and analysis, and the fourth quarter (February-May 2009) focusing on data analysis, research dissemination and action steps. However, these are not rigid boundaries, as PAR is a cyclic process in which inquiry, questioning, research design, data collection, analysis and analysis happen in cycles, and not in a linear progression.

Each research meeting involved a variety of interactive, pedagogical activities and discussions. In the following chart I will describe, briefly, and in chronological order, the sequence of the training and development of ProjectDISH.

Table 4.2 *Overview of ProjectDISH Research Process*

Month	Content Focus	Sample Resources Read / Viewed	Products Developed
May 2008	Learning about: educational and health disparities; social determinants of health; life course perspective of health; participatory action research; team building	**Literature:** *Reframing School Dropout as a Public Health Issue* (Freudenberg & Ruglis, 2007); *Cities in Crisis* (Swanson / EPE Research Center, 2008); *Defining a Common Common Education and Health Agenda* (Ruglis & Freudenberg, 2005), *Social Conditions As Fundamental Causes of Disease* (Link & Phelan, 1995); *Million Dollar Blocks Project* (See: archleauge.org/exhibitions/AJ/AJ_exhibition_guide/pdf); Whitehall studies **Documentary:** *Unnatural Causes (*California Newsreel & PBS, 2008); *Echoes of Brown* (Fine, Roberts & Torre, 2004)	Journaling; concept mapping; brainstorming; "Educational cause – Health effect"

June 2008	Development of ProjectDISH Vision, Mission and Goals; Synthesis of how education, schooling and health are related across multiple levels of analysis; Developing and deciding research questions	**Literature:** *NYC Community Health Profiles* (See: http://www.nyc.gov/html/doh/html/data/data.shtml); *The YRNES Report* (YRNES, 2008. See: http://www.ncscatfordham.org/binarydata/files/YRNES_Report_Updated.pdf); Unit 3 "Research and Action" from: *Youth Engaged in Leadership and Learning (YELL) Curriculum: A Handbook for Program Staff, Teachers and Community Leaders, 2nd Edition* (See: http://gardnercenter.stanford.edu/resources/yell_curriculum.html); *Framing Questions* (Shinn / Society for Community Research and Action, 2008. See: http://www.igloo.org/community.igloo?r0=community&r0_script=/scripts/folder/view.script&r0_pathinfo= percent2F percent7B4e06a67e-1c45-4088-84ad-980620068ac0 percent7D percent2FTeaching percent20Resources percent2Fclassexe&r0_output=xml)	Problem Tree of how education affects health; ProjectDISH Vision, Mission and Goals (See Appendix); ProjectDISH team contract (See Appendix); Research Questions
July 2008	Learning about other YPAR projects and products; Ecological Model / Perspective on Research; Developing research questions into research methods; qualitative vs. quantitative research; Things to include/consider when developing a research design (i.e. participants, incentives, recruitment, sample, ethics, risks etc.); Triangulating data	**Digital Media:** Youth Media: http://www.youthchannel.org/ SJEP: http://www.socialjusticeproject.org/SJEP/ABOUT_SJEP.html Educational Video Center: http://www.evc.org/ **Literature:** Unit 3 "Research and Action" from: *Youth Engaged in Leadership and Learning (YELL) Curriculum: A Handbook for Program Staff, Teachers and Community Leaders, 2nd Edition* (See: http://gardnercenter.stanford.edu/resources/yell_curriculum.html); *Death of a Dropout: (Re)Theorizing School Dropout and Education as a Social Determinant of Health* (Ruglis, 2009); Urie Bronfenbrenner's Ecological Model of Development	Research Methods; "Complete the Image" (Based on Augusto Boal's Theater of the Oppressed activity); X-ray maps; "I am" poems
August 2008	Human subjects certification; IRB; Research Methods; Develop research protocols; Polling for Justice	Literature: CITI Training Test / Readings	Final Research Methods (See Appendix); CITI Training Certificates; Complete Polling for Justice Survey; Focus Group Protocol
September 2008	Learn about scholarship and facilitation of each selected method, participation observation/how to take field notes	Literature: *Designing Qualitative Research, 3rd Edition* (Marshall & Rossman, 1999); *Moderating Focus Groups: A Practical Guide for Group Facilitation* (Greebaum, 2000); *Focus Groups in Health Research* (Wilkinson, 1998); *Drawing on Education* (Haney, Russell & Bebell, 2004); *Student Self-Portraits as Test-Takers* (Wheelock, Bebell, Haney, 2000)	Pilot focus group, Videotaped practice of facilitating focus groups;
October 2008	Data Collection	n/a	Final focus group protocol (See Appendix); Recruit for Focus Groups; Develop recruitment flyer
November 2008	Data Collection	n/a	Conduct Focus Groups
December 2008	Data Collection and Analysis of Maps	n/a	Conduct Focus Groups; Analysis Scheme for Maps
January 2009	Introduction to Focus Group Data Analysis	Digital Media: Watched one complete ProjectDISH focus group	Emergent Themes from Focus Groups & Individual Youth Researcher Interpretation of Themes
February 2009	How to analyze transcripts: bottom up / grounded theory coding; Prepare for first academic	Literature: Selected Segments from: *Qualitative Data Analysis: A User Friendly Guide for Social Scientists* (Dey, 1993); *Qualitative Data: An Introduction to Coding and Analysis* (Auerbach & Silverstein, 2003); *Grounded*	Analyze 2 transcripts; Approval of focus group themes and findings; PowerPoint presentation for UPenn Ethnography in

	conference presentation	*Theory in Ethnography* (Charmaz & Mitchell, 2001); *Writing Ethnographic Fieldnotes* (Emerson, Fretz & Shaw, 1995); *Drawing on Education* (Haney, Russell & Bebell, 2004); *Photovoice ethics* (Wang & Redwood-Jones, 2001); *Flint Photovoice* (Wang et al, 2004)	Education Forum
March 2009	Analysis of Polling for Justice Data; Reflection on ProjectDISH	n/a	Youth researcher Autobiographies;
April 2009	Develop action steps / plan; Work on conference presentation and PowerPoint of data and findings; Help with college decisions	n/a	Present at Bank Street College "ROC Your Voice: Student & Community Perspectives on Race, Opportunity & Class";
May 2009	Prepare for YPAR training	n/a	Present at Urban Education Emerging Scholars Conference; Present to all focus group participants; Conduct a YPAR training for another youth group
June 2009	Develop "How Schooling Affects Your Health" Fact Sheet	n/a	Possibly present our data at youth researcher schools

Our Collaborative Process

As you will see throughout the remainder of the chapter, the development and analysis of this study was entirely collaborative. After our first three months of critical education and team building, youth researchers selected the research topic, developed research questions, methods and protocols. I actively guided and facilitated their process. We also collaboratively developed the methods of analysis, which are described later on in that section of this chapter.

The IRB process was also a collaborative approach. Approval for this research study was a two-step process. First I had to seek IRB approval for recruiting, working with and training the youth to be researchers. Since part of our process was to develop research questions and methods and our research sample, I then had to resubmit an IRB amendment (although it was a full IRB application) detailing our research questions, sample, recruitment strategies, incentives, methods, protocols, etc. The youth researchers also needed to be certified in Human Subjects Training. Since the youth took the lead in developing the research questions and methods, it was collectively agreed upon that I would write the IRB, they would approve it and then I would submit it. This is a process that continued throughout.

In everything I have written for this dissertation, I have asked and invited youth researchers to participate in a collaborative writing process with me. I would have preferred this.

However, they unanimously did not want to. They preferred instead, they “trusted me,” for me to do the writing and report back to them. This continued through my actual dissertation writing, where I sent every “findings” chapter I wrote for this dissertation to the youth researchers as soon as it was written so they had the opportunity to approve it; and they will each get a copy of the full manuscript.

During the last phases of research in which we moved through data collection into data analysis, only four of the initial ten youth researchers remained. One young man had moved back to his country of origin, one young man joined the army, the one young woman who was in college at the start of this project got too busy with school work and employment at the start of her second year that she couldn’t continue as of fall 2008, one young woman was struggling with school, and the other two young women were no longer interested after the education and research development phase. Of the four youth who remained throughout the whole project, three were in their senior year during the second half of this project and were very busy with college applications, so support with the college process also became a large part of the work of ProjectDISH in our second year.

But to reiterate, these four youth researchers did not want to write about our methods or our process—they explicitly and unanimously wanted me to do it and supported me in my dissertation process with text messages of encouragement, lots of hugs and tons of love and pride. What they *were* interested in was presenting at conferences, developing the conference presentations and talking to their friends and communities about this research. So, decidedly, this entire document is all my own writing. I describe in full our collaborative processes for analyzing the data at the end of this chapter.

You will also not see any writings *about* the youth researchers. This too is intentional. And I believe it was the cornerstone that has fortified the deep sense of trust the youth researchers have in me. From the first meeting we had as a collective, I made it clear to them that they were co-researchers and that any activity we did, discussion we had, or information they shared would *not* be used as data anywhere. They were youth *researchers.* And they took this role and identity very seriously and with much pride. This decision caused some phenomenal

"data" to be lost, to sit in files and notebooks forever silent. However, this decision also led to the amazing, extraordinary data yielded in this study. But it also allowed for a very raw intimacy with one another and a deep sense of community and shared responsibility. We rallied around the rigor and vision of our work, as co-*researchers*, and in doing so, in privileging this identity first, we were able to know each other in very personal terms, because that was always off-record, off the table, and always what was only volunteered. And because of our fundamental commitment to confidentiality and trust, we were able to be really vulnerable and open and allowed spaces for each other to take the lead of the project and different times, as each one of us was struggling with personal hardships—all without there ever being a threat of one's privacy. For example, we suffered four deaths in the personal lives of collective members during our year together: some to natural causes, some to hate crimes and some to violence. In this sense, we created a dynamic open space in which we all only ever needed to share as much about who we are as we each wanted. But so elegantly, we all unfolded like flowers in the first light of dawn, opening one petal at a time, one week at a time. And this issue of confidentiality was returned to, revisited and recommitted to throughout the whole time we have been together. They have seen that I have never breached this and it has allowed them to trust me fully in their absence and me to trust them reciprocally. While I am extremely interested in the development of their critical consciousness and growth as young, critical people as a result of participation in this project; for this dissertation, a "study" of them is off-limits. My allegiance and protection is solidly with them.

However, we have all grown immensely, together, over the past year; and I am interested in writing a reflexive, collaborative piece on our work together. But they are not interested or ready for this now. They are making college decisions and college visits, applying for scholarships and securing employment for the summer. But mostly, they are completely immersed in this moment, in March and April 2009, with pride in themselves for *their* research—and what they want to be doing is talking about it, presenting it, and sharing it in community, not in text. Our time for collaborative writing will come, our time for our group dynamics will come. But not now. And the choice was theirs.

However, I do include here, an individual piece written by Demeterios, one of the youth researchers. I met Demeterios during the first Poling for Justice meeting, which was two months prior to the start of ProjectDISH. From the very first moment I met him I was blown away at how brilliant and precocious he was: this young man's brain conceived of things and analyzed, as if instinctually, across contexts, disciplines and spaces. Soft spoken, quiet, gentlemanly, deeply loving and patient, he sits, consumes and observes; and when he speaks the words and ideas that come out are far beyond his sixteen—now seventeen—years. I remember telling him after maybe our fourth or fifth meeting together that he was precocious. After a discussion of what this meant, he got silent and you could feel him feeling those words moving through his body. He then said to me that the thought that was one of the nicest things anyone outside of his family had ever said to him. This made me so sad. I was able to see his wisdom and critical thought from the first moment I met him. Why hadn't any teacher ever said this to him before? But I was also, in that moment, extremely grateful. Grateful to be working with a young man who will certainly be—or rather *is*—a leader in his generation. The writing below is his autobiography of his participation in ProjectDISH, and *with his approval*, it is included here:

"*The image of the century, decade, year, month, week, or even the day will never be an image of the Bronx but that is where I am from. Birthed in the heart of the South Bronx and have no shame of it at all. Most people say when they hear or think of the Bronx that the first thing that comes to them is the new and old Yankee Stadium but for me it is the many people living in poverty. After thinking about the people living in hardship I can only imagine how they got there. Is it unfair treatment? Is it a lack of opportunity? Or lack of education? No matter the reason I promised myself that I would make no excuses for any of my failures throughout the life I choose. I also promised myself that I, Demeterios Gould, an African-American prodigy of this nation, will be successful in any path I choose to lead or follow.*

I generally think different than most of my peers about life and how everything a person goes through has an affect on their life. One thing I often think about is the success gap that this country always had and why it has not changed nevertheless. I never really had a chance to express my emotions towards the issue until I was introduced to a youth organization called

Polling 4 Justice. Polling 4 Justice was and still is an exceptional youth program but it was a little too broad in the issues of teens. In other words I wanted to be apart of an act that focused on the education gap in the country. I was later introduced to Jessica Ruglis and ProjectDISH. ProjectDISH explores schooling and how it correlates with your health.

Through the course of me being a part of ProjectDISH we have done so much together. We have done everything from educating ourselves, others, and more importantly we build a relationship that will last a lifetime. During our time together we have done so much to get where we are today. The youth portion of our group was certified to conduct focus groups and our research in general. We have completed six focus groups and even presented our information in the University of Pennsylvania. We have much more upcoming events and we plan to inform as many people as possible about the education gap throughout the city of New York and how it is similar to the rest of the country.

Overall it has been a great opportunity for me to participate in the ProjectDISH experience. I have learned so much throughout the year about the world and myself as a young man. By researching the issue of the education gap I realized how what I once believed was over still goes on today. I discovered this while speaking with my girlfriend (another ProjectDISH member) about our college plans. Looking at the "Educational Opportunity Program" (EOP) and the "Higher Educational Opportunity Program" (HEOP) which are two programs that are supposed to help students pay for college who are in more financial aid had a very shocking restriction. The two programs declared that the applicant cannot have a cumulative average of more than an eighty-eight (88 percent). Most academic scholarships do not except students with a minimum average but this program is holding students back from their academic potential. Honestly, how could a school ask a student to basically "dumb their self down" to be accepted? This is just one of the findings we have noticed throughout working together and we only plan to find much more.

As a result of working with ProjectDISH I hope that we can present our work so as many people can be notified. It is not a mystery that the U.S education system is a problem but it is a problem that many people do not show that it is one. If we the people do not do anything about it

then nothing will ever change. If we do not solve the crisis ourselves it would be good to know that we helped others realize this, and that it is their decision to decide if they want better treatment. Presenting our work can inspire others to follow and help change the success gap in this country. If I do not know nothing I know that ProjectDISH encouraged me, that it is hope and because of that I maintain my eighty-nine (89 percent) average as I plan to take my SAT's in May 2009 and head off to college in 2010."—Demeterios Gould, April 7, 2009.

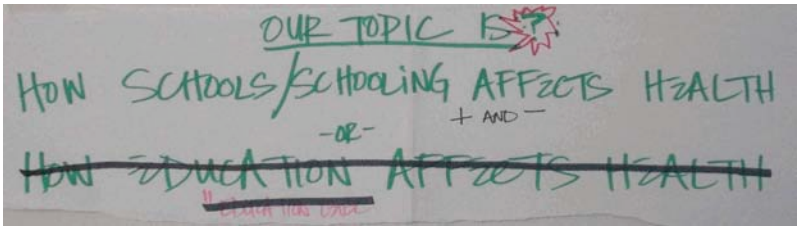
On this deeply moving note, the remainder of this chapter will focus on the research questions, methods and protocols of ProjectDISH's (my dissertation's) research, and not on our process.

ProjectDISH's Research

Research Topic

Perhaps the simplest and most elegant example of the sophistication youth researchers developed for understanding education as a social determinant of health is the following snapshot:

Figure 4.1 *ProjectDISH's Research Topic*



At the culmination of our first few months of critical education work, and as we moved towards developing our research questions, we first needed to decide upon our general research topic. We had in our research meetings been using the words schooling, schools, and education interchangeably (with respect to how each affects health); yet the content of our meetings and readings had on one hand focused on how education level affects health and on the other how daily experiences in school affects health. So when it came time to develop research questions, the youth researchers first understood that we needed to clarify our research focus. That is, they understood the deep and clear distinction between the two issues listed in Figure 4.1, above. In their view, the latter, "How education affects health" refers more objectively oneducation levels

and outcomes achieved or earned in school. That is, what the health benefits, resources, social supports, related income and occupational benefits, and health outcomes are by differential education levels earned (i.e., high school diploma, college graduate, etc.). On the other hand, the former, “How schools/schooling (both positively and negatively) affects health” refers to how the daily, accumulated schooling experiences affects one’s health. That is, before one can achieve any particular education level, there is first a process of *schooling* one has to endure to. And it is the experiences *in* schools that effect “your body, mind, health, soul and well-being. In addition to whether or not kids are gonna drop out of school” (Demeterios, field notes, June 2008).

Also helping to shape the direction of our research topic is the status of existing research. While much is written, in both the fields of education and health, about the: a) impact of maternal, infant and early childhood health on educational achievement; b) relationship of nutrition and physical activity to cognitive development, school performance and adolescent health status; c) benefits of vision and hearing screenings, school based health centers, coordinated school health programs, substance abuse prevention and treatment, mental health programs & resources, and programs for pregnant and parenting teens; d) violence and conflict prevention programs; e) HIV/AIDS and sexuality education, and f) chronic health and mental health conditions on absenteeism and school success, little information accumulates from the opposite perspective. That is, each of these bodies of literatures takes its starting point in health and reflects how health issues effect or intervene in (or can be intervened through) education. This dissertation has an opposing origin: that the process of schooling not only affects one’s educational outcomes but that school itself impacts one’s health, as this stance offers a new contribution to the field.

As a reminder: youth collaboratively developed the research questions, research design, research protocol and several of the methods of analysis.

Research Questions

Reflecting an ecological model for research design, these questions address relevant intersections of schooling and health across multiple levels: micro, meso, exo and macro (Bronfenbrenner, 1977). Our research questions are:

1. How do youth define health?

2. Are youth aware of how schools affect health? In what ways?
    a. What school factors promote health?
    b. What school factors are bad for your health?
    c. How do schools make students feel?
        i. What about schools make youth feel good?
        ii. What about schools make youth feel bad?
3. What are schools doing to keep students healthy?
    a. What classes about health (i.e. health class, sex education, physical education) are taught in school?
        i. What is being taught in these classes?
        ii. In what grades are they offered?
        iii. How often does the class meet?
        iv. How is class/course/content/requirement enforced?
        v. Does a certified teacher teach the class?
        vi. What should be taught?
    b. What health and social services or supports are there at school?
    c. What should the DOE be doing to improve our health?
4. What people experience the most “unhealthy causes” in school?
    a. Would / do people have better health if they have a better school environment?
    b. What is an ideal school environment?

In the last research question, the phrase “unhealthy causes” was developed by the youth researchers. It spawns from the PBS documentary *Unnatural Causes*, which focuses on the root causes of health and disease in the United States. For example, it explains how root causes of racism structure health disparities in infant mortality. Following this, the young people flexed their semantic muscles by using the phrase “unhealthy causes” to refer to the root causes in school (i.e., racism, poverty, policing, unqualified teachers, etc.) that cause educational disparities in achievement patterns.

Again, while the explicit aim of our research was to investigate the effect of school on health, our research questions and design also yielded data on the reciprocal effect of health on school. This will be discussed in the following chapters.

Research Design

We employed a mixed methods design, incorporating three primary research methods: focus groups, secondary data analysis and survey. Yet within each focus group, we utilized three different qualitative methods: mapping, focus group discussions, and narrative inquiry. We collected data about the relationship between school and health across several central domains, collectively addressing our research questions: information about health (i.e., health class), preventive care in school (condom distribution), health services in school (nurse or health clinic), actual bodily experiences in school, health hazards (asbestos, fights in the corridor), and psychological stress (testing, bullying, sexual harassment).

Focus groups were either facilitated by one or two youth researchers, one youth researcher and myself, or in the extenuating circumstance of scheduling conflicts by me solely. In all, youth researchers facilitated three focus groups and I facilitated the remaining three. Focus groups were conducted as single-sex focus groups, because the youth researchers felt that given the sensitive nature of some of the topics we are asking about, young people would be more likely to be forthcoming and talkative in groups of their own sex. Female youth researchers facilitated the female focus groups, and male youth researchers facilitated the male focus groups.

All focus groups were audio and videotaped (unless a participant did not consent to videotaping, in which case the session was only audiotaped). We felt video documentation was pertinent since we are interested the bodily and visceral impacts of school experiences, documenting participant's reactions and body language was necessary. Focus groups lasted two hours. Participants received a movie ticket for their participation, and refreshments were served. All focus groups took place at the Graduate Center of CUNY, with the exception of one focus group that was conducted at the partner organization's site in the Bronx.

The survey component of this research was not developed or administered by ProjectDISH, but focus group participants were invited to take the survey. The survey data used

for this study was created by the “Polling for Justice” project. “Polling for Health, Education and Justice” (this is its full IRB title) is a research project conducted through the Graduate Center of CUNY. I am a Public Health/Public Education Research Associate on this project. As a Research Associate, I was involved in every aspect of this project: including the survey development, administration and analysis. Since the survey aims to examine the connections between education, health and criminal justice, the survey questions will meet the exact needs for the quantitative portion of this research. Additionally four of the ProjectDISH youth researchers were also a part of Polling for Justice.

About Polling for Justice

Polling for Justice (PFJ), a multi-grant funded project, is an intergenerational, intersectoral research project that trained forty youth researchers who (along with graduate students and faculty, affiliated community organizations and several municipal agencies) developed a comprehensive survey of educational, health, criminal justice, safety and violence issues for youth living in New York City. (For survey, see Appendix). We are, as of the date of this manuscript, still currently surveying 1,000 youth and conducting a variety of localized focus groups. The focus groups excavate survey data and provide tailored data for policy and advocacy to our community partners to support their on-going campaigns, organizing and activism.

The project is a collaboration of the CUNY Graduate Center, Hunter College, the Urban Youth Collaborative, the Annenberg Institute on School Reform of Brown University and several New York City community based organizations in a coordinated effort to conduct youth-generated research that ignites action and inspires policy reform. The Principal Investigators are Dr. Michelle Fine, Dr. Nicholas Freudenberg and Kavitha Mediratta, The phenomenal Project Coordinator is Maddy Fox. In a context of shrinking access to public space, the expansion of test-based accountability in schools, widening social and economic disparities, and mayoral control of

education, this study examines the psychological, health and civic consequences of inadequate access to schools and health care. Consisting of a citywide survey of 1,000 young people in New York City, our data documents the ways young people (by race, ethnicity, gender, sexuality, immigration status, disability) are bearing the costs of health, education and criminal injustice and the ways they are resisting the consequences.

The Polling for Justice research collaborative began meeting in February 2008. Aligned with youth organizing and advocacy in New York City, we gathered in order to create a citywide survey of youth experiences and desires/demands of education, health, criminal justice, safety and violence. We are a participatory action research project (PAR) focused on assessing urban youth experiences of education, health (including sexual and reproductive), criminal justice and policing in their schools, on the streets and on mass transit in the five boroughs of New York City.

The research collaborative is made up of 40 youth and a handful of adults, aged 14 – 60 years old, diverse by race, ethnicity, socio-economic background, educational level, religion, sexuality, gender, disability and immigration status. We work across positions, creating and populating a research space with youth researchers and adult academics, community organizers, policy advocates, city employees, youth-led organizations and community groups. The work of Polling for Justice is guided by four core goals:

1. To document the experiences of a broad cross-section of high school-age youth with education, health, safety and juvenile justice in New York City;
2. To understand the particular experiences of sub-populations of young people—particularly across gender, neighborhood, race/ethnicity, sexual orientation, disability and immigration status;
3. To support youth organizing campaigns for expanded college preparatory supports and positive youth-oriented safety policies in public high schools serving low-income communities of color in New York City; and
4. To foster youth leadership development and student voice through youth participatory action research.

Qualitative Research

Focus Group Sample and Recruitment

Participants are youth ages 16-19 living in New York City. We sampled from three different educational demographic parameters: urban public school students, urban private school students and urban school non-completers. Although we had specific groups of student experiences we were recruiting, our sample is a convenience sample. Participants are recruited through community organizations, neighborhoods, schools and peers of the ProjectDISH research collective.

The sample age range was informed by the survey component of this dissertation, which stipulates participants be between the ages of 16-19. For analytic purposes, we decided that the qualitative component of this study should match the survey population so that we can generalize and triangulate findings. The table below describes the demographic characteristics of the focus group participants, by age, gender, ethnicity and New York City borough of residence.

Table 4.3 *Focus Group Participant Demographics*

Focus Group	Gender	No. of Participants	Ethnicity	Borough	Ages
1	Male	2	Puerto Rican, Indian (Punjabi)	Brooklyn, Queens	14, 16
2	Female	6	Black / African American	Bronx	16 (5), 17 (1)
3	Female	4	African American (2), White (Russian, 1), Puerto Rican (1)	Brooklyn (1), Manhattan (2), Bronx (1)	16 (3), 17 (1)
4	Male	2	Black / African American	Bronx	18
5	Female	2	African American	Bronx	17, 18
6	Female	6	Puerto Rican (2), Latina (1), Puerto Rican/Native American (1), Honduran (1), Indian (Guyanese, 1)	Bronx	16 (1), 17 (2), 18 (3)
Totals	Male = 4 Female= 18	n = 22	Black/African American = 12 White = 1 Indian = 2 Latina = 6 Mixed Ethnicity = 1 1st generation immigrant = 5	Bronx = 17 Brooklyn = 2 Manhattan = 2 Queens = 1	14 = 1 16 = 10 17 = 5 18 = 6

We conducted a total of six (N=6) focus groups and had a total of twenty two (n=22) participants within all of the focus groups. Eighteen of the focus group participants were female and four were male. While we recruited equally for male and female focus groups, in many cases

no young men showed up to scheduled focus groups for which they had verbally stated that they would attend. As a result, while interesting and important gender difference emerge from the findings of this study, caution must be used in generalizing the gendered qualitative findings as the male sample size is not of equivalence to the female sample size. A majority of participants live in the Bronx and are African American / Black.[17] Five participants were born in other countries and immigrated to the U.S. sometime during their childhood / early teenage years. No students self-identified or referenced themselves as anything other than heterosexual, although importantly, this question was not explicitly asked. A majority of participants were age 16, although they ranged in age from 14 to 18.

Of all of the participants, 19 had been in high school continuously (i.e., never dropped out), one was currently out of school, and two had dropped out but were back in school. Three of the participants were immigrants to the United States, two of whom moved to the U.S. in middle school knowing no prior English, and one who moved to the U.S. when she was a baby. Three of the participants had also attended high schools in other states at some point prior to moving, or returning back, to New York City.

All focus group participant names have been changed as well as any identifying characteristics. For example, names of states which participants had previously lived in have been changed to aliases as well.

Focus Group Methods

Within the focus groups we employed three distinct qualitative methods: life space mapping, focus group discussion, and narrative inquiry. (See Appendix for focus group protocol.) The youth researchers also invented a fourth method, based on the popular game “Charades” which proved to be an excellent focus group facilitation technique, but not a good data collection technique for our purposes. Although discarded, this extremely innovative method will be described in this section for it elucidates the creativity that youth bring into PAR and is also an

[17] Black/African American is indiscreet here because the focus group participants self-identified their ethnicity in this way. Additionally, several of focus group participants described their ethnicity as African American, yet had a parent who was Jamaican which would technically not ascribe them to the African American ethnic group. As a result the clustering for Black/African American represents the self-identification by the research participants.

important consideration when thinking through how to research embodiment: or that which cannot be seen. Focus groups lasted 2 hours; and were audio and videotaped.

1) Mapping

After beginning introductions, we began the focus group with a mapping exercise. Our goal of this method was toextract data that got at 'that which cannot be seen' or that for which there may be no precedent for having words for. In other words, how do we examine what school is doing inside the body? How do we get at where and how school affects one's body and health? After several brainstorming sessions and after reading two articles on mapping as a research method, we decided upon the following mapping prompt:

> "Draw an x-ray of what a normal day in your school looks and feels like in your body." (e.g., where are your daily school experiences located in your body and what do they feel like?).

Participants had twenty minutes to create their map, using poster board and a variety of crayons, colored pencils, markers and paint. After creating their maps, each participant then discussed and explained their maps to the entire focus group. Discussing the maps provided two things to the research design. First, it sparked topics for discussion amongst the focus group participants. Particularly because they were conducted from a feminist perspective (Wilkinson, 1999). So in other words, it spawned moments of *interaction* that are inherent to focus groups (Wilkinson, 1998a, 1998b; Kitzinger, 1994) Secondly, it provided construct validity for the analysis of the maps, since it insured that the ProjectDISH researchers interpretation of the maps matched the participants' intentions and meaning of their maps.

2) Focus Group Discussion

We decided specifically upon facilitating single sex focus groups, as youth researchers felt that participants would be more likely to share personal information regarding health, sexuality and gendered experiences in school with peers of their same sex. Focus group discussion questions were asked across nine different "in school" domains: educational settings; conceptions of health; psychological stresses (i.e., testing, bullying, sexual harassment); information about health; preventive care; health and social services; actual bodily experiences; health,

environmental and built environment hazards; and, comparative questions. (See Appendix for protocol).

3) Narrative Inquiry

At the end of each focus group, we asked participants to write their "Advice to the Mayor" on this topic. Specifically, we asked participants to:

> "Write a letter, poem, song, etc. to the mayor telling him what schools should have (or do better) in order to make students healthy."

With this narrative inquiry prompt we were aiming to move from documenting schooling experiences towards a deliberate envisioning of what young people desire and articulate as the components of schools that would make them feel healthy and good about themselves. Participants were invited to share their "Advice to the Mayor" out loud with the group.

4) "Charades": A Discussion of a Discarded Method

We had originally included in our focus group protocol a fourth qualitative method. This method, "charades," was fully developed and created by the youth. I include a detailed discussion of this discarded method for several reasons. Not only does it show the creativity and ingenuity of youth researchers, but it also highlights the need for furthering development of research methods that are both arts-based and that document embodiment.

The goal of this "charades" method was two-fold. First, like the mapping exercise, it aimed to document embodiment and that which cannot be seen. Second, it was a mechanism for documenting what students had (or lacked) particular educational experiences and opportunities. As with traditional charades, focus group participants selected an index card out of a bowl. Each index card had an "experience" or scenario to act out (See Appendix). These scenarios reflected various schooling and school environmental experiences. Participants were asked to make sure that they *had* the experience indicated on the index card. If they had not had that experience, they kept choosing cards until they selected a card with the experience they had. And "discarded" index cards were handed to the primary focus group moderator (a youth researcher). Participants were asked to act out the charade, and the secondary focus group moderator (myself or a youth researcher) photographed the acted-out charade. Meanwhile, the primary focus group moderator

documented the experiences that each focus group participant had and did not have—which was data on structural inequities in schools.[18] Each participant was to act out 1-2 charades, and the collection of charade photographs was to be made into a photoessay of the bodily impacts of school.

However, as we implemented this method in our first two focus groups, we found that it was not yielding us the data we had hoped for. Many of the pictures, when we reviewed them, looked generic; looked like they weren't expressing any clear emotion or experience. In reflecting on the first two focus groups, the youth researchers felt that the "Charades" worked really was as a focus group facilitation tool, but that it took too much time so we should discard it. So too did they feel that we had so many alternative methods already, and such a full question protocol, that the "Charades" may have worked better if it were the *primary* focus of data collection.

Quantitative Research

Survey Sample and Recruitment

All youth ages 16-19 living in NYC were invited to take the survey, as we are interested in youth experiences with education, health, safety and violence and criminal justice in New York City. Importantly, we were looking to over sample for particular groups of youth such as school dropouts, immigrants, LGBTQ youth and youth with disabilities. We are looking to have our sample match the demographic distribution of adolescents in NYC. Due to some of the content of the survey (specifically questions about sexuality and health) youth 16 and older were able to consent for themselves (assent). Given that we are interested in such a large sample size (n=1,000), and our methods of dissemination, gaining parent permission for 14- and 15-year olds seemed unfeasible, so we limited our survey sample to ages 16-19. All participants received a free movie ticket for taking the survey (See Appendix), which took approximately a half hour to complete. The survey was available in two formats: hard copy and on the Internet. The survey was formatted and created using Survey Monkey, the online survey development software (http://www.surveymonkey.com/). This survey was then made available online at the Polling for

[18] Specifically, each index card was numbered and next to each participant's name, the primary focus group moderator wrote down the numbers of the cards that the participant did experience as well as the numbers of the cards that they did act out.

Justice website, http://www.polling4justice.org/, and it was also downloaded and printed to distribute in hard copy. We employed distribution strategies to both reach the widest possible audience and to account for different modes of access and resources available to the many different groups of youth living in NYC.

Polling for Justice is a non-probability sample, and survey participants are recruited through partner community based organizations (CBOs), youth organizations, education organizations and after-school programs, municipal agencies, social service agencies serving youth, as well as through online social networking sites (PFJ has both a Facebook and MySpace page), and email blasts. Additionally, Polling for Justice researchers also distributed surveys at several youth activist events and street fairs throughout NYC. Because the sample is a snowball sample, word about the survey was also spread peer-to-peer, through word of mouth, and through mass flyering on the street. Once complete, paper survey data are then entered into the Survey Monkey computer program by the PFJ coordinator or by one of the youth researchers.

As of the date of the defense of this dissertation, the Polling for Justice survey is still open, and will remain so through June 2009. As such, the demographic and participant information and data presented in this manuscript will reflect preliminary data of Wave 1 of the survey: a term that refers to the first 550 surveys completed.

Survey Demographics

With a preliminary total n = 550, in this section I briefly report on survey demographics. Respondents are from all five boroughs of NYC, although most are from Brooklyn (47.6 percent), followed by Manhattan (24 percent), Queens (15.9 percent), the Bronx (12.2 percent), and Staten Island (0.4 percent).[19] And the average age of survey takers is 16.8 years. Over twice as many survey respondents were female (69.2 percent) than male (30.8 percent). Seventy seven percent of survey takers were born in the United States, and the remaining 23 percent of youth are immigrants who were born in 34 different countries. Of the 34 countries that respondents are from, most immigrants are from the Dominican Republic and Bangladesh (5.1 and 2.7 percent of the survey takers, respectively). Four percent of survey respondents are White, 34.2 percent are

[19] Although not reflected in this analysis, we have just received an additional 150 surveys from youth living the Bronx.

Black or African American, 35.8 percent are Latino/Latina, 2.2 percent are Afro-Caribbean, 11.7 percent are Asian, South Asian or Pacific Islander, 0.7 percent are Middle Eastern, another 0.7 percent are Native American / American Indian or Alaskan Native, and 10.8 percent are of multiple ethnicities. Nearly ninety percent (89.7 percent) of respondents identify their sexual orientation as straight, while 10.3 percent identify as LGBTQ. Few respondents identify themselves as having a disability (3.6 percent). Nearly half all youth respondents are employed: 9.2 percent are currently working full-time and 41.7 percent work part-time, while another 29.7 percent of respondents identify themselves as currently looking for work but not working. One quarter of the respondents identified that their mother had not graduated high school, 21.9 percent report that the highest level of schooling their mother/female guardian completed was high school only, 42.1 percent report their mother had some college, graduated college or had an advanced degree, and 11 percent were unsure.

Survey Method[20]

> Intersectionality refers to particular forms of intersecting oppressions, for example, intersections of race and gender, or of sexuality and nation. Intersectional paradigms remind us that oppression cannot be reduced to one fundamental type and that all oppressions work together in producing injustice (Collins, 2000, p. 18).

The Polling for Justice survey was developed specifically to look at how the systems of education, health, and criminal justice *intersect* and operate in youth lives.

The survey is grounded in the recognition that discrete 'sectors' of public life—health, criminal justice, education, and economics—are not separated in the lives and communities of these youth but bleed into and intersect with each other. As Ginwright and his colleagues (2002) note, youth do not exist in the context of programs, rather they exist in the context of their communities.

Emerging from the field of feminism, particularly black feminism, in the 1980's, intersectionality "is an analytic approach that simultaneously considers the effects of multiple categories of social group membership (e.g., race, class and gender), [and] takes place at

[20] A version of text on intersectionality in this section will be published in Fox, M, Mediratta, K, Ruglis, J, Stoudt, B, Shah, S & Fine, M. (forthcoming). Critical Youth Engagement: Participatory Action Research and Organizing. In: Sherrod, Torney-Purta & Flanagan (Eds.). *Handbook of Research and Policy on Civic Engagement in Youth.* Wiley. The author, Jessica, wrote the original text for the book chapter herself.

multiple levels" (Cole, 2008, p. 444). Intersectionality was conceived of as a way to understand and theorize social identity(s). Kimberle Crenshaw (1995) outlines two components of intersectionality. The first, *structural* intersectionality, interrogates how the diverse structures that shape one's experiences intersect to create one's social reality and how these structures are located at the nexus of race, class, gender, sexuality, able-bodiness, and so on. The second, *political* intersectionality, "describes the ways that those who occupy multiple subordinate identities, particularly women of color, may find themselves caught between the sometimes conflicting agendas of two political constituencies to which they belong (Crenshaw 1995), or are overlooked by these movements entirely" (Cole, 2008, p. 444). Indeed there is interesting new research from Canada in which scholars are exploring how a paradigm of intersectionality can help to "understand and respond to the 'foundational' causes of health and disease" (Hankivsky & Christoffersen, 2008: 271). YPAR and youth organizing embody a paradigm of intersectionality, providing a lens into the "foundational causes" of oppression and disenfranchisement in youth lives.

What we learn from an intersectional approach is that social realities and successful interventions (whether health or education related, or dealing with domestic violence, for example) are rooted in the *intersecting* institutions, opportunities, constraints, barriers, and access one has to participate in, and be treated respectfully by. The systems that structure our lives are rooted in political agendas and modes of operation that are raced, gendered and classed.

The impact of an intersectional approach is three-fold. First, intersectionality expands the possibilities for generating data, standardized measures, and theory that more accurately reflect the realities of youth lives and the mechanisms of (including alternative modes and barriers to) youth engagement, especially for youth on the margins of society or for poor youth and youth of color. Second, participation in YPAR validates young people's experiences and desires, reducing the psychological and political dissonance that can undermine longer-term engagement in public life. Third, an intersectional approach yields opportunities for supporting the development of sophisticated, interdisciplinary, and innovative thinkers who can act on the broader stage of public

policy-making and political debate in increasingly powerful and influential ways.

In is in this vein that we use Polling for Justice survey items related to education, health, sexuality, and demographics to support our qualitative research.

Data Analysis

In this section, I detail the multiple data analysis strategies employed for all data collected, beginning with qualitative methods of analysis before moving on the quantitative methods. Overall, we employed a grounded theory approach to analysis for both quantitative and qualitative data (Charmaz & Mitchell, 2001; Charmaz, 2006; Glaser, 1994; Strauss & Corbin, 1990). An iterative process, grounded theory begins by raising emergent questions to help guide the research, but which are neither limiting nor fixed.

Qualitative Data Analysis

Since not all youth researchers were able to or had a desire to facilitate focus groups, of the four youth researchers who remained with the collective during this phase, we began by watching in full one focus group. This allowed all youth researchers to experience a focus group and to have a grounded perception of what they were to be analyzing.

1) Maps

ProjectDISH developed mechanisms of analyzing the maps collaboratively. We analyze the maps in three different ways:

1. Quantification of annotated body parts
2. Themes
3. Correlation

Quantification of body parts. This method of analysis was developed by the youth themselves. They decided that the first thing we needed to do was to figure out how many times each body part was represented across all maps. However, they thought that we should only count the number of body parts that participants “talked about”, meaning the body parts that students wrote descriptions of or drew graphic representations of on their maps, or that they talked about when describing their maps in the focus group. We then called these the “annotated body parts.” The youth felt that we should *not* count all body parts drawn on the map, only the

annotated ones, because since we had asked participants to draw an x-ray of their body, they might have drawn some parts to illustrate the x-ray their body, and not because that part was necessarily meaningful. So, we defined an annotated body part as any body part on the map that was commented on either textually or graphically (i.e. with symbols or images). Figures represent the number of maps on which the body locations were specifically mentioned/annotated by the participants. (E.g. This is *not* a count of the body parts that were drawn, as we decided that some of what dictated how the body was represented was the participants artistry/creativity/insecurity in their artistic ability. Only a few instances made us think that how the body was represented was of interest, and these dilemmas are described below). Additionally, while there were twenty-two focus group participants, we only have twenty maps. This is because in the very first focus group (which was a male focus group) we tried an alternate version of the mapping exercise. The numbers below represent the number of maps on which each specific body part was annotated, as well as the subsequent percentage of total maps, which identified this body part as being affected by school. A graphic designer then created an illustration of our data (Figure 7.9).

<u>Quantification (total number of maps = 20)</u>:

Head / Brain: 20 (100 percent)

Eyes: 14 (70 percent)

Stomach: 9 (45 percent)

Mouth: (40 percent)

Back: 7 (35 percent)

Hands/Fingers: 5 (25 percent)

Body: 4 (20 percent)

Legs: 4 (20 percent)

Face: 3 (15 percent)

Heart: 3 (15 percent)

Lung/Chest: 2 (10 percent)

Shoulder / Arm: 2 (10 percent)

Ears: 2 (10 percent)

Nose: 2 (10 percent)

Butt: 2 (10 percent)

Neck: 1 (5 percent)

Penis: 2 (out of 2 male maps, 100 percent)

Additionally, we were also interested in the variants of what was left out, indicating, perhaps, the experience of feeling silenced or invisible. While we did not include this in our analytic scheme because they were not annotated, and therefore we cannot be certain of the participant's intention (i.e. was it left out because they don't feel they are a good artist, or because it is truly a symbolic expression), but the youth researchers (and myself) nonetheless found the following information from the maps interesting:

- 2 maps had no eyes, one map had no body
- 1 map with no body
- 1 map with no face
- 1 with no mouth
- The visual representation of mouths was variant:
    - Smile: 2
    - Frowns: 4
    - Neutral: 6
    - Tongue out: 1
    - Fake smile: 6
    - Smirk: 1

Themes. After quantifying the locations in the body that school affects, the youth decide that we should first create a list of all of the words and phrases that participants used to describe what particular body parts felt like and why. For this list, we included items that were written/drawn onto to maps as well as things that were said in the participants' verbal explanations of their map. From this itemized list, we then organized a list of repeating themes that emerged from the maps. This then helped us develop our coding schematic for the focus groups. After this preliminary analysis, I then created an Excel spreadsheet of the map data. In

essence, I created a transcript for the maps, which included: a) all of the text from each map, and b) all of the text from the focus group transcriptions in which the participants were explaining their maps. Following this, I then coded the content in the Excel spreadsheet in two ways: by body part represented and by schooling experiences expressed on the maps. I did this coding and database development alone because the youth did not want to. They instead developed the analysis scheme, and approved what I was going to do in isolation, and then everything that I did alone was reported back to them for approval.

However, we also then organized all of the annotations for each body part by body part. So, for example, we created a list of all of the things that participants identified with their head, eyes, mouth etc. When then categorized these and had a graphic designer develop illustrations for each body part that contained both an image of the body part and the causes of what about school affected that body part (Figures 7.10-7.23).

Correlation. We compare our findings from the maps to existing health data. Specifically, we explore the possibility of any correlation by demographic groups to leading causes of death.

2) *Focus Groups*

All focus group audiotapes were transcribed using GMR Transcription service. After receiving the transcripts back from this service, I listened to all audio files as I read through the transcripts to check for any errors. All focus group transcripts were imported into Excel, where I developed an original coding program. Focus groups were analyzed by grounded theory coding, following the procedure from Auerbach & Silversten (2003): research concerns, raw text, relevant text, repeating ideas, themes, theoretical constructs and theoretical narratives. Approaches to analyzing the transcripts for rigor, reliability and validity were taken from Kidd and Parshall (2000). After reading these texts, I developed a workshop for the youth researchers on how to analyze and code transcripts.

Youth researchers were involved in transcript analysis as well. Initially, we all watched in-full one focus group videotape. While watching the video, youth wrote down notes on the repeating ideas and themes that emerged, and then followed this task by writing up their individual interpretations of the themes (i.e. their own theoretical narratives). This was the first

stage of the data analysis for focus group discussions. This helped the youth become familiar with the material and also to get comfortable with listening and thinking about our research. It also allowed the to feel as if there was no “right answer” for themes or ideas. After I received all of the focus group transcriptions back, each youth researcher read one transcript in full, highlighting relevant text and creating lists of both repeating ideas and emergent themes. After this task, as a collective we organized all of the themes into one “master list” of themes. I then, by the same process describe above, transferred all focus group transcripts to an Excel spreadsheet and coded all of the transcripts myself, utilizing the themes and codes that we developed collaboratively. Again, the youth did not want to do this task. Instead we continued our trusted process by which I would code the data and present everything that I had done back to them for approval. Personally, I listened to each focus group audio file twice and I read through each transcript five times. The first time I read the transcripts was to get a sense of the data in textual form, without any coding. Then I went through and coded them myself. Then I entered the transcripts into the Excel spreadsheet, and then I went back to the hardcopy of the transcript to double check the codes I entered with the codes I wrote on the hardcopy for my own internal validity. Then the fifth time, I double checked the transcripts in the Excel file against the youth researcher codes and added any of their codes that I missed.

After this was done, I saw a list of themes that emerged and I presented the data back to ProjectDISH youth researchers for discussion and approval. After they approved what I had done and my synthesis of the data, I forwarded these themes into theoretical constructs, and then reported back to ProjectDISH these theoretical constructs for explanation, discussion and approval. The youth researchers were not only approving of our process and what I had done, but they were also approving the content of the findings, member-checking the validity of my interpretations. In this sense we feel we have very valid data, as not only were the youth involved in the design and data collection, but they also were involved in the analysis schemas and had final say in validating and approving findings. Also, as a way to even further ensure our findings, I would bring up discussions of data in weeks following when they had analyzed and approved it. This way, we had discussions about certain “issues” and they were able to share their own

perceptions and experiences about the data—providing another layer of ensuring validity. Importantly, we did not present back to our focus group participant during the analysis phase, as the youth researchers felt very confident that what the participants were saying was indeed a completely accurate reflection of their lives, schools and realities.

3) Advice to Mayor

"Advice to the Mayor" letters were analyzed via thematic content analysis. After reading through each participant's letter, we analyzed the data by repeating themes and ideas.

Quantitative Data Analysis

Survey

Following the same PAR philosophies to analyzing qualitative data, I extend this approach to analyze and interpret the quantitative data. However, quantitative data analysis was done with the Polling for Justice research collective, *not* ProjectDISH. However, all of the findings that were found with this quantitative data were used to support the qualitative research findings, themes, and constructs that ProjectDISH youth researchers had approved.

Findings for the quantitative data analysis are informed by the interactions and epistemologies produced through the PAR process. Like the content of survey, we (the Polling for Justice collective) analyze the data at the *intersection* of our research orientation, participatory action research, PAR, and our analytic technique Exploratory Data Analysis, EDA (Tukey (1977), Cleveland (1985, 1993), Hartwig & Dearing (1979) and Tufte (1983). Working collaboratively as a collective of youth and adult researchers, we use selected statistical techniques (i.e. cross-tabulations, descriptive tables and graphs in SPSS) in order to look at the relationships between "our variables of interest and important demographic indicators" (B. Stoudt, personal communication, March 9, 2009). Brett Stoudt, our PAR statistician expert goes on to explain:

> I would consider this stage an inductive approach to quantitative analyses that in some ways parallels a qualitative process and I think is much more complimentary to researchers like us with qualitative sensibilities. It provides opportunities to be most comprehensive with the data and uncover the underlying meanings in the data; though it is also very time consuming (as I'm

> sure is apparent given the vast amount of tables we have so far!) and provides few indicators to determine "statistical significance" (besides our own conceptual/theoretical framework). This approach stands in contrast to more traditional deductive-theory driven-hypotheses testing quantitative approaches which are more sophisticated (in the technical sense) though top down oriented…The idea is that you stay as close as you can to the observed data through graphs, cross-tabulations and other forms of simple descriptive statistics—being weary of averages and other methods of central tendency until you've thoroughly paid close attention to percentages and distributions (B. Stoudt, personal communication, March 9, 2009).

All findings discovered with the Polling for Justice team, which for me was primarily collaborative analysis with the amazing adult researchers, Brett Stoudt, Maddy Fox, Michelle Fine and Valerie Francisco, were brought back and presented to the ProjectDISH youth researchers.

Major Findings

Across all sources of data, we in ProjectDISH find eight categories of major findings, each of which includes data on both the positive and negative impacts of school on health. Detailed data and results will presented in the next three chapters:

1. Built Environment & School Design
2. School Food and Food Policies
3. Academic / Educational Issues
4. Safety, Abuse & Violence
5. Social & Mental Health Services and Resources
6. Health & Sexuality Education, Resources and Programs
7. Psychological Consequences of School
8. Physiological Consequences of School

Conclusion

This chapter outlines ProjectDISH's history, research design and methods of analysis. Our research is grounded in an investigation of the ways in which schools and the process of

schooling affects health; and we are guided by the four following research questions: 1) How do youth define health?, 2) In what ways to schools affect (promote and harm) health?, 3) What are schools doing to keep students healthy, and 4) What students experience the most “unhealthy causes” in school? Employing a mixed methods, participatory action research project, we conducted a series of focus groups, in which we utilized a variety of qualitative methods. Additionally, we utilized survey data from a sister YPAR project, Polling for Justice.

In the next three chapters, I will present results and findings from the data.

Chapter 5.

DISPOSSESSION BY DESIGN AND VIOLENCE

> I'm used to it. I go through it every day. I walk in the whole place. I see real NYPD officers with guns, with bulletproof vests. Is that necessary? Like, we're getting scanned. There's a whole bunch of them bulletproof vests, the full armor suit. Like you're not ganging up for war or something. So I'm saying, what type of environment is that? That's discouraging. And that's how kids fall into the wrong crowds. They're scared, so they see a group of popular kids who are obviously respected and feared, so they say you know what? Let me associate myself with them and maybe I don't have to worry about that. And that's how gangs start, you know, gang-raping starts. That's how a lot of things happen. Look at the environment we're in. Messed up bathrooms, cops, scanning – it feels like we're in jail already. Like, sometimes, there's no heat in classrooms. Come on! Messed up, nasty food. If you ask anybody that's been to jail, they describe what we describe if we say a day in the life of public high schools in New York. Budget cuts. How are you cutting? Do we have to have books?
> —Jermaine
>
> I commend anybody that graduates from a public high school. Even if they graduate with a 65 GPA, you came out of the dumps. You made it.
> —Jermaine
>
> Everything revolves around health for everything.
> —Ayana
>
> Mr. Mayor, One thing you can do to make us healthier in the long run would be giving NYC schools a higher budget. With a better education, people get better careers and can afford one of this country's insane health care plans or insurances and more frequent check ups. It all goes hand in hand.
> —Tracy

Structural violence is a term used "as a broad rubric that includes a host of offensives against human dignity: extreme and relative poverty, social inequalities ranging from racism to gender inequality, and the more spectacular forms of violence that are uncontestedly human rights abuses" (Farmer, 2004, p. 8). In short, structural violence refers to violations of social, economic, civil and political rights and is "a set of historically given and, often enough, economically driven conditions…[that] guarantee that violent acts will ensue" (Farmer, 2004, p. 9). In this chapter I extend this term to the context of schooling. The data presented within this chapter emphasizes one or more of the ways that urban schooling can be a form of structural violence (Galtung, 1969; Farmer, 2005) or symbolic violence (Bourdieu, 1992) in itself.

Another way to think of the data in this and the following two chapters is by the ways in which *all* four types of violence that can be applied to schools (Harber, 2004) are documented as

experience in this study. These four types of violence are *direct violence, indirect violence, repressive violence and alienating violence* (Harber, 2004, p. 44). *Direct violence* involves "deliberate injury to the integrity of human life", here seen in instances of fighting, bullying and interactions with school security. *Indirect violence* is a violation of the right to survival. In this chapter and the remaining chapters, we will see this achieved through "omission or lack of protection" from hunger and disease (specifically STIs and HIV/AIDS in this study) and as "mediated violence" through a harmful and hazardous environment. *Repressive violence* is deprivation from fundamental rights, and in the context of the data we see this as deprivation from the right to an education for pregnant and parenting teens or for youth subject to school discipline and policing actions. Lastly, *alienating violence* "consists of alienating working conditions, racism (and presumably sexism), social ostracism, cultural repression and living in fear" all of which are documented in this study (Harber, 2004, p. 45).

In addition to the notions of structural and symbolic violence, this chapter will report data through the lenses of *educational dispossession* (Fine & Ruglis, 2009), violence and neglect (Harber, 2004) and *miseducation* (Woodson 2000/1933; See also Chomsky, 2000). This chapter will specifically detail findings that elucidate the structural dynamics of schools and attend to the research questions concerned with what about school promotes and harms health, how school makes students feel, and what the unequal distributions of schooling experiences are. Woven throughout all of the findings are the ways in which school wears on or protects one's psyche, and illuminates the principal role that *relationships* and *trust* play in schools in causing or mediating stressors—relationships between individual students, between students and authority, between students and academics, and between groups of students. Discussions and supporting literature on the *how* these educational experiences and stressors affect the body will not be presented in this chapter, as they will be taken up in great detail in Chapter Seven.

I organize the layers of data on structural and symbolic violence, dispossession and neglect that youth face in schools according to Urie Bronfenbrenner's (1977, 1993) ecological model of development. This is useful and relevant for several reasons. First, and for obvious reasons, this study is concerned with human development. Arranging data in this frame allows for

it to be dynamic; thinking not about themes of research findings but rather sets of interactions, relations and experiences that structure youth development. Second, this model is concerned with the issue of the consequences of one's ecology over time, a point that will be taken up in depth in the remaining chapters. Framing data by an ecological model now sets up congruence with what follows. Third, each of these layers reveals the ways in which structural and symbolic violence permeate through schools and penetrate youth's bodies.

Bronfenbrenner's Ecological Model of Human Development

This chapter presents the data organized by Bronfenbrenner's (1977, 1993) ecological model of human development. This model offers a sociocultural perspective on development. It views development as a progressive, reflexive *process* in which a human is in a dynamic relationship with the informal and formal changing environments (both immediate and distal) in which it lives, including the relations, settings and larger social contexts into which it is embedded. Before introducing the data, I first detail each of the subsystems of this ecology followed by a discussion of how each is appropriated in the educational context. Importantly, each level offers embodied consequences for individuals. For example, the ideologies of any given society don't merely swim in the outer macrosystem in which one is situated: rather this ecological model asserts that those ideologies, either directly or indirectly, affect the individual.

In this chapter, I offer the ways that each level *directly* affects and becomes embodied by youth. For example, while students have one-on-one interactions and relations with school safety officers, to me, these interactions are not part of the microsystem of schooling. Rather they are the corporeal costs of larger macrosystem forces and ideologies that structure the interactions youth *have to have* in school each day. And of course, all of this—even the macrosystem—reside in the context of global capitalism, neoliberalism, imperialism, racism, cumulative concentration of poverty, widespread violence and warfare, a rapidly changing ethnic domestic and global demography, and finance inequity.

A *microsystem* "is a pattern of activities, social roles, and interpersonal relations experienced by the developing person in a given face-to-face setting with particular physical, social, and symbolic features that invite, permit, or inhibit engagement in sustained, progressively

more complex interaction with, and activity in, the immediate environment" (Bronfenbrenner, 1993, p. 39). In the context of educational institutions, the microsystem can be defined as direct, *youth controlled*, relational and interpersonal interactions youth have with people in the school, e.g., teachers, peers, guidance counselors, etc.

A *mesosystem* "comprises the linkages and processes taking place between two or more settings containing the developing person (e.g., the relations between home and school, school and workplace, etc.). In other words, a mesosystem is a system of microsystems" (Bronfenbrenner, 1993, p. 40). In the context of this study, I define the mesosystem as the linkages of and processes between the adult and youth systems in the school. For example curriculum and pedagogy is part of the mesosystem, since it reflects the relations between student patterns and teacher social roles, for example. The mesosystem incorporates things that affect the learning environments and practices in a school, classrooms, guidance counselor offices, etc.

The *exosystem* "comprises the linkages and processes taking place between two or more settings, at least one of which does not contain the developing person, but in which events occur that indirectly influence processes with in the immediate setting in which the developing person lives (e.g., for a child, the relation between the home and the parents workplace)" (Bronfenbrenner, 1993, p. 40). I use the exosystem to describe the linkages between a student's school and those events and decisions that occur at the New York City Department of Education, which indirectly influence the school setting. In this sense, the exosystem encapsulates the structural environment of a school.

The *macrosystem* "consists of the overarching pattern of micro-, meso-, and exosystems characteristic of a given culture or subculture, with particular bodies of knowledge, material resources, customs, life-styles, opportunity structures, hazards, and life course options that are embedded in each of these broader systems" (Bronfenbrenner, 1993, p. 40). This is used to reflect larger ideological beliefs and educational operations that structure the material resources, bodies of knowledge, disciplinary technologies and customs that shape the contemporary climate of public schools. Included in discussions of the macrosystem, I intentionally include the *relational*

and *embodied* byproducts of such regimes, as connecting the micro with the macro is what gets left out of discourses and rhetoric arguing for such practices to begin with.

Lastly, is the *chronosystem,* which extends the ecological model for human development "into a third dimension": it is the z-axis. Encompassing time, "a chronosystem encompasses change or consistency over time not only in the characteristics of the person but also of the environment in which that person lives" (Bronfenbrenner, 1993, p. 40). The notion of the chronosystem, or the accumulated effects of such educational operations *over time*, gets taken up more explicitly in the next two chapters and particularly in Chapter Seven.

Much of the data and analyses presented herein are in the voices of the youth participants[21] and youth researchers themselves—at times at great length. Their narratives from focus group discussions so beautifully document *and* analyze their surroundings at the same time. So too do they state things so profoundly clear, that an additional explanation is often not warranted. It is also an editorial choice to privilege reality as a matter of perception, and a political choice to provide a medium for youth voices to speak, to scream, about the issues affecting life and death. Collectively, these findings communicate penetrating messages to young people about their worth: I ask the reader to please consider in their digestion of this text, what the consequence of this is. In many ways the research presented in this chapter virtually mimic the findings in a 2004 study by Fine, Burns, Payne and Torre. With a whole nation in between New York City, where this study takes place, and California where that one did, and with entirely different research questions, methods and purposes, we end up perfectly aligned. These conditions and social ideologies stretch across all geographies of urban schooling.

Here in, I and we in ProjectDISH let the data speak for themselves.

Microsystem of Schooling

This section reveals the youth controlled or youth centered relational and interpersonal experiences in schools. They're relationships with peers, teachers and guidance counselors that either the students have control over or that the people in the school or that individual schools policies take initiative for forging these relationships.

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[21] All names of participants, their schools and related identifying information have been changed. However, the names of the ProjectDISH researchers are their real names. IRB approval was sought for this.

Teachers

Principally, students identify positive *relationships* with teachers (and authority figures in school in general) as defining features of happiness, success and feeling good. And it is documented that "the personal dynamics among teachers, students, and their parents, for example, influence whether students attend school and sustain efforts on the difficult tasks of learning" (Bryk & Schneider, 2002, p. 5). Deborah Meier in her renowned book *The Power of Their Ideas* (1995) also credits that building trust and healthy social relationships were central to the extraordinary success her school. I cannot highlight enough the importance of this for consideration in teacher, principal, counselor and social work education programs and in the training of police officers and school safety agents.

Students identify *recognition* as an indelible force to their sense of belonging in school: teachers and staff who know their names and adults who welcome them and say hello when they walk by. Denial of recognition is an extreme form of disrespect and "of course trust presumes mutual respect" (Meier, 1995, p. 132). In a discussion of the essential nature of trust to healthy relationships and school success, I offer the following exchange of two young men in our study that attended schools without school security and metal detectors.

Jessica: Why doesn't there need to be security?

Carlos: Because everyone trusts each other.

Darvesh: Yeah. Yeah, definitely.

Jessica: Do the teachers trust you?

Carlos: Yeah.

Jessica: So trust. The teachers trust the students. Do you guys trust your teachers?

Carlos: Yeah.

Darvesh: Yes, we, at our school, we call the teachers by their first names.

Jessica: What are things about your school that make you feel welcome or that make you feel important?

Darvesh: When I walk in the school, there's a security guard there and he's like, he's friendly with everyone mostly. Like every time you walk into our school, you have to show your I.D. and at some point, not in every place, you've got to sign in, so if he knows you, like he tells you, he don't let you like waste your time. He just lets you walk in, but he's friendly. Oh yeah, in my school, every teacher or staff member passing by you will at least greet you. Even though the person don't know you, they will at least say hi to you.

Carlos: All the teachers in my school know my name, since it's a small school.

Interestingly, the practice of students calling teachers by their first names was also implemented in Deborah Meier's Central Park East middle school—*explicitly as a policy to build trust.* Students yearn for teachers and staff who are friendly and who acknowledge and help them. Darvesh remarks: "I mean friendly staff. Basically, you could ask a teacher at any time for help, and he will help you. And even though a teacher don't know you – there's a teacher in my school – he's old, but he's good at math. And he's doing tutoring or in class, I could go up to him and ask for help, and he would help. He don't have any requirements and conditions to teach any student." Carlos also remarks "The good things, things about my school that makes me feel good is that they make me feel welcome every time I walk inside the school. The teachers treat students very good and they give extra help to people that need it." Conversely, in another focus group, Lisa, Maritza and Brittany describe what frustrates, angers and dis-empowers them about the teachers in their school:

Lisa: Teachers that don't listen to you. If you hand in a homework assignment and you know you handed it in and they lost it, they're going to blame you. You know you handed that in and they're going to fail you or not listen to what you have to say, and that's annoying. I feel like they have too much power. They

abuse it.

Maritza: Yeah, especially if you have a problem with a teacher, and you know, teachers are friends with other teachers. They bring it up to the other teacher, and then this other teacher will give you a whole bunch of problems, and then you just want to say something.

Lisa: But you can't say anything because they'll suspend you.

Maritza: I only disrespected a teacher twice in my whole three years of high school, but after that, never again.

Brittany: When you have a point – like what she said. When you argue with a teacher and then you really prove them wrong, you know that you really did something and then you be like I know I did it and then you have to prove it. Then they feel real dumb because they didn't want to believe you and they didn't want to look over and try to find the stuff or talk about it. That makes me feel good because if I know I did something and I know I did it and I know I studied for it really bad and I got it right and everything. Losing stuff and then you're telling me I didn't do anything good or anything like that. I prove myself right and I feel good.

These conversations show the fundamental component of student-teacher relationships is *trust*; and when that gets broken it causes stress for students. This is confirmed in another NYC based study in 2003 of nearly one thousand youth who had negative experiences with teachers or police, where findings suggested that urban youth do feel mistrusted by adults (Fine, Freudenberg, Payne, Perkins, Smith & Wanzer, 2003). This stress and powerlessness caused by the lack of trust in the authority figure bleeds resistance on the students' part as the fight to assert that they are deserving of being trusted. And it shows how deeply these relationships affect their emotions—as their only form of power is to hopefully make the teachers *feel* what they felt.

Bullying / Harassment / Fighting

Turning now to a discussion of peer violence, we examine another monumental stress for youth in schools. In addition to bullying and harassment, many fights stem from gossiping. Naomi says “there's a lot of gossip because it's a small school so stuff goes around quick, and like if something happens to somebody, like if they was to say this person that hit my car or something, or this person is pregnant, like they're in your business a lot.” ProjectDISH youth researchers recently told me, the “root of all problems is gossip.” Diana’s statement confirms this: “Yeah, the gossip is crazy. I don’t even know people and I’ll just be hearing so much stuff about them. The gossip is crazy in that school.” As does Kamala’s: "I think drama plays a huge part in school." Brittany also states that “People just going around with, like, rumors and stuff that they don’t even know nothing about. They say things to really get you really agitated. When you know you’re not supposed to do something, you end up doing it anyway and then you end up having conflicts physically and sometimes emotionally.” Polling for Justice (PFJ) survey data reveals the outcome of these conflicts, where 7.7 percent of youth reported that in the past thirty days, they had gotten into a fight in which they got injured. And 14.7 percent of youth report injuring someone else in a fight in the past thirty days.

Stresses about the “drama” and fighting persisted throughout focus groups, and when asked about school supports and mediation to deal with these issues, many of the students did report peer mediation programs in their schools. However, students often cited their ineffectiveness.

Maritza: They try to do mediation in my school, but that doesn’t work.

Lisa: Yeah, they did it in mine. People still fight.

Maritza: I don’t know if they do it the same in your school, but they take you and the person you have a problem with in the same room and ya’ll talk about it. But that doesn’t change anything because in the end, you don’t have to like that person. That person could either do something to hurt you or you could do something to hurt the other person. It doesn’t matter either way.

Lisa: Once you walk out of that room and there are no adults around, people don't really care.

Maritza: It works for some people but not for everybody. For example, if you upset me, I'm not going to stop till I see you hurt. That's the way I think. The other person may not think like that.

Brittany: Other people are always bringing other people to fight their battles with them. That's not going to help. Even if you do bring it to the attention of the dean or principal or anything else, it's not going to change much, as she says.

As we can see, existence of a program does not automatically warrant effectiveness.

Youth Solutions for Peer Issues

Youth solutions for dealing with bullies include reinforcing *consequences and relationships*:

> They should have different consequences. Like instead of just suspending them, they should like really try to teach them a lesson. One of the consequences should be is if you bully someone, they should put that bully in a really bad school, like with bigger kids to see how he feels. But I think that it should happen, not by the teacher, but like the relationship among students, like they should do something for the bully, to treat him that way so he could understand among the students.

Carlos's form of consequences and punishment are not punitive in tone or intent rather is solution for putting a bully with other bullies is a matter of *feeling and emotion.* That is, his construction of altering bullying behavior is empathy, relationships, attachments and accountability to other students, and the ability to see and feel things from someone else's perspective. Over and over youth are yelling to us that they desire help in their social development. When I asked Carlos if he thought putting bullies in with other bullies would really help, he thoughtfully recants saying: "It will make you get worse. It's because you're probably in a bad situation where you dad's in jail, but...they shouldn't be bullying. They shouldn't be doing that

at all, like if you need help, just ask for it. Don't just go bullying people and robbing their money and stuff." Here Carlos announces how the external social and criminal justice systems penetrate the walls and actions of students: offering a downwind manifestation of structural violence experienced by urban youth in their home communities.

Whose Supposed to Help: Relationships with Guidance Counselors

Regardless of the structural barriers to support and the understaffing of social support services in schools as dictated by the Department of Education, to students the outcome simply feels like they have no support and no protection. Malik expresses about his guidance counselors:

> Yeah, they suck. There's no point to them being here. Basically, our guidance counselor, all she does is sits down, talk on her phone, gossip with students. Just know where you're guiding me. Please. We have one guidance counselor in our school, and I can go in there, and she doesn't even know my name. It's a small school. How can you not know my name? I really think that for her, it's just – she's waiting for her check every two weeks. There's no point for her to be there. The only thing she does is keep hold of our transcripts just in case you want to get a copy to send to a college.

Like Malik, Maritza also "can't stand" her guidance counselor "because they talk about things that are not about you. Yeah, that's so weird to me. I'm like "oh my god!" Do you not see me here? Then they don't have time for you, but they make time for other students. Are you serious?"

Here again students describe the pain of no recognition, of not being known. Invisibility viscerally hurts. And across all focus groups, participants report on the "uselessness" of their guidance counselors, particularly the experience of not being able to trust their guidance counselor(s) because the guidance counselors "gossip" (with other students, teachers and staff), and like teachers, guidance counselors also have favorite students ("lets say its a kid who's always in there gossiping with her would come in. You know it's like oh, he or she would get first priority and they're not even in there, you know, for an important reason", Jermaine). Other

students also report not being known by their guidance counselor. Collectively, issues of gossip, lack of trust, lack of help, lack of recognition, and lack of safe spaces cause harm, are developmentally damaging to students and are factors in students' disengagement from school. And all highlight important nodes of improving training and preparation of counseling staff at schools.

Ultimately, the neglect of social support in schools has left youth feeling the need to rely solely up themselves (and sometimes their friends) and believing that "You're supposed to always depend on yourself" (Sharese). Or as Amanda affirms, "Like me personally, I don't feel like I should go to somebody and be like – only my best friend. That's who I go to. I don't feel like I should go, like I can't see what they can do for me."

(Under)Utilization: On Trust

Here we see issues of trust played out, and that trust is a relationship that needs to be built. It is an active process, not implicit just because a school does establish a program. In one focus group, Shakira, a ProjectDISH youth researcher who facilitated three of the six focus groups asked about this issue:

Shakira: So say like you got something horrible or whatever. Like say God forbid you guys were getting abused, you're experiencing like people who want to fight you. Different things you guys go through. Who would you talk to in your school?

Kamala: Nobody

Amanda: Probably advisory teacher.

The sentiment of talking to nobody resounded in all focus groups. Nearly all participants mentioned that they kept things to themselves. Carlos, who does think that the guidance counselor in his school is "cool", remarks "I'm not the type of guy that goes to a counselor to talk because I don't talk to anyone in my school about my problems or anything." Darvesh, who warmly describes his guidance counselor as "helpful" and "friendly", says "Yeah I talk, not about like really personal stuff, but things about school and how to like, about my college planning, and she advised me to do this and that." Amanda states: "Some people go to the guidance counselor.

I don't go because I don't like to share any of my business like that, but some people go." Karin "Yeah, we do have them, but I don't deal with them."

The outlying cases were several students who attended a school in which they not only had guidance and college counselors, but also have a health team counselor and an "Assistance Team" (A Team) comprised of college aged students, social workers, peer mediators and staff whose sole jobs were to help with student social, personal and academic issues and peer mediation. Students in this school did indeed talk with their health counselor and members of the A Team.

Several students did report promising roles of guidance counselors in school. Maritza has guidance scheduled as part of her academic schedule. In her school "Guidance is scheduled right on my schedule. We're mandated to go to our guidance counselor. Once a week." Jade has a guidance class once a week. Here a guidance counselor goes to advisory class once a week. "In ninth and tenth grade it was mostly about how to start high school and sex and [those basic stuff]. Now, it's about preparing for college, SATs, prep and all that." But another young woman who attends this same school as Jade challenges the effectiveness by saying: "They don't do anything. They talk and that's it. We just sit. It's a free period."

Diana also describes her school's senior seminar policy, in which the guidance counselor runs required sessions for students to attend, at which students talk about how they "feel about the school." At one session, three young women showed up and "started talking about things that were personal. So what [the guidance counselor] did was take that group and she made another session on Fridays, and we're gonna be knitting, and so we can talk and everything. I have to be in that group because I heard what the girls had said." But despite this very responsive and proactive guidance counselor, Diana continues, "But, honestly, even though I wanted to say something, I didn't because I'm not sure she would have called my mother or not, so I wasn't comfortable speaking to her at all." She hadn't negotiated the boundaries of trust with this guidance counselor, who told her that "You can talk to me about anything, but if its really personal its my job to tell somebody" meaning ACS or a parent. What Diana heard was a breach of trust—that the "personal" becomes exploitative, and so she "wasn't comfortable speaking to her at all."

Trust again, mediated this *positive* relationship. What Diana needed was a patient discussion about what *specific* personal issues the guidance counselor was required to report to outside sources and *why.* So too did she need to understand the processes of who gets told, what would happen, and how her confidentiality—to her peers and people in the school—would remain intact.

Polling for Justice data supports these claim; where we see good news that at least some of the time youth do seek support. The survey shows that 65.8 percent of youth frequently or always turn to their friends (which includes a boy- or girlfriend) when going through a hard time. If you include youth who "sometimes" talk to their friends, this number rises to 94.1 percent. In contrast, when going through a hard time, only 14.8 percent of youth seek support from adults at school (e.g., teachers, guidance counselors, nurses) frequently or always. A full 40.7 percent of youth *never* seek support from adults at school. This confirms what youth narratives are saying.

Mesosystem of Schooling

This sub-section addresses the immediate learning and social support environments of schools. It weaves stories of educational success and neglect, toggling between narratives of students who have positive, reinforcing, engaging educational experiences and those who experience educational dispossession and marginalization. Much of what is presented here can be supported by existent educational literature that highlights the importance of critical pedagogy (Duncan-Andrade & Morrell, 2008; Apple, 2004; Giroux, 1997; McCarthy, 1990; McCarthy & Crichlow, 1993; Banks & Banks, 2003) and the 3Rs—relationships, relevance and rigor—to student engagement and success (National Research Council, 2003). At the end of this section Table 5.1 synthesizes the factors students report as positively and negatively affecting *both* their health and educational achievement. The chart uses students' own words. As a preface, I offer two students narratives on their positive schooling experiences. So clearly do they articulate the simplicity of what it takes to promote a healthy school environment.

What It Takes: Successful Educational Environments

Carlos, in narrating his high school experience, offers an image of what school should be, offering a warm, safe, friendly environment where students and teachers trust and help one another, where time is taken to develop the social environment and relationships between

students and staff, and where curriculum is relevant, interesting and culturally relevant. Carlos attends a small school that is located in its own, stand-alone school building. Carlos states:

> I walked through the doors of [his school] and it immediately felt like I was at home. The way they received me was so good, that it made me feel welcome. As soon as I walked in, I met a boy named Mikey. This kid wasn't shy at all. He gave me a [hand] shake like he knew me for years. This day was the best school experience because I met new people. I lost my shyness in this school. In middle school, I used to, like I wasn't shy like once I got to know people and stuff, but I was actually shy to present myself to people. But in this school, like they, I'm not scared, you know because when they told us, you know, it was the first day of school, so we all got in a circle or something – not the whole school, like our class – because by the way my school is small. So we got in a circle and presented ourselves and I wasn't scared like right off the bat. I was saying my name and who I am and stuff. Like I wasn't scared at all. When I'm talking to these kids and teachers, nowadays I feel like I'm talking with my family. Like usually if you go to a new school and you're like, oh, and you don't know where to go, you ask them and they're like, "Oh, just go over there," you know. But they, I asked them and they actually told me, you know, they would stay and help, they helped me out. They wouldn't just abandon me, and the teachers are cool, all of them, especially my History teacher. In History, I learned a lot about who I am. I learned about my ancestors, the Taínos. I also found out in this school that my previous History teachers had lied to me about certain stuff. Christopher Columbus was supposed to be a good man. No, he's not. He killed most of the Taínos—turned them into slaves.

Another student, Darvesh, who attends a very successful small school, one that is part of a coalition of several schools operating under the same model in New York City that are specifically for recent immigrant students, describes his successful school (which is located within a larger building that is located on a local community college campus) in the following terms:

> Safe environment in the school, mutual understanding among each other and different communities in the same school, friendly staff, helpful teachers, access to college and college classes, different activities for everyone. Bad things in school are sharing with other schools, not having our own space.

Pedagogy / Curriculum

As the quote from Carlos mentioned in the beginning of this section, students yearn for, respond to and are transformed by critical, relevant, interesting, culturally relevant pedagogies (Ladson-Billings, 1992, 1995; Banks, 2006, 2007; Sleeter & McLaren, 1995; Duncan-Andrade, 2004), such as critical hip hop pedagogy, for instance (Akom, 2009; Stovall, 2006). Providing a distinction between interest and relevance, Darvesh offers a definition: "Interesting is like the stuff you are like looking forward to know more about. Relevant is like the stuff you are relating to, you are relating with or somehow you know how to get yourself related with." Relevance is about stuff that is in the sphere of your lifeworld. Bad pedagogy is associated with teachers "just giving you a book and telling you to read it" and when "teachers don't explain." Unanimously students report that its difficult to learn with the lessons are boring. Of the 490 students who responded to the question "In my school I feel bored," 61.2 percent agree or strongly agreed with this statement. Boredom has considerable risks for school non-completion. Research indicates class cutting and school dropout result from "disengagement and alienation that students label 'boredom'" (Fallis & Opotow, 2003, p. 103).

In describing his science class from earlier that day where they were learning about electrophoresis, Jermaine says:

> I admit I was sleeping today. I was getting hungry and I was sleeping today. I woke up. I heard something about enzymes breaking down. Went back to sleep. Woke back up. I heard that the machine has a gel in the middle and they break down the DNA. Went back to sleep. Then I heard electricity runs it because it's two positives. Went back to sleep. Then I woke up when she plugged it in. I was up, ready to learn. Then she's talking about she's not going to do it. Back to sleep. I can't listen to talking. I know it's bad. I admit it. I was

sleeping today. Cuz you know class wasn't interesting to me. Talking, talking, talking for an hour and 30 minutes!?!

A topic that has all the power to be dynamically engaging and interesting turns out to be deflated by too much talking by the teacher and by it not being hands on. As a former science teacher myself, I can tell you first hand that it is absolutely possible to run an electrophoresis lab where students actually do it themselves. And it is very engaging to then relate this lab and the science content to real life, relevant topics of interest to the students, such as forensic science and criminal law.

In today's day and age, interest and relevance also necessitate technology (Gee, 2004). Malik says "We should be able to use computers in school." And Jermaine extends his thought: "Yeah. Have hands on things. Sitting in the classroom listening to lecturing – come on. That's so back to my great–grandparents' days. Make things interesting. Everything's technology nowadays."

High Stakes Exams

The history of high stakes exams has been widely written on, so I will omit a discussion of that here (Kohn, 2000; Au; 2009; Fine & Ruglis, 2009), so I will limit a discussion here to students' reflections on the pedagogical role of testing. Chapter Seven will provide a revealing discussion of the stresses of tests.

Interestingly, we get the most complicated understanding of the educational impact of high stakes exams from the three focus group participants who attended "portfolio schools", meaning students there did not have to take Regents exams[22] to graduate. Instead, portfolios are the culminating assessments of students at these schools. Students can still choose to take Regents exams if they want to, but the Regents score(s) do not count towards their course or overall grades in any way. This, the youth assert, allowed curriculum to be centered on learning and critical thinking, not teaching to the test. And while the portfolios are a tremendous amount of work, students are able to see all they have done and be engaged by the rigor and high

[22] Regents exams are the name of the New York State high stakes exit exams. Students need to pass at least five Regents exams to graduate with a regular diploma (Foreign Language, Math, English, History, Science).

expectations demanded of them. It also lends itself to project-based and social justice curricula. As one of these students, Carlos, states:

> My school doesn't believe that a test is the way to, like a test is a way to find out if you're smart enough. Like a portfolio, what we do in a portfolio is like a whole year of our work, so it's like they have it and they know that we did the work, but a test is just one thing, and you take the test, but if you're having a bad day and do bad on the test, that's it. It's over. You can't pass.
>
> Well we take tests, but like exams, little ones, barely, but you know, those state tests, we don't take that, and that's good because then you don't feel stressed about that, thinking 'oh you have Regents next week.' We do quarterlies. It's like, at the end of the marking period or at the beginning, or something. Say like a final exam, but that's only to see what you learned that marking period. It doesn't really count. I mean it's just like a diagnostic assessment.

Another student who attends a portfolio school actually thinks that tests *are* a fair measure of what you know, but warns that they must be implemented and used differentially. When asked if standardized tests (i.e. Regents, PSAT, SAT/ACT, etc.) actually measure what students know, Darvesh states: "I think they do, but they should give you some more time. Because when you try to like hurry things up, you always mess it up. That's what I believe in. So I take my time and that's what costed me, like not good scores. So I tried to catch up on my speed so I get better results." This student is an immigrant from South Asia, moving to the United States only two and a half years prior to this focus group. He also describes the impact of this experience, particularly for language acquisition (See Garcia, Skutnabb-Kangas & Torres-Guzman, 2006) on the tests: "Most of the, like the test was reading, writing. I was good in Math in my country, so I didn't have any problem here, but the reading and writing just took me a while. So that was hard, unknowingly hard." For students who do have to take these tests, why is time such a premium? As Alfie Kohn (2000) writes, "this means that a premium is placed on speed as opposed to even thoughtfulness or thoroughness."

And in an interesting exchange between these two students, we see the complexity and sophistication of students' relationships to testing:

> Carlos: A test? That's bad because, like that doesn't show what you know. That doesn't show as nothing.
>
> Darvesh: No, isn't it – it's not bad, but like marking your grades on the test, like putting all focus on the grades of the test and saying, "If you fail the test, you fail the marking period," because some teachers do that.

For the students who attend portfolio schools, you hear in their voices and emotions a different relationship to schools; they do not experience the same amount of stress, tension, and poor teaching as described by other students. And in keeping an eye towards intersecting systems, *all three* of the students who attend portfolio schools also *do not* have metal detectors or policing at their schools.

Table 5.1

Youth Perceptions of School Characteristics Affecting Health & School Non-Completion

"Good" Things About School / Things About Schools That Make Students Feel Good	**"Bad" Things About Schools / Things About Schools That Make Students Feel Bad**
Characteristics of small school • Small classes • More attention • Teachers have more time	Characteristics of Big schools • Less attention • Crowded classrooms • Not enough materials (supplies)
Curriculum • Meets students needs • Bilingual teachers • Interesting and relevant • Challenging • Hands on • Technology • Builds community between students • Lots of tests • More options for classes	Curriculum • Boring, uninteresting • No practical connections, no explanations • That lies to students (that teaches dominant discourses, not the real histories of the groups of students that attend school…Like teaching about all the good things of Christopher Columbus and not what he did to the Taínos)
Programs • Access to college counselors, college classes and college preparation • Different activities for everyone (after school programs, extracurricular programs, different types of classes, art, sports, etc). • Academic support programs (i.e. night school, credit recovery, alternative schools, programs for pregnant & parenting teens) • Learning about safe sex, comprehensive sex education and drug prevention • Dual and bilingual education programs • Guidance counselors that take initiative	Programs • No supports for immigrant students • No programs to deal with peer pressure & bullying • No programs for pregnant & parenting teens • No programs for sexuality education and healthy relationships • Not enough social workers, guidance counselors, college support

"Good" Things About School / Things About Schools That Make Students Feel Good	**"Bad" Things About Schools / Things About Schools That Make Students Feel Bad**
Teachers • Have patience • Trust students • Give individual attention • Tutoring / extra help • Helpful • Nice / kind	Teachers • Ignorant teachers • Mean teachers • Speak in imperatives (i.e. when students aren't paying attention, they say "do this…!") • Lacking extra help
Inclusion • Special education students in regular classes makes them feel a part of the school community • Mutual understanding between the students • Different communities living together	Exclusion • Segregation amongst groups of students • No supports for students in need (immigrants, pregnant teens)
Portfolios • Instead of high stakes graduation tests • Shows your knowledge throughout the school year • Standardized tests do not count towards your overall grade	Testing • Excessive testing • Considering tests' result as your knowledge • Using tests for deciding graduation • No test preparation
Security • Just for emergencies • No searching • Consider everyone equal • Focus on safe learning environment and no weapons in school without security & surveillance • Help create school community (i.e. help monitor and keep bathrooms clean)	Security • Metal detectors • Security officers' fear [of students] • Random searches are biased (i.e. sexist and against immigrants) • Violations of one's "safe space"
Safe School Environment / Community • Feeling a part of school—a sense of community • Welcomed and greeted when you enter school • Friendly faculty • Everyone in the building knows students name • People you know • Knowing that you have someone there • Honor language and culture and religion • Alternatives and different consequences to suspension and expulsion • Trust between everyone: teachers/faculty and students and amongst students themselves • Guidance counselors & college support programs • Parents and families are part of the school community • Have a student lounge	School Environment / No Community • Military recruitment • Bullies • Gangs/violence • Drugs • Un-repaired buildings (ramshackle) • Peer pressure • Classrooms in basement or with no windows • When environment outside & around school is bad • Not having personal space • Have to share resources, space, entrances, etc with other small schools in the same building • Only suspension and expulsion to deal with problems

On Teacher Quality, Fairness and Struggles

These students, like low-income and students of color in other inequitable educational environments, also *yearn* for qualified teachers (Fine, Burns, Payne & Torre, 2004). In describing his frustration with lack of health classes in his high school, and in response to the question of where he takes health and who teaches it, Jermaine says: "In advisory – you do what your advisor wants, whether it's read – they use that time to throw in health. What background in health do our advisors have? Just the little courses they took in high school?" But the stakes are *high* for students with unqualified teachers in any of the five disciplines in which exit exams are required in New York State. Students discussed not feeling confident with some of their teachers.

When asked what it feels like to not have confidence in teachers, Carlos states: “It puts you down, or it puts them down in a way, because how are you going to pass the test if you don’t have confidence in your teacher?” As presented in Chapter Three, the consequences of diploma denial for youth are that of life and death. And the placing underqualified teachers in the schools who most need the very best teachers anchors this outcome (See deVies & Chandler, 2009).

Students also loathe favoritism in school. Karin remarks: “I feel teachers only pay attention to some students and it makes me mad.” Alise also explains, “Yeah, favoritism always plays a big part.” In fact, in discussions of this research finding in our weekly ProjectDISH research meetings, all of the youth researchers agreed that favoritism “doesn’t feel good” to *those “students being favored*.” As Shadaisha and Shakira, two of the youth researchers, went on to detail: “At first it does feel good, then you think about what you did and it doesn’t—you don’t deserve it.” This sense of justice and communal fairness and its implications for relationships and school community is self evident to the youth, so why do teachers continue to privilege some students over others?

And yet students continue to extend empathy for teachers’ struggles in abysmal conditions. Sharese states that “I'm mad or I don’t understand it that well, and my teacher, she can't help all the students in the class because the class is over-packed. It had like 30 kids in the class, and she can't help everybody before the bell rings.” Amanda also acknowledges that her Chemistry teacher is “emotional”, but “if you put all the bad kids in one class, that's just making it even worse.” So a successful educational environment also requires small class size. “I think it should be at least ten kids to one teacher. It should be ran like a college instead of the regular 30 kids to one teacher. I don’t want that” (Malik). Students also take responsibility for collective peer actions. In our survey, 67.2 percent of youth agree or strongly agree that “students in my class talk back or act rudely towards teachers.” Identifying accountability for their own actions while at the same time implicating institutional structures that breed these disrespectful behaviors, we can again see the ways in which the larger educational practices that structure schools produce social patterns of behaviors in students. And yes, students are themselves aware. And astute.

Guidance Counselors and Social Workers

This topic is sticky and students report varying degrees of support in their schools. Its difficult to carve clear limit situations of what dictates patterns of utilization. But the overall milieu seems to suggest, again, that trust mediates this trend. A few themes do prove salient however. First is the issue of understaffing. Students report upwards of one guidance counselor for 1,200 students (the student in this school remarks, “because they have a lot of people, so I feel like it’s not that effective”), others report one guidance counselor per grade in a school with a freshman class of 300 students, while a few attend schools where there is one guidance counselor for 85 students. Second is the distinction between guidance counselors, college counselors and social workers. In many schools a “guidance counselor” is responsible for all three—or two of the three—roles. As Naomi explains: “Our guidance counselor, like, she's not really there to talk to either. Like she's just there to help us with our grades. Like she'll tell us what we need to catch up on, and what course we have to take. Like she's not there to talk to us. She's there to help us with our grades.” Unanimously students report needing more college counselors.

Focus group participants clearly identify *four* needed professional roles in schools. Broadly, social workers (or guidance counselors) should be who they can go to and talk about personal, family and peer problems and get help. The distinction between the two job titles here has more to do with responsibility: students identify social workers as those who are supposed to report abuse and follow social and child welfare regulations. College counselors’ sole function should be to help with the college process and college applications. Guidance counselors (or education counselors) should be there to support students’ educational programming, problems with classes, getting transcripts, etc. Lastly, are school psychiatrists for serious issues. As Jermaine says: “I think all schools, especially high school, should have school psychiatrists because a lot of kids these days are doing outrageous things.” Lisa reflects the same point, also offering an analyses of the intersecting inequities in school: “I think at my school, they should have more people, like therapists and stuff. A lot of people in my school have problems.”

On Quality

In response to the flat question "Do you have guidance counselors in your school?" participants responded with a variety of emotions, ranging from anger to sadness to self-preservation to frustration. Yet all answers paint a very bleak picture of the actual social services available in schools as well as of student experiences and perceptions of these services, even if a school does have them. Unanticipated, the issue of guidance counselors and implications for their training is a salient finding of our research.

Jermaine and Malik report that their school of approximately 400 has one guidance counselor, one social worker, and one college counselor for their whole high school.[23] That is, until recently:

Malik: We have a guidance counselor, a college counselor and a social worker type lady. She's worse.

Jessica: She's worse? How so?

Jermaine: She just became assistant principal, and now she thinks she's the shit.

Malik: So now it's two assistant principals and one principal. Makes no sense. There's only 400 and something students. Why?

Beyond this being an inherent conflict of interest, students describe consequences of the fear-, discipline- and security-based educational policies in New York City unto what's supposed to be their social support resources in school. Interestingly, one young woman also went to the same school as these young men, but her emoting of the social worker becoming the assistant principal was of sadness, and less anger then the boys. Naomi sadly deflates and says: "Like now she's too busy."

Invisible Support ≠ Make Believe

Law mandates educators to report students who are victims of abuse to child protective services (CPS). In New York City, the child protective service agency is called the Administration

[23] According to the New York State School Report Card Accountability and Overview Report, 2006-07, their school has 394 students, 2 professional staff, 1 assistant principal and 1 principal; although according to the 2005-06 (most recent available), *NYC Public Schools 2005-05 Annual School Report Supplement,* the school has 425 students. Either way, the student perception of their school is spot on.

for Children's Services, or ACS. Yet there were a few discussions in the focus groups where the participants talked about known abuse of fellow students that adults in school did nothing about. Another young woman spoke about getting abused nightly by her little sister. But in one focus group, a male participant went so far as to proclaim: "I don't think ACS exists in our school. I don't think so." While this service must exist in the school based on local, state, and federal mandates, the haunting power of his *perception* suggests to this high school senior that the adults at school *are not protecting and keep safe students in the way they are supposed to and in the way students desire them to.* This invisibility and lack of access to the systems and supports meant to keep students safe seems to be a pathway by which students are most blatantly neglected or through which alienating violence (Harber, 2004) is experienced.

Another conversation yields:

Malik: You know how many kids I know would be getting beat up from siblings? Period, like. One day, this dude had his nose fractured because his brother decked him.

Jessica: And nobody in school does anything about it?

Malik: Nope.

Jermaine: The problem is – let's say you were a social worker at my school and I was to come with a broken nose or a black eye. Okay. You might just ask what happened. If I say nothing – They'll leave it.

Malik: Yeah, they'll leave it alone like it's not a concern. That – like obviously, something happened. Yeah, you know? There's no reason for you to just leave it alone. *Do your job*. If it was somebody in your family and you keep pressing the history and pressing the history until you get to the bottom of it, you know, but to them, if they don't want to talk about it, it must not be nothing, so just leave it alone and move on. They're worthless. There's no point in them being here. They're just taking up space. Their office could be another classroom!

Brittany, a student in an entirely different school (that actually has a substantial amount of guidance counselors) describes her social worker:

> I think there's only one out of all these 16 darn guidance counselors, and there's only one social worker. Last month, there was a person in the school who really got hurt, and then the next day they came into school with bruises and everything from coming home, and then the social worker didn't do really anything at all. Not questions or anything like that. They just send them back to the classroom. First they made a note and everything and send them to the classroom. They gave the note saying go to the hospital after school. What is that? That's stupid. It's nothing. You can't – they don't even sit down, ask questions or help you with anything. They don't do anything.

Exosystem of Schooling

> Schools, like other contexts of childhood and adolescence, are not simply places where development happens…they are intimate places where youth construct identities, build a sense of self, read how society views them, develop capacity to sustain relations and forge the skills to initiate change. These are the contexts where youth grow or they shrink...Buildings in disrepair are not, therefore, merely a distraction; they are identity producing and self-defining (Fine et al, 2004, p. 2198).

This section describes the effects of New York City Department of Educational policies and practices, neglect and dispossession, on the schools that youth attend. It articulates structural issues of individual schools, linking larger educational movements and ideologies to the immediate school settings of youth.

School Location

"The environment around my school is not that safe."—Carlos

Several of the students described the neighborhoods around their schools as being very unsafe. This seems to hinge primarily on the presence of gangs. Maritza states frankly, "My school's right across the street from the projects, so everything's bad." Alise also expresses that to get to and from her former school "you had to cut through the projects and walk up the block; the school was in the projects." When asked why having school located next to the projects automatically makes everything bad, Maritza explains immediately:

> It's gang affiliated. Anything you do, you're already dealing with a gang. If you're wearing a certain color, you pertain to that gang. Certain beads you can't wear because you pertain to that gang. You always pertain to something. They question you or pressure you about it. The gangs. They come up to you. What are you? Are you neutral, Blood, whatever the case may be? If they feel a certain way about it, then they either leave you alone or they're gonna do something to you. I never got pressed because I don't do nothing wrong.

Maritza went on to assure that gangs will press students on school grounds: "Wherever they catch you, that's where they're gonna press you." Carlos also describes, "the train station around my school is kind of bad. There's always a gang hanging out there." He goes on to describe a detailed incident of the gang pressing he and his friend for their wallets. But Martiza's explanation and Carlos's detail of the gang ultimately leaving he and his friend alone indicate that there is, as Elijah Anderson (1999) calls, a *code of the street.* And these youth are able command respect based on the "certain way" that they interact with the gang members. Where these young people have The Polling for Justice survey reveals that while only 5.6 percent of youth participated in gang activities, nearly twice that amount, 9.9 percent, of youth had been hurt or felt threatened by a gang. In other words, in the last thirty days, one out of every ten students walking into any given school had felt threatened or been hurt by a gang.

Tangential occupancies have debilitating effects on youth. In one of our focus groups, students attended a school located next to an agency that provided services to homeless men during the day. The outside courts that this school uses for gym separate the school from this agency. Although fenced in, the court is fully visible to the surrounding streets and buildings. The young women in this focus group all describe how men line up along the fences of this court. But one young woman in particular feels so harassed, so threatened and so unsafe that she filed both a police report and requested a school safety transfer. Both proved null and to no avail. Tracy states: "I don't feel safe going out in gym with those men there, and another thing is that I just don't feel safe in this school at all." Her school is a school that is not policed, there are no metal detectors, and of all the schools focus group participants attended, hers was among the best—it

is most responsive to students, has a wide variety of educational and social support programs, and really focuses on health, social, academic and sexual development for students. Indeed, it even facilitates health services for students with a clinic near the school. Her not feeling safe "at all" is *explicitly* related to the mistrust of the school administration that was not able to facilitate a safety transfer for her. The magnitude of this young woman's experience of safety and harassment effects her learning in grave ways. But in a beautiful exchange between focus group participants[24], the young women help strategize how to keep safe in the midst of this reality:

> Sophia: But if that happens, you should definitely tell somebody, or speak up. Even if you're shy, you need to speak up to them because honestly, I've been here since freshmen year, and they've been doing it since then. I actually cursed a few of them out. The guys out there, and during gym or whatever, they'd be whistling and just saying really disrespectful things, and I just can't deal with that, so I cursed them out all the time.
>
> Tracy: But for me, when they do that, I ignore them, but it's – when I ignore them, they tend to scream louder.
>
> Tara: But you don't know any guys or anything that you talk to in class or something? Sometimes ask a guy to just walk with you or something, and they won't say anything usually.

Environmental Hazards

Several students spoke of the bars on the windows of their schools as something that did not make them feel good. Indeed, this makes them feel as if "we are in jail." One student reported that "60 or 70 percent" of his classes are in the basement (again, due to the dividing up of his building), so that he doesn't see windows, or light, for most of the day. Carlos describes his previous middle school in "ramshackles", "the ceiling, like it wasn't falling, but like the paint was

[24] This is just one of many feminist interactions that occurred within focus groups. In every single focus group, there were elegant interactions of problem-solving, care-taking and social support, helping each other with advice on how to navigate systems, find and utilize existing resources and growing knowledge. Although this is not the focus of this dissertation, it is worth mentioning that discussions around health and safety were dynamic: where knowledge was produced, challenged and verified through interaction effects and where peer support was privileged as much as personal narration. It was certainly a beautiful and sophisticated sight to behold.

peeling and it was in bad condition." This school was in such bad condition, that they had to move to another building. Brittany tells that in her school:

> The steps are broken and stuff like that. The floors are cracked and everything. On the third floor of my school building, one of the floors are actually up higher than the rest of the floor. The square – you know how you have a square, like the square tile? It's higher than the rest of them. You better watch out before you fall and everything. It's like that on a lot of floors. And the doors to the hallways and stuff, they're really hard to push, so if you push it, you better watch out because you might get hit by it.

But young people also describe vermin in their schools. Some find mice droppings in desks and drawers (Diana: "In my science class, when we was opening drawers there was rat feces in it"), and another young woman's school underwent a renovation over the summer because of a roach infestation. This issue of vermin intersects with another chief complaint of students, that of hunger. While this issue will be discussed in detail later on in this chapter, what's interesting to note is that this environmental hazard—beyond affecting obvious physical health problems such as asthma and psychological factors of self respect and self worth—also affects young people's academic success.

Youth also report the frequency of broken escalators and elevators in their school buildings, as well as the uncomfortable chairs. Several students report the pain that their butts, backs and legs feel from having to sit in the hard chairs all day. In fact, Jermaine suggests we have "better desks" while Alecia suggest that we have "cushions on the chairs." Students also report flies on the school food. And when asked what their ideal school would look like, one student responded: "My school would look like the White House. It would have to, it would be white. That's how I feel." Following up on this, I asked "why would it have to be white?", and Malik continued: "Purity." "Poor students and working-class youth of color are *reading* these conditions of their schools as evidence of their social disposability and evidence of public betrayal. These young women and men critically analyze social arrangements of class and race stratification and come to understand (but not accept) their 'place' in the social hierarchy" (Fine, Burns, Payne &

Torre, 2004, p. 2194). The largest environmental hazards reported, by far, the ones that most communicated to these youth their "social disposability" are bathrooms and water fountains, both structural entities of "filth." (Fine et al., 2004, p. 2206)

Bathrooms

The portrayal of bathrooms is startling. In one focus group of students who were all from the same school, they describe an incident in which a young woman wiped her period blood over the walls of the bathroom, after which it was not only closed for a week but the school changed its bathroom policies so students were only allowed to use it during one period in the morning and one in the afternoon. The punitive nature of this policy decision not only has been ineffective in eradicating messy bathrooms, but it potentially can harm students health through forcing their biological bladder cycle onto an artificial school time schedule. Many other students talk about similar policies in their schools, ranging from bathrooms only being open certain periods of the day to not being open the first and last ten minutes of each class (the latter of whose aim is likely to help quell hallway lingering). But through one particular exchange, we get a glaring (and confirmed) portrait of school bathrooms:

Jermaine: But you gotta understand, though. I've seen our bathrooms and the girls' bathroom. I could bet money our bathrooms are disgusting. *That's* a hazard. It *is* scary. Pee all over the floor, paper clogging the toilets, doo-doo, red stuff—blood—you have to hold your breath going in. And that's boys. Okay that's understandable. So just imagine how the girls' bathroom is. And girls have to sit down to use the bathroom, so they're not I mean–

Malik: They don't have no -- I think they should have seat covers.

Jermaine: I know. Girls tell me they stoop down. They don't want to sit. Its, its…Boys could easily just pee on the floor, but for a girl to do it? Like that's real….

Malik: Crazy.

Jermaine: Yeah it's crazy. Like that's what I'm saying. That's hazardous.

We have to go in there. We have to touch the knobs. You know? There's no tissue, you know?

Malik: Sometimes, there's no soap.

Jermaine: Yeah. If there is [soap], people will lift up the stuff and spit in it. God knows if they put pee in it. That's why I always wash my hands then use hand sanitizer [not soap]. I'm never – plus, there's some disease going around. It was like a rash on your hand. I don't know what it was. But they were stressing about washing your hands. The whole day, I did not use the bathroom until I got home.

One third of the focus group participants report that the conditions of the bathrooms make them not use the facilities all day, instead "holding it" until they get home after school. Not using the bathroom can cause constipation, urinary tract infections, and difficulty with bladder control. Not washing of hands also can lead to transmission of infections and bacteria. But there is also an interaction effect between the deleterious water fountain and bathroom conditions where poor fluid intake during the day (either because of the conditions of the water fountains or because students don't want to have to go to the bathrooms) can lead to dehydration, urinary tract infections, constipation and irritations to the bladder. Students also report some bathrooms that do not have doors on the stalls, a fierce invasion of privacy—something that is a particularly important developmental phenomenon during adolescence (See Parke & Swain, 1979).

Demeterios, one of the ProjectDISH researchers, in his coding of one of the transcripts reminded us that to one particular young man, bathrooms are a "very important issue." Demeterios's re-reading and re-hearing Jermaine's impassioned plea suggests that it's worthy of spending extra time in this analysis. When we asked in focus groups if students had any suggestions for how to improve bathroom conditions, Jermaine energetically and without pause stated:

We can't put cameras in the bathroom because of privacy issues. I would say have kids swipe in when they use the bathroom, but like I'm saying, that's too

> much time. Basically what I'm saying – if kids use the bathroom, they go in, come out, they have security guards stop them. They go check the bathroom. Every time. I know it sounds stupid, but that's the best answer I have right now. Have like a bathroom monitor. As soon as kids come out, stop them, check and make sure everything's good. If I see something that's out of place like pee on the floor and I didn't see that the last time, go clean it up. You're suspended. Do something like that. Like have somebody monitor the bathroom.

Students are clear in the ways in which students collude in making their school spaces filthy: taking responsibility for student actions in making bathrooms inhumane and for throwing trash in water fountains. They all state that at the beginning of each school day bathrooms are clean, thanks to the janitors and custodial staff, but that students throughout the day create the mess. Again it is also interesting to consider how students feeling disrespected and abused by the overall ether in schools translates into their disrespect for themselves and for their peers, and/or the ways in which this may be their own form of resistance. Jermaine's response also suggests an interesting, more developmental, way that security guards *could* be used in schools. Although I would argue the suspension would likely only further one's disconnect from their space, as opposed to a generative action that kept the "violating" students intact, interacting with, and responsible for their space and their actions.

Water Fountains

> "If the water was nice, cold and clean, nobody would be sticking gum in it or putting chip bags in it. Obviously, something's wrong that everybody's doing that."—Karin

Students describe the water as being brown, rusty and hot. In a beautiful reversal of logic often employed by those in decision-making power, this student so eloquently describes the root cause of the defacement of water fountains. So too does she (and many of the other focus group participants) acknowledge and take ownership of student participation in creating the mess, but she importantly tells us that *first* disrespect was done to the students. This theme of disrespect of authority and adults resounds throughout our findings. Students speak loud and clear of school safety officers "just because they got their little uniforms on" (Malik) being disrespectful, and of teachers and guidance counselors doing the same. But what Karin is telling us is that when those

in power do not improve school conditions, do not listen to students and treat students with disrespect (either through words, relationships, or building conditions), then students are left with this being either their only form of resistance or, even worse, they begin to internalize the disrespect and start acting in ways that equally disrespectful and disempowering. The messages that we send to students by not fixing water fountains is more than providing sanitation and the ability to quench thirst: it communicates values of worth about one's self and one's community.

But lack of water fountains may also play a role in the high rates of obesity for New York City youth, where 43 percent of all elementary students are overweight (measuring above the 85th percentile of BMI, Body Mass Index). Half of these students (24 percent overall) were obese (Thorpe, List, Marx, May, Helgerson & Frieden, 2004). This totals to one in four elementary children being obese and nearly half being overweight. About one in six high school students are obese and one in three is overweight (Matte, Ellis, Bedell, Selenic, Young & Deitcher, 2007). This trend continues on to adulthood in New York City, where over half of adults (56 percent) are overweight or obese (Van Wye, Kerker, Matte, Chamany, Eisenhower, Frieden, & Thorpe, 2008). "Obesity affects psychosocial wellness and increases the risk for type-two diabetes, hypertension, and high cholesterol," each of which are their own health risks (Libman, 2007, p. 88).

In the Polling for Justice study, we asked participants to report their height and weight, from which we calculated BMI, as well as a question about their *perception* of their own weight, in which they were asked if they felt they were underweight, about the right weight, overweight or very overweight. Findings were remarkable. 68.3 percent of the young women reported being underweight (7.2 percent) or about the right weight (61.1 percent), and 84.9 percent of young men reported being underweight (13 percent) or about the right weight (71.9 percent). On average, with the exception of young women who perceived themselves as underweight but where 0 percent were actually underweight, young women have accurate perceptions of their weight.[25] That is, on average, women who reported being about the right weight, overweight and very overweight all had BMIs that appropriately corresponded. Another interesting finding is that a

[25] First Brett Stoudt, PFJ statistician, calculated BMIs for each participant. Then each case was organized by the individual respondent's perception of their weight. Then all individual case BMIs for each perception category were averaged. This average was then compared to the age average for the survey, 16.8 years of age, using the BMI growth chart for girls and boys respectively (See Appendix).

BMI between the 5th and 85th percentile represents the “right weight” range, in our survey the average BMI for women reporting they were “about the right weight” was 21.6, a figure that is just above the 50 percentile, thereby appropriately reflecting the curve. Trends for young men differed from the young women’s. However, similar to the young women, on average 0 percent of the young men were underweight. On average, those who reported being about the right weight had a BMI that appropriately corresponded, although the average for this category of young men was at the 75th percentile; indicating they are on the upwards end of the healthy weight category. For young men who reported they were overweight, the average BMI for this category, 29.6, actually indicates that they are obese, already above the 95th percentile. An average BMI for the very overweight category is not calculable, since we were only one case in which their height and weight was correctly reported. But for this one case, his BMI was 44.2—a figure that doesn’t even appear on the 2-20 year old BMI growth chart.

In a recent study by Muckelbauer, Libuda, Clausen, Toschke, Reinehr & Kersting (2009) of an innovative “intervention” of nearly 3,000 German elementary school students in thirty-two schools to reduce childhood obesity, it was found that for children attending schools in which water fountains were added, by the end of the school year they “were 30 percent less likely to be overweight” (Parker-Pope, 2009). Importantly, this was a program had an integral environmental educational component in which not only were students given water bottles to fill up with at the beginning of the day, but where water consumption was encouraged and teachers taught lessons on the health benefits of water drinking. While the authors are unsure of the absolute cause this link, it is interesting to think about the role of drinking water instead of consuming other higher calorie beverages or foods. Of note, this study was conducted in “elementary schools in deprived neighborhoods of two neighboring cities” where children the prevalence of obesity was three times that of children from higher SES backgrounds—a demographic similar to New York City public school children (Muckelbauer et al., 2009, p. e662).

School Food [26]

Like issues of violence and water, school food is merely a node on a larger tangled web of food politics. Aside from federal and local educational and school food policies that shape school food programs, student eating habits are so directly linked to larger, historical systems of economy, food availability in their home communities, cultural eating patterns, and poverty. Slapping a quick fix of wheat bread on school lunch sandwiches will not make youth healthier or more likely to eat healthier without larger educational (i.e. knowledge generating) investments and availability of healthy food sources outside of school—not to mention *quality* food in school. Offering a scathing critique of how young people can be healthier, Alise says: "Eat more healthy food instead of eating everything greasy and junky; that's what I think of, but at the end of the day, that's now how society wants it. They put this stuff out here for us to eat; it's what we like." Research widely confirms this and other corporate disease promotion practices (Dinour, Fuentes, Freudenberg, 2008).

Like all of the other capillaries of dispossession articulated in this chapter, the quality of food students receive at school is, well, sub par at best. Focus group participants are "quite sure that students in suburban schools have better food." Lisa, a senior in high school who for the past two summers has attended an out-of-state accelerated/gifted summer academic program says: "I think they should have more variety in foods. When I went up to Massachusetts, their high school, they had Coke and fruits and a lot of drinks and sweets and *real food*. It's food. Real food inside vending machines. It looks like food and tastes like food."

Students do indeed recognize the moves that the NYCDOE has made towards healthier food, although it is detached from any sort of systemic progress towards interaction with healthy, quality food, nutrition and cooking.

> I think – our school doesn't have a say in what they give. That's the city. Michael Bloomberg or was it Joel Klein, the Chancellor, you know somebody said we're taking out soda, Pepsi, Coke and we're putting in those 100 percent Juicy Juice, Snapple's and water. Okay. They're having low fat Cheez–its. The

[26] For an excellent discussion of the politics of school food, see the 2006 issue of *Rethinking Schools, 20(4).*

> sandwiches is wheat bread. Nothing is 100 percent fat. So I'm not saying – our school has nothing to do with it. It's not our school. It's just basically the city. But, if our school had a say, I really think that they wouldn't make a difference – they would have the Coke, Pepsi. (Jermaine).

There are few, if any, culinary courses, urban gardens, health/nutrition classes or any comprehensive effort to change food *values.* Just imagine if the rooftop of every school building was used as an urban garden! Libman (2007) states: "Gardening has been shown to promote psychological well-being, the development of social capital, and vegetable consumption… Gardening has also been found to positively influence people's attitudes, behaviors, and preferences for vegetables" (p. 87).

But aside from dietary and nutritional habits and quality, school food and proper nutrition to youth is intimately related to their *ability to do well in school*, cognitively, academically and socially (World Health Organization, 1997; Center on Hunger, Poverty & Nutrition Policy, 1994; Pollitt, 1995; Pollitt & Matthews, 1998; Murphy, Pagano, Nachmani, Sperling, Kane & Kleinman, 1998; Action for Healthy Kids, n.d.). When, where and how students can eat in school directly affects their ability to pay attention, to focus, to stay awake and to not be cranky or frustrated in class. But school *safety* policies also affect hunger, dictating what youth can and cannot bring into school. Youth who attended schools with metal detectors and policing spoke of policies in their school that bar them from being able to bring prepared meals from home into school. This deeply marginalizes youth in poverty who cannot afford to buy food otherwise, and who are so astutely aware of the cost of things and of financial responsibility. Jade articulates:

> You know what I don't like? I don't like that you can't bring food in from outside of school for certain reasons. You might have things inside the food. Who brings things inside the food, like weapons inside the food and stuff like that? I don't waste food. I'm not about to choke on nothing. It's stupid. You can't bring in too many things with metal on it or anything like that.

And Maritza goes on to state:

If the principal catches you, she'll throw out your food. She throws out my food she better pay me. Where my money at? $4.50 right in my hand. I paid $4.50 for everything. You better [pay]– right here.

Food Schedules

Naomi says "I have headaches because we don't eat until the end of the day." And in another focus group, Carlos stated:

- What type of foods do they give in schools?
- What period to you get lunch?
    - late in the day/hungry and won't pay attention
    - early in the day/hunger later in the day and won't pay attention
    - should give 10 min break besides lunch to get snacks.

To youth, solutions to assuage students' sleeping in class and lack of focus requires small, simple solutions. Although they are clear how this is all tied to having one cafeteria to share amongst several schools in the same building. Again, the division of large schools into small schools neglects underlying necessities for successful learning. Carlos in this focus group also went to on describe a suburban school that a friend of his told him about that had a 10-minute snack break in the morning. Carlos thought that this was not only great for preventing hunger and promoting focus in classes, but that it would also help to cut down on clowning in classes because students would be able to socialize with their friends and "get it all out" in a structured time. To me, this reflects much more on a judgment of the trustworthiness of suburban (read: White) students versus the mal perceptions of urban students (read: students of color).

Quality of Food

Students do report "healthy" foods offered by their schools, but their descriptions of the quality of the food offer visual images of sad, pale, marginally nutritious meals. Students' report that salads are being served at their schools, but through their descriptions all I can imagine is almost white looking pieces of iceburg lettuce and depressing looking vegetables. Karin says, "Yeah. Their mozzarella sticks tastes like it was there yesterday and they just put it in the

microwave and served it to you. And then their strawberry milk is nasty. Like the only time – The only time everybody will get up and go on line if there's pizza or icee. Other than that, nobody's getting anything."

Two other students describe a former high school of theirs that "used to have pizza and the pizza, they made it out of wheat bread. Like on the bottom it would be wheat bread instead of dough. Like that was so nasty" (Kamala). Efforts to improve the health of foods without any consideration of the quality, or transference of the "recipe" are acts of both neglect and dispossession. It communicates to students that they are not worth the thought or deserving of tasty, quality food. Its as if the schools are fine with serving them what would be served to animals, or to people in jail (not that this is humane either). In one focus group exchange:

Brittany: Sometimes it's not even cooked all the way. Sometimes, they just put things on your plate that you're like – you don't even know what they are.

Lisa: They look alive.

Sadly, this same exact sentiment of the food looking "alive" was echoed in *two* other focus groups—fully half of all focus groups reported life in their food. With one student describing that "the chicken had a pulse" and another interjecting to say "yeah, it was still moving on the tray!" Despite being soliloquy, these images narrate youth's *actual interactions, experiences and perceptions* of food. When asked about the type and availability of food in school, one participant laid out the food spaces of her school so clearly:

Maritza: No, not every day is that good tasting food. It's either pizza, mozzarella sticks or chicken strips. And French fries.

Jessica: Are there salads or vegetables or fruits or anything?

Maritza: Yeah. My lunchroom, it has two separate sides. There's one side with the pizza, the French fries and all that good stuff, and on the other side, they have salads, fruits, sandwiches – what else they got on that side? I think slushies and milk.

Ayana: They don't have vending machines in your school?

Maritza: When you go sit down, they have about six in the lunchroom. Snapples. And then downstairs by the – where my dance team practices in front of the auditorium, so there's two vending machines – one like cookies, chips, Pop Tarts, stuff like that and then the vending machine is a Snapple machine with water and juice. I know the vending machines from the back of my head.

Overall, students report this same basic set-up, a salad bar (or packaged salads), fruit and sandwich options in addition to the meals/hot food options of the day. Many students describe the vending machines as their primary food source in school; alleviating the "nastiness" and bad "smells" of the school food and cafeteria, but at least getting some calories (however empty) into their bodies. Diana says "Honestly, I've been in the lunchroom one time; I never ate it. As soon as my friend got it, I smelled it, it was burnt, and I smelled it, and said I would never eat that." Malik reports that he is hungry "All the time. I don't eat their lunch because I don't think kids from Feed the Children would eat it, personally. I don't know. It like smells old and stuff like that."

Several students did attend schools that allowed sophomores, juniors and seniors to leave the school for lunch. They greatly appreciated this trust and autonomy, but described the affordable food options in the neighborhoods around school primarily as fast food restaurants and bodegas (delis). This is not inconsequential. In a recent study by The National Bureau of Economic Research, it was found that 9th graders whose schools are within one block of a fast food restaurant were more likely to be obese than students who attended schools that were a quarter of a mile or more away from these establishments (Currie, DellaVigna, Moretti & Pathania, 2009). This same study also investigated the effects of proximity to fast food restaurants on pregnant women, and found that those "who lived within a half-mile to a fast food restaurant were at increased risk of gaining more than 44 pounds during a pregnancy" (Rabin, 2009).

In her "Advice to the Mayor", Sophia simply asks that he "Clean up our cities and schools" and "Make more healthier stores around schools." Other students offer critiques on the

actual nutritional value of the allegedly healthy foods in school, saying that canned fruits still have corn syrup and that the only way to really ensure that the foods are healthier is to “pick it yourself”, or “actually own a farm yourself, or if you go to the farmer’s market” (Alise). In a study of a gardening education program of youth of color ages 10-14 in Brooklyn, NY, Libman (2007) found that youth participating in the program had significant changes in their nutrition and food consumption behaviors, including enjoying eating raw vegetables or vegetables with little preparation, trying new varieties of vegetables, “developing agency around eating through growing and cooking food,” and experimenting and being creative with their food (p. 91). But youth gardeners also had changes in their food consciousness where they began to value their products and appreciate how hard it is to grow vegetables as well has the aesthetics of the produce; and since they used organic farming techniques, the youth were able to recognize the relationship between freshness and taste. These youth also had positive social interactions in other arenas outside their garden plot due to their participation in the program. Parents noticed increased positive social interactions with plants, animals, other youth, program staff, and immediate and extended family.

Why can’t we think of urban gardening and delicious healthy food as a mechanism of health, academic achievement, *student engagement* and career planning in schools? This is interesting to consider in conjunction with the PFJ survey, where youth reported that worries about their future and career planning were sources of stress for them. Integrating school deficits as opportunities for improving educational and life trajectories seem particularly powerful.

Consequences of School Food Programs: Hunger

To begin this section I privilege a series of quotes that directly connect the previous section’s discussion of the quality of school food with its academic consequence of hunger. It is well evidenced in the literature that hunger effects children’s ability to do well in school across many measures (Murphy, Pagano, Nachmani, Sperling, Kane & Kleinman, 1998; Kleinman, Murphy, Little, Pagano, Wehler, Regal & Jellinek, 1998). Young peoples’ voices scream so clearly:

> "If I don't like wheat bread, then I'm not gonna eat and I'm gonna be hungry. Then I'm gonna be dizzy and I'm not gonna participate in class and you want me to concentrate in class, but I'm gonna be hungry." (Karin)

> "I am so miserable. My main focus is basically my stomach instead of what's being written on the board. Like, I could just be sitting down and my stomach be turning. My teacher's looking at me, and I'm looking at her or him and I'm like listening to you, but I'm like 'yo I'm hungry!' That's like – I don't believe in that whole food gives energy. Food just gives you focus. Really, it keeps you focused. If I was full, I would be 100 percent attentive in your class. If I'm hungry, I'm getting miserable. I'm gonna go to go to sleep. Once you sleep, it's like that feeling for the food just dies down. It gets back up. But at least it's dying down for a moment, and that calms me down. But I can't focus as much in class if I haven't had nothing to eat." (Jermaine)

> "I get real cranky if I don't eat because I'm constantly thinking what am I gonna eat after school at the end of the day." (Amanda)

> "I can't focus. I start talking about food. You should see me at school I be going at it. Oh, man, I'll be going at it. McDonald's, talking about the buffet, too." (Maritza)

These quotes yield a reconsideration of school food and nutrition as a) a mode of social and academic engagement for youth in schools, offering sites of possibility for creative educational and vocational programs, b) *fundamentally requisite* for academic success, c) a central component of student (mis)behavior and attitudes, and d) necessary topics for courses and education in schools to buttress the chasm between *mis*education and *lack of* information about the role of food systems and nutrition in their bodies and their desire to be healthy, agentic, academically successful beings. The survey data revealed that *94.8 percent* of youth had trouble paying attention in class due to hunger at least one day per week. Specifically, 29.4 percent of

survey respondents were hungry one day in the past week; 24 percent, two days; 19.2 percent, three days; 5.4 percent, four days; and 16.7 percent were hungry all five days.

There was one exchange in a focus group where young women were talking about how all White people only eat salads and healthy foods. While objectively an *inaccurate* statement, the observation *is* an *accurate* read of the economic climate that facilitates better, safer, higher quality foods in traditionally White, middle and upper class neighborhoods. So to this young woman this *is* her reality. Tied to economy, differing food options and behaviors are inextricably linked to variant cultural traditions. Yet schools, screaming with desire by youth, have the potential and *need* to be transformative spaces in food politics, integrating healthy development, cultural traditions, life and vocational skills, urban farming, economics lessons, and community development. Most importantly, youth *deserve* to have quality food that does not look like it's alive or that it could "be fed to prisoners" (not that they deserve it either), or "to animals." This, I suggest is absolutely necessary if we are to change eating habits of children and teens to help alleviate obesity, diabetes and food related health crises plaguing our county. Youth believe that "not everything supposed to be healthy tastes good," so *schools* should be the leaders in valuing their students and quality, tasteful, affordable food is what it will take to change eating habits. Let's look at one example.

Jamie Oliver, a celebrity chef from the UK, began a healthy eating campaign called "Feed Me Better" in 2004 in the Greenwich section of southeast London. Largely by public pressure (271,677 petitioning signatures) after Jamie aired his idea and the poor nutritional quality of school food in the UK on a local television station in 2005[27] to millions of viewers, the British government committed over $500 million (USD) to improve school lunch programs. Replacing nutrient empty foods with wholesome, healthy menus, "During the campaign, Oliver hired nutritionists who found most school meals contained less than half the daily recommended amount of iron, a mineral that improves children's cognitive development and concentration" (Waite, 2009). He then replaced processed, fat-laden foods with *quality* nutrient rich foods such as red meat, green vegetables, pasta, fresh fruit, and fish while at the same time reducing refined

[27] On a program called *Jamie's School Dinners*

sugars and saturated fat. Sample items on his menu are coconut fish and broccoli, Mexican bean wraps, vegetable chow mein and chickpea soup. School cooks were retrained and schools were provided with equipment necessary. Implemented in the 2004-2005 school year in all of Greenwich, London (81 out of 88 schools participated), the Institute for Social and Economic Research (ISER) conducted an outside evaluation of this program. The ISER has identified the "*causal* effect of healthy meals on educational performance" (Belot & James, 2009, p. 16). Analyzing results for over 13,000 students from 2002-2007 who took the 2006-2007 exams and who were on the new diet for at least one year, and after adjusting for "upward trends in pass rates" the study found that the performance of 11-year olds improved by up to 8 percent in science and 6 percent in English and that there was a small increase in math scores. Additionally, health related absenteeism fell by a dramatic 15 percent. Also a result of this campaign, in 2006 the School Food Trust in the UK "introduced new national guidelines for healthier school meals" (Waite, 2009).

Imagine the power of such a campaign in New York City. With amazing grassroots organizing around food rights and urban farming and armed with data on the central role school food plays in youth's daily schooling experiences, this area seems readily equipped for activism and further research. If we reposition school food as central to shaping possible futures and for bolstering youth's aspirational capacities (Appadurai, 2004) we can effectively disrupt several racialized trends of society: health disparities, occupational trajectories, and community food scarcity.

Collectively, we see that environmental stressors of the structural conditions in these schools are those that psychologists and urban planners identify as "most threatening to instruction and sense of self…including facilities in disrepair, overcrowding, temperature problems, filthy bathrooms, mice, vermin, animal feces and noise" (Fine et al., 2004, p. 2207; See also Kozol, 1991, Lepore & Evans, 1996). The bodily effects of these conditions will remerge in Chapter Seven.

Macrosystem of Schooling

This section examines the embodied consequences of contemporary national ideologies and policies that are structuring the move towards massive privatization of public schools, the prison-industrial complex and the small school movement.

School (Un)Safety and Security

> The effect of discipline "was to silence (for ever in some cases) or to suppress the ways of knowing, and the languages for knowing, of many indigenous peoples" (Tuhiwai Smith, 1999, p. 69).

"Zero tolerance has been defined by the American Bar Association as a specific response to student misbehavior where a school automatically and severely punishes students for a variety of infractions, often resulting in expulsion or suspensions and criminal charges" (Noam, Warner, VanDyken, 2000).

In December of 2003, Mayor Bloomberg and Schools Chancellor Joel Klein announced a school safety plan that "will apply strategies based on successful NYPD crime-fighting initiatives such as "Operation Impact" and "Operation Spotlight." Announced in this press release are the two cornerstones of a plan that will "work more closely with the criminal justice system" and that will "streamline the school suspension process." The former includes: "providing information to probation officers and the courts about students charged with crimes so that they can make the right bail and sentencing decisions," putting Department of Education "representatives in each courthouse in the city" to "ensure that schools provide attendance, disciplinary, and academic records of students to probation officers and the courts." In the latter cornerstone, the administration seeks to toughen suspensions by doubling the length for a maximum suspension from five to ten days. It also aims to expedite the suspension process (NYCDOE, 2003).

Several remarkable things emerge from this press release. First, it outlines the mechanism for how to feed juvenile and correctional institutions for which the state and city will receive extra federal aid. The No Child Left Behind legislation, signed in 2002, stipulates that "state agencies get extra funding for supporting at risk programs" (USDOE, n.d.). Specifically, that states are eligible for assistance if they are: Responsible for providing free public education for children and youth: (1) in institutions for neglected or delinquent children and youth; (2) attending community

day programs for neglected or delinquent children and youth; or (3) in adult correctional institutions (Section 1411, NCLB).

Second, the new NYC school safety plan explicitly states that the education system will become *part of* the criminal justice system. Third, the examples of what constitute s*uspension*; amongst which are things like chronic misbehavior, profanity, and skipping detention, set children up for failure. When children are suspended, they must leave school, which also puts them at the disposal of the criminal justice system. In conjunction with Operation Clean Sweep (which targets "quality-of-life offenses") and Operation Impact (which deploys large numbers of police officers daily to deliberately targeted locations that have an increased tendency for crimes to be committed during certain hours and days) children of color are again more likely to be targeted in their communities by the police.

More specifically, the new NYC school safety plan makes synonymous a student who "chronically misbehaves" and one who commits "a serious crime." Derived from "Operation Impact," the new school safety plan aims to identify "Impact Schools" "based on the latest data on criminal incidents, suspensions and on early warning problems as school attendance rates and incidents of disorderly behavior." The safety plans in these schools "will include the utilization of enhanced scanning and security measures, the redeployment of school safety officers as well as…other school safety tactics. The number of police officers will be doubled and the number of SSAs [school safety agents] will also be increased at 'Impact Schools'. School-based police officers will report to school safety sergeants in local precincts *in order to forge closer ties between Impact schools and local precincts*" (emphasis my own). Probation officers will also work in "Impact Schools." Ultimately "a police presence in these key problem locations will be increased." (NYCDOE, 2003).

> Students with two or more principal or superintendent suspensions within a 24-month period will be considered "Spotlight Students." A three-strikes-and-you're-out policy will be implemented for those students with "Spotlight" status. Any new incident of Level 2 - such as misbehaving on a schools bus, using profanity, or misusing others property - or higher (Level 1-5 incidents are defined in the

> Department of Education's Citywide Standards of Discipline and Intervention Measures) will trigger the immediate removal and transfer from the school. "Spotlight students" who have been removed will be placed in Off Site Suspension Centers, New Beginnings or SOS [Second Opportunity Schools] depending on student need and the severity of the incident (NYCOE, 2003).

antics or poor judgment." (Institute for Children, Youth and Families, 2003).

At the beginning of the 2005-2006 academic year, there were 4,625 school safety agents (SSA) and at least 200 armed police officers, authorized to make arrests, in New York City Public Schools. Taken together, this makes "the NYPD School Safety Division the fifth largest police force in the nation, larger than the police forces in Washington, DC, Detroit, Boston or Las Vegas." (Mukherjee, 2007). There are more SSAs per student then there are police officers per citizen, and 82 percent of youth attending schools with permanent metal detectors were Black or Latino/a. Schools that have permanent metal detectors spend between $1,500 and $3,000 *less* per student, depending upon school size, compared to the city per student average. Schools with permanent metal detectors issued nearly 50 percent more suspensions then schools without, and the police and SSAs in these schools intervened in twice as many non-criminal incidents as they did in schools without them. In this school year, 93,411 students in 88 schools were subjected to this walking through metal detectors every single day. And in 2006, along with the Mayor's "roving" metal detector operation, "*the city's budget for school safety equipment more than doubled."* [28]

School safety and security is inherently complicated. Thick. Messy. What is clear however is that hidden messages of safety and security penetrate youth and their psychological development in ways and by means far beyond any intention to manage physical safety. The young men participating in these focus groups had much to say—deep, heartfelt, and emotional—about school safety. Likely because these same young men are targeted on the streets *and* in their schools by police: they are statistically more likely to end up in prison than college. As young men of color, both black and brown, this issue is *their entire life.* And so I will

[28] http://www.nyclu.org/schooltoprison/lookatsafety

reverberate their voices at length here. While young women shared the same sentiments, their relationship to the topic did not carry the same weight that the young men's daily interactions with school safety was indicative of a tracked future. This qualitatively gendered finding was also supported by our survey.

The Polling for Justice survey revealed that 85.9 percent of all students attend schools with School Safety Agents (SSAs), 30.2 percent of students have armed NYPD cops in their schools, 29.4 percent have metal detectors and 52.8 percent have security cameras in their schools. However, while 35.7 percent of young men strongly agreed or agreed that they have had negative interactions with School Safety Agents, a significantly lower percentage (although still substantial) of young women did. Specifically, only 20.6 percent of young women strongly agreed or agreed that they have had negative interactions with School Safety Agents.

Feel the nuances in Carlos's conception of his school's safety practices: "Some of the bad things is that you can easily sneak a weapon into my school. My school doesn't have metal detectors and I'm proud of that. My school trusts that kids, trusts the kids not to bring weapons, but I know some students do it anyway." So this communicates that *trust,* a variable constitutive of *relationships,* is more powerful a structuring force in feelings of physical safety then weapons are. This is extraordinarily counterintuitive to the punitive zero tolerance ethos that shape current policing practices in urban schools. Carlos goes on to say:

Carlos: I think metal detectors are good, like in a way because it doesn't, like it makes you feel a little bit safer, but it's just like, it's too much because like every morning they have to search all the stuff. I think they should lower their level with like the security, and they should get better guards because like they be violating people.

Jessica: And how do they violate people?

Carlos: Like they throw them on the floor like nothing and they search them and stuff. I don't like metal detectors at all, like I'm glad my school doesn't have one, but it is helpful because like then you

know no one has a weapon in school. You know no one has a gun or a knife. Like even though they can still sneak them in, and they have, people find ways, but the possibility is lower, but like it's still, the security guards are, they need to stop being so mean.

Jessica: What do you think when security guards throw students on floors and search them, what do think that communicates to students? What message does it send to those students being thrown?

Carlos: It makes them feel that they're nothing, that they're trash, that they're in prison.

Again, I urge a line of analysis that privileges the psychic consequences of students—feeling as if they are in prison, that they are "trash", that they are "nothing"—more than any rationale necessitating armed police at schools. Particularly, because students clearly identify ways that weapons and violence can happen in schools *regardless* of fortresses established:

Jessica: Is this really helping with the weapons?

Jermaine: Uh. No.

Malik: It's who you know. Some of the machines don't work sometimes.

Jermaine: Look, I was on the basketball team freshman, sophomore and junior year. I stopped playing now because I got sick. I walked through that scanning machine – my phone, my iPod, my belt, my boots – everything that would give me straight five stars. They're not stopping me. That's not all of them, but the ones I made friends with. Ok. Now, there's also, for some reason, kids like to walk through the metal detectors slowly. All you gotta do is speed up. It will – first, you have five stars. Once you walk through, it goes from green to nothing, and if you have metal, it will go straight red. If you walk through fast, it will go from green to nothing. Of course, if you're walking slow, you're giving it time to

go red. If you walk through fast, it'll go green then nothing then go back to green.

Jessica: So they're not really keeping you safe?

Jermaine: No.

Malik: No.

Demeterios, a ProjectDISH researcher confirmed in his analysis of this focus group transcript that "people know how to beat the system." Similarly, Malik and Jermaine verify the psychological costs of feeling like an animal and like they are in prison that Carlos and Darvesh spoke of in their focus group. In describing a school safety agent, who the students in their school refer to as "Sergeant" ("You would have thought she was a former FBI agent by like the way she thinks") because of her harsh and degrading behaviors to the students, Jermaine who was at school *on a Saturday* for a supervised SAT Prep Saturday School Program (does this not communicate educational motivation and desire enough?) describes in an intensely provocative and revealing narration:

Jermaine: With an attitude, she says to me boy, move. Okay. She's disrespectful, and not only her. There's a whole bunch of them.

Jermaine: Yeah, "Boy, move!" But if I was to walk somewhere I'm not supposed to walk – "excuse me. Where are you going?" There's no right way. So I stood there. Like the first instinct somebody will have is to stand there until you're told to go somewhere by my teacher. She gets an attitude. Tells me "Move." Okay. And all the other security guards who were just sitting down are giggling and laughing.

But let me snitch right now, 4th floor entrance—no security guards. You could have walked in there. Exit 7—no security guards. You could have walked in there. Exit 3—no security guards. You could walk through there. I know all these. Like are you serious? But all the security guards who were posted that day were right there sitting down, gossiping. I don't pay no mind. But it's a problem because you see a lot of kids hitting security

guards. People say these kids are out of control. But *they're* rude. You don't understand. Kids are provoked. If you want respect, show respect.

Jessica: Is there a cost to this? You just said that you don't pay any mind. That's a choice you're forced to make. Every day, you have to go through and decide, "I'm not going to let this bother me." Does that have a cost to your body or to your mind?

Jermaine: Your pride is gone. Like you know, I'm the type of person—I don't bite my tongue for nobody. If you're coming at me, I'm coming at you. You've got to remember, if I start to open my mouth that's a choice. That means if I get suspended, handcuffed, tackled, whatever –

Malik: Tasered, probably.

Jermaine: Yeah, I caused it on myself. So you gotta know when to just put your tail between your legs and walk away.

Malik: It is a skill.

Malik: Scanning makes me feel like an animal. When I ring, they have to use a wand or whatever, and that makes me feel like an animal. Like I'm a terrorist – that's what it make me feel like. Which I think of JFK, the airport.

Jermaine: To tell you the truth, all the scanning and mess, its getting kids used to is going to jail.

Malik: Hmm.

Jermaine: You know what's funny? Five out of ten kids that they scan tomorrow at school might be in jail.

These young men say it all: disrespect, gossip, lack of trust, lack of humanity, violence committed against them, fear, self preservation, self control, dehumanizing actions, consequences to their psyche, lack of protection and support by those who are supposed to be keeping them safe, preparation for jail, discouragement. They also highlight that the security, while completely dictating their actions is somewhat of hypocrisy, a joke, because students know of alternate ways to get into and out of the school. But what is astounding about this is despite

this expert knowing, and the abuse these young men will experience going through the main entrance, *they still follow the rules.* They are not deviant. But they also narrate sadness, frustration, *desire* for an education and for being treated as an upstanding, trustworthy human.

In a detailed critique, Carlos and Darvesh also draw attention to the biased "random" searching patterns of school safety: telling me that "we have a higher possibility against us than you do" for being searched. When I asked them why, Carlos responded matter-of-factly, "because you're white." They went on to say that the students most likely to get stopped for random searches are black and brown, immigrants (of color), or kids dressed in baggy clothes. And also that security is "sexist." But its not just metal detectors, "We have cameras. So, you're being watched, and they're checking to see if you have weapons and stuff like that. It's annoying because sometimes, you can't even bring cell phones[29] to school. I think that's bad."

Young women also felt frustrated with the scanning and policing upon entrance to their schools, but the sentiment was different. To the young women, scanning and security is: frustrating, stressful because it often makes them late to class, a nuisance, an invasion of personal property (i.e. searching their bags), and inefficient (either because the technology doesn't work properly because often times the scanner and wand keep beeping even though they have nothing on them, or because there should be more entrances and/or scanners for students to go through). And different from the young men, these young women think "the scanning thing is all right" (Ayana) and that "the scanning makes a lot of sense except for the shoe part" (Karin). In fact in two of the young women's "Advice to the Mayor", the indicated that they'd like more security guards in their schools. Similar to some of the young men, one young woman seemed to "buy into" the notion that the metal detectors keep weapons out of the school:

> It's like you don't like the scanning because you feel whatever you have in your bag is yours and you don't feel they should take it out. But if you have a problem with somebody, you don't know what they're carrying. So if you get into an

[29] Cell phones, while tangential, was another source of stress for students—mostly revolving around the issues of trust (again), economics, and the need for them for their work and familial responsibilities. Most schools don't let students bring phones into school and so they have to pay local bodegas a dollar a day to hold their phone, because if they bring it in to school then it will be taken and often not ever given back. Instead of fighting the times, schools should probably think of more innovative strategies for having students not use phones during class time.

> argument, leads into a fight, then they can easily pull out something and you can get cut or whatever the case may be. When all that could be stopped by them taking everything away from whoever's not supposed to have it (Karin).

Like Carlos earlier, Karin's fear of weapons is real. Of all survey respondents in the Polling for Justice Survey, 13 percent report carrying a weapon at least once during the past thirty days. This is lower than the national figure of 18 percent as reported by the Youth Risk Behavior Surveillance Survey.[30] By and large the young women's critique of safety and security practices revolved around issues of betrayal, lack of trust and neglect.

Lack of trust and protection erodes student's feelings of safety, health and success. This "school harassment by school police takes an emotional toll," and makes attending school often a very difficult task; where police presence in school is both detrimental to learning and to developing healthy perspectives of fairness, trust, and justice (Browne, 2003). This criminalization of children in their schools can be emotionally traumatic, have serious psychological consequences, and lead to stigmatization and embarrassment. Resultantly, victims of criminalization who are either suspended or expelled are often left with little or no education and often may never return to school (Browne, 2003). Ironically, "many of these students were expelled for behaviors that once would have been considered nothing more than adolescent antics or poor judgment" (Institute for Children, Youth and Families, 2003).

Discipline in schools has become an exercise of power. "The exercise of discipline in schools takes on great importance because it serves as the primary means through which symbols of power and authority are perpetuated" (Noguera, 1995). The symbols associated with discipline and violence persist long after children are in school. And disengagement from school results from moral exclusion "in which students are meant to feel that "considerations of fairness do not apply to them" (Fallis & Opotow, 2003, p. 112).

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[30] See http://www.cdc.gov/HealthyYouth/yrbs/index.htm

The Small School Movement: Reflections on Architecture, Design and Health

"It's when they turned all the big schools into smaller schools inside of them that it makes it complicated."—Ayana

Students had much to say about what did not feel good about schools. Unexpectedly, much of it revolved around the division of large comprehensive schools into small schools; which is an important distinction from freestanding small schools. Young people articulate distinctions between the benefits that small schools confer (See Table 5.1), and the increased competition for resources that happens when big schools get divided into small schools. This section addresses the latter, complicated issue by content themes that young people connect to the division of formerly large comprehensive high schools into small schools as part of the small school movement in New York City (See Dunetz, 2009), spawned by mayoral control of the New York City Department of Education (NYCDOE) under Mayor Michael Bloomberg.

Ayana: All the big schools that's in the Bronx, they like split it up into little schools. Like put little schools inside the big schools. They split the kids up. It makes no sense.

Jessica: So you felt that it was better if it was a big school still?

Ayana: No, they should just make it into one smaller school. One whole small school.

Overcrowding

When asked, "is your school overcrowded?", several participants responded "no." Yet others resist. One young woman states: "Sometimes we over pack schools, so it'll be hard. Like it messes up everything and they'll switch up our programs and everything. Like it's too overcrowded." In another focus group of participants who all attended the same school, after responding "no" to this question, the young men then went on to describe outcomes of overcrowding, such as a classroom being expropriated and converted to a teachers lounge. As a result of this, the seventeen lockers in that classroom were knocked down, so those students no longer have lockers. This means that they have to carry their books all day, an important point to which I will return below. This finding suggests students' implied definition of overcrowding is that of student overcrowding (i.e. not enough seats for students in the classroom), yet what their

narratives allude to the issue of *structural overcrowding,* in which the large school buildings being divided into small school cause overcrowding for the facilities and building overall. Converting one building into many schools means more teachers, staff, and students in the space that remains the same size. Corroborating these young men's responses, the New York City 2005-2006 Annual School Report Card for their school reports that it is at 128.5 percent capacity. And the DOE officially states "when over 100 percent, school has exceeded official capacity." The PFJ survey reveals that 47 percent of students agree or strongly agree that their school is overcrowded.

This locker issue proves a significant policy loophole for which the consequence is *dispossession by design* for students. With no lockers, students have to carry all of their "stuff," books, jackets, bags, etc, all day. Jermaine articulates: "And that's another problem. I have no locker. But our school enforces a dress code, and of course, I'm not walking around with my jacket and my hoodie in my hands if I have a locker. But yeah, if I'm seen with it on, free suspension. Give me your ID. I'll call home." The 'no locker' issue also manifests in physical health outcomes for students, many of whom report sore backs, spines and shoulders from having to carry their books around all day.

This intersection of overcrowding and security in these schools has another arm: entrance into the school building. Students remark, "they need to have separate ways for separate schools to go in and out, they own scanning, they own security." Since big schools use only one main entrance for all students to enter through and these entrances are barricaded with police, school safety agents (SSAs) and metal detectors, students often have to wait a substantial amount of time to get into school. As Amanda says, "Yeah, there's like five schools in that building, for four scanners. Imagine everybody got to school at 8:30. We're all gonna get late for class!" And another young woman remarks that her building only has two scanners for five schools: totaling a volume of students in the thousands. The lack of care and concern on the part of authorities for the interruption of student desires and demands for education with antithetical school policing policies lead young people not only to feel like they are being prepared for jail but

it also, again, communicates inalienable messages to them about their worth, and shapes their perceptions and constructions of trust and respect for themselves and for others.

Physical Education

> Like my school is small, right? So the gym teachers that we have – my school is like four years old. It's just a very new school, so they're not really organized in gym. To me, I feel like when I'm going into other school, I hear about people going to gym, they have like a sport sport for gym. Like some people play basketball or volleyball. To me, I don't think I need gym in school because we don't do nothing in gym (Amanda).

Immediately following her statement, another young woman in this focus group chimed in "That's what I say!" Two things get taken up in this quote by Amanda. The first is that small schools get started without all resources and programming in place.[31] The second is that students *expect* new schools won't have all of the resources needed for successful, engaging education—even after four years. Both are manifestations of miseducation. Youth attending these under-resourced and understaffed schools have internalized the lower expectations and value that those in power have for them. This is not only a sign of dispossession, but of inhumanity as well. In this context it communicates that students' apathy towards physical education and fitness has more to do with the ways in which schools, through policies, access to gyms or recreational spaces, and the physical education curriculum disengage students from interest or *knowledge* of physical fitness.

But the role of physical education as it intersects with school division cuts even deeper. So many schools competing for the same space requires awkward scheduling. And here is where we see school policies essentially negate each other, yet students are still required to abide by them.

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[31] Another example of the dispossession of students by preemptive starting of small schools is that of school food. Where one focus group, in which students were all from the same school, described that for the first year or two of their small school, they didn't have a kitchen, their school lunches were packed lunches that were delivered from another local school. Their school only had refrigerators and an oven or "heater thing" that would be used to serve the food from. Eva says: "we would open it, and it was just really gross. It looked like it was space food or something."

Sharese: Yeah, we had five minutes to get to class and gym ends at 9:00. By the time you switch your clothes, go up eight floors of an escalator that don't work, you're still late to class.

Naomi: And like they'll give you until 9:35 to be late, but it don't make sense if you still came early for gym and make it to class late. You still have to get a late pass for class.

Ayana: So you still have to–be marked late—even though you came early for school!!

Naomi: And then they'll mark you late for like the whole day. Like you just came late the whole day.

The emotion is the room was tangible during this exchange. Students could not process how nonsensical their school's programming was yet they were still left to deal with the consequences. But the consequences don't just bear on lack of fitness and their attendance record: so too does it bear on their sense of self, their pride and their self worth. Since school's policies do not bolster these fundamental components of psychological health, the students are forced to settle and deal with the bleak conditions of what they do have. Immediately following the above conversation, the same student, Naomi, went on to say, "But it's a real good school." As if needing to defend her self worth, as if she had a moment of realization in this conversation of the hurt and neglect that her school caused. How do we make sense of young people's dispossession and desire for pride and recognition in their sub par environments at the same time?

Broadly speaking, physical education policies varied greatly from school to school. Some schools did not require participation at all. Here students merely have to sign in, attendance is taken, and they get to hang out for the period: "You go sit." Other schools didn't require participation, but at least had students change clothes for gym class. Of the schools that required participation in the form of actual physical activity, only some factored in the gym into a students overall grade. Of the schools that didn't count the gym grade, students report being less apt to take it seriously. Speculatively, these variant practices seem to be grounded in spaces available

to have a gym class: if there was an outdoor field and/or an inside gym and how many other schools had to share this space.

One young woman makes a very surprising remark:

> Us teenagers, we're very lazy. These days, we're very, very lazy. We don't want to do anything else but hang out. Not really move around, not really be active. Just talk and stuff. My gym, I do aerobics and stuff and gymnastics, and stretching our muscles and our bodies also helps our minds and stuff because we're not just focusing on one thing. We're focused on our health and our bodies and stuff as we grow up.

Brittany describes her school as having a proactive stance towards physical education, one that integrates fitness into holistic well being. But I'm wondering how much her description of teenagers as being "lazy" is a reflection of the opportunities that youth living in cities have for participation in activity, particularly if schools do not promote it. Highlighting the role that the small school movement plays in dismantling student fitness, Naomi says: "We can't do soccer. Like all that stuff we do, we have to go through [name of the large comprehensive high school that her small school is located within]. Its hard." And Carlos, who loves his current school, spoke about the likelihood of him transferring after this year because his school doesn't have sports teams and he is a baseball player. How has the division of schools severed opportunities for participation in organized (or informal) sports? And in what ways can the small school movement be utilized as a way to promote athletic participation? That is, in large schools there is often the issue of competition for a limited number of spots on athletic teams, while in small schools with competition reduced, how could fitness be promoted?

The outcome of this "violence by omission" (Harber, 2004) is that merely walking up stairs, or a ten-minute walk from the bus stop to school becomes exercise for students. Like hunger and poor nutrition, lack of physical fitness has negative effects on academic achievement and social relations. With no space to relieve energy and stress, it stays inside, gets pent up and can be released in non-ideal and non-constructive ways, even according to the students. Research shows that physical fitness in school leads to increased test scores and concentration,

and reduced behavioral problems; even when class time and overall instructional time is reduced (Shephard, 1997; Symons, Cinelli, James & Groff, 1997).

Conclusion

Overall, 38.2 percent of students agree or strongly agree that "in my school, sometimes school rules, tests, they way school personnel treat students, and other elements of school make me feel pushed to leave school." What is interesting is that in 2004, NYC graduated only 38.2 percent of its students (Swanson, 2004).

The physical volume of this chapter stands as symbolic representation of the depth to which youth yearn and need to discuss how school makes them *feel* and how it affects them. Dissecting the ways in which the built environment, school food, academic and pedagogical issues, safety and violence, and social supports in schools affect young people's health, relationships and educational success, this chapter forms the legs upon which the following two chapter are to be built. In the next chapter I detail what youth have to say about sexuality and health education and intimate partner relationships, while in Chapter Seven I present our mapping data and data on stressors through the theoretical lenses of embodiment and weathering.

In closing I offer one last exchange for plausibility of the ways in which *schooling may itself be a mediator of depression and mental health* and it startlingly sets up what is to follow*:*

Sharese: My high school has after school, like we get P.M. school and credit recovery and stuff, so people could like catch up on their work and stuff.

Shakira: How do you feel, like, having those classes to help the – you know how sometimes the kids they fail classes, they might feel a certain ways –

Sharese: Yeah. They depressed. Like they can't eat, they're sad and crying a lot. Like they real moody and stuff like that. But –

Shakira: Do you see people in your school like that?

Sharese: Yeah, but then like they go to P.M. school, credit recovery and stuff. Then when they get in, like, they pass, they get all their credits, then they're not stressed no more. They're happy.

Shakira: So it plays a big role?

Sharese: Yeah.

Chapter 6.

ON DESIRE FOR HEALTH AND THE POLITICS OF SEXUALITY EDUCATION: MANUFACTURED OUTCOMES

> You can't be protected without really knowing anything about it or about anything.
> —Jade

> Pregnancy is a problem in every public school but there's no way you could count how many girls you see missing school because they're pregnant or how many rumors are running around that he got an STD or she got an STD.
> —Jermaine

> You just gotta understand. You can't wait until a problem occurs in your school for you to take steps. You gotta do it from day one. If that problem occurs, you might not be able to stop it. That's me personally. Why wait until something escalates? Stop it while it's still small.
> —Malik

The very first question asked in focus groups was "when you hear the sentence 'health and education are related/connected,' what do you think of? Having no other information or interactions to help filter, persuade or cause static in their responses, participants' embodied responses all orbit around sexuality and health education, services and outcomes. Maritza says "My school. Because my school is based on pregnant females." Diana remarks "gym, sex, that's what I think about." Jermaine also cites issues of sexuality as central to the education-health nexus, stating: "The first thing that comes to mind probably is kids having sex and they contracted STDs." While Alise conceives of the services associated with these aforementioned items: "You know what I think about, really the school, period, how they need more nurses, and doctors, and everything in it."

What is simultaneously ironic and evaluative is that students are reflecting upon what is missing in schools. They document both deep desires and manufactured outcomes of poor (or no) sexuality education and health services. This chapter will focus primarily on findings related to our third research question: what are schools doing to keep students healthy? What classes are taught and what services are provided? Students were not all that verbose in talking about health services in their schools. Several students reported that they didn't even have a nurse in

their school and for health problems had to seek out a guidance counselor, while other students attended schools with comprehensive school based health clinics or that had relationships with clinics that students could go to. Regardless, the issues of health services in schools seemed to be matter-of-fact to students—not a topic needing much discussion. Yes, all schools need to have nurses, doctors and health clinics: end of question. The survey data yielded support for this, where 75.5 percent (n=403) of all youth worried about their health sometimes, frequently or always. As a result of minimal data yielded on this topic, the sum of this chapter will provide findings on some of the most impassioned and urgent data: sexuality education and health education and services, including issues of masculinity, healthy relationships, pregnancy and sexuality.[32]

I begin this chapter by placing this data in context, through detailing the federal, state and city policies that have shaped these youth's (lack of) health and sexuality education, as well as the policies related to educational rights of pregnant and parenting teens. Including a policy analysis is imperative here as it allows us to see how social behaviors and educational (and health) inequities are structurally and institutionally shaped. The latter part of this chapter will then sink its teeth into these policies through data yielded from our study.

The youth in this study have come up through school at a time in which their entire middle and high school education was during the Bush Administration. This means one thing: an era of abstinence-only-until marriage that for one whole generation of youth denied them any substantial education on their sexual subjectivities (Fields, 2008) or safe sexual practices. The findings reported in this chapter are to be read through this lens: that they are the manufactured outcomes of the Bush-era sex education policies. Here, policy and embodied reality are fiercely intertwined.

The Politics of Sexuality Education

What gets left out of schools, of public discourse, of democratic action, of foreign policy, of personal agency and *what gets included* are the two frames useful in analyzing policies

[32] For literature on the positive influence of health education and health services in schools, see Lear, Isaacs, & Knickman, 2006; Allensworth & Kolbe, 1987; Allensworth, Lawson, Nicholson, &Wyche, 1997; Marx, Wooley & Northrop, 1998; Symons & Cinelli, 1997.

surrounding sexuality education. Both suppress multiple realities. Both force a dichotomy and dualism. "And the result of dualism is *alienation*: the alienation of subject from object, of the psychic from the corporeal, [the self from the world] and thus of a man from nature as well as from his own proper nature" (Madison, 1988, p. 58). Elusive in form, policies concerning abstinence and sexuality education are full of gaps and loopholes contributing to a stickiness in one's ability to understand how things that appear to be totally unrelated manage to trickle into education.

Serving a normalizing function—through inherent debates over the nature of science, sexuality, religion, race, media, gender roles, and democracy—abstinence-only-until-marriage ultimately impacts and inhibits individual subjectivities and the health and development of youth. For the past eight years (2001-2008), the conservative, religious right dominated society with their model of "moral politics" (Lakoff, 2002). Believing that "ideas determine social conditions," "the religious right believes that a well-functioning democracy depends on the morality of the individual" (Spring, 2002, p. 6). Ralph Reed, the founder of the Christian Coalition, concisely summarizes the religious right's stance on Christian morality and politics: "'faith as a political force is not undemocratic; it is the very essence of democracy'" (Spring, 2002, p. 7). It is, after all, what took us to war in Iraq. But of course, these "ideas" include racism as its fundamental centerpiece, shaping policies around efforts to maintain whiteness as a form of property (as was discussed in Chapter Two), so that *manufactured* social conditions can then be blamed on the victims, the form of which is hegemonic judgments on their morality. In this frame, "HIV risk and infection becomes the product of weak people making bad decisions, not of oppressive social structures and ideologies. Racism, sexism, poverty, and other social inequalities drop from view" (Fields, 2008, p. 153).

Historically, this racialized moral politics played out with out-of-wedlock births, where from the 1930s on, White women who became pregnant "disappeared" into the safe haven of social institutions, the baby was put up for adoption after birth, and the women returned home as if nothing had ever occurred. On the other hand, when Black women became pregnant out-of-wedlock, the same social and adoption agencies that protected and insulated the White women

rejected them and so they were forced to birth and keep their babies. “Black women were viewed by social welfare agencies as primitive and irresponsible in their sexual habits and undeserving of a ‘second-chance’. So effective was society in hiding the out-of-wedlock patterns of White females that by the time society got around (circa 1980s and 1990s) to doing something about welfare as we know it, out-of-wedlock birthing was depicted as a problem unique to Blacks” (Cross, 2003, p. 70).

Take also, as perhaps an extreme contemporary example, former Secretary of Education William Bennett’s comment, in October 2005, that if all black babies were aborted crime would go down. Not so extraneously, this comment reflects an epistemological and ideological viewpoint that a) black equals crime, and so of course zero tolerance and the prison crisis makes sense, b) people of color aren’t worthy of life or of their own ability to decide life, and c) if children of color aren’t worthy of life then they certainly aren’t worthy of deciding knowledge. Further, Bennett’s comment illustrates a “white supremacist patriarchy” desire to control black (or colored, or poor, or immigrant) bodies (hooks, 1994, p. 81).

Bennett’s remark and the abstinence-only movement all have one thing in common: the desire to control bodies. Essentially, this could be viewed as a population control argument: in both the literal, racial, eugenics sense and with respect to social control. Not so coincidentally, Bennett’s wife, Elayne, runs the Best Friends abstinence-only-until-marriage program based in Washington, DC (Kaplan, 2005). Sexuality education, and its absence or presence, is a matter of moral, racial and religious politics.

Religious politics in the United States is also a masquerade. Religion manages to dance at once between its omnipotence in society, in popular culture, in media, in schools, and in policy and the complete erasure of God from its ethos and rhetoric. Religion is everywhere, in obvious and in proud ways, and yet it somehow simultaneously manages to strip itself from its own nature. It is this complete infiltration of religion, often disguised as “science,” and social control in education that so frighteningly chokes students, stifles them from their rightful agency and development, and proliferates the status quo. Abstinence-only-until-marriage has led the suit in

the debasement of science and in which the public sphere becomes a site of religious indoctrination.

The slight, often undetected movements of the religious right function in a normalizing and covert manner (Harding, 1998 & Skrtic, 1995), but they also meet with racial motives of mantaining hegemony through the strategic underdevelopment and bastardization of low-income communities and communities of color.

> Covert politics shape sciences when "power is exercised less visibly, less consciously, and *not on but through* the dominant institutional structures, priorities, research strategies, technologies, and languages of the sciences—through the practices and culture that constitute a particular scientific episode. Paradoxically, this kind of [covert] politics functions through the depoliticization of science—through the creation of "normal" or "authoritative" science (Harding, 1998, p. 131).

And it is swimming in these racialized, religious and moral politics in which the youth in this study have gone through puberty and grown into their sexual selves. Their souls are bleeding as a consequence.

Background and Context

Nationally, nine in ten adolescents experiment with sexual behaviors, and by age 20 more than 82 percent of American youth have had sexual intercourse (Haffner, 1995). In 2007, according to the Youth Risk Behavior Surveillance Survey (YRBSS), nationally 48 percent of high school students have ever had sexual intercourse.[33] Of these youth only 61.5 percent used a condom during last sexual intercourse. Our Polling for Justice (PFJ) survey reports that 55.5 percent of youth in New York City have sex, a figure slightly higher that the YRBSS although the YRBSS surveys students between ninth and twelfth grades, whereas PFJ only surveys youth ages 16-19, indicating an older average sample. Of these PFJ youth, 71.1 percent report using a condom during their last sexual intercourse, a report of sexual behaviors healthier than the national average.

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[33] See: http://www.cdc.gov/HealthyYouth/yrbs/index.htm

Each year 1 million teenage girls become pregnant, half a million of whom give birth, and over 3 million teenagers acquire a sexually transmitted disease (Haffner, 1995). Yet this too is racialized, and we can again see the historical legacy of the social practices that shaped birthrates (Cross, 2003). In 2002, the pregnancy rate amongst Black and Latina women ages 15-19 is nearly 3 times that of the pregnancy rate for Whites. Birthrates for Black teenagers are doubly that of Whites, while for Latinas the figure is nearly three times as high as Whites. Abortion rates are asymmetric as well: young Black women have an abortion rate nearly four times higher than Whites and Latinas have an abortion rate double that of young White women (Guttmacher Institute, 2006). Overall, the United States has the highest teen pregnancy rate in the developed world.

More than 50 percent of all new HIV infections occur among youth under the age of 25 (Mandell, 2004). Compared to the late 1980s, secondary sexuality education today is more focused on abstinence and is less likely to provide information on contraception, abortion, and sexual orientation. In the eleven years between 1988 and 1999, the percentage of secondary teachers teaching abstinence as the only way to prevent pregnancy and STDs rose from 1 in 50 to 1 in 4. In the same time frame, 3 out of 4 teachers present abstinence as the preferred method of pregnancy and STD protection (Dailard, 2001). At the same time, and in direct opposition to these trends, an overwhelming majority of the public, 81 percent, support the teaching of comprehensive sexuality education (Dailard, 2001).

Often about teaching “values” and “character” instead of preventing pregnancy and disease, abstinence-only-until-marriage programs largely rely on tactics of fear and shame (and which are racialized as well); include *incorrect or misleading information* on sex, contraception and abortion; ignore and overlook any non-“traditional” relationship structure or sexual orientation; and place most of the responsibility on young women/girls. Overwhelmingly, these programs are “ineffective in reducing sexual onset and promoting attitudes, skills and behaviors consistent with abstinence” or safe sex (SIECUS, May 2005). In fact, our Polling for Justice survey identified that students who had comprehensive sex education were more likely to have never had sex (46.9 percent) then were students who had either abstinence-only education (41.2 percent) or no sex

education at all (34.6 percent). Students receiving comprehensive sex education are also more likely to have been tested for a STI (36.7 percent) than were students who received no sex education (32.1 percent) or abstinence only education (27.8 percent).

Developmentally damaging, abstinence-only programs are grounded in neither data nor evidence. It is important to note that evaluation is not required for Title V abstinence programs. After the eighth year of federal funding, only eleven states (of the 48 states and the District of Columbia) that accept Title V funds have formally evaluated their programs and released these results publicly. "These evaluations have ranged from finding abstinence-only-until-marriage programs ineffective to finding that *these programs are potentially harmful*" (SIECUS, 2004, emphasis added). And in the sole federal evaluation, only non-scientific, attitude-based indicators were used to determine program effectiveness. (For a critical analysis of abstinence-only evaluation research, see McClelland & Fine, 2008a).

Abstinence-only programs have also been found to negatively impact health. Virginity pledges are the foundation of abstinence-only-until-marriage programs. Compared to peers, pledgers are: one-third less likely to use contraception when they do become sexually active then their peers; less likely to seek testing and treatment when contract STDs, thereby increasing chance of transmission; and are more likely to be engaged in both oral and anal sex then peers. STD rates are also higher in communities with a high proportion of pledgers (SIECUS, May 2005). Not to mention that beyond contraction of STDs and HIV/AIDS, young women can also get pregnant, and here abstinence-only-until-marriage polices affect *two* generations of children. Teen mothers are less likely to receive prenatal care and are more likely to give birth to low birthweight babies, both of which can lead to long-term developmental and health problems for the babies.

Policies Related to Sexuality Education

Federal Policy

While the federal government cannot directly dictate district policies and standards for sexuality education, it inserts control in an indirect manner through its funding regulations. Three distinct categories of federal policy influence the teaching of sexuality education in United States

public schools: 1) HIV/AIDS education, 2) Abstinence-Only-Until-Marriage education, and 3) No Child Left Behind.

Conservatives, largely ruling the second and third categories of federal policy, give priority to the metaphor of Moral Strength in Lakoff's (2002) model of Strict Father (conservative) morality. Under this premise, giving out condoms encourages promiscuity. "Instead, be tough and teach self-discipline, self-restraint, and abstinence. In a moral system in which morality is correlated with self-discipline and chastity and following societal norms, the moral people won't get pregnant or get AIDS. And the immoral people…deserve what they get if they don't learn" (Lakoff, 2002, p. 187). It is this impetus within which the health of our entire nation resides.

1) In-School HIV/AIDS Education

In response to the AIDS epidemic, the Centers for Disease Control and Prevention (CDC) have supported HIV education in schools since 1988. Funding is administered through the CDC's Division of Adolescent and School Health, and most of these funds are aimed at strengthening efforts for comprehensive school health, teacher training, and HIV education for youth. In 2000, the CDC provided $47 million for HIV/AIDS education in schools. Forty-eight states, US territories, the District of Columbia and eighteen of the major US cities receive this funding. Only Ohio and Utah do not accept HIV education funds from the CDC.

Funding recipients are primarily state and local education agencies, and schools that receive this funding must agree to a curriculum review by a CDC panel, which follows the Guidelines for Effective School Health Education to Prevent the Spread of AIDS. The CDC, and their program guidelines, is the only federal source that recommends comprehensive sex education (Henry J. Kaiser Family Foundation, October 2002).

As of December 1, 2005, only 21 states and the District of Columbia require that sex education is taught in public schools (Guttmacher Institute, December 2005). Often requirements on how to teach abstinence and contraception are mandated. Thirty-seven states and the District of Columbia require the HIV/STD education, with many placing requirements on how abstinence and contraception are to be taught. Thirty-six states plus the District of Columbia have opt-out

policies, while three have opt-in policies, which require parental consent for participation of any, and all, students in HIV/STD education.

2) Abstinence-Only-Until-Marriage Education

Abstinence-only-until-marriage federal funding predominately comes from three sources: Adolescent and Family Life Act (AFLA) (1981), Personal Responsibility and Work Opportunity Reconciliation Act (Title V) (1996), and Special Projects of Regional and National Significance—Community-Based Abstinence Education (SPRANS-CBAE) (2001). The first and second funding streams were both quietly passed into law, with the former formally established to endorse chastity.

And although unsuccessful, during the reauthorization of the Elementary and Secondary Education Act (ESEA) in 1994, an amendment was introduced by Representative John Doolittle (R-CA) to limit the content of sexuality and HIV education in schools. Due to federal prohibitions against the involvement of the federal government in setting state and local curriculum standards, this amendment was defeated (Perrin & DeJoy, 2003). Rather than achieved via direct control over schools, the aim of this proposed this amendment was ultimately realized through the Title V and SPRANS federal block grants.

A. Adolescent Family Life Act (AFLA) (1981). AFLA was the first federal effort to formally support abstinence and the first example of how federal sexual education policies are laden with heterosexual and traditional gender role values. This Act aims to prevent premarital teen pregnancy and to promote “chastity” and "self discipline.” AFLA is refunded annually between $6 and $18 million, although funding has maintained stable at $13 million for fiscal years 2004-2008.

In 1983 the American Civil Liberties Union (ACLU), a group of clergy and several other individuals, which challenged the constitutionality of AFLA on the grounds that it breached that Establishment Clause of the US constitution (which stipulates separation of church and state), filed a lawsuit. Finally settled in 1993, it was ruled that education programs funded by AFLA must be “based on fact, not ideology” and must present selected, accurate information about sex (Henry J. Kaiser Family Foundation, October 2002; Perrin & DeJoy, 2003; SIECUS, 2005; SIECUS, 2008).

B. Personal Responsibility and Work Opportunity Reconciliation Act (1996). Also known as "Welfare Reform Act," this Act is attached to Title V, Section 510 of the Social Security Act. Colloquially it is referred to solely as Title V—a term which I will use henceforth. We find the federal definition of abstinence-only-until-marriage in Section 510(b) of Title V of the Social Security Act, P.L. 104-193. It states:

> "For the purposes of this section, the term "abstinence education" means an educational or motivational program which:
>
> **a.** has as its exclusive purpose teaching the social, physiological, and health gains to be realized by abstaining from sexual activity;
>
> **b.** teaches abstinence from sexual activity outside marriage as the expected standard for all school-age children;
>
> **c.** teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;
>
> **d.** teaches that a mutually faithful monogamous relationship in the context of marriage is the expected standard of human sexual activity;
>
> **e.** teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;
>
> **f.** teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society;
>
> **g.** teaches young people how to reject sexual advances and how alcohol and drug use increase vulnerability to sexual advances; and
>
> **h.** teaches the importance of attaining self-sufficiency before engaging in sexual activity.

Visibly attached to welfare reform, Title V openly couches abstinence in a larger framework of believed social deterioration. Along with the passage of Title V came a new federal definition of "abstinence education." Attached to this bill and its reforms are the values and ideologies by which it is defined. Read: the poor, the immigrants, the women, the non-

heterosexual, and the people of color are the problems. These “problems” were thought best suppressed not only by social control, but also—as defined in the eight-item federal definition for abstinence education—by reinvigorating hegemonic values and ideals, and by controlling, literally, peoples bodies and choices. While Title V programs do not have to maintain all eight points in the definition of abstinence education, they cannot contradict any one of them.

Under Title V the federal government allocates $50 million dollars to states each year, with states having to match every $4 they receive with $3 of state-raised monies. Title V funding is currently provided and overseen by the Department of Health and Human Services. After receiving this funding states can run and direct “sexuality” education programs themselves or they can distribute funds to schools, faith-based organizations, community-based organizations, private or non-private organizations, or to media campaigns.

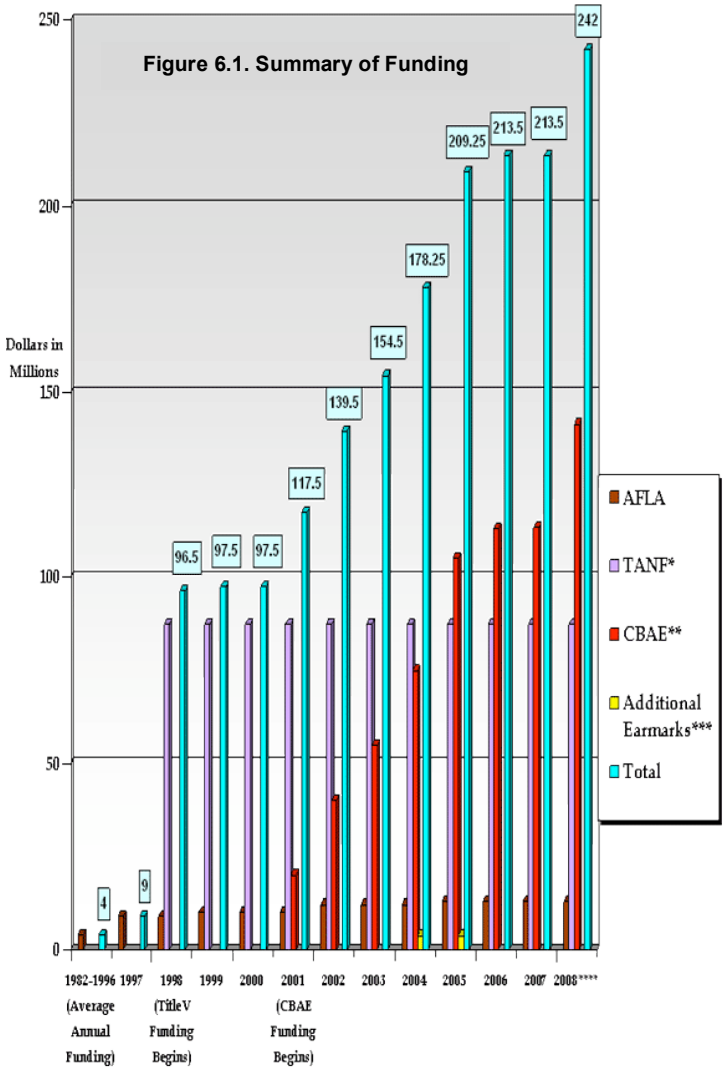
Programs accepting Title V funds do not have to incorporate all eight points of the federal definitions, but they cannot contradict any aspect. However, programs that do include all eight points receive extra funding. In a 2000 amendment proposed by Republican Representative Ernest Instook (OK), $20 million dollars in direct funding is allotted for programs that are responsive to all eight points. This figure has since been doubled to $40 million.

C. Special Projects of Regional and National Significance (SPRANS) / Community Based Abstinence Education (CBAE) (2001). Importantly, SPRANS-CBAE grants are the largest source of funding and have had a 450 percent increase in funding, from $20 million in 2001 to $113 million in 2007. Along with this mass of money comes an increase in the magnitude of responsibility: programs receiving SPRANS grants must teach all eight items of the federal government’s definition of abstinence. Unlike Title V, the federal government makes all decisions regarding SPRANS grants.

In 2005, the oversight and administration of this funding stream was switched from the Maternal and Child Health Bureau for the Department of Heath and Human Services (HHS) to the HHS’ Administration for Child and Families. And in addition to these three major funding streams for abstinence-only-until-marriage education Congress earmarked an additional $3.75 million in

both 2004 and 2005 for conservative organizations such as the Abstinence Clearinghouse and the Medical Institute (SIECUS, 2008).

D. Summary of Abstinence Funding. As Figure 6.1 shows[34], in 2008 alone, $242 million spent on abstinence education. During his entire presidency, Bush has spent $1.5 billion on ineffective abstinence-only-until-marriage programs, that as you will see later in this chapter has bore real consequences to youth's lives and to domestic HIV/AIDS cases, where in 2006 alone 34 percent of all new HIV cases that year were to young people ages 13-29 (CDC, 2009). Bush had spent 4 times more money on abstinence-only in the 5 years he's been in office than was spent total in the two decades between 1982 and 2000.



3) No Child Left Behind (2002)

In the most explicit arm of abstinence-only-education in public education and youth control, No Child Left Behind clearly frames—tightly—what should and should not get included. In a search of No Child Left Behind for the words "health education," "sexuality education," "sex education," and "abstinence," none appear anywhere in the legislation until the very end of the Act—at which point NCLB merely stipulates what is prohibited. Dictating what cannot be included speaks volumes about what can

[34] Original Source: http://www.nomoremoney.org/index.cfm?fuseaction=page.viewpage&pageid=1004

be. Through a short section of NCLB (Title IX, Part E, Subpart 2, Sec. 9526), the hidden agenda is made clear:

(a) PROHIBITION—None of the funds authorized under this Act shall be used—

(1) to develop or distribute materials, or operate programs or courses of instruction directed at youth, that are designed to promote or encourage sexual activity, whether homosexual or heterosexual;

(2) to distribute or to aid in the distribution by any organization of legally obscene materials to minors on school grounds;

(3) to provide sex education or HIV-prevention education in schools unless that instruction is age appropriate and includes the health benefits of abstinence; or

(4) to operate a program of contraceptive distribution in schools.

State Policy

Bridging the federal funding policies to New York State practices regarding sexuality education, NYS received $9,346,650 in federal funds in FY 2004. This is the second largest sum received by any state in the nation—second only to Texas. One quarter (8 of 33) of the Title V grantees are Catholic organizations, 6 of the 7 SPRANS grant recipients are religious institutions, and the 6 AFLA grantees reflect an array of service providers (SIECUS, 2004).

State specific policies impacting sexuality education come from four sources: 1) Regulations of the Commissioner Part 135.5, 2) State Board of Regents Policy Statement, 3) Regulations of the Commissioner Part 100.5, 4) Teacher Certification, 5) State Content Outline for Health Education.

1) Regulations of the Commissioner Part 135.5

Detailing educational legislation for the areas of Health, Physical Education and Recreation, Part 135.5 dictates that: a) health education must be a “constant” for all students throughout secondary schooling, b) one-half year course of health education is required for junior high schools, c) one-half unit course is required for high schools, d) health education must be taught be a teacher certified to teach health according to NYS teacher certification standards, e)

every school needs to have a designated health coordinator, and f) all secondary schools teach AIDS education has part of the required health education courses.[35]

New York State has had an HIV/AIDS Education Requirement since 1987. This legislation does not stipulate either the number of AIDS lessons that need to be taught or that AIDS instruction need be taught in conjunction with larger STD or sex education topics. By NYS law, AIDS instruction must teach accurate information concerning the nature of HIV/AIDS, modes of transmission, and prevention methods. This instruction must: stress abstinence as the most effective protection, be age appropriate, and match community values. Additionally, all public school districts must establish an advisory council that has the responsibilities of recommending content, implementation, and evaluation for an HIV/AIDS program. This advisory council is established by the district's board of education and consists of parents, board members, relevant school personnel, and community representatives—including those from religious organizations. While this council makes the recommendations, the district's board of education ultimately approves and evaluates the proposed AIDS program.

The last policy falling under CR 153.5 is the opt-out policy. This policy states that parents or legal guardians can file a written request for their child not to participate in HIV/AIDS lessons if they assure that the child will get such instruction at home.

2) State Board of Regents Policy Statement on HIV Instruction

At its July 25, 1991, meeting, the Board of Regents adopted the following explanation of the Commissioner's Regulation 135.3 (C) (2):

> 1. The requirement that HIV/AIDS instruction must "stress abstinence as the most appropriate and effective premarital protection against AIDS" means that written and oral instruction on AIDS prevention must devote substantially more time and attention to abstinence than to other means of avoiding HIV infection. It also means that such instruction must always make it clear that no other method of prevention can provide the same 100 percent protection against infection as abstinence can.

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[35] Document available at: http://www.emsc.nysed.gov/ciai/pe/pub/part135.pdf

2. Among other things, the requirement that HIV/AIDS instruction must "provide accurate information...concerning... methods of prevention" means that any written or oral instruction relating to condoms must fully and clearly disclose the various risks and consequences of condom failure (New York City Department of Education, 2005, p. xiv).

3) Regulations of the Commissioner Part 100.5

A one-half unit health education course is required for all high school students to graduate and, as of 2001 all entering ninth grade students must additionally complete parenting education standards before graduating. Parenting education learning standards can be fulfilled by incorporating its instruction into either a health or family life and consumer sciences education course, or as a separate course of its own. Parenting education, defined by the NYSDOE, "provides youth with the knowledge and skills needed to be responsible parents and caring citizens" and "to help students recognize the critical role of families as the building blocks of a healthy community and the job of parents as the promoters and supporters of healthy family life and family values."[36]

4) Teacher Certification

Following all New York State standards and guidelines for teacher certification, in grades 7-12 health a teacher certified in health education must teach education and HIV/AIDS instruction. This, we will learn later in this chapter is grossly not the case.

5) State Content Outline for Health Education

Approved by the State Board of Regents in July 1996, the State Learning Standards govern the teaching of health education but do not explicitly set learning standards for sexuality education.[37] Additionally, among the eleven areas of study in Health Education, sexuality education is not explicitly one, nor is healthy relationships. The Areas of Study in Health Education are: 1) Human growth and development, 2) Nutrition, 3) Family life, 4) Alcohol, tobacco, and other drugs, 5) Safety, first aid, and survival, 6) Community health, 7) Environmental health, 8) Diseases and disorders, 9) Consumer health, 10) Emotional health, 11) Healthful life styles (New York State Education Department, n.d.).

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[36] See http://www.emsc.nysed.gov/part100/pages/parentingqa.html *and* http://emsc32.nysed.gov/guides/health/partI1.pdf
[37] See http://www.emsc.nysed.gov/ciai/pe/pels.html

Despite the fact that sexuality education doesn't appear in either the learning standards or areas of study for health education, the topic surfaces in several parts of the health education content outline. This outline connects New York State learning standards to the areas of study for health education, and issues of, and related to, sexuality education are covered in three of the eleven areas of study. The areas in which sexuality education instruction is included are: Human Growth and Development, Family Life, and Diseases and Disorders (New York State Education Department, 1995).

Local Policy

Policies governing sexuality education in New York City stem from two sources: the city's Health Education Program and HIV/AIDS Instruction regulations

1) Health Education

New York City has a self-described comprehensive health education curriculum. Similar to New York State its high school curriculum focuses on seven subjects: Abstinence & Sexual Health; Emotional & Mental Health; HIV, STD & Pregnancy Prevention; Improving Health Behaviors; Nutrition & Physical Activity; Tobacco, Alcohol & Other Drug Prevention; and Violence & Injury Prevention.[38] Converse to New York State, New York City overtly defines sexuality as one of the core areas of health education.

2) HIV/AIDS Education

A. History. In 1988 the NYCBOE extended New York State's 1987 AIDS mandate by requiring that students in grades 7-12 must receive six HIV/AIDS lessons per year and students in grades K-6 must receive five per year.

In 1991, the NYCBOE further expanded its 1988 mandate in what was known as the Expanded HIV/AIDS Education Including Condom Availability Program. This refurbished agenda included: a comprehensive new curricula for all grade levels; an HIV/AIDS Education Team in each high school made up of students, parents and faculty to plan how HIV/AIDS education will be delivered in the school; condom availability programs in high schools where condoms are offered at designated resource sites at least 10 periods per week; and an HIV/AIDS information

[38] See http://schools.nyc.gov/Academics/FitnessandHealth/StandardsCurriculum/ComprehensiveHealthEd.htm

training session for parents of high school students. Based upon data from the late 1980s, this 1991 curriculum is still being used and is based and includes some incorrect, outdated, and misleading information (Assembly member Stringer, June 2003; Mandell, 2004).

In a 2003 report of the state of health education in New York City's Public Schools, it was found that a majority of New York City schools and regions are not in compliance with either the State or City policies. Citing lack of certified teachers and that health education is not a "testing" subject tied to accountability standards as the primary reasons for the disarray of health education, New York City echoes the national trend of the "hands-tied" nature of NCLB (Scott Stringer, 2003).

A 2003 citywide survey of high school students found that: only 6 percent of students reported receiving the six mandated HIV/AIDS lessons, 30 percent said that since entering high school they had not received any HIV/AIDS education at all, 71 percent reported that their school did not have an HIV/AIDS Education Team, and 31 percent reported that their school did not have a Health Resource Room where students could access condoms (Mandell, 2004).

B. Current. Although unsure when it will be implemented into schools, in December 2005—after a long, embroiled political battle—New York City's new HIV/AIDS curriculum was released. Updated to include scientifically and medically accurate data based upon developments in the disease over the past decade, the new curriculum "deals with issues of interpersonal relationships sex, drugs, and death" and expands HIV education to include accurate information on STIs and safe sex in general (New York City Department of Education, 2005)

Principals now bear responsibility for ensuring that the six mandated HIV/AIDS lessons are taught each year. Training for teachers in the new curriculum began in October of 2005 and continued into the spring of 2006.

Although still grounded in abstinence—perhaps in large part due to federal and state policies—and in comparison to other states and districts, this new curriculum is overall impressive and represents a solid move in the right direction. Several of the most forward thinking principles included in the new curriculum are that children may come from a variety of familial constructions; it cannot be assumed that all students are heterosexual; care must be taken to distinguish

between “sexuality” and “sexual intercourse”; HIV can be transmitted through three types of sexual intercourse: vaginal, oral, anal and the teacher should initiate discussion of these three types; while the primary focus of this curriculum guide is HIV/AIDS, it is important for students to know that HIV is only one of a number of sexually transmitted infections (STIs); for people who are sexually active, using condoms is the best way to prevent HIV; and this curriculum covers how to maximize condom effectiveness (NYCDOE, 2005). The problem, however, is that by the sunset of 2008, most students had not yet experienced this curriculum.

Educational Policies Related to Pregnant and Parenting Teens

This section briefly details the major federal, state and local policies that shape educational opportunities and experiences for pregnant and parenting young women in New York City. For a detailed discussion on the educational politics and policies of pregnant and parenting teens, see Burdell, 1995; Kelly, 2000; Luker, 1996; Luttrell, 2003; Mittelstadt, 1997; Pillow, 2004; Pillow, 2006; Schultz, 2001.

Federal Policy

Title IX

Passed in 1972 and effective in 1975, Title IX was a federal response to a 1971 Massachusetts civil litigation *Ordway v Hargraves* in which Fay Ordway, a high school student, was dismissed from school as a result of a pregnancy. Broadly, Title IX prohibits sex discrimination in all schools that receive public funds. This includes discrimination on the grounds of pregnancy or parenting status. Title IX charges that public schools are responsible for providing equal educational access and opportunity to pregnant and mothering students. It states: “[A] recipient [of federal funding] shall not discriminate against any student, or *exclude any student* from its education program or activity, including any class or extracurricular activity, *on the basis of such student's pregnancy, childbirth, false pregnancy, termination of pregnancy or recovery therefrom.”* Stipulations of Title IX include:

- Schools are prohibited from discriminating against pregnant students based upon their marital status and cannot discriminate against a

- A school is permitted to require a doctor's certificate from a pregnant student only if the school imposes the same requirement upon all other students with physical or emotional conditions requiring a physician's care.
- Participation in special schools or programs reserved or designed for pregnant or parenting students must be completely voluntary on the part of the student. Such programs or schools must be comparable to programs and schools offered to non-pregnant students.
- Schools must treat pregnancy as they treat other medical conditions. Health plans, medical benefits, and related services are to be provided to pregnant students in the same manner as services are provided to students with "other temporary disabilities."
- A pregnant student may be granted a leave of absence for as long as it is deemed medically necessary and at the conclusion of her leave must be allowed to resume the status she held when the leave began.

State Policy

NYS Education Law § 3201-a.

Also enacted in 1972, NYS Education Law § 3201-a made it illegal for public schools to refuse anyone admission or exclude from any course of instruction on the basis of sex.

NYS Education Law § 3202.

Declares all children have a right to a free public education from age 5 to 21.

NY Education Law § 3205 (Compulsory Schooling Law).

Stipulates that minors *must* attend school from age 6 through the school year in which they turn 16. But in New York City, the compulsory age is 17.

NYS Bill A05376.

Recognizing the legal rights to perinatal care and equal educational opportunities of young women under the age of 18, this is an act to amend NYS Education Law (*§* 3641) with a prenatal care initiative. It was referred to the to the education committee on February 13, 2009. This bill would ensure pregnant teenagers “of compulsory school age are required to attend

school unless medical reasons indicate the contrary."[39] Specifically, this bill proposes the following stipulations:

- Section 1.1 Each School shall designate a faculty member who shall serve as a support person responsible for the dissemination of entitlement information and for the referral mechanism for students in need of prenatal health care and/or related services.
- Section 1.2. An ongoing effort should be made to involve the parent or guardian regarding student choices. Parental or guardian involvement should be sought to the extent possible without delaying the student's receipt of necessary health care or related services.
- Section 1.3. The designated staff should act, as facilitators to help ensure a course of action that will be in the best interests of the student are followed.
- Section 2.1. Educational choices should be available to pregnant students. Students should have the following options: remain in present school, transfer to another High School or program, and finally home instruction.
- Section 3.1. Pregnant students of compulsory school age are required to attend school unless medical reason indicates the contrary. If there is an unexcused absence, regular attendance procedures are followed.
- Section 3.2. The pregnant student and her parent/guardian should be provided with information, which enables her to seek the services, she will need to assist in the continuation of her education.
- Section 4.1. Reports on the progress of the student should be compiled the last day of the month.

Local Policy

New York City Chancellor's Regulation A-740 (2008)[40]

Updated in November 2008 to supercede its previous 2004 orders, Regulation A-740 clarifies the roles and responsibilities of schools and school personnel during and after a

[39] http://www.assembly.state.ny.us/leg/?bn=A05376

[40] See: http://docs.nycenet.edu/docushare/dsweb/Get/Document-34/A740.pdf

student's pregnancy based upon the policy that pregnant students under the age of 17 are required to attend schools unless otherwise prevented by medical reasons. It explicates rights of pregnant and parenting students, the responsibility of the principal and school staff, options available to pregnant/parenting students, and reproductive health privacy issues.

Closing of P-Schools

In 2007 the New York City Department of Education closed all of its specialized schools for pregnant and parenting teens in New York City, referred to as "P-Schools." While many of the P-Schools offered a sub par education to young mothers, they at least were schools designed to meet these young women's *right* to an education. The closing of these institutions with no alternatives is an explicit at of dispossession.

LYFE (Living for the Young Family through Education) Program

LYFE programs provide school-based childcare for parenting students (either fathers or mothers). Although there are thirty-eight LYFE Centers in New York City public high schools, these centers grossly under serve the demand needed. Of the more than 8,500 young women under the age of 19 who give birth in NYC each year, the 38 LYFE centers only have the capacity to serve 638 infants and toddlers (NYCLU, 2008). Two young women in the focus groups attend schools with LYFE programs.

On Desire for Health and Sexuality

> The consequences of these silencing and obscuring gestures extend beyond young people's bodies, desires, and pleasures into the whole of their lives. Sexual subjectivity is fundamental to young people's sense of agency in all aspects of their lives. As young people learn that they and others can—or cannot—experience, assert, and satisfy sexual desires and boundaries, they also gain a sense of their own and others' abilities to act and effect a range of changes they want to make in their worlds. Adolescence is a period of significant emotional, physical, and social growth for girls and boys in our society. Visceral experiences of puberty, desire, sexual behaviors, and violence make the body of particular importance to girls' and boys' sense that they can make change and have an influence. The lessons that both boys and girls learn about what they should expect and seek in bodily sensations, pleasures, and vulnerabilities also contribute to their sense of sexual subjectivity. (Fields, 2008, p. 110)

Situated in these contexts, youth have had their sexual subjectivities (Fields, 2008) hallowed out. But if you rein these policies around the testing and policing regimes described in Chapter Five you see an entirely different image. The focus on abstinence only has eroded knowledge systems and the social capital that health and sexuality education confers. As the

youth describe, it results in pregnancy, rape, skewed perceptions of masculinity and sexuality, reproduction of sexism and homophobia, sexually transmitted diseases, dropout, misinformation, and unhealthy intimate partner relationships and communication strategies. But testing and accountability regimes provide fuel to this fire by forcing schools to privilege only those subjects that are tested. Health education not only becomes irrelevant, but qualified health teachers are moot. In a time when young people are yearning for healthy relationships and social development, trust and fairness, denying health and sexuality education perpetuates social inequity. It maintains safety nets for those who already have them, and it throws no *life*vest to the millions of students for whom school and education is there only vehicle to another life; to other futures and possibilities (See also Street, 2005, p. 141-144; McClelland & Fine, 2008c). In describing "the missing discourse of desire," McClelland & Fine (2006, 2008c) argue:

> [T]hat young women (and men) are entitled to and psychologically motivated toward thick desire: a broad range of yearnings for meaningful intellectual, political, and social engagement, the possibility of financial independence, sexual and reproductive freedom, protection from racialized, homophobic, and sexualized violence, and a way to imagine living in the future tense (Appadurai, 2001, 2004; Nussbaum, 2003). A framework of thick desire locates sexual well-being within structural contexts that (dis)enable young women's economic, educational, social, and psychological rights. That is, we understand that young women's thick desires require a set of publicly funded *enabling conditions*, in which teen women have opportunities to: develop intellectually, emotionally, economically, and culturally; imagine themselves as sexual beings capable of pleasure and cautious about danger without carrying the undue burden of social, medical, and reproductive consequences; have access to information and healthcare resources; be protected from structural and intimate violence and abuse; and rely on a public safety net of resources to support youth, families, and community" (2008c, p. 244)

In the remainder of this chapter I report on findings related to health and sexuality education and services, filtered through the consequences to both young women *and men* of the "missing discourse of desire."

What's Taught, When, Where and by Whom vs. What's Desired

What has become evident is that there is not standardized a health experience for students in school. Six students attend a school where there is a comprehensive school-wide health initiative, including courses, student activities, school projects, health teams, health fairs and sex education. Several of the participants describe what they learn in health class in their school:

Sophia: We learned everything.

Alison: In health – everything.

Sophia: Everything, literally.

Alison: We didn't only have classes, we used to always – also have some days where they – it was a whole seminar, the whole day, and they would teach us all these different kind of things about your health, whatever, your health in general, or it could be your sexual health, or anything like that. They would have whole days where they would just teach about that stuff – workshops and stuff.

Eva: Last year they had this activity where people came from a clinic and they actually tested you for HIV for free. If you wanted to get tested.

Alison: They had it all day. We didn't have classes –

Lilly: And the whole day you are in workshops

These students' school was the most comprehensive by far and they had health professionals and health teachers. They describe being shown videos and images, and having different classes where they learned about different topics and STDs. Another student attends a school where they actually have a formal health class, in which comprehensive sex education is taught, but the course isn't taught until junior year—a time by which most students who will not graduate from high school have already left or been pushed out. One student had a formal health

class in the ninth grade, and another student also has a health class in which sex educators from a local university come in to the school to teach sex ed. Sharese describes her education:

> In my school we get health class, so almost every day we talk about sex and stuff. And people from Madison University come to our school and teach us about, like, a lot of things about birth control and sex, condoms, female condoms, and stuff like that. The Pill, and they teach a lot of stuff about that. But they don't give us condoms. They're not allowed to give us condoms. They give us cards to go to doctors and get checkups and see if you have any kind of disease or something, and if the students go to the doctor they can get condoms. But they don't allow them in my school.

But for the most part students describe bleak circumstances. Several students have health as an “option” in their school where you only take it if you want. Maritza says, “Heath is an option class in my school. It’s just another class. If you don’t have gym, then you’re stuck in that class.” Diana says “Yeah, we have health class. But that’s if you want to take it.” Several have not had it at all (and they are seniors). Malik responds to the question of whether or not he’s had a health education course by saying: “No. I research on my own.” Clearly desire, interest and relevance are there. Alise affirms this point: “Some schools don’t have health classes at all!” And several students have “officially” taken the class (i.e. it appears on their transcript) but their advisory teachers taught the “course” in their advisory class. Jermaine narrates this experience:

> We took one semester of health. In advisory. Advisory’s like homeroom, homeroom classes. My homeroom teacher basically gave us a printout article from the Internet about herpes, AIDS, pregnancy – specific STDs. That’s it. It’s like where are the books about how to put on a condom properly? Where are the articles about condoms breaking? What are the articles about you using those oral things– what do you call them? I seen other health classes where they showed males how to put on condoms. They showed females how to use female condoms, and they didn’t really do any of that. I’ve seen a lot of movies where teachers have got cucumbers and put the condom on. What happened to those?

> All we're doing is articles. They just basically gave us articles and we read it and then we got basically a passing grade. There's no – kids are having sex at the age of 11 now. At this generation, kids are going through puberty at crazy ages, so they're having sex now.

Lastly, one young woman describes her health class as being instructed by people from health clinics who come in once every three months and another describes her health class as "this lady come in twice and talk about sex ed. She said that we really need it because people had a lot of questions."

Across the board, health and sex education become conflated by the school administrations; where when students say health education, by-and-large they are referring to sex education. While sexuality education is critical, health education is as well. Ten participants actually described learning holistic health education, which included learning about the body, diseases, "what's good for you," sex education, drugs, healthy foods, and sexuality (including homophobia). One young woman's health class even integrated community service and fitness into it. Naomi describes, "Yeah they make us do a lot of walking. We do hiking, go on hiking trips. We do the walk, like the AIDS walk and the breast cancer walk too. And in our health class, our health teacher, she'll tell us what's good to eat and what's good. And what we should drink and stuff like that."

When listening to what students want to learn in a health class, they report wanting information on healthy relationships, mental health, sexuality, safe sex, nutrition, fitness, pregnancy, health resources, personal hygiene, and sexual violence and abuse. When asked what health classes should include, Malik responds: "I think like crimes—like sex crimes, also. Like rape and sexual assault and stuff like that. I think that's a good idea. Some type of law behind it." Alise echoes this by saying, "Yeah. They don't get into details or nothing. Not sex details, but how people actually feel. Like were they pushed into it." Here we can read that there is a tangled web of sexuality activity amongst youth, fluctuating between informed and engaged consent, to sexual activity based on misinformation or misunderstanding, to undesired sexual activity. Our survey showed that students who received no sex education were more than twice

as likely to report having been hit, slapped or physically hurt by their boy or girlfriend on purpose (15.5 percent) then were students who had been in comprehensive sex ed programs (7 percent). Interestingly, while of the students who reported having been hit, slapped or physically hurt by their boy or girlfriend on purpose more were female (54.8 percent) than male (42.9 percent), *overall* young men were more likely to report having been abused by a partner (12.1 percent) then were young women (7.0 percent). Young women (10.1 percent), on the other hand, were twice as likely as young men (4.7 percent) to report being forced to have any kind of sexual contact when they did not want to. An additional 1.5 percent of women and 2.7 percent of young men were *unsure* if they had ever been forced to have sex.

Lisa then offers: “And also maybe if you’re sexually active, where are places you can get free healthcare, like birth control and stuff like that if you need it.” We do a grave disservice to young people everywhere by not complicating teen sexuality and pregnancy statistics with ownership of the ways in which the institutions meant to keep safe and educate these youth about a healthy sexual life and desires are complicit. As Lisa says, “We have a lot of – we have girls who were pregnant, and they all gave birth. Maybe if they knew more information about protection or something like that, they wouldn’t be in that situation.” Taken together, these two statements highlight that knowledge, access and availability of free contraception are *all* requisite for safe sexual practices.

And as was reported here and in the previous chapter, engaging curriculum is pertinent. Diana details, “The health class can be much better because the one we got, it’s not really good. She’ll talk to us about – there’s this pamphlet that she has, and everybody has to go around and read it and nobody’s interested, everybody’s bored. And then, we have to get up for two minutes and do these fake exercises, something like this, and then we sit back down.” It becomes clear that data from survey questions asking, “Have you ever had health education?” is irrelevant, for we do not know what a “health education” class is defined as nor what is taught in that class. To this end, we revised the Polling for Justice survey after Wave I, to include questions on what was learned in an alleged health class and who taught the class. Currently, 90.8 percent of youth reported that they have had health education at least once between grades 6-12. But we do not

know if they are appropriately responding that a health education course appears on their transcript, but that they never really took an actual class—as is so widely reported in this study. In this sense, the qualitative portion of this study has offered critical, invaluable information for informing quantitative research on health education and health services in schools.

Another theme that emerges here is the lack—or absence—of certified health teachers in school buildings. Most students describe advisory teachers or outsourced health educators. What is principally problematic about this mosaic of health education experiences is that, as was articulated in the previous section, as a graduation requirement in New York State students are required to have a ½ credit (1 semester) health course that is taught by a certified health teacher. Yet what these young people's experiences are telling us is that in many cases school administrations are subverting this policy. This illegal act bears life and death consequences to the youth who administrations privilege AYP (Adequate Yearly Progress) mandates—to which funding and job security sanctions are attached—as opposed to, or in addition to, mandates that are not testable. In this sense, and in no uncertain terms, school officials are deciding futures for young people—removing the youth's right to become healthy beings and to make informed choices about what healthy or "risky" behaviors they want to engage in. Denying health education is both educational neglect and dispossession. To this point, Jermaine and Malik offer a very telling exchange:

> Jermaine: There's no [education]—kids are having sex at the age of 11 now. At this generation, kids are going through puberty at crazy ages, so they're having sex now. Plus, they're seeing what their older siblings who are in high school are doing, so you know they're doing it.
>
> Malik: Yeah, but they don't know enough about condoms or anything.

Jermaine: Exactly. So they don't know what to do. All they know is they're using their private on a girl's private and they don't know how to put the condom on properly. They could put it on wrong, and they're having sex and the condom breaks or falls off. There's no guidance on how…in the same way you can't drive unless you're taught.

On (Un) Safe Sex: Reflections on Condom Availability & Barriers to Usage

As the first section of this chapter illustrated, condoms are supposed to be available to high school students. Most students reported that they could get condoms in their school, one explicitly stated that condoms were not allowed in her school, and several students were unsure. In one focus group exchange between two young men, Jermaine was discussing where he gets condoms in his school. Malik jumps in and exclaims "I didn't know that. I'm going tomorrow!" Jermaine goes to the large comprehensive high school that his small school is located within to get materials on safe sex. Since he previously attended this large, comprehensive school, he had capital and expertise on how and where to locate this health knowledge. He describes what safe sex supports this other school offers:

> They have pamphlets on safe sex, STDs, how to prevent pregnancy, and they have condoms. They give you lubricant and all that. They give you a whole Ziploc bag full, and they give you the packets. Even though they don't talk to you about it, still, if you have problems, they're there to talk. I've seen so many girls went in there and obviously, because you can see, they're pregnant. So they're in there talking to this guy and a woman, so they have a stable program.

Young women had less to say about condom availability then men, mostly answering the question matter-of-factly: yes we do, no we don't. Conversations about birth control were more illustrious to the teen women. By speculation, this is either because focus group moderators did not investigate this issue further, or because discussions seemed to fall along the lines of what was in the students' locus of control. Men took up in depth conversations of condoms, and women of birth control. Extrapolated to the larger context, this reflects directly on inexperience

with health communication, skills for talking about sex with partners and for developing healthy relationships. Not to mention that this also reifies gendered power dynamics. The lack of health education young people get in schools fractals into exponential health and social outcomes; where here we see just one product of structural preclusion.

Another example of how lack of health education (re)produces shame, embarrassment and under developed self-advocacy skills, while at the same time not respecting and responding to adolescent developmental needs for privacy, can be seen in the following conversation about *structural obstacles* to teen condom usage. Demeterios, while coding this transcript, affirmed this exchange, noting: "True. True."

Malik: Yeah, they give condoms, but it's not like that's all they do. You have to ask for them. I don't think you should have to ask for them. I think it should be mandatory that you have some.

Jermaine: The reason why for kids – how do you feel like walking into an office with the social worker, guidance counselor, college advisor and whoever and asking can I have condoms? Like, that's – some people are bold, but yeah, some people just don't feel right asking for it. Of course – if I'm about to have sex and I have no condoms, when it comes down to me walking into an office asking for condoms in front of adults or me just going raw in a girl, I'm gonna go raw – I know it's not smart, but you know it's – people – how would you feel if you go to an adult saying dude – how can you ask that question? There's no way. I think they should have pick up bags – not pick up bags. Like a concealed something, somewhere private you could go.

Malik: Like a box or something.

Jermaine: Yeah, like go pick up condoms. It's not confidentiality if you have to walk into an office with a bunch of kids in there and ask for a condom. That's me personally.

Malik: Personally, I had to ask for a lot of kids to get condoms for them or whatever because they were too scared to get it. So, I understand what he's talking about.

(Un)intended Consequences and (Re)produced Outcomes

Pregnancy

"I know somebody that's pregnant. My whole school's pregnant this year."—Kamala

"There's girls getting pregnant left and right in my school."—Maritza

In every single focus group, participants spoke of teen pregnancy in their school. When Shakira asked in focus groups, "Do you know anyone who has gotten pregnant during the school year?" Responses echoed "Yes," "Oh, plenty of people!" and "Oh yeah, a lot of pregnant teens." In one focus group, when one young woman responded "Not a lot, its like one a year" she was interrupted by the other teen women saying "No! Yeah there are! Right about now there's four pregnant. That's what I hear." What ensued in all four female focus groups after this question was asked was a tangential conversation in which focus group participants went round listing all of the names of the girls in their schools that were pregnant. In all focus groups, of young women who attend schools that do *not* have childcare programs, they were able to identify between two and six girls in their school that were currently pregnant. In one focus group, where all participants happened to attend the same small school, when it was confirmed that there were at least four current pregnancies, Gail jumps into the conversation at that point saying "I'm flabbergasted!" In sheer disbelief at the amount of young women pregnant, she couldn't move past this reality for quite a few minutes. The Polling for Justice survey reports that 7.4 percent of the teens have been or have gotten someone pregnant, 5.2 percent of young women (or young men's partners') have had an abortion, and 12.4 percent have taken emergency contraception.

These divergences into who was pregnant changed in tone, shifting the focal point of the conversation away from providing information for the questions we were asking towards their own member checking and self-evaluation of their reality. Or what they had been so degradingly told would be their reality. When teachers and adults in school communicate such racialized low expectations and certain futures to young women, what is the cost? Alise tells us: "You know

what's crazy because growing up in junior high school, a lot of people doubted a lot of students, me, in particular. Me in particular. Saying we was gonna end up pregnant. But the people that they least expect, they'll get pregnant." The hyperbole of "my whole school's pregnant" clearly suggests that however many it is, it's too many. Too many young women that were supposed to have been, or could be, them.

The young men on the other hand divulged into conversations about what schools should be doing to keep young pregnant and parenting teens in school. Here is Malik's reflection on pregnancy, school dropout, and the state of urban schools through his perception of what (should) happen to young women who become parents:

> Some disappear, but some take their months of recuperation and they come back. There's no program. [This other school has] an after school program. It's not like especially made for people who are pregnant, but it's a night school program. I think we need that. I think that instead of having these secretaries and guidance counselors that sit there on their phones, turn them into like babysitters. I know it's not fair to them, but make them earn their money. Have the kids – I'm sure a lot of these girls who are pregnant's moms can't stay home, dads can't stay home, so they stay home themselves and watch their kids. Why can't you bring the kid to school, you know, do what you do? Our classes are like an hour and 30 minutes. Who doesn't like kids? You're already sitting down and doing nothing, so how hard is it to watch a kid? You've probably already had a kid yourself, so I think if that's not fair, have someone – have private – have teachers during their breaks come into the office or whatever while the mom has their kid. Just have some type of program. It don't have to be like a full class. Just have a teacher come in and explain the material, give it to her – check in and out with the mother. Cuz you know, there's no way you could have a baby, miss a good couple of months, come back and expect to graduate on time. I know teachers in the school say it's not my fault why she's pregnant, but at least

> she's making the effort! If the mother's making the effort to come back to the school, at least meet her halfway.

Malik's exposition communicates several important things to adults. It tells us that all students, young men and women alike, desire justice and inclusion for pregnant and parenting teens. So too does it communicate that young people yearn for community; it shows a deep sense of empathy. But it also shows that young people aren't asking for much: they are just asking for their rights (Benjamin et al, 2006), and for help in meeting their efforts halfway. Furthermore it shows how creative young people's solutions are; involving using resources that already exist and for putting as little amount of demand and pressure on people as possible. Malik's description accounts for the "personal responsibility" of the young mother but is merely asking for some structural and institutional help to support these young women. In reflecting on her school Eva says, "the good thing that like I like about this school they don't have the discrimination because you pregnant, they try to talk to you and they give you like, help you and they have to like take their work home some of the teachers will take their time and go visit you."

In addition to day care and academic support needed for parenting mothers, Karin offers a more grave perspective, introducing us to serious mental health needs for young women who may be depressive, suicidal or thinking of self harm or damage in some way:

> I feel if somebody's pregnant their classes should be different. Like why should you be learning social studies and all that? Even though that's what you need to pass. *But* when you're pregnant, you go through a lot. You go through postpartum, like different stuff. So I think you should be able to talk to them like other than just learning cause she just might really wanna be—like, you don't know what she's thinking of doing to herself after class or after school or whatever the case may be.

The nuances of Karin's quote identify that there is an importance for taking regular education classes, and that it's not that pregnant and parenting mothers should *not* have a quality education. Rather, young mothers should *additionally* be supported through their transition into motherhood—learning about how to keep themselves and their babies happy and healthy. And

both Karin and Malik's tell us that there is a chasm between what educational policies for pregnant and parenting teens espouse and what the lived realities and needs are.

Communication (and Violence)

> "No matter what the formal topic or classroom structure, every time teachers and students discussed—or failed to discuss—sexuality, they practiced *how* to talk about sexuality" (Fields, 2008, p. 82).

The Polling for Justice survey found that 65.8 percent of youth have been in a romantic relationship. As such, issues of healthy communication are paramount.

Alise: I feel that what the schools need to do is talk about what's more in society. Not just what they see on TV, what people are actually going through out here. Instead of just getting straight to the point, talk about how people feel about it. They don't talk about how people feel about it at all.

Shakira: About what, sex?

Alise: Yeah. They don't get into details or nothing.

Diana: What kind of details?

Alise: Not sex details, but how people actually feel like were they pushed into it.

Diana: Oh.

Shakira: So like people's personal experiences.

Alise: Yeah.

Shakira: But then you gotta realize some people are probably not comfortable talking about it, so that's probably why they don't try to force people to try to talk about it.

Alise: Not to force them, but try to make them feel more comfortable into it.

Shakira: But don't you think the topic itself is already, should be, uncomfortable?

Diana: Uncomfortable. Because I wouldn't talk about it, not with my class.

Alise: No.

Shakira: That's not something you could talk about –

Diana: Not with your class.

Shakira: – to just classmates?

Alise: No, not 'were you doing it?' But how was they feeling when it happened, stuff like that; not just talking about, oh, you had sex.

Shakira: Oh, their emotions. Your emotions.

Alise: Yeah, your emotions. Not just 'when you have sex, you do this you do that,' no.

Diana: Oh.

Alise: No, nobody wants to hear that. No. That's something you talk about with your partner.

Diana: Yeah.

Shakira: Yeah. What happens in the bedroom stays in the bedroom.

Alise: Um-hum.

Five critical things can be read from this dialogue. 1) Young people deeply desire to *talk* about their feelings and desire to learn *how to* talk about their emotions, 2) Young people are encountering forced sex, unprepared sexual engagement, or rape and lack of education in schools is causing *mis*informed, *mis*educated, aggressive encounters, 3) Youth do not have the practice of talking about sexuality so it is something that gets bracketed as either shameful or as something that needs to be done in isolation, 4) Young people are not equipped with the tools to talk about sex, or their emotions, with their partners, and 5) In addition to reproductive and sexual health and biology, young people need to be learning about communication and all forms of violence.

Comprehensive sex education educators and advocates promote wider communication aims for students, beyond just learning how to say "no" to sex. "They claimed that to reduce pregnancy, disease, and sexual activity among students, curricula should 'give young people the

opportunity to receive information, examine their values and learn relationships skills'…to promote their sexual health and well-being (Fields, 2008, p. 68).

In a focus group of young men I asked, "Would it make a difference in your experience of school if there was courses or places where you could talk about healthy relationships or issues of sex?" Jermaine responds:

> I think so because I know on the male standpoint, we think with the wrong part of our body, and once that happens, we're more likely to go out and mess with the first thing we see and contract something. I really think that we should have classes that we could – classes that we have a teacher who explains to us the safety of sex and all that. And also a teacher who would do like you're doing right now, have a one on one sit down, tell us the right – so we could get all of those feelings out to somebody. When it comes to fighting or anything, if you have feelings, it builds up, and once we let it out, it will relieve it. I think that you can't have kids these days or our crazy hormones and keep all that in because they're going to be acting at the first chance they get and not knowing the person they have sex with could have an STD or something really harmful.

Here too, these young *men* speak of "thick desire" to talk about their feelings and to learn about positive ways to channel and talk about their sexual energies. Beyond the possibility of pregnancy or contracting an STI (which the PFJ survey reports 35.2 percent of youth have ever been tested for, and 5.8 percent have had an STI/D), this statement also suggests that an even more debasing consequence of abstinence-only and of lack of sexuality education is that young people are not engaging in healthy relationships and that they are denied learning about puberty. Instead sex becomes reactionary (or *necessary*) and sex becomes aggressive, for both parties involved in the encounter. Again, the policies that have shaped the sexual milieu in which these youth swim is *manufacturing* the moral outcomes by which these same youth are then judged.

When I then asked if these young men had any suggestions for what types of programs would work well for issues dealing with relationships or violence, participants had enthusiastic responses.

> Most definitely. Mostly I've seen it in movies. I think all schools, especially high school, should have school psychiatrists because a lot of kids these days are doing outrageous things. When it comes to hormones, they're gang-raping girls in bathrooms and all that. When it comes to fighting, they're jumping people. I think it should be mandatory – they should do a class and the school therapist should give each of the kids exercises to control sexual urges, angry urges, anything. I think that would solve a lot of problems.

Jermaine's response articulates several alarming things. First, is the issue of gang-rape. This triangulates Alise's accounts above. Not to mention that this is the *second time* Jermaine mentioned gang rape in the focus group. (But he also mentions rape, as distinguished from gang rape). And while his was the only focus group in which this topic emerged explicitly, I think mention of it once is a significant finding.[41] Jermaine's response highlights the sexualized and gendered spaces of schooling, with violence being produced and reproduced by neglect on behalf of school administrations and educational policies. This sort of intimate violence—both rape and fighting—suggests that the social, psychological and sexual environment at school impacts adolescent choices, behaviors and attitudes at magnitudes larger than potential mal educational consequences (i.e. suspension, severe disengagement, etc). This choice, the data suggests is not without desire for an alternative. Second, it shows the extent to which discipline and control have inculcated youth development and become embodied. The discourse around the need to "control" "urges" (McClelland & Fine, 2008b) again communicates the warped relationship to sexuality that gets taught in many public schools (See Fields, 2008).

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[41] When member-checking this piece of data with the ProjectDISH youth researchers, they did not feel gang "rape" happened in their schools, but that gang "banging" did. Often. They proceeded to describe several accounts; the most alarming of which was one young woman who has had sex with eight different boys in the same encounter. And this event was videotaped and then seen by many people in the school—including two of the youth researchers. Whatever its called—or both—violent, exploitative, objectified, unhealthy, demeaning encounters *are* certainly occurring. While the youth researchers proclaimed that this girl "liked it," after having a conversation about how media, popular culture, objectification of women, gender and sexual exploitation, low self esteem and self worth, and lack of sexual understanding, education and awareness they were able to identify that a) "like" may be relative and that "no one" *really* wants that, and/or b) it is violence, either to one's self and/or by others.

Masculinity: In Two Parts

Young Women on Young Men

Alise: Boys are just plain immature, if you ask me.

Shakira: How?

Alise: They're little kids.

Shakira: The way that act? Because the way they carry themselves?

Alise: When they're around their friends, they don't know how to act, period, right? They got to try to shut people down.

Shakira: That they got to prove something.

Alise: They gotta prove a point, like, "Oh, I been hit that." "You been hit what?" They gossip. They gossip more than females, if you ask me.

Diana: That's true.

Shakira: You think so?

Diana: In my school.

Shakira: So what do boys do a lot? They talk about girls?

Alise: When they talk about girls, they don't talk about how smart she is or how good her grades be.

Diana: Well they talk about that about me, they do, they do. Not in a regular school – but my school is so small, it's like one floor, so –

Alise: Everybody knows everybody.

Diana: Yeah, the gossip is crazy. I don't even know people and I'll just be hearing so much stuff about them. The gossip is crazy in that school.

Shakira: Wow.

Alise: A regular boy won't talk about how pretty a girl is. You know what they talk about, how fly she gets, how big her butt is, how big her titty is, and when they gonna beat it.

Diana: Yeah, in my school, that's how it is, but not all the boys are like that in my school.

Alise: Not all boys is like that, but the majority of them.

Diana: There's probably like five of them that's not like that.

Alise: They judge a female on their physical appearance, not what they're really about. Because you never hear a guy asking, "What do you wanna do for a living? What do you wanna be when you grow up?"

Shakira: Sure enough don't. Now, what else you said? You said they judge females on appearance, their body –

Diana: Clothes.

Alise: Or not even. Some guys don't even ask you if you have a boyfriend or not, they just like "give me your number."

Diana: People don't care no more.

Alise: People sure enough don't because they know everybody's cheating nowadays.

Here we see the pervasive sexual harassment and degradation of young women. And like was reported in the previous chapter, here too young women yearn for *recognition* and identification from young men. Women desire to be known for their dreams and their intelligence, goals and accomplishments, and who they are. They do not desire to be objectified, exploited and *disrespected*. But most importantly we see that lack of sexuality education erodes healthy relationships and healthy conceptions of the other. Men are not taught how to have other meaningful conversations either with their male or female peers and place no value on other peoples relationships. Sexuality education is a content rich subject that also allows for development of conceptions of others and for thinking about things from differing perspectives. In fact, this masculinity also influences young women's understandings of themselves and relations with other young women. As Karin says, "You being friends with another boy and then girls get mad because they like the boy and they think you're doing something to him. It don't always have

to be like that." Evading health(y) education reproduces asymmetric gender dynamics and reinforces masculinity in the ether of schools.

Young Men on Young Women

Jermaine: I really think that they should start having separate classes for girls and really like scaring them. Show the graphic videos. Once they're juniors, I think they should be shown graphic videos. Because I'm sorry to say it – girls ask to be preyed on.

Jessica: Can you describe to me how? How do they ask for it?

Jermaine: Shorts that come way up here, tight shirts, walking – you're asking for it. There's no way you could leave your house dressed a certain way not asking for it. There's no way that you could – I've seen how many girls purposely when they have gym wear thongs and wear shorts that are basically – look like it's painted on them. They just – they think it's cute because they want boys to stare, but all they're doing is -

Malik: Making it –the crime rate higher.

Jermaine: And girls need to stop flirting. They need to really stop flirting because flirting could tell a male who's not that stable that oh, she likes him and then once he wants to pursue you and you say no, it wasn't like that, it's a little game I'm playing, he might – he might not take no for an answer. And that's how girls get raped. I think girls need a class that scares them straight. That's my personal opinion. That scares them straight. I have sisters, and I have cousins, and I don't want that to happen. They need to be scared straight! They need men who rape to come in as speakers and say oh, this is why I did what I did. They need girls who was raped their age and older to come in and say you know I used to be like you wearing the little short belly out and the short shorts and all

> that. They need to be scared straight because this generation – they're basically asking for it.

Sexism and misogyny are alive and well: blaming young women for their victimization while at the same time putting ownership and accountability for young men's behaviors onto the women. The school curriculum "has indicated that boys had no reliable role to play in any effort to achieve sexual abstinence and respect" (Fields, 2008, p. 90). And Jermaine himself thinks that changing this entire dynamic requires *solely* changes on the girls' part. He neither insinuates that young men are responsible nor surrenders that they also need educational programming. He is complicit is blaming rape, intimate partner violence and crime rates on women. But this also reflects on sexism and misogyny in society at large, and the trickling down of exploitative music videos and outrageous television and reality shows that have created new, either expected or accepted, boundaries for what young women should dress like, along with messages about what communicates a woman's worth. Such negative and objectified visual imagery that collages daily life has affected micro aggressions. It has been digested and is now being performed; highlighting the need for critical media literacy studies in schools (Duncan-Andrade, 2006).

This exchange also explicates internalized discipline, fear and violence. That his solution necessitates being "scared straight," coming face to face with violent offenders and seeing "graphic videos" communicates how much he has internalized the daily structural violence in school, community and in the media. But you also hear his vulnerability. When held in parallel to his earlier impassioned pleas for opportunities to talk about feelings and emotions and his desire to learn about sexuality and gendered empathy for the women in his life, his sexism must, in part, also be read as a manufactured outcome of his miseducation and educational neglect.

Demeterios wrote, when coding the transcript in which this account came from, "Maybe this is a great idea, but definitely for both males & females." And while single-sex classes may be important, generative and necessary, we must also be sure to bring young women and men together to learn how to talk to, about, and explore each other's genders and sexualities.

On Sexuality and Heteronormativity (or Homophobia) and the Devastating Consequences of Evaded Health Education

One last manufactured consequence of no health education in schools is the production of discourses around homosexuality and lesbian, gay, bisexual, transgender/sexual, queer and questioning (LGBTQ) youth. Here is a smattering of responses. Kamala, "In me and Sharese's school, everybody's gay. Everybody. EVE-RY-BOD-Y!" Ayana, "My whole school is gay. Everybody's bisexual. Everybody's gay. There's not even a lot of boys up there. But all the boys that's up there is gay. So they always just hang out with the girls. And then my school on the first floor, all the girls is bisexual and they all just hang out." None of these students attend Harvey Milk High School, the only high school in New York City that was founded for and explicitly geared towards LGBTQ students. As such, these students' phrasings are their own description of their "regular" small high schools. In tone, some of their responses are merely observational, reporting their own perception of reality in their school, judgment free. Yet for others, you can sense somewhat of a critique: partly derogatory tone and partly simple lack of knowledge or awareness about what any of this means other than the homophobic bigotry that is circulated through popular culture and through the silencing of these issues in schools.

While these young women all also describe having friends who are lesbian and gay, they discuss a threshold of what's acceptable—particularly for the gay boys. Ayana says: "If the whole school was gay, like, I would have a headache all day. Gay boys, like, you know how they be talking? It annoys me. Too much of it. I hang out with a whole bunch of them. But, it would annoy me to hear it every day. Every day, every day after school, in school, hang out with a whole bunch of gay boys, no." Denying sexuality education denies safe spaces for all students to exist in school, but particularly for LGBTQ students. And even for students who are accepting of the sexual orientation component of alternative sexualities, there is no education around the cultural and gendered components in the embodied and performed identities of LGBTQ youth. So they stay preserved in their heteronormative states/spaces. Where this homophobia and stereotyping is suffocating all parties. Straight youth can be suffocated by ignorance, while LGBTQ youth suffocate by violence, in all its forms. Resulting sometimes in death, as is the case

of the recent string of suicides by young gay teenagers—or teenagers who were *presumed* to be gay despite never having indetified as such—who had experienced harassment and bullying at school (GLSEN, 2009).

In closing this chapter, I end with one last exchange between two young men. It bleeds with conflation of sexism, homophobia, fetishizing (of lesbians) and of the excessive ostracization gay boys face. But beyond detriments to not knowing the sexual other, this passage articulates to two straight, eighteen year old, graduating, college-bound seniors in high school what an ultimate cost of being denied a legal health education is.

Malik: Like, [lesbians] out there. They're out there. The girls –

Jermaine: I don't know. Since 2008 started, everybody's turning lesbian now, to tell you the truth.

Malik: It's a trend now.

Jermaine: Yeah. Everybody's wearing those skinny jeans, no pants sagging. Girls are turning into boys, start squeezing in their breasts. They're straight dudes now. You know, there's not no discrimination about oh, she's a lesbian– Cuz, this is how we think: Well, personally, and tell me if I'm wrong . We have no problem with lesbians, but we have problems with gay people, MEANING we don't discriminate against gay people, but we're so naïve and we think that if two boys are gay, they have AIDS. Because you know what? Because we're not taught. All we hear is gay men have AIDS. We think that AIDS comes from men and men having sexual encounters. So of course, if all you're hearing is gay men have AIDS, people are not taught properly or aware however – it doesn't mean two sperm mix, that two sperm make AIDS. No. We're not taught properly.

This "trend" was not only confirmed by all the youth researchers, but it highlights the fluidity (and perhaps resistance to harassment and violence faced) that young people are

incorporating into their sexuality, gender expressions and identities (See Linville, 2009). This can be read in many ways as health promoting. On the contrary, reducing this “trend” to a “phase” may have damaging ramifications for the young women (and men) experimenting with their sexuality; for it denies them an identity in much the same way that these young men are outraged at not being recognized by their guidance counselors or treated humanely by school safety. But even more so, it depicts the reality of youth culture and their emerging sexualities, and schools are doing little to educate and eliminate homophobia, social isolation and to create inclusive communities. The silencing of sexuality education explicitly, causally and directly leads to miseducation, misinformation and perpetuation of racist, sexist, gendered and heteronormative stereotypes. But even more consequentially it maintains violence (either in physical or symbolic form) against the gay community *as well as* not aiding the combat of the HIV/AIDS epidemic—where new HIV infection (diagnoses) rates are on the rise, in the midst of Bush era sexuality education programs. The CDC (2007) reports: “From 2004 through 2007, the estimated number of newly diagnosed HIV/AIDS cases in the 34 states with confidential name-based HIV infection reporting increased 15 percent” (p. 5). And the number of new cases of HIV/AIDS increased in all age groups between ages 15-29.

Reading disjointed articles from the Internet in advisory leads to disjointed understandings of real social and health phenomenon. So blatantly marginalizing health education in schools molds the social capital that youth have concerning their own health. How do choices concerning health and health behaviors get made if the world in which a young person exists is precluded from particular bodies of health-related knowledge and experiences? And how does this preclusion systematically disenfranchise health *as well as* community capacity, the ability to be informed about and empathetic of others, and the eradication of all social -isms? In what ways does this avoidance marginalize and limit the forms of capital that one has and that one can access? As Akom (2006) states: “For Bourdieu, [these] micropolitics of inclusion and exclusion are some of the most invisible, pervasive, and effective forms of marking social and cultural distance, leveraging privilege, and creating and maintaining unequal access to institutional resources” (p. 84).

In this sense, health and sexuality knowledge, access and subjectivities become forms of symbolic capital (Bourdieu, 1986). Given this, one's habitus (or agency) is "a set of dispositions that generate and structure human actions and behaviors. Habitus develops through accumulated socialization experiences and represents the sedimentation, internalization, or embodiment of these experiences within the individual" (Dimitriadis & Kamberelis, 2006, p. 68). Since both students of color and whites, the poor and the rich, the heterosexuals and LGBTQ students are all socialized into the same educational system, we can not overlook the power that this accumulated socialization has upon the development on an individual youth. So we see the racialization of social, and health, capital achieved through the politics of health and sexuality education. In this sense, this data helps to support Akom's (2006) call for a "model of social capital that pays careful attention to (1) race, racism, and the processes of racialization; (2) identity-based frameworks; (3) context dependency; and (4) issues of power within and outside the ghetto" and urban schools (p.90).

Conclusion

Armed as a political tool, and with religious undertones, the debate surrounding the abstinence-only-until-marriage carries three severely threatening messages: a redefinition of "science," social control over bodies and the public sphere, and the compromise of humanity itself. Inherent to a redefinition of science is a drastic paradigm shift—one that conversely occurred in the 15th and 16th Centuries when science first emerged as a challenge to religion.

As the research in this chapter has shown, abstinence-only education policies *do* oppress and occupy bodies of youth. Pumping these abstract policies through the actual veins of young peoples' schooling experiences documents how the subjectivities of youth, their voices and their *beings* in this world have been shaped, neglected and born out of denial of learning about health, sexuality, relationships, safety and violence. And equally in how it results in patterns of social and sexual health. Schools have dispossessed them and the consequences of this are complicated and substantial. But we also hear their desire for: people to talk to, *accurate* knowledge, healthy relationships and communication skills, recognition, and safe, love-filled intimate relations.

In the next chapter, I present our mapping data and data on stressors through the theoretical lenses of embodiment and weathering. Then, in the final chapter, I will synthesize all of the research findings by offering a new way to conceive of school dropout. In the last chapter, I will also identify policy recommendations (both my own and the youth) for our research findings, as well as discuss implications for this work.

Chapter 7.

EMBODYING AND WEATHERING A MISEDUCATION:

EVIDENCE FOR ACCUMULATING STRESS AND (DIS)ADVANTAGE IN SCHOOL

> My heart aches for the people – my friends who are dropping out of high school.
> —Jermaine

> This place hurts my spirit.
> —A California high school student (in Darling-Hammond, 1997, p. 15)

> Stress affects mood, behavior, and problem solving, changes individuals' motivation to achieve goals or engage in self-protective behavior, and appears to lessen restraints against harmful behaviors. Stress affects the whole body.
> —Dougall & Baum, 2001, p. 325

> I never get angry. I grow a tumor instead.
> —Woody Allen

A few years ago one of my dearest friends and I were having a conversation about a relationship he was in at the time that was pretty stressful when he said: "I'll die a few years early from this anxiousness." And I can recall myself saying more than once that I was going to be physically sick, or that 'x' wasn't good for my health if I worried one more minute about it. I hear people on the subways and walking the streets talking about the physical degradation from one taxing life event or another. And I hear "my heart just can't take it anymore." This phrase holds both the corporeal and psychic. It is in this public discourse that sadness, anger, oppression, dispossession, or loss of everything is bad for the body. Think too about people losing all appetite while experiencing deep grief. Or the phenomena of people averse to doctors having staggeringly high blood pressure when measured at the physician's office. Now imagine the daily destruction of elevated body systems for the young people for whom schools are loath. How is it that emotional, lived responses to one's environmental and situational realities translate into physiological consequences? What are the depths to which this layered embodiment and an accumulation of negative life events contribute to health outcomes and disparities? How does the daily stresses of inequitable schooling, over the course of childhood through adolescence, erode

the body and lead to health outcomes? Does leaving school protect health? And how do we account for the differential values that an education has for some groups of youth versus others?

We are shaped by a public discourse around physiological reactions to visceral experiences, and yet any talk of the visceral nature of schooling is seemingly absent. Young people's voices are solicited to talk about school and its productions of their perceptions of futures and identities, but we don't get a picture of what schooling is *doing* to them. This chapter takes up this issue.

Specifically, this chapter explores how the *contours of education manifest in distributions of health*. Building upon the qualitative and quantitative data presented in the previous two chapters and introducing mapping data, this chapter considers *how* education may have come to be the most salient predictor of lifetime health and disease (See Chapter Two of this manuscript and also Freudenberg & Ruglis, 2007; Deaton, 2002). To begin, I introduce four conceptual frameworks useful for grounding analyses of such work. The second section presents the mapping data. The third and final section brings to life the mapping data by integrating focus group and survey data on reported stressors and health consequences, along with the literature with which it is conversation with.

Theoretical Underpinnings to Researching the Relationship of Education to Health

Defining Health

There exists an inextricable connection of people to their environment, and as Merleau-Ponty (1962) articulates, "The body is our general medium for having a world" (p. 146). "Our body" he says "*inhabits* space and time." It is neither *in* space, nor is it *in* time; rather "I belong to them, my body combines them and includes them" (Merleau-Ponty, 1962, p. 140). Characterized by the relationship between human bodies (with a biological constitution) with the social world in which they live (Krieger, 2005a; Farmer, 2004), health is the dynamic interplay of social processes, relations and events; individual experiences, being and ways of knowing; and biological influences within the larger social matrix into which one is embedded. Collectively these forces act with outcomes on both the present and with long-term consequences. Paul Farmer (2004) states that those who take up research on "hierarchies of suffering", "study both individual

experience and the larger social matrix in which it is embedded in order to see how various social processes and events come to be translated into personal distress and disease. By what mechanisms, precisely, do social forces ranging from poverty to racism become embodied as individual experience?" (p. 29-30). The data in this chapter evidences this question. [42]

Before moving on to describe the conceptual frameworks useful for grounding this work, I would like to mention briefly why I am not using either Foucault (1973, 1977) or Deleuze and Guattari (Fox, 1999; Grosz, 1994; McHoul & Grace, 1993), since they are foundational theorists in works dealing with the body. While I find components of their theories very useful and critically important, both Foucault and Deleuze & Guattari dismiss the idea of a physical body and of the body as having a biological constitution. They opt instead for the body as solely a psychic and philosophical surface, one that gets inscribed by discursive elements, social forces, and ethered, romantic relations of power, capital, and oppression. The conceptual frameworks presented in this discussion argue that health occurs at the nexus between biological and social forces, between the body being in the world and the world in which it inhabits, and they necessarily involve the two:

> While perhaps obvious, embodiment is contingent upon having a body. Understanding probable pathways of embodiment thus requires clarity about what it is that bodies do, as jointly biological organisms and social beings. Minimally, this includes:
>
> a. for biological organism: reproduce; develop; grow; interact; exist in time and space; and evolve;

[42] While the World Health Organization offers a good operational definition of health ("Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."), I am making a deliberate choice to not create my own confined and categorized definition of health. I believe systematically defining health would aid reinscribing social judgments and forms of social control that already exist under the categories of "high risk" or "unhealthy" behaviors. Not only do the terms 'health' and 'school dropout' take on very different meanings and permanence in different populations, they are also devoid of the environmental, cultural, ecological, epistemological, political, economic, and social foundations in which health, health behaviors and disparities are grounded. Similarly, by defining health ambiguously the data is open to accounting for the contradictions in health data, trends and decisions. An explicit definition of health reifies. And while I do not delude myself into thinking that there aren't better and worse choices to make concerning health, better and worse states of health, that health equally has a biological component as it does social, and that disease, trauma and illness objectively exist; I believe that the larger forces acting on schooling manifest themselves in ways that shape, define, and preclude (or bolster) health outcomes and ones subjective meanings of health. As we saw in previous chapters, one can't know what healthy nutrition is without first the opportunity to learn about it, but one can also not engage in healthy eating options without food availability either.

b. for social being: societal context; social position; social production; social consumption; and social reproduction (Krieger, 2005a, p. 351).

In this vein, four constructs are central to researching the relationship of schooling and health. First, is ecosocial theory, second is the concept of embodiment, third is the analytic framework of weathering, and lastly is the concept of cumulating advantage/disadvantage over the life course. While many theorists aptly and philosophically deal with the concept of embodiment (See Lock & Farquhar, 2007), I limit the discussion of embodiment here to Nancy Krieger's (2001) work for she operationalizes embodiment in a way that is constructive for research in this particular line of inquiry and context.

Ecosocial Theory

Ecosocial theory is grounded in the following question: "who and what drives current and changing patterns of social inequalities in health?" (Krieger, 2005b, p. 5). Ecosocial theory supports other models of health and development (Bronfenbrenner, 1977; Revenson, 1990) in its consideration of education as both systematic and as *the* fracture that cuts across all levels, domains, contexts of childhood and adolescence. It demonstrates schooling as a process that defines one's life and being. School becomes a pathway, domain, scale, and institution through which embodiment occurs and by which social inequalities in health are forged. The ways in which youth experience, are subjected to, move between, make sense of, and accommodate the many levels, contexts, and layers of their schooling worlds I argue are a primary component of what defines, or creates, health. And it has four central constructs (Krieger 2005a, 2005b).

Table 7.1 *Core Constructs of Ecosocial Theory*[43]

Construct	Elaboration
Embodiment	a concept referring to how we literally incorporate, biologically, the material and social world in which we live, from in utero to death; a corollary is that no aspect of our biology can be understood in the absence of knowledge of history and individual and societal ways of living. As elaborated in this article, ''embodiment'' for epidemiology is best understood: (a) As a construct, process, and reality, contingent upon bodily existence; (b) As a multilevel phenomenon, integrating soma, psyche, and society, within historical and ecological context, and hence an antonym to disembodied genes, minds, and behaviours; (c) As a clue to life histories, hidden and revealed; and (d) As a reminder of entangled consequences of diverse forms of social inequality.
Pathways of embodiment	structured simultaneously by (a) societal arrangements of power, property, and contingent patterns of production, consumption, and reproduction, and (b) constraints and possibilities of our biology, as shaped by our species' evolutionary history, our ecological context, and individual histories—that is, trajectories of biological and social development.
Cumulative interplay between exposure, susceptibility and resistance	expressed in pathways of embodiment, with each factor and its distribution conceptualised at multiple levels (individual, neighbourhood, regional, or political jurisdiction, national, inter-national or supra-national) and in multiple domains (for example, home, work, school, other public settings), in relation to relevant ecological niches, and manifested in processes at multiple scales of time and space.
Accountability and agency	expressed in pathways of and knowledge about embodiment, in relation to institutions (government, business, and public sector), communities, households, and individuals, and also to accountability and agency of epidemiologists and other scientists for theories used and ignored to explain social inequalities in health; a corollary is that, given probable complementary causal explanations at different scales and levels, epidemiological studies should explicitly name and consider the benefits and limitations of their particular scale and level of analysis.

[43] Originally published in Krieger, 2005a, p. 352

The first construct is *embodiment,* refers to how people biologically integrate lived experiences from the material and social worlds, from conception throughout their entire life course. This chronological integration creates patterns of population health and disease. Embodiment holds that biology cannot be understood severed from history, social context, and individual lifeworld. This construct will be taken up in depth in the next sub-section.

The second construct is *pathways to embodiment.* This refers to the multiple pathways, each comprised of multiple levels, to any given outcome. These pathways are simultaneously structured by a) possibilities and constraints of social, biological and ecological contexts and exposures, and individual life histories; and b) by societal arrangements of power, capital, and patterns of consumption, production and reproduction. Educational possibilities and constraints and the (racialized) educational arrangements of power, capital and patterns of consumption, production and reproduction have been detailed throughout all of the preceding chapters. Collectively they structure the pathways to embodiment for students attending public schools.

The third component is *cumulative interplay of exposure, susceptibility, and resistance across the lifecourse,* which are expressed through pathways of embodiment. Each of the three factors is conceptualized and distributed across multiple levels (micro, meso, exo, macro, global), domains (home, school, work, etc.) and scales (niches, time and space). Variant levels and scales of the school domain and have been introduced earlier in this document, and a discussion of student *resistance* will be explored in the concluding chapter.

The last concept of ecosocial theory is *accountability and agency,* both for social inequalities in health and for the ways in which these inequalities are or are not analyzed and addressed by institutions (public, private, and governmental), communities, families, individuals, researchers, etc. The overarching aim of this dissertation is to take accountability and employ agency for social and health inequities through research and analysis of educational institutions.

Embodiment

> Embodiment. This construct and process are central to ecosocial theory and epidemiological inquiry. Recognising that we, as humans, are simultaneously social beings and biological organisms, the notion of "embodiment" advances three critical claims: (1) bodies tell stories about—and cannot be studied divorced from—the conditions of our existence; (2) bodies tell stories that often—but not always—match people's stated accounts; and (3) bodies tell stories that people cannot or will not tell, either because they are unable, forbidden, or choose not to tell. Just as the proverbial "dead man's bones" do

> in fact tell tales, via forensic pathology and historical anthropometry, so too do our living bodies tell stories about our lives, whether or not these are ever consciously expressed. (Krieger, 2005a, p. 350)

As is already evidenced in this dissertation, and as educators, we see the stories the bodies of young people tell by their burns and bruises from abuse, safety, survival, suicide and self-hatred; by the signs and symptoms of their depression; by their slices from gang initiation; the acts of self-mutilation (cutting); and by their lethargy from not sleeping or eating healthily. We also hear of the middle school child who still bed wets, but is unable and forbidden to tell about sexual abuse. We see aggression, which is often a distorted self-protection and self-preservation. Students' bodies tell stories, but we need a better way to account for all of the ways schooling diffuses throughout the body and to document the stories youth's bodies tell of their schools.

According to Krieger (2005a), embodiment is a concept that refers to "how we literally incorporate, biologically, the material and social world in which we live, from in utero to death; a corollary is that no aspect of our biology can be understood in the absence of knowledge of history and individual and societal ways of living" (p. 352). Otherwise, Krieger states *"there would be no variation in population health across time, place, and social groups"* (2005b, p. 3, emphasis added). A constitutional piece of what young people bring into themselves is schools: A system that by definition is historically and socially contingent.

There are four epidemiologic notions of embodiment that collectively are essential to exporting this notion to schooling. Embodiment is conceived as: 1) a "construct, process, and reality, contingent upon bodily existence"; 2) "a multilevel phenomenon, integrating soma, psyche, and society, within historical and ecological context, and hence an antonym to disembodied genes, minds, and behaviours"; 3) "a clue to life histories, hidden and revealed"; and 4) "a reminder of entangled consequences of diverse forms of social inequality" (Krieger, 2005a, p. 352). Embodiment conceived in these four ways makes it possible to think about *how to* research where, how and in what ways the social matrices in school get taken up by the body. In this sense, embodiment is not merely a theoretical frame; it is equally a methodological one.

The mapping prompt was developed explicitly for trying to research embodiment. Attempts to find bodily experiences, both hidden and revealed, and to investigate the

consequences of social/educational inequality structured the focus group protocol, looking at experiences across levels and over time. This work requires a phenomenological perspective (VanManen, 1990) as each individual participants narratives, perceptions and experiences must be taken as *reality.* But beyond phenomenology, subjectivity or perception has a biological reality, particularly for those young people at risk of not graduating from high school. In a 2004 study on the effect of daily stressors and health, Grzywacz, Almeida, Neupert & Ettner offer two significant findings: 1) examining within-person covariation of stress and health indicate that experiencing daily stressors, *particularly those that are subjectively severe*, promote declines in physical and mental health, and 2) results from between-person analyses strongly suggest that experiencing *subjectively* severe stressors promote negative changes in daily health more for those who do not complete high school than for those who either graduate high school or have a college degree (emphasis added).

Weathering [44]

Weathering, a form of early aging and in essence an accumulation of embodied experiences, is a process whereby one's "health reflects the cumulative impact of their experiences from conception to their current age…The older they are, the more time they have had to have health-impacting experiences, and the greater the opportunity for these experiences to express any *(even lagged)* health effects or to accumulate or interact with others" (Geronimus & Thompson, 2004, p. 257, emphasis added).

One common experience cited widely in the health literature as having drastic health implications is the experience of racism (Clark et al, 1999; Fang & Meyers, 2001; Guyll et al, 2001) and the quality of health care received by different demographic groups. We know that the same is unfortunately true for schools, which are systemically and interpersonally racist institutions (Feagin, 2006) and that provide inequitable educations to varying groups of young

[44] A limitation of weathering is that it has only been effective for explaining differences in Black-White health disparities. I acknowledge this, but also think this limitation actually provides a useful starting point for examining how the historical educational foundations of Latinos, Native Americans, and other marginalized groups differ (or are similar to) from Black, which could be am important contribution to thickening and informing the weathering framework and explaining the "immigrant effect" of health and how/why many Latinos have health status more similar to Whites than Blacks. Additionally, I think that the weathering hypothesis offers a very useful literary metaphor for youth, making real imagery of the ways in which schooling erodes their psychic and physiological selves.

people. This is an important point to consider in the plausibility of education being embodied: that health disparity first becomes readily apparent in teen years, after an accumulation of the formidable years of schooling and then the gap widens after age 25—after which one's ultimate schooling experiences have had a chance to accrue.

More specifically, as Geronimus (2001) explains: "The weathering framework conceptualizes racial inequalities in health as physiological manifestations of social inequalities between groups, pointing to socially structured sets of opportunities and constraints—including available mechanisms for pursuing goals and coping with adversity—as sources of health disparities" (p. 135). The data presented throughout this dissertation (and the frame of school non-completion which will be introduced in the concluding chapter) highlights the socially structured sets of educational opportunities and constraints as sources of health disparities.

The central premise of weathering is that early health deterioration occurs in African Americans because, in comparison to their White counterparts, they have more and more frequent experiences with economic, social and political adversity and exclusion. Included in this weathering frame is the physical cost of the requisite active engagement with, and resistance to, structural barriers to one's well being and achievement. Similar to ecosocial theories and notions of embodiment, weathering hinges on the belief that experiences in-utero and continuing throughout the rest of one's life accumulate and present as health issues. I suggest that the pathways and processes of education are central features of weathering. And as will be evidenced in the remainder of this chapter, schooling stressors are some of the most oft cited educational experiences youth have.

In a 2008 study by Walsemann, Geronimus and Gee entitled *Accumulating Disadvantage Over the Life Course*, which looked at the relationship between educational advantages in schools and health-induced work limitations,[45] the authors found that indeed educational advantages in school accumulate over time and in turn contribute to "widening health disparities

[45] Health-induced work limitations are the measure of health status for this study for several reasons. First, these were the relevant questions asked on the NLSY; where specifically three work-limited/health questions were asked. Second, health-induced work limitations are "highly correlated with disability, functional limitations, health impairments, activities of daily living (ADLs), instrumental activities of daily living (IADLs) and self-reported health…,and produce comparable findings as measures of self-reported health when used as a dependent variable in multi-variate analyses" (p. 176).

as individuals age" (p. 170). Using survey data, annual interviews from 1979-1994, and biannual interviews from 1995-2002 of a sample of 4,627 non-Hispanic Whites, 2,719 non-Hispanic Blacks, and 1,704 Hispanics from the 1979 cohort of the National Longitudinal Survey of Youth (NLSY), this study highlights three groundbreaking findings:[46]

> 1) greater educational advantage in youth is associated with lower probabilities of health-induced work limitations in adulthood and later onset of health-induced work limitations,
>
> 2) the health gap between those with greater versus fewer educational advantages in youth widens with age, and
>
> 3) the magnitude of the racial health disparities over the life course is modified by educational advantages (p. 192).

This study is extremely important for considering the thickness of how education and health are interrelated by illuminating several important questions: What are the ways in which resisting or leaving school may be more health promoting than staying? What are the health returns of this decision in the short and long run? How do we account for the differential values that an education has for Black students versus other groups of youth (See Western, 2006)? Educational dispossession harms more than futures. It harms lives, bodies and futures.

Cumulating Advantage/Disadvantage and the Life Course

> Cumulative advantage/disadvantage can be defined as a the systematic tendency for interindividual divergence in a given characteristic (e.g., money, health, or status) with the passage of time…'Systematic tendency' indicates that divergence is not a simple extrapolation from the members' respective positions at the point of origin; it results from the interaction of complex forces. 'Interindividual divergence' implies that cumulative advantage/disadvantage is not a property of individuals but of populations or other collectivities (such as cohorts), for which an indentifiable set of members can be ranked…Although CAD is a property of *collectivities*, it is centrally relevant for those interested in *individuals*, *because it is concerned with the existence and sources of age-specific individual differences and with questions of fairness in the distribution of opportunities and resources*. —Dannefer, 2003, p. S327, emphasis added.

In short, cumulating advantage/disadvantage deals with "trained capacity, structural location, and available resources" which incrementally advantage and widen gaps between the

[46] The word Hispanic is used here and not Latino as is utilized throughout the paper because Hispanic is the term used in the original study and is the category label that the NLSY employs. It does not represent an oversight on the author's part.

haves and have-nots (Merton, 1988, p. 606). And it conceptually and methodologically integrates the macro and the micro. In this frame, (and allied with Bourdieu's (1990) social reproduction theory (See also Wayne, 2008; Bowles & Gintis, 1976)), schooling becomes a medium through which advantages and disadvantages begin in elementary school and accrue, due to the differentiated educational and social opportunities children and adolescents have access to and opportunities for.

Coupling this concept with critical race theory, we see that distribution of fairness, opportunities and resources are deeply asymmetric.[47] We merely need to look at data on school violence to see that Black and Brown bodies bear the consequences of White crime. Of *all* thirty-seven incidences of "targeted school violence" (i.e., school shootings) from 1974-2000, an overwhelming majority of the forty-one attackers were White (76 percent) and from two-parent households (63 percent). And yet it is urban public schools, where a majority of students are *students of color* that are forced to endure the hyper-sensationalized fear of school violence and adolescence, and whose bodies are subject to daily security, surveillance technologies and extreme disciplinary measures. Here we see the production of life course trajectories based on "allocation mechanisms" for different collectivities.

Dannefer (2003) goes on to say that if education is indeed a "resilient mechanism" through which "regimes of inequality are reproduced" (or, I would argue, generated) "then the diverging interindividual trajectories that lead to increasing intracohort inequality have their origins in education-based stratification in early childhood, and, it can be hypothesized, continue to be amplified through the life course" (p. S331). Thus, CAD provides more than a systematic conceptual frame in which to situate research on schooling as a social determinant of health. It offers a means through which to explore how "success and failure are created" (p. S331). Considering the now fortified trend of the "health gradient" (Adler et al, 1994; Adler & Newman, 2002) which evidences the consistent, divergent gap in health status by socioeconomic status (Ross & Wu, 1996; Kim & Durden, 2007), the concept of CAD opens up the space for *schooling—as distinguished from education*—to be considered an inextricable resource of socioeconomic

[47] This concept of fairness will be discussed at the end of this chapter, where as it turns out is not only a universal schooling experience for students but one that also bears substantial costs to health.

status that further advantages or disadvantages the health of people based on their socioeconomic status.

In the next section, I present the data from our study evidencing the ways in which schooling is embodied and the ways in which disadvantage accumulates.

Evidence of the Embodiment of Schooling

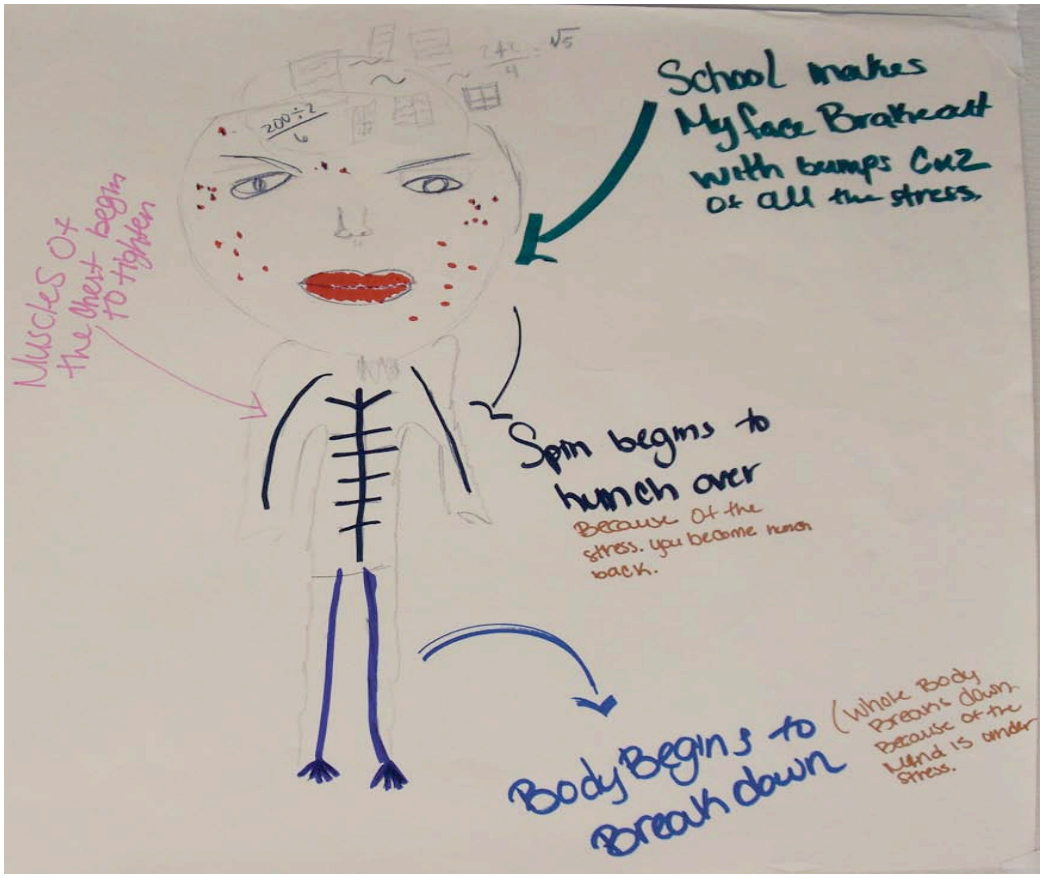
Maps: Windows to the World of the Education-Health Nexus

As the very first activity of our focus groups, we asked participants to imagine they were leaving school one afternoon and going to a doctor to get an x-ray of their whole body. In the same way a doctor would x-ray a pained arm to see if it was broken, to see that which cannot be seen with the naked eye, we asked the participants to imagine that this doctor wanted to see the marks school was leaving on their inside. We wanted to see what their body could reveal about what schools are doing to them: what an x-ray of their body could show us about schools that we cannot see with our naked eye. So we gave all focus group participants the following mapping prompt:

> *Draw an x-ray of what your a normal day in your school looks and feels like in your body.* (i.e., *Where* are your daily school experiences located in your body and *what* do they feel like?)

With large sheets of drawing paper, countless choices of markers, crayons, colored pencils, paint tubes and glitter glue, participants were given twenty minutes to draw their x-ray. We asked participants if they were done early to write an “Artist’s Statement” on the back of their map, describing in a few sentences what their map portrayed. Each participant then went around the room describing their map to the rest of the group. When analyzing the maps, we used both the map content as well as their oral description of it. Below I discuss eight maps. After detailing each map I will then move into a discussion of the findings for all of the maps.

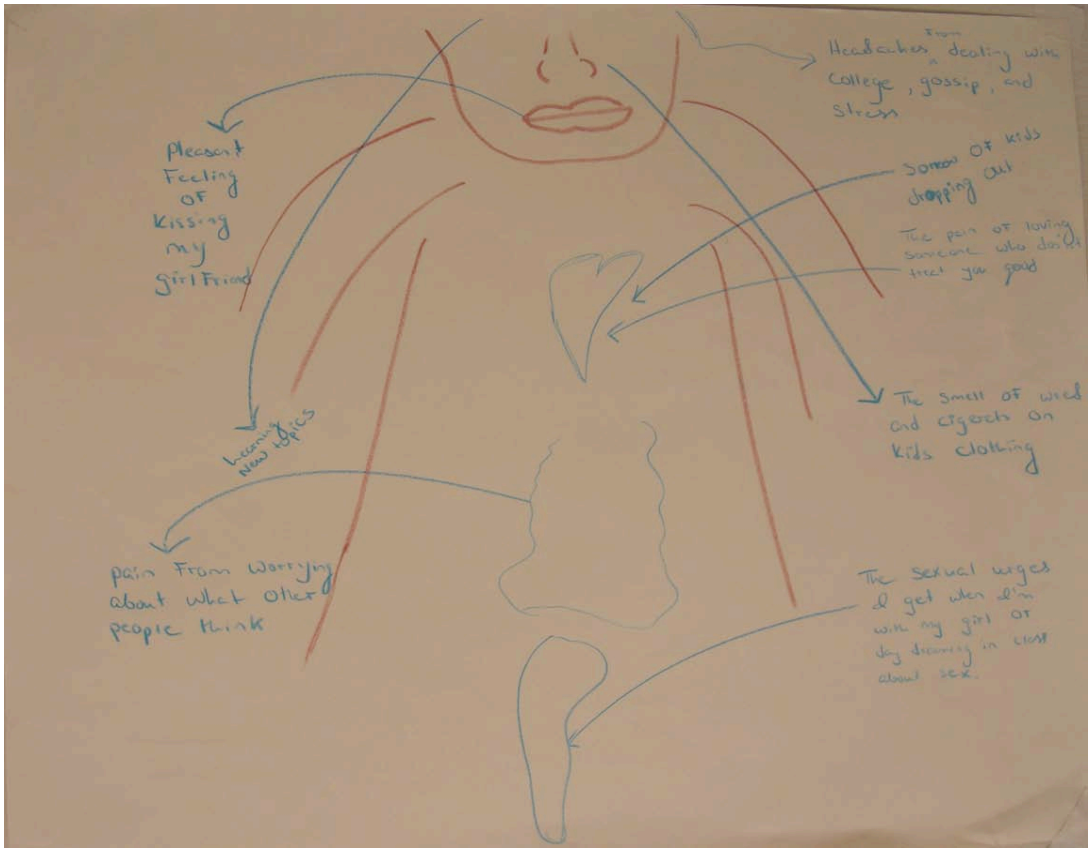
Figure 7.1 *Martiza's Map*



Maritza is a 16 year old, Puerto Rican female from the Bronx. In her map, she annotates six specific body parts that are affected by school. Through visual representation of mathematics formulas and pages of books and writing, Martiza describes the stress and headaches that her brain feels because she takes "so many classes." She also shows that her face breaks out with bumps due to the stress of school. When describing her map to the group she says, "My lips change color. I don't know why, but my lips change in color." She feels school in her spine, which "begins to hunch over because of all the stress." She continues, "the more you get stressed, your spine tends to hunch over, so mine's just tends to hunch over." Maritza experiences her "chest muscles tighten, which causes it to be hard for me to breathe." This too is because of "stress." Lastly, she describes her whole body as affected by school stating perhaps in the most explicit youth quotation that *defines embodiment and weathering*, "As my brain starts to break down, my body does also, because the mind controls the body." On her map, she writes: "Whole body breaks down because of the mind is under stress."

When I followed up with Martiza and asked her what some of the really stressful things about school are that cause her face to break out and her spine to hunch, she replied immediately: “Not passing my Regents exams. Tests.” Here, we see evidence of the bodily costs of the stress and anxiety generated by high stakes exams: a topic which will be taken up in detail later in this chapter.

Figure 7.2 *Jermaine’s Map*



Jermaine is an 18 year old, African American male, also from the Bronx. His x-ray identifies six body parts that are specifically affected by schools. His Artist’s Statement reads: “The picture I drew depicts the day to day heartache and enjoyment I face at school. Heartache from worrying, getting my feelings hurt, and being talked about. And enjoyment of the sexual urges which come from being with that special one I really enjoy it. I consider the feelings which I experience at school as those seen in a soap opera.” His body confirms the costs and social environment of gossip and drama in schools that we’ve heard stories of in the previous chapters.

In looking at his map, Jermaine describes first the headaches that he experiences from "dealing with college, gossip and just the stress of school." His head also embodies "learning new topics for math and science" which if "I don't understand it, it will give me a headache, but if I understand it, it will give me a good feeling." Here again we see evidence of education as a moderator of mental and physiological health. His nose is annotated for "the smell of weed and cigarettes on kids clothing."

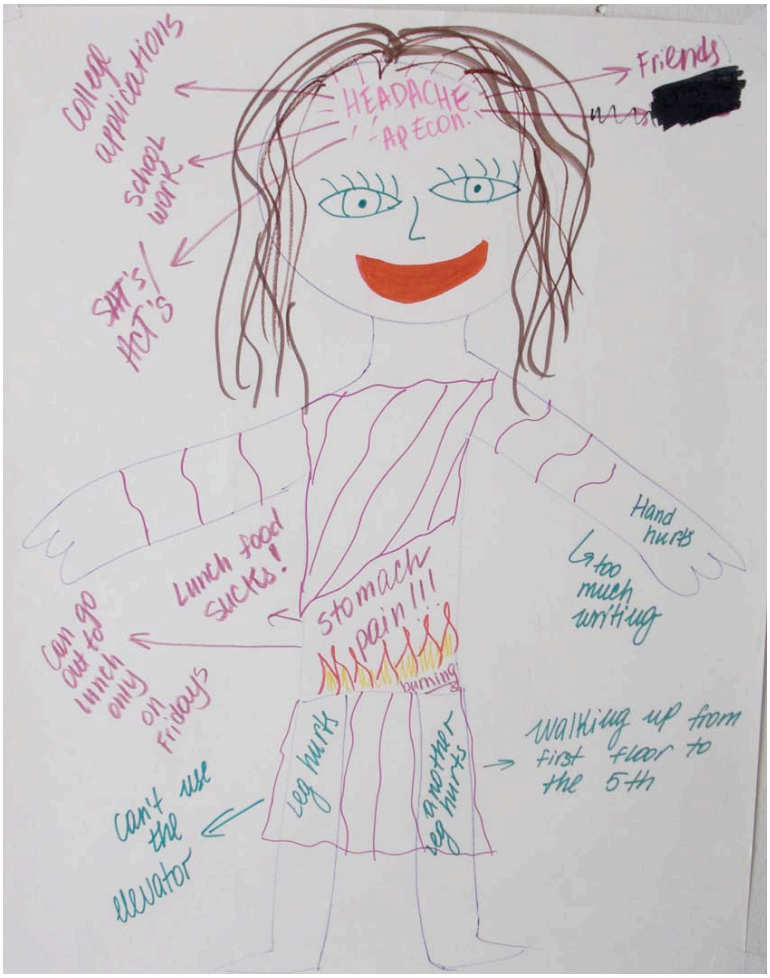
Jermaine's heart is doubly annotated. Once for the "sorrow of kids dropping out", the "heartaches for the people—my friends who are dropping out of high school" and once for "the pain from showing love to different people who don't show love back to me." Jermaine goes on to say "you can see my private area, which gets a lot of erections from being with my girlfriend and thinking about different people and the different girls in the school." His lips also depict the embodiment of sexuality, and "the pleasant feeling I get from kissing my girlfriend." His stomach hurts and aches from worrying about what other people think. In following up on the pain and worry in his heart and stomach, I asked Jermaine whom he worried about gossiping about him:

> It's adults and my peers because when it comes to adults, I have an image. Like if you went up to the teachers in my school, they'd say Jermaine's a very good kid. He does all his work. Let's say I was to mess up because we're all humans and we're going to mess up. If I was to mess up and one teacher has a bad remark about me, I will really get worried and stressed that they will spread it around to other teachers because it will switch the way they think about me. My peers, I'm just a kind person in general, and I like to help people. I hate to feel if I'm helping somebody and they don't appreciate it. For example, I will help Justin one day and then the next day, he's just looking at me like we're not friends or nothing like that, so that would be stressful.

Already, we see the theme of stress as paramount, as well as the triangulation of findings on gossip, sex, intimacy, relationships and need for sexuality education. But we also see the psychic and corporeal *consequences* of lack of trust and punitive discipline practices which have so instilled fear in Jermaine's mind; and of no sexuality education which includes, as I argued in

the last chapter, healthy communication and healthy relationship strategies. The denial of sexual subjectivities does indeed hurt the body and stunt healthy adolescent development.

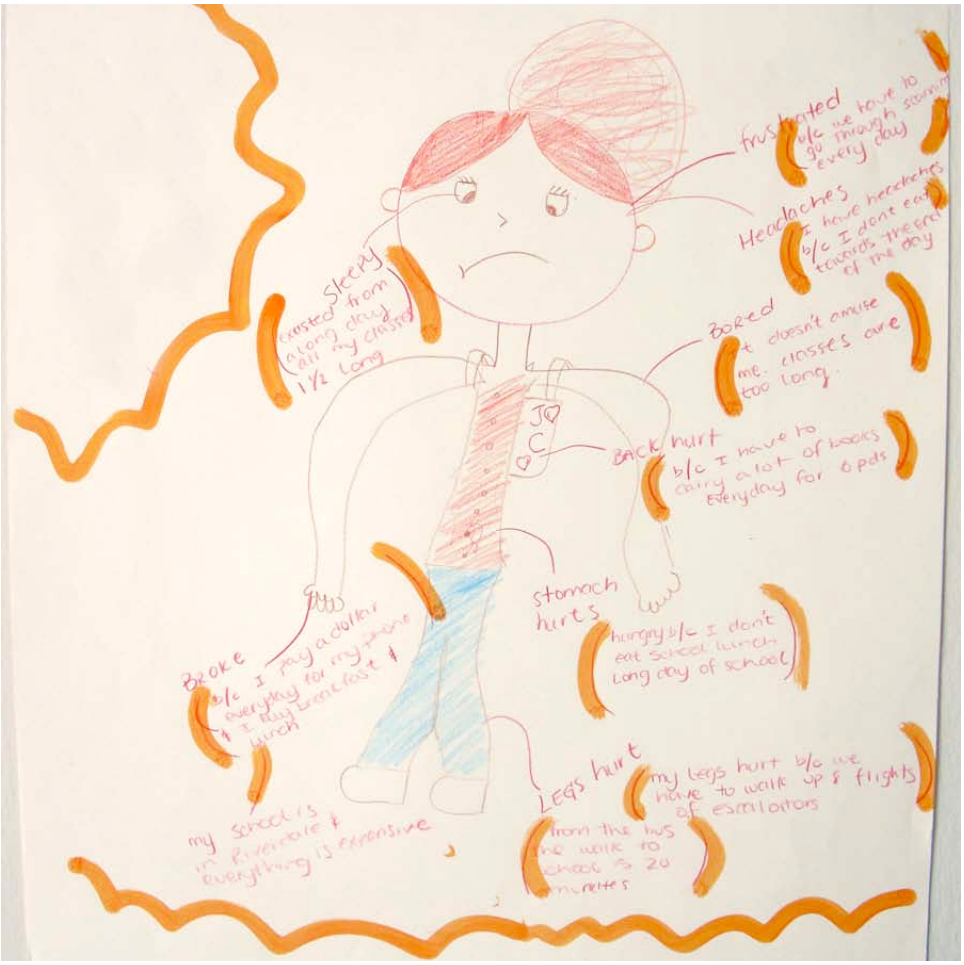
Figure 7.3 *Lisa's Map*



Lisa is a 17 year old, White female from Brooklyn. Her map depicts four body parts affected by schools. Her head gets "headaches" from schoolwork, friends, college applications and ACTs and SATs. Having to take the tests "over and over again" and AP Economics, which "I suck at, so it's a little stressful trying to pass it" causes Lisa many headaches. What's interesting about her map is that in many ways she is reflecting on stresses of opportunity—being in a school with AP classes. Her hand hurts from too much writing, her legs from walking up and down all the flights of stairs between class, and her stomach from school lunch that "sucks!" She also gets frustrated because seniors are only allowed to go out to lunch and "get normal food" on Fridays, so for most of the week she experiences major stomach pain from not eating. She describes

getting headaches from her friends because they often rely on her for advice and listening to them, but sometimes so many of her friends have “so many issues.”

Figure 7.4 *Naomi’s Map*

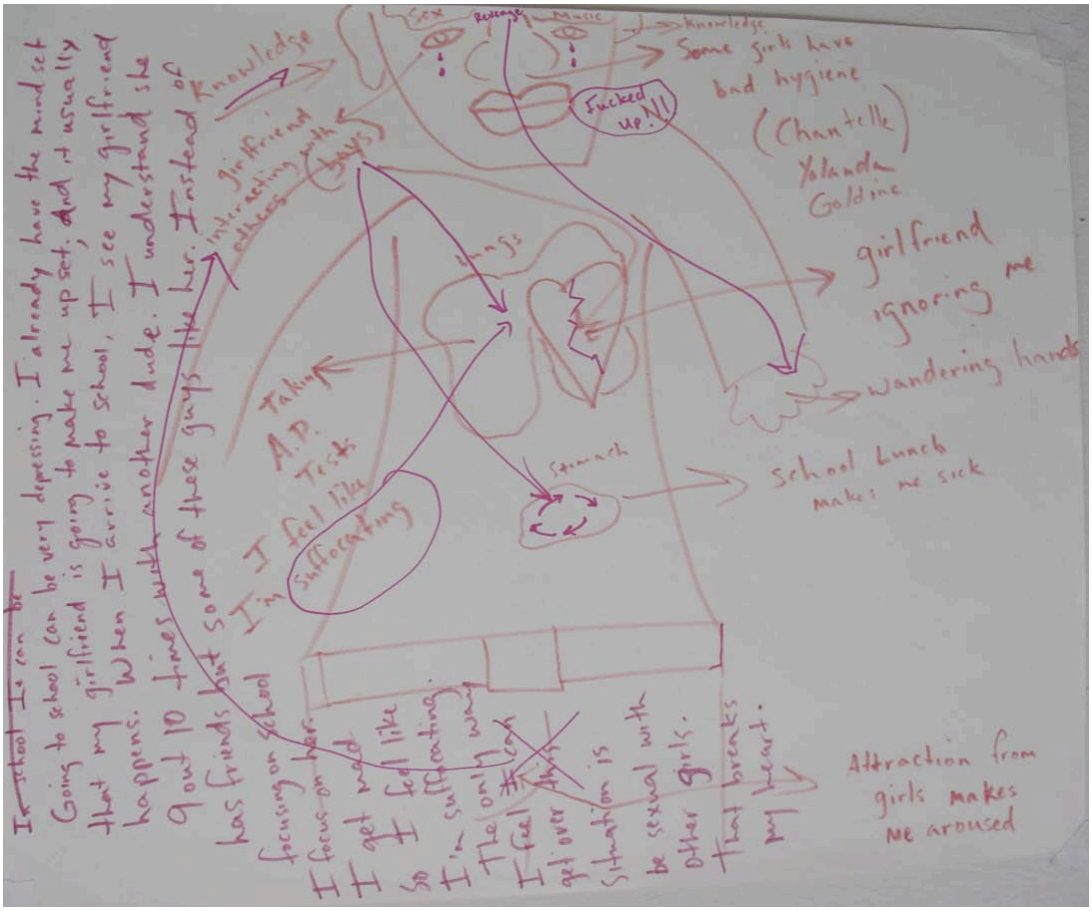


Naomi is a 16 year old, African American female from the Bronx. Naomi illustrates that school gets taken up in seven different parts of her body. She also decidedly drew her mouth with a frown, another visual clue as to her general unhappiness with school. Naomi first indicates that her head feels frustrated every day “because we have to go through scanning every day” and “I have headaches because I don’t eat towards the end of the day.” She locates the boredom she experiences “because her classes are too long” in her arms, while her back hurts because she has “to carry a lot of books everyday for 6 periods.” Like many others, Naomi attends a small school with no lockers. Her school is also located within a large school, so she often has to walk up and down eight flights of stairs (or broken escalators) in the five minutes between classes. To

this reality, she indicates that her legs hurt. But they also hurt because it is a twenty-minute walk from where the bus lets her off to the entrance of the school. Her stomach hurts from hunger because she doesn't eat the school lunch and it's a long day of school. Her hands and fingers are metaphorically "broke" because she has to pay $1 every day for her cell phone to kept at a local bodega because her school doesn't let students bring cell phones in. She also attends school in a section of the Bronx that borders a wealthier community and so the food that is available to buy is more expensive. Lastly, Naomi's eyes hurt because she is sleepy due to "exhaustion from a long day" where "all my classes are 1 ½ hours long." She remarks that this is okay if her classes are interesting and engaging, but when they are boring (and she is hungry) it makes her sleepy.

From Naomi's map, we see the intersectional pain of economic issues and schooling.

Figure 7.5 *Malik's Map*



Malik is an 18 year old, African American male from the Bronx. His map identifies ten specific body parts that are affected by school: head, ears, eyes, nose, hands, stomach, lungs,

penis, mouth and heart. Malik's map once again identifies the impact of taking exams on his body, where he states that "My stomach starts hurting and I feel like I'm suffocating when I'm taking tests." Yet another map evidences that our national testing regime is *generating* anxiety and worry in students and is manifesting in health outcomes.

Malik also identifies that the school lunch makes his stomach sick, as does his girlfriend interacting with other guys. His girlfriend ignoring him not only breaks his heart, it also makes him feel like crying (graphically annotating his eyes with tears) and sometimes like he's suffocating too. Here, the expressed consequences of denying sexuality education are *anxiety and depression.* Malik, like Jermaine, drew his penis noting, "attraction from girls makes me aroused." His hands depict his sexual energy and his *desire* to know what to constructively do to handle this energy and the related emotions of revenge, anger and sadness. Taken together we see two sides of this coin: on the one hand, both young men *and* young women need help in developing healthy relationships that aren't structured around jealously, envy and revenge. On the other hand, we see that emerging sexualities are central to youth's *educational experiences* and denying health and sex education does not make them go away. Malik is one of the students who have *never* had a health education class. He is a graduating, college bound senior.

His nose indicates a tenor of sexism and masculinity, but also highlights another health education issue—hygiene. This is the fourth time that feminine hygiene has come up for these young men. Malik even indicates that sex and music are what is on his brain, because he likes music; that his preoccupation with his girlfriend consumes him so that knowledge "goes in one ear and out the other." Taken as a whole, Malik's *entire map* involves issues of sexual subjectivity. But we could also read this statement about the detrimental consequences of not having music programs in schools. Malik writes his Artist Statement in the margins of his map and it states

> *Going to school can be very depressing.* I already have the mindset that my girlfriend is going to make me upset, and it usually happens. When I arrive to school, I see my girlfriend 9 out of 10 times with another dude. I understand she has friends, but some of these guys like her. Instead of focusing on school, I

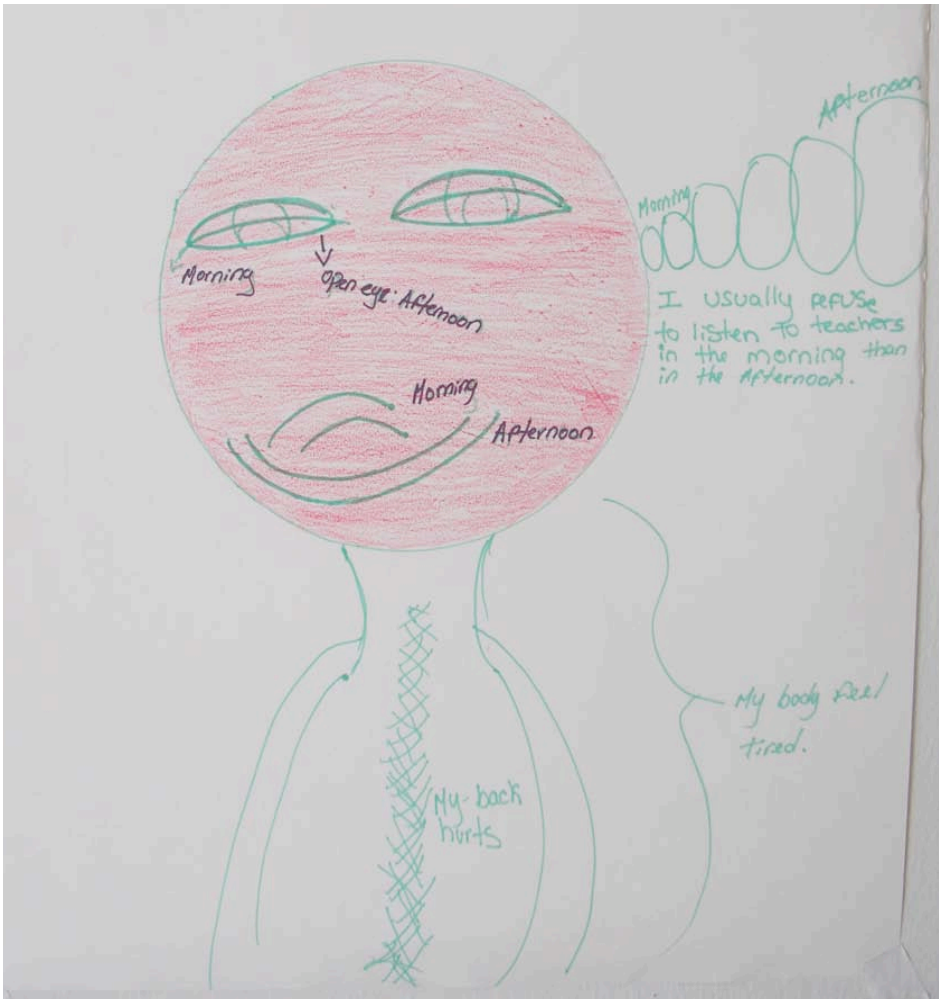
focus on her. I get mad. So I feel like I'm suffocating. The only way I can get over this situation is be sexual with other girls. That breaks my heart.

If there was any doubt that the social environment of school has no effect on the *ability* of a student to learn and do well in school, let this statement allay that reservation. Yet once again, this also highlights the supreme role that relationships, both amongst peers and romantically, play in students' lives and social-emotional worlds. Sexuality education must play a central role in education, for it not only affects students' abilities to make healthy choices and engage in healthy communication, but it also their mental health status and socio-behavioral outcomes.

Figure 7.6 *Alison's Map*

Alison is a 17 year old, Indian female from the Bronx. Her map illustrates her tired eyes from her insomnia (a condition reported in four of the maps), her fake smile, and that her head hurts when it's too loud in school—highlighting the impact of environmental stressors on health.

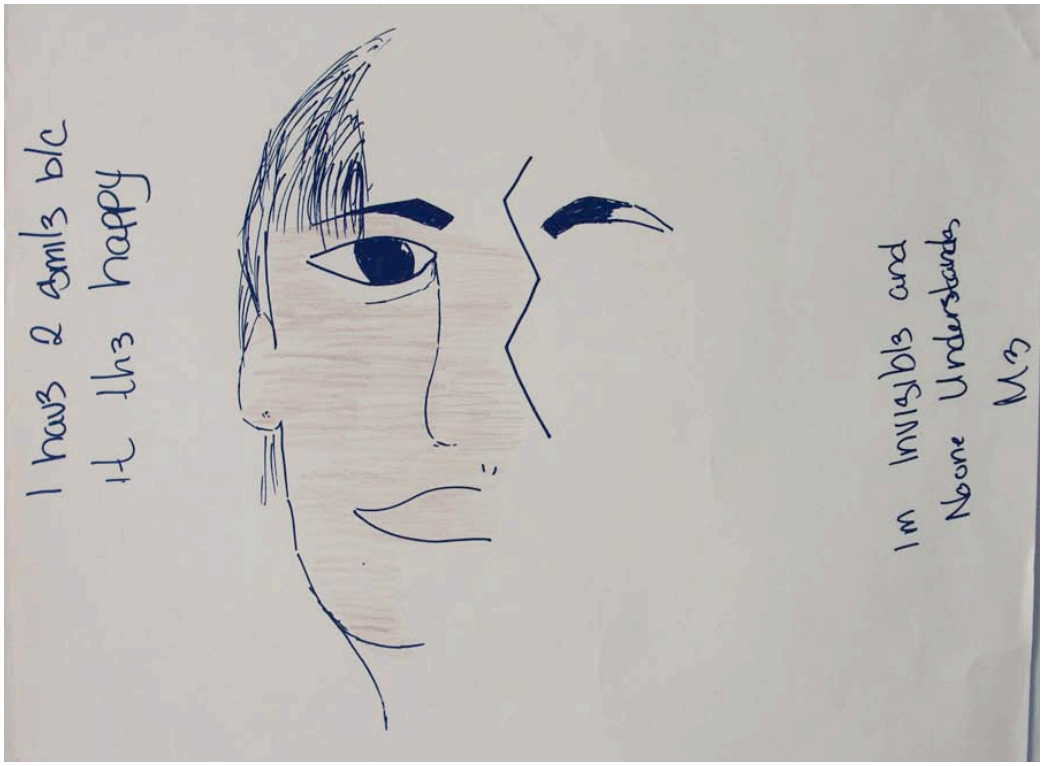
Figure 7.7 *Gail's Map*



Gail is an 18 year old female from the Bronx. She is Hounduran. Her map shows her daily temporal progression through school, indicating through her eyes, mouth and ears that she is more tired, less happy and more reluctant to listen to teachers in the morning than in the afternoon when she is awake, happy and attentive. Her eyes also hurt from not wearing her glasses and the red of her head symbolizes stress. In her own words she describes: "My eyes are kind of squinted like that when I don't wear my glasses, which is – sometimes I forget them at home. Sometimes they bother me. They hurt sometimes, and I have that little stress thing [the face shaded in red] on my head is because it symbolizes headaches that I get from a lot of class work and deadlines [a lot of] deadlines and stuff like that." She also draws here spine detailing

that it “hurts.” And also that her body feels tired all of the time: a description that I speculate is a condition of depression.

Figure 7.8 *Brittany’s Map*



Brittany is a 16 year old, African American female from the Bronx. This map symbolizes the corporeal costs of not having a relationship with any adult and with very few peers at school, of being “invisible.” The price of invisibility for this young woman is so substantial that she does not even draw a body, and only half of a face. Even beyond her having to disembody herself everyday at school, the psychic stakes of this are so high that she is forced to engage in a duality of her experiences there: having to take sole responsibility for her survival and happiness at school (“I *have to* smile”,) while at the same time feeling invisible and misunderstood there. The themes of trust, recognition and relationships that were evidenced in previous chapters here have a bodily consequence. She narrates:

> I have to smile because it makes me feel happy. It’s nothing else better in the world to do than smile. Sometimes, I can have the hardest day, and somebody will make me just smile and I’ll – everything’s okay. Someone noticing me,

> sometimes. Some days when I go to school, it feels like you're the only person in school or you're the only person in school that no one notices at all. No one will say anything to you, and that's like – that's very, very hard in school. For me, it's very hard sometimes because it's like noticing somebody makes them feel good, and noticing me makes me feel good. When I go to school, it's like – every day I wake up, I don't smile. I go to school and I'm like okay, whatever. Then I get to school and I'm like – I just smile because I'm doing something for myself, getting my education and everything. It's not for nobody else but for me. I just smile and I feel better.

She feels she must take sole responsibility for herself, and the accumulated costs of this must erode one's body. Social isolation is deeply damaging to one's health (Lepore, 1997). But this self-responsibility from being denied recognition could equally have caused externally damaging coping strategies (i.e. acting out, drug use, aggressive behaviors, etc.), instead of Brittany's choice for internally centered ones. The theme of having to make herself smile is echoed in other maps as well, where six students describe putting on a fake smile at school every day. In addition to Brittany's dismembered map, two maps were drawn without eyes, one without a face and one with no mouth. While participants did not either annotate or articulate these erasures (and therefore they are not counted in our map analysis), it does beg a deeper question of the penetrating subconscious effects of invisibility and/or silencing of students of color in schools. Is this how racism and social isolation seep into the body? Is it a pathway to embodiment?

Quantification of Body Parts [48]

In Figure 7.9 of this section, I present a graphic visualization of the body parts depicted across all twenty participant maps.[49] This "visual display of quantitative information" (Tufte, 1990, 1997, 2001, 2006) presents, in both numeric and graphical form, the number of maps on which any given body part was annotated. This graphic provides several layers of information. First, it

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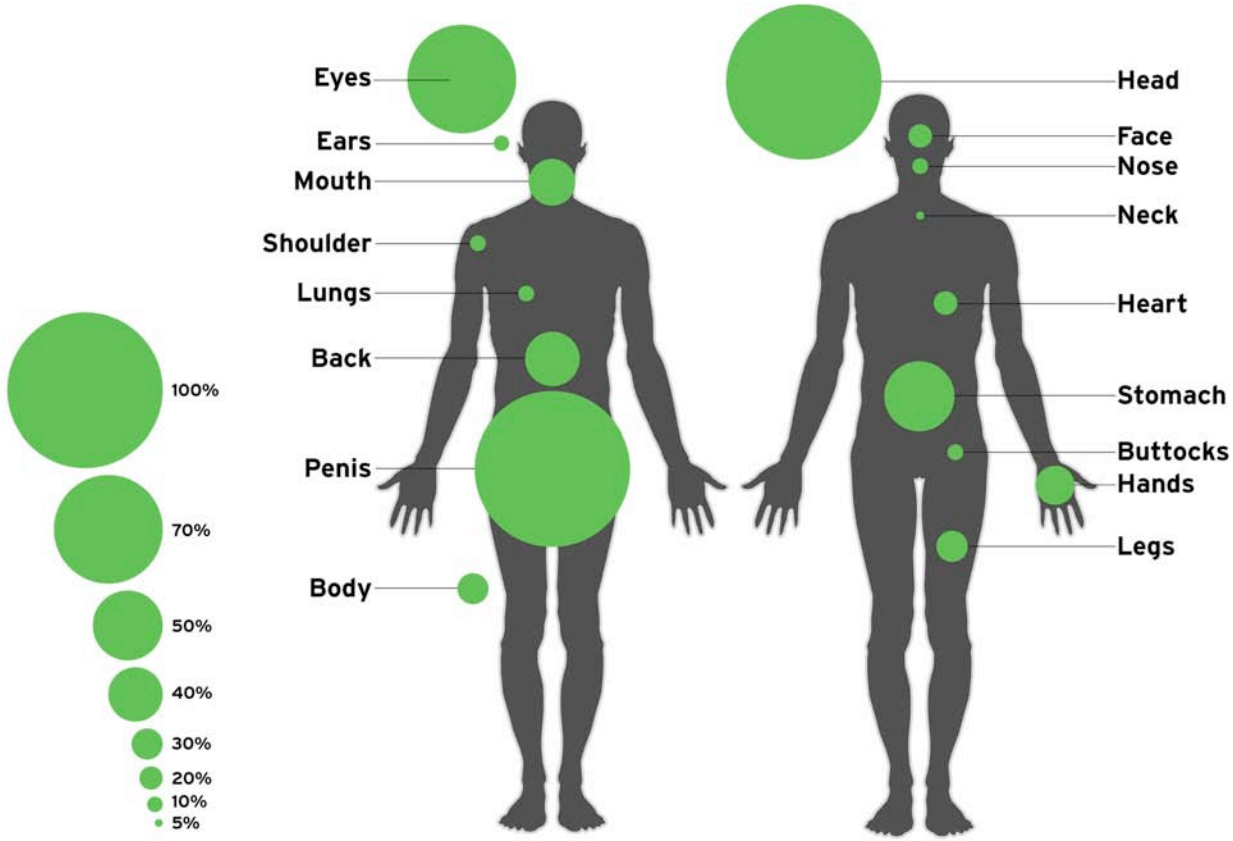
[48] See Chapter Four for a detailed discussion of methods of analysis.

[49] Although we had a total of 22 focus group participants, only 20 (18 girls, 2 boys) did the maps. One male focus group was conducted before we piloted the "x-ray maps", so they did not participate in this activity.

identifies the percentage of maps on which any given body part was drawn and specifically annotated. These percentages are depicted graphically through the relative size of circles located at each body part. In other words, the larger the sphere the more maps that body part was identified in. Again, for our analysis we did not include every body part drawn, only those that participants explicitly identified (through symbolic, textual or oral notation) as being affected by schools. We decided this because in order to draw an x-ray of a body, first participants had to draw an outline of their body: it did not necessarily mean that school affects every body part drawn on the map. Second, in Figure 7.9, body parts are represented graphically and textually, where the frequency circle is located at each body part it corresponds to and additionally each body part is labeled. Of note, the penis is denoted on 100 percent of the maps that could have possibly had penises, indicating that of the two maps that could have had penises, they both drew and annotated a penis. Therefore it was represented as 100 percent of possible maps.

Figure 7.9 *Quantification of Body Parts Affected by School* [50]



[50] For enlarged graphics of, see Appendix.

We see from Figure 7.9 that the head/brain is affected more than any other body part, primarily experienced as headaches. It is depicted on 100 percent of the maps; followed by eyes (70 percent), stomach (45 percent), mouth (40 percent), back (35 percent), hands/fingers (25 percent), whole body (20 percent), legs (20 percent), heart (15 percent), face (15 percent), lungs/chest (10 percent), butt (10 percent), nose (10 percent), shoulder/arm (10 percent), ears (10 percent), neck (5 percent), and penis (100 percent; 2 out of 2 maps). In the next section, we explore each body part in depth presenting all of the educational variables that students identified in their maps as affecting each specific appendage.

Emergent Themes from Maps

As previously we analyzed across maps, here we went deep within the maps. Following a count of each body part, the ProjectDISH collective then moved to organizing, across maps, the school "causes" for each body part being affected. Each figure below (Figures 7.10-7.26) depicts one distinct body part and the associated features of schooling that were identified across maps as the causes for that area to be affected. This is analogous to a doctor identifying a fractured tibia in an x-ray and finding out that this student was kicked forcefully during a soccer game, an act which resulted in the break. Here we see *embodied* educational operations, where the data tells what and where urban public schooling experiences get taken up by students' bodies. We see what young people are *saying* is also being *felt.*

These analytical designs (Tufte, 2006) illustrate *the embodiment of schooling*. We see through these data visualizations that the physical, sexual and psychic body indeed takes up the social matrices of schooling and how educational possibilities, constraints and relations of power and social control affect their health. We see what causes students' stress in schools. In the next section following the images, I will triangulate this mapping data with data from the focus group discussions and surveys, and move evidence of embodiment towards that of weathering. I do so by detailing items that participants explicitly identified as stressors and by supporting the data with literature on the corrosive effects of stressors on health.

Head / Brain / Headache Figure 7-10

1. Denied schooling **2**. Tired **3**. Boredom **4**. Abuse **5**. Noise **6**.Anger / Frustration **7**. Overcrowding (teacher can't help all students in class so I get mad when I can't understand and can't get help) **8**. Too hot / too cold **9**. Bad lighting **10**. School security / scanning procedures **11**. Thinking about sex, urges, arousal, girlfriend, revenge **12**. Hunger **13**. Stress **14**. Peer violence / fighting **15**. Teachers only pay attention to certain students like the kids that they like **16**. Difficulty in classes / understanding content **17**. Drama between girls **18**. Deadlines & class exams **19**. Too much work **20**. High stakes testing (Regents, SAT/ACT, AP exams) **21**. College applications (amount of work and deadlines; and lack of supports, resources and preparation) **22**. Gossip **23**. Sexual harassment

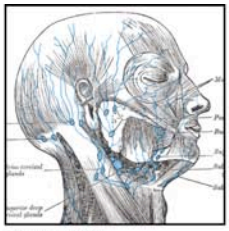


Figure 7-10

Eyes Figure 7-11

1. Exhaustion from long classes **2**. Can't see the board / vision difficulty / no glasses **3**. Sadness (denied school, girlfriend interacting with others, peer pressures and drama) **4**. Sleepy (too hot, boredom) **5**. Tired (too much work, not enough sleep, night school after regular school, insomnia)

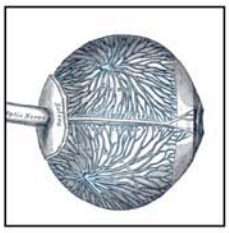


Figure 7-11

Stomach Figure 7-12

1. Hunger **2**. School food sucks **3**. Pain from worrying about what other people think **4**. Girlfriend interacting with other boys **5**. Classes start too early so no time for breakfast, Leads to anger **6**. School lunch schedule

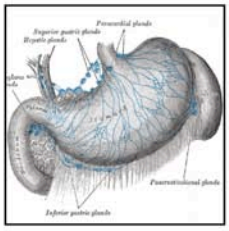


Figure 7-12

Mouth Figure 7-13

1. Pleasant feeling from kissing girlfriend **2**. My lips change color **3**. Anger **4**. Fake smile **5**. Frown in the morning, smile in the afternoon

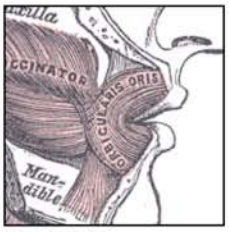


Figure 7-13

Back Figure 7-14

1. Sitting in hard chairs **2**. Carrying heavy book bags / lots of books / no lockers **3**. Spine hunches over from stress

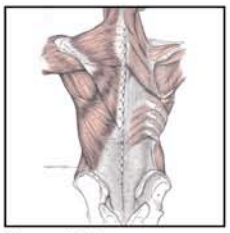


Figure 7-14

Hands / Fingers Figure 7-15

1. Too much writing **2**. Too much writing in not enough time **3**. No money and/or expenses incurred daily

Figure 7-15

Body Figure 7-16

1. Pain from afterschool athletic activities **2**. Feels tired **3**. Begins to break down from stress **4**. Hurts from sadness (Depression)

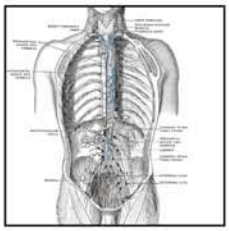


Figure 7-16

Legs Figure 7-17

1. Too much walking to get from one class to another (school organization

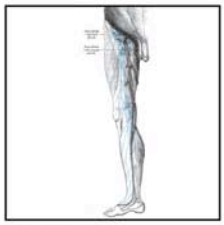


Figure 7-17

Heart / Heartache Figure 7-18

1. Sorrow of kids (friends) dropping out **2**. Pain from loving someone who doesn't treat you well or who doesn't show love back **3**. Worry **4**. Getting feelings hurt **5**. Being talked about **6**. Excited and shocked to be graduating)

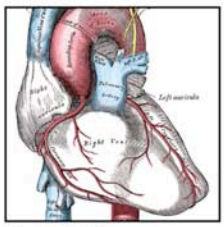


Figure 7-18

Face Figure 7-19

1. Anger **2**.Stress

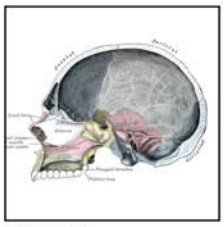


Figure 7-19

Lungs / Chest Figure 7-20

1. Muscles of chest begin to tighten from stress **2**. Suffocation: from taking high stakes exams and from getting so mad at girlfriend's relationships with other guys

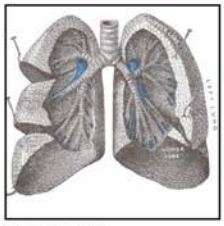


Figure 7-20

Buttocks Figure 7-21

1. Hurts from sitting in hard chairs all day

Figure 7-21

Nose Figure 7-22

1. Smell of marijuana and cigarettes **2**. Smell of "bad hygiene"
3. Smell of school food **4**. Smell of bathrooms

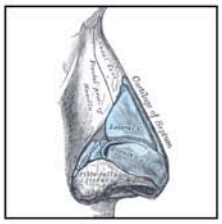


Figure 7-22

Shoulder / Arm Figure 7-23

1. Boredom **2**. Tired from carrying heavy bookbag

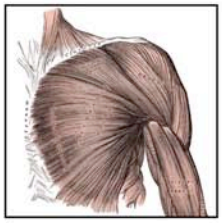


Figure 7-23

Ear Figure 7-24

1. Knowledge in, knowledge out **2**. Refuse to listen to teachers in the morning

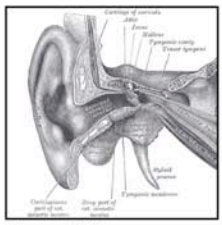


Figure 7-24

Neck Figure 7-25

1. Thirst **2.** Anger

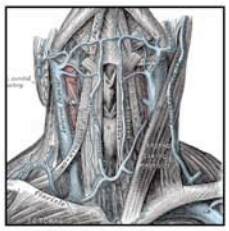


Figure 7-25

Penis Figure 7-26

1. Sexual urges and erections when with girlfriend or dreaming in class about sex **2.** Arousal from attraction from girls

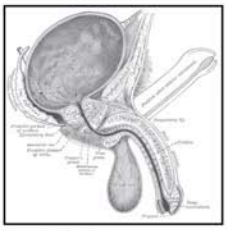


Figure 7-26

What's Stress Got to Do With It? The Impact of Schooling Stressors on Health

> Stressors are "conceptualized as 'environmental demands (that) tax or exceed the adaptive capacity of an organism resulting in psychological and biological changes that may place persons at risk of disease'" (Cohen, Kessler & Gordon in Shulz et al, 2000, p. 1640).

This section extends the mapping data to highlight youth identified stressors in schools. We see emergent themes of chronic stressors as: teachers, sexuality and sex education, relationships, identity, safety and violence, peer stresses, depression/mental health issues, school food, school policies/small school division, school safety/scanning/policing, dispossession, hunger, curriculum/pedagogy, and anger. To situate the remainder of this chapter, it is important to emphasize that 91.8 percent of all youth taking the Polling or Justice survey report worrying about school sometimes, frequently or always. Not to mention that "there is a well-established link between higher levels of stress and decreased physical and mental health" (Grzywacz, Almeida, Neupert & Ettner, 2004, p. 1). While a detailed discussion of varying life stress process models will not be presented here, the section below does cite findings across the literature that explains and hypothesizes the findings of this study. For a detailed discussion of life stress models see: Lepore (1997), Ensel & Lin (1991), Israel & Schurman (1990), Schultz, Zenk, Israel, Mentz,

Stokes & Galea (2008), DeLongis, Coyne, Dakof, Folkman & Lazarus (1982), Lazarus & Folkman (1984), and Baum, Revenson & Singer (2001).

This study does, however, challenge previous studies that have reported negative school stressors (e.g., bad teachers, getting bad grades, not understanding the material) were "unrelated to depressed mood" (Allison, Burton, Marshall, Perez-Febles, Yarrington, Kirsh & Merriwether-DeVries, 1999, p. 1026). The authors of this particular study suggest that perhaps it is because "school may not be central to self-concepts of African American youth" and "negative experiences that are less central to the self, produce lower levels of stress" (p. 1026). In contrast, the Polling for Justice survey reports that *96.5* percent of students agree or strongly agree with the statement "I care about getting good grades." When asked "what's the highest level of education you plan to achieve?", 12.8 percent cite a high school diploma, 10.3 percent plan to achieve a Bachelor's degree, 26.9 percent aspire to a Master's degree, and 26.1 percent plan to achieve a doctoral degree (PhD, MD or JD). In fact, only 0.8 percent of all 484 respondents indicated that they do not plan on finishing high school or obtaining a GED. In our focus groups students mentioned that they aspired to be lawyers, doctors, midwives, nurses, social workers and hairdressers. We see an overwhelming sense of marriage between self-concept and schooling for two research samples that are predominately youth of color.

Or citing Fordham & Ogbu's (1986) work, Allison et al. (1997) postulate that perhaps the "'irrelevance' of school stressors is linked to youths' development within a sociocultural setting that views the educational system with skepticism" (p. 1026). In addition to this latter point being previously been debunked (O'Connor, 1997, 1999, 2006; Horvat & O'Connor, 2006; Galletta and Cross, 2007; Anderson, 1988; Butchart,1980; Fine & Ruglis, 2009), and whether this stemmed from the author's methodological choices, the data of this dissertation speaks a very different story. In fact, this data speaks in stark contrast. Youth of color not only yearn for an education, higher education and *professional* occupations, but their schooling experiences are central to the self. The distinction can be made, however, that since in many cases the *majority* of their schooling experiences are negative, youth in New York City have had to dissociate from school being their principal identity *as a matter of survival.*

Furthermore, this study (including the Polling for Justice survey) offers another important contribution to existing research. As Grzywacz, Almeida, Neupert & Ettner's (2004) study sought to expand the literature on how stress is a mediator of the SES-health relationship by looking at the effect of *daily stressors,* as opposed to acute or chronic stressors, on both physical and mental health, this study has identified through youth's own voices and perceptions what daily stressors in school (and otherwise) are. "Although the magnitude of daily stressor effects is partially attributed to indirect effects from chronic or acute stressors, *daily stressors do also exert additive, independent effects on physical and mental health*" (Grzywacz et al., 2004, p. 3, emphasis added; See also Wheaton 1994; Lu, 1991). Not to mention that daily stressors also give us insights, as I have argued throughout, into how individual life experiences are shaped by larger raced, classed and gendered dynamics of the power and social stratification.

Stressors, Embodiment and Weathering

"Usually, what you think start affecting you physically because your mind is that way. So then it starts. Your mind is like, 'I feel sick, or I don't want this.' And then it just starts taking over, affecting your body."—Gail

Organized by the subsystems of Bronfenbrenner's (1977, 1993) ecological model of human development that were detailed in Chapter Five, Table 7.2 identifies daily stressors students experience in school. Although the sum of data presented in previous chapters are largely stressful experiences, these are things that students explicitly mentioned in focus group discussions as *causes of stress*. Items marked by an asterisk, indicate youth-identified stressors that were mentioned in every focus group.[51]

[51] where applicable. I.e., not all students attend schools with cops and metal detectors, but for students who did, they cited it as a cause of stress.

Table 7.2 *Student-Identified Daily Stressors*

Micro	Meso
• drama * • gossip * • people who are ignorant * • bullying * • peer pressures (e.g., doing drugs, cutting classes, etc) * • abandonment (no help from teachers/staff) • worrying about girlfriends / boyfriends / love interests • worry about fighting / safety • headaches	• curriculum and courses of no interest or relevance • no autonomy (e.g., can't choose classes, no privileges) • teachers • guidance counselors • threats of teachers that you will fail • too much work, not enough time • favoritism / unfairness • being doubted (by teachers, security, faculty) • people being disrespectful, loud, disrupting class
Exo	**Macro**
• school environment (e.g., no heat, bathrooms) * • hunger * • “nasty” school food • no materials / supplies / books • moving through the school building • having to repeat a grade • sexual harassment	• high stakes testing / not passing Regents * • school security (i.e., metal detectors, security guards, armed NYPD officers, searching, scanning) * • "feeling like you're in jail" • what school budget is being spent on • being denied school • money • racism

School Stressors

In the survey, we included an open-ended question asking “what are the three most stressful things in your life?” Of all respondents, school was the most frequently reported stressor. It was articulated in answers ranging from “school”, generally, to stress about college, college preparation, decisions, admission and the college application process; “dealing with school work;” worries about graduating (both junior and high school) and passing classes; homework; “getting good grades”; studying; attending specialized schools; career choices, career goals and worries about their future, future jobs and employment; the GED; passing exams, Regents, SATs and ACT tests; AP classes; too much school work in not enough time; school safety agents; teachers; and not graduating on time.

But survey takers also frequently cited stresses concerning relationships and the social environment of *school*, including: “teenage issues”; talking about problems; “social standards”; social problems; sex; “self-determination,” “personal choice” and “personal freedom”; interpersonal relationships with friends, peers, boyfriends, girlfriends, and “ex-s”; “people who are ignorant,” who have “closed minds” or who are foolish; doubt and low expectations, e.g., “people screaming at me all the time saying ‘you don’t do anything right’ or ‘you don’t know what you’re doing’”’; parenting; social isolation and not fitting in; love life; “boys” or “girls” in general; rejection and being let down by people they care for; jealousy; planning and fear around their future and success; worries about their weight and health; sexuality, “sexual anxiety” and “being a gay

youth"; love; racism; peer pressure; decision making; emotional control; "broken heart"; money; and fighting. It is clear that survey data widely supports our focus group data on the ways in which the social and academic environment of schools deeply impact students, and in the deep need for sexuality, health, and social development programs at school.

Yet beyond identifying concrete stressors, focus group participants offered their own reflections on the ways in which these stressors *over time* manifest in health outcomes as well as the production of racialized social behaviors.

On Bullying

Consequences of bullying, as students portray are a matter of life and death—literally. By their own initiative, Darvesh and Carlos in their focus group theorized on the consequences of bullying and peer pressure:

> Darvesh: If a student is constantly harassed or bullied, slowly he would develop a fear in mind, which insidiously would affect their mental health. Maybe he would develop this fear in his mind, and constant fear would result in maybe mental disorder, but not like really fast, but gradually. So maybe over time, it would do some damage.
>
> Carlos: You would have like a reaction, like when, you get so used to being bullied and stuff, that next time it happens, you're going to make a crazy reaction. You're going to explode somehow. You're not always going to stay like that, being bullied all the time. So one time you just can't stand it no more, you're just going to go crazy.
>
> Darvesh If a student confronts bullies or aggressive students, he would start adapting that aggressiveness and invariably act like that even in usual surroundings.

In another focus group, a young woman describes the actualization of Carlos's and Darvesh's postulate. Alise describes a suicide in her high school. An announcement of this

student's death was made one day over the loudspeaker. Confused because he "was just in the class" with her a few days ago, she inquired what happened to him. The teacher told her that he had committed suicide. "To tell you the truth, they said he was getting bullied in the school. All I heard was that he was getting bullied in the school. One of the boys said they was gonna beat him up after school, whatever, whatever. I guess he did get beat up or whatever. I guess he got tired of it and committed suicide, hung himself." It takes no more than these young people's words to underscore the salience of bullying in student's lives to their health. A recent string of suicides by middle school students who had experienced bullying proves evidence (GLSEN, 2009). It also speaks to the grossly underserved needs for effective conflict resolution, social support, social-emotional education, healthy relationships, sexuality education, anti-bullying, gay straight alliances and peer mediation programs in schools.

While Darvesh, Carlos & Alise describe the mental and social health outcomes of bullying, Sophia describes her physiological experiences. "People's attitudes and stuff – it can be just the way you dress or something. It just used to make me sick before. I remember my sophomore and last year, I swear I couldn't go a day without someone making a comment and saying, 'oh look it's the gothic girl, or gothic crew', or the rocker crew or some stupid little comment like that, and it just used to make me sick." And Amanda reports that one of the young men who is gay in her school "doesn't want to come to school no more." Bullying can also cause school dropout.

On Testing

Testing leaves wounds on the body. Testing, particularly worry about passing tests and graduating, is a significant stressor for young people causing stress and anxiety in children who had never experienced stress otherwise—even in even young children (Harber, 2004; Eccles, Wigfield & Schiefele, 1998; Elliot & McGregor, 1999). In addition to discussions of the stress of high stakes exams in the focus groups, and evidence of it in the maps, survey data also found supporting results. The Polling for Justice survey results reveal that 49.1 percent of all students agree or strongly agree that too much class time is spent getting ready to pass the Regents, and

42.5 percent of all students agree or strongly agree that they worry Regents exams could keep them from graduating high school.

Test anxiety is itself an interesting consideration of how the process of schooling becomes embodied and for how an accumulation of a lifetime of testing erodes health. Test anxiety is comprised of two components: emotionality and worry (Eccles, Wigfield & Schiefele, 1998; Elliot & McGregor, 1999). Emotionality is evidenced through physiological responses during testing: increased heart rates, nausea, dizziness, and feelings of panic are all manifestations of test anxiety. The second component, worry, is referred to as “cognitive test anxiety” to better capture the range of cognitive processes associated with test anxiety (Cassady & Johnson, 2002). As a result of this, there have been increases globally in the number of children taking medication for stress or to improve performance, who are being *mis*diagnosed as having attention deficit disorder because they naturally can’t be confined to the artificial, unnatural demands of testing; as well as suicides due to academic stress (Harber, 2004). A British National Health Service counselor “argues that stress and ill health among teachers and pupils is pathological of technocratic modernity in education” (Harber, 2004, p. 120).

But testing also contributes to the back pain evidenced in this chapter as a result of all of the books students need to carry, and because few schools have lockers anymore (Harber, 2004). Together we see that the testing and “accountability” regimes plaguing schools are having identifiable, deleterious effects on youth. Beyond determining future life trajectories and opportunities, graduation from high school and access to higher education, all of which have social costs themselves, testing itself is harmful to students’ mental and physiological health in both the short and long term.

On Feeling Like You’re in Jail

In one of the most riveting, deeply moving and heart-wrenching exchanges, I offer the following conversation. Let there be no doubt that young people embody and weather their schools, the consequences of which, again, bear on educational, health and social outcomes alike.

Jessica: You just described this as like being in jail, this horrific place. How do you think experiencing these things every day for four years or twelve years or whatever affects you? How does that affect your health later on in life?

Malik: It makes you paranoid, I think.

Jermaine: Yeah, and it makes you rugged I think. I think if you make it out of public school and you make it to a big, nice college environment with dorms and all that, you're not going to have that respect for the environment that you're in now as someone who came from a Catholic school or a private school or a rich family may have. Come on. You're using the bathroom in college or whatever. You're so used to washing your hands – I might dry my hands and throw the tissue on the floor. Why? I'm used to that.

Twelve years of seeing tissue on the floor, so you might think back and say oh, I'm not in that environment. You're paranoid. You have that behavior instilled in you. You – have – it – instilled – in – you.

Malik: It's not your fault, though.

Jermaine: Yeah.

Malik: You were forced to live like that.

Jermaine: You were forced to adapt to other people's behavior. Now it became your own and you can't break it.

Malik: Nice.

Jermaine: Nice, nice man.

Malik: We need help.

On Bathrooms

Students widely discussed that the result of the abhorrent bathroom conditions in their schools is that they do not use the facilities all day or that they "hold it, "even if they have to go,

until their "gym period to use the bathroom." Beyond making students "feel bloated" it causes concrete health problems. Lisa explains:

> Bladder problems. People have that in my school. They used to have bathroom passes where it was six passes for like a whole marking period, and that's the *only* times you could go. They have to sign that pass. Now, they made it so every class has its own pass and you can go during class with that pass. People now have bladder issues because in the past three years, they had the bathroom passes. People had to hold it in and stuff and that's bad for your health.

On Drugs

The above chart is one of only two times that the issue of drug use came up during all of the focus groups. This time it was mentioned in the context of peer pressure as a stressor, in which peers may pressure youth to do drugs, and the other time was mentioned in Jermaine's map when he reported smelling cigarettes and marijuana on people. Interestingly, our survey data seems to in some ways support and in other ways raise questions about the *absence* of discussions of drug use.

In the Polling for Justice survey we found that "in the past 30 days," 11.4 percent of youth had smoked a cigarette, 13.5 percent had used marijuana, 2.9 percent of youth had used some other illegal drug (e.g., crack, cocaine, heroin, crystal meth, ecstasy, etc), 3.1 percent of youth used prescription pain killers to get high, and 43.7 percent had drank alcohol.[52] With the exception of alcohol use, which was only one percentage point higher, all of these "risk behaviors" are *lower* than the national averages reported on the YRBS.[53] These data again reveal the contradictions between relation and social constructions of race and class. The YRBS surveys youth in grades 9-12 in public and private schools in the United States, incorporating a substantially higher percentage whites and middle and upper class youth then live in NYC, who

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[52] In discussions with the ProjectDISH youth researchers about drug use, they state that in their perception lots of students smoke weed and cigarettes and drink alcohol, with more youth smoking marijuana than cigarettes, and more youth smoking marijuana than *drinking alcohol*. Very few people, they feel, do other sorts of drugs. With the exception of alcohol usage, the survey data supports the trends that youth researchers bear witness too.

[53] http://www.cdc.gov/HealthyYouth/yrbs/pdf/yrbs07_us_summary_trend_all.pdf

are predominately students of color and lower income. We see a grave asymmetry in social, racialized, constructions of fear and burden.

Yet, if we are to consider substance abuse as a *coping* strategy for youth on the margins of society and for whom mental health problems are prevalent as a result of their social marginalization, then the data reveals very telling stories of educational and health crises that need urgent tending to.

Mental health problems themselves can lead to self-harm behaviors such as eating disorders, substance abuse, suicide or fighting (Kung, Hoyert, Xu & Murphy, 2008). For example, LGBTQ youth are widely reported to have higher rates of depression than their heterosexual peers (Russell & Joyner, 2001; Safren & Heimberg, 1999; Gilman, Cochran, Mays, Hughes, Ostrow & Kessler, 2001; Fergusson, Horwood & Beautrais, 1999; Cochran, 2001). Consistent with other research, our survey found that compared to heterosexual youth, LGBTQ youth were more likely to drink alcohol (42.1 percent of heterosexual youth had drank over the past 30 days versus 60.9 percent of LGBTQ youth) smoke cigarettes (9.2 percent versus 31.1, respectively), and use marijuana (12.2 percent versus 26.1 percent, respectively). LGBTQ youth were also more likely to have been in fight that injured them (13 percent) than were heterosexual youth (7.2 percent); as well as have been in a fight that injured someone else. 26.1 percent of LGBTQ youth report being in a fight over the last 30 days that injured someone else versus 13.6 percent of straight youth. This *must not* be read that LGBTQ youth are more likely to engage in “risky behaviors,” rather that their schooling experiences and the stresses, harassment, bullying, lack of safe spaces available and lack of health, sexuality and social supports and education *produce* a situation in which they have little other alternatives for healthy coping mechanisms. It also highlights that they are more likely to be bullied and in fights, period (See also Harris & GLSEN, 2005).

And excluding Middle Eastern, American Indian or Alaskan Native youth for whom there were not enough survey respondents to accurately compare against, of all ethnic groups, African Americans were least likely to drink alcohol and smoke cigarettes. And they were more likely to use marijuana than they were drink alcohol and smoke cigarettes—a finding that confirms an

"anecdote" that was continuously repeated during research meetings where the youth researchers reported on their peer and school lifeworlds.

On Too Much Work

Jade states "A lot of work can lead to stress or physical problems." There was resounding agreement of this statement within her focus group. Maritza added, "like weight loss and chest problems. How do I know? I went through it." Lisa then chimed in, "I know, I get headaches." Ironically, stress also affects performance (Dougall & Baum, 2001).

While the conversations above portray consequences of negative experiences in school, students equally report that "good grades make me happy" and that "teachers and staff who are nice" and "friends" make them happy too.

Of the 171 students in the Polling for Justice survey who reported that they were *always* worried about school, 14.6 percent "felt that life wasn't worth living" 3-7 days per week (occasionally, moderately or all of the time), and another 15.2 percent felt life wasn't worth living sometimes (1-2 days per week). Taken together we see that nearly one third of students who are always worried about school feel that life isn't worth living *at least* once per week. And of the 157 students who are *frequently* worried about school, 10.8 percent felt life isn't worth living 3-7 days per week, and 13.4 percent felt life isn't worth living 1-2 days per week. It is shocking to see how staggering the effects of school are upon students' mental health, depression and *thoughts of suicide.*

Equally, students cite that worries (i.e. stress) about school affects their overall health (self-reported health status). Of students who are *always* worried about school, 13.5 percent report that their overall health is either poor or fair. Of the students who are *frequently* worried about school, 13.9 percent say that in general their health is either poor or fair.

On School "Safety"

Of students who *strongly agree* that they have had negative interactions with School Safety Agents, 22 percent felt depressed 1-2 days per week, and an additional 31.7 percent felt depressed 3-7 days per week. So for students who most *strongly agree* that they have negative interactions with security at school, nearly *54 percent report being depressed some, occasionally*

or all of the time! Similarly, of students who *strongly agree* that they have negative interactions with SSAs, 17.5 percent report that life isn't worth living 3-7 days per week, and an additional 15 percent report feeling like life isn't worth living 1-2 days per week.

For students who *agree* that they have had negative interactions with SSAs, virtually 50 percent report feeling depressed some, occasionally or all of the time. Similarly, of students who agree they have had negative interactions 19.3 percent report feeling that life isn't worth some of the time (1-2 days) and another 8.4 percent report feeling life isn't worth living occasionally, moderately or all of the time (3-7 days). While this data could also be read reciprocally, where youth who are more depressed are more likely to have negative interactions with school safety, reading the data in this, alternate frame is a political one, meant to bring attention to the psychological costs of the interactions youth experience at school and to the role of structures and social forces in the production of health outcomes.

Considering that unintentional injuries, homicide and suicide are the top three leading causes of death for youth ages 18-29 and that nearly 9 percent of all young adults ages 20-29 have had some form of major depression, panic disorder or anxiety disorder in the last twelve months, what students are reporting that schools are doing to them is of grave and significant proportion. Considering that "three-quarters of all diagnosable mental disorders begin by age 24", we are capturing a portrait of where and how schools can intervene on *all fronts* whether it be programs to reduce bullying, sexuality education, critical pedagogy and culturally relevant curriculum, or school architecture, findings are ripe with possibilities for youth driven reforms and "interventions" (National Center for Health Statistics, 2008, p. 94). We must also not forget that mental health problems themselves can lead to self-harm behaviors such as eating disorders, substance abuse, suicide or fighting (Kung, Hoyert, Xu & Murphy, 2008). Polling for Justice survey also found results consistent with national data, which reports that women suffer from higher rates of depression than men.

On (Un)Fairness

To assess issues of unfairness in the Polling for Justice survey we asked respondents to think about how much they agreed or disagreed with four different statements. Compared to

White youth who disagreed or strongly disagreed that “Adults respect me,” African American or Afro Caribbean youth were 8.2 times more likely to disagree or strongly disagree, Latino/as were 7.7 times more likely, Asian, South Asian or Pacific Islander were 1.2 times more likely, and youth of mixed ethnicities were 2.7 times more likely to disagree or strongly disagree. Of youth who agreed or strongly agreed that “People treat me with less respect than others,” they were 10.1 times more likely to be Black, 10 times more likely to be Latino/a, 3.2 times more likely to be Asian, South Asian or Pacific Islander, and 3 times more likely to be of mixed ethnicities than White. A similar trend can be found for youth who agreed or strongly agreed that “People treat me as if I’m not smart.” Here, compared to White youth, those who agreed were 7.3 times more likely to be Black, 7.9 times more likely to be Latino/a, 2.8 times more likely to be Asian, South Asian or Pacific Islander, and 3 times more likely to be multiracial. Lastly, of the 104 youth who agreed or strongly agreed that “People act as if they are afraid of me,” they were 38.5 times more likely to be Black, 34.6 times more likely to be Latino/a, 9.6 times more likely to be Asian, South Asian or Pacific Islander, and 13.5 times more likely to be of mixed ethnicity.

But we also asked questions assessing social trust at large. We used three standardized items from the Adolescent Development of Trust scale (Flanagan & Gallay, 2008), asking survey respondents to identify how much they strongly agreed, agreed, disagreed or strongly disagreed with each statement. To the statement “Basically, people get fair treatment in the U.S., no matter who they are,” 81.8 percent of all youth disagreed or strongly disagreed. With Whites being the ethnic group most likely to agree or strongly agree. To the second item, “In the U.S. you have an equal chance no matter where you come from or what race you are,” again the majority of all students disagreed or strongly disagreed (74.9 percent). Yet Blacks, Latino/as and Asian, South Asian and Pacific islanders were all more likely to disagree or strongly disagree than Whites, by a factor of 1.4. The last statement “The U.S. is a fair society where everyone has an equal chance to get ahead” yielded similarly bleak beliefs, where 71.8 percent of all students disagreed or strongly disagreed. Interestingly, this statement found the most similar responses across racial/ethnic groups, with the exception of Asian, South Asian and Pacific Island youth who were

between 1.4 and 2 times more likely to agree or strongly agree with the statement then Black, White, Latino/a and multiracial youth.

Following the famous Whitehall I study that examined social determinants of health for 18,000 men in the British Civil Service from 1967-1977, the Whitehall II study investigated the health of 10,308 non-industrial civil servant men and women aged 35-55, aiming to understand the underlying causes of the social gradient of health and disease. Begun in 1985, this prospective cohort study is ongoing. In a 2007 article documenting the relationship between perceptions of generalized unfairness and health with data from the Whitehall II study, it was found that among participants who strongly or moderately agreed they were treated unfairly there was a 55 percent higher risk of incident coronary events (DeVogli, Ferrie, Chandola, Kivimaki & Marmot, 2007). Unfairness, “a stress-producing mechanism”, is an “independent predictor of increased coronary events and impaired health functioning” including poor physical and mental health (p. 513). The authors posit that threats to individual dignity (which includes your “public worth”) and self-worth not only exclude those on the margins from full participation in society but also influence emotional and biological pathways to health. As DeVogli et al. (2007) so clearly elucidate:

> Emotional reactions include humiliation that may, in turn, result in inward-focused and/or outward-focused negative emotions depending on attributions of blame relative to acts of injustice. Inward-focused negative emotions occur when individuals, who are treated unfairly, evaluate themselves negatively or make internal attributions of responsibility. Outward-focused negative emotions occur when individuals evaluate others and externalise blame for the acts of injustice (Barclay, Skarlicki & Pugh, 2005). Inward-focused affective responses to acts of unfairness may include feelings of being devalued or insecurity about personal worth that are precursors of depression and anxiety. Outward-focused affective responses may include anger and hostility, often used as a "face-saving strategy" to defend the loss of dignity (Glibert & Guire, 1998). Both categories of emotional reactions have been found to influence CHD (Hemingway & Marmot, 1999).

> Potential mechanisms connecting unfairness and health may also include biological reactions such as alterations of autonomic functions, neuroendocrine changes, development of metabolic syndrome, insulin resistance, disturbances in coagulation, and inflammatory and immune responses (McEwen, 1998). These factors are precursors of CHD and other conditions that may impair physical health functioning (Brunner, 1997) (p. 516-517).

Other studies support this data on the mental and physical health outcomes of subjective experiences of unfairness, while also introducing the racialized and gendered contours of perceptions of unfairness and discrimination (See Kessler, Mickelson & Williams, 1999; Krieger, N, 1990, 1999; Krieger & Sidney, 1996; Ren, Amick & Williams, 1999; Williams, Yu, Jackson & Anderson, 1997). As we have seen in the data throughout this dissertation, issues of unfairness expressed in terms of favoritism, adult perceptions of youth, decrepit bathrooms and school environments, policing and school security, no materials and books, budget cuts, unqualified teachers and un-engaging curriculum abound. Taken as a whole and in context of the mapping and survey data presented in this chapter we see that the general ecology of urban schools can be detrimental to human development.

Stress and Health

> Stress is seen as a complex and dynamic process in which social and environmental conditions conducive to stress or stressors (e.g., major life events, daily hassles, chronic strains, ambient exposures), perceived stress (e.g., stressors perceived as bothersome or result in a physiological adaptational response), short term responses (e.g., elevated blood pressure, tenseness), and conditioning variables or protective factors (e.g., social support, personal control, physical activity) all affect each other and longer term health outcomes (e.g., cardiovascular disease, anxiety disorders). —(Israel et al., 2006).

Providing evidence for the weathering hypothesis (Geronimus 2000, 2001) as a biologically plausible process is the concept of "allostatic load" (McEwen, 1998, 2004).[54] Allostatic load describes "the long-term effect of repeated physiological response to stress. Allostatic load can cause wear and tear on important body systems, including the cardiovascular, metabolic, and

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[54] For another description of the biological pathways of social determinants of health, see Bruner, E & Marmot, M. (2006). Social organization, stress, and health. In: Marmot & Wilkinson, eds. *Social Determinants of Health,* 2nd Edition. Oxford, UK: Oxford University Press.

immune systems, and over time the health consequences include cardiovascular disease, obesity, diabetes, increased susceptibility to infection, and accelerated aging (weathering)" (Geronimus, 2001, p. 135; See also McEwen, 2004; Geronimus, Hicken, Keene & Bound, 2006).

Stress is linked not only to metabolism and ability to mobilize energy (perhaps this is why students cite laziness), but also to increased heart rate, blood pressure and release of neuroendocrines. At the same time, immune system functioning is decreased (Dougall & Baum, 2001). While these stress responses are beneficial and adaptive in particular contexts and for short periods of time, sustained elevated (or suppressed) bodily functions lead to disease. In addition to physiological changes, stress can lead to depression, anxiety, anger and fear—all of which have been reported in our findings. So too is stress linked too immune function, less resistance to infectious diseases, cancer, heart disease (including coronary artery disease and hypertension), hormonal balance and neuroendocrine disorders (such as diabetes), and rheumatoid arthritis (Dougall & Baum, 2001; Marsland, Bachen, Cohen & Manuck, 2001; Kop, Gottdiener & Krantz, 2001).

Environmental stress and hazards also affect health in three ways. First, when the stressor directly affects the body. For example, crowding, noise, unbearable temperatures or abysmal bathrooms. Second, the physical environment contributes to stress "by damaging or ameliorating coping resources themselves" (Evans, 2001, p. 365). Here, crowded schools can interfere "with the development and maintenance of socially supportive relationships" when there are too many students and too few guidance counselors, or when class size is so high that teachers cannot forge relationships or healthy instructional practices. Third, physical stressors can "elicit poor coping strategies that in turn lead to poor health" (Evans, 2001, p. 366). For example, when students "hold" their bladder all day to avoid using bathrooms, or when they cope with having no safe space or trusting adult at school by becoming introverted, not talking to or seeking support from anyone, relying solely on themselves, or turning outwardly to fighting and bullying. Environmental stressors influence physical and mental health, motivation, psychophysiologic processes, social resources and coping behaviors (Evans, 2001).

As Stephen Lepore (1997) writes: “Exposure to chronic stressors may be more detrimental to the physical and mental health of people whose social environments are characterized by negative, or strained, interpersonal relationships than it is to the health of people with positive, or nonstrained, social relationships” (p. 144). Crowding increases psychological distress for people experiencing frequent social hassles, the interaction of which supports youth’s complaints of structural overcrowding, of there being no “space” or student lounges in school, the lack of trust students have in their guidance counselors and teachers, and of peer violence. Here, architecture, school design and the social environment of schools affect health likely because people experiencing social hassles in crowded environments are less likely to perceive control over their environment. This diminished perception of control “might have resulted from the limited behavioral coping options (e.g., ability to withdraw to another room) of people in crowded” environments (Lepore, 1997, p. 147). As Table 7.2 shows, lack of autonomy and control over one’s choices and social environment at school are indeed stressors for students. This coupled with an overcrowded environment, regimented schedules and behavioral options and negative interactions with teachers or school security breed an environment that is certainly psychologically damaging for students.

Yet evidence from the survey data also shows the healthy effect that positive relationships with teachers has on students. Of the students that agreed or strongly agreed that teachers in their school cared about them, only 19.3 percent felt that life wasn’t worth living some, occasionally or all of the time (1-7 days per week). Whereas students who disagreed or strongly disagreed that teachers in their school cared about them, 39.7 percent felt that life wasn’t worth living at some point during the week (1-7 days per week), twice as much as students who agreed.

Interesting evidence for this work also comes from studies of medical schools in Britain, which show that medical students have particularly high rates of mental illness caused by the “symbolic violence” of the “dual discourses” that structure medical school (Sinclair, 1997, p. 302). For example, conflicts between the nature of medical students as caring individuals and their professional training which requires them to relate to patients in a formal way.

Since people of color living in poor, urban communities suffer more from stress-related conditions and suffer at earlier ages, with a greater probability of early death, stress-related conditions are a central feature in racial health disparities (Israel, Schulz, Estrada-Martinez, Zenk, Viruell-Fuentes, Villarruel & Stokes, 2006; Schulz, Israel, Williams, Parker, Becker & James, 2000). And we know from this and other studies that young people of color are more likely to attend schools with stress-inducing climates (i.e. metal detectors, policing, standardization, structural disrepair, environmental hazards, unqualified teachers, etc.) (Fine, Burns, Payne & Torre, 2004; Skiba, Michael, Nardo & Peterson, 2000). Often these same young people face significant stresses on their way to and from school (Evans, Fine & Fox, forthcoming).

Lepore and Evans (1996) add that there can be negative adaptive consequences to coping with one chronic stressor. They argue that a stressor can interfere "with a person's appraisals (i.e. evaluation of threat), capacity (i.e., resources), or motivation (i.e., incentive) to cope with a subsequent stressor" (Lepore, 1997, p. 147). Considering that chronic stressors manifest in psychological distress and negative health outcomes, in what ways are students who *leave school* (either out of resistance or due to diminished capacity or motivation to deal with daily schooling stressors) promoting or protecting their health? And at what point in their life span do the negative health effects associated with not having a high school diploma trump the short-term protective health effects of leaving school and the chronic social stressors there?

While across all ethnic groups in our survey the majority of students report being in good, very good or excellent health (86.9 percent), of the students who report having fair or poor health, Blacks were 3.6 times more likely than Whites to report this bleak health status and Latino/as were nearly 5 times more likely then Whites to report being in fair or poor health. Similarly LGBTQ students were nearly twice as likely to report being in fair or poor health than straight students.

Conclusion

This chapter presented data detailing the bodily costs of an inadequate education. Bearing heartbreaking scars, the youth in this study attend schools that are assuredly carving life-long wounds into their bodies. We see the embodiment of schooling—as explicitly distinguished from education—as well as the *daily stressors* that schools impose on students. Spanning

stresses of opportunity to stresses of dispossession, abuse and neglect the data in this chapter yields scores of possibilities for reform efforts to not only keep students in school, but to reduce many of the health crises that plague communities of color. In the next, concluding, chapter I offer reflections on theory, method and policy born from this data.

Chapter 8.

Reflections on Theory, Method and Policy:

(Re)Theorizing School Dropout, Methodological Considerations and Policy for the Education-Health Nexus

> They oppose a schooling process that disrespects them; they oppose not an education, but s*chooling*.
> —Valenzuela, 1999, p. 5

> Ain't school and life the same?
> —Diana

> Dear Mr. Bloomberg,
> As a NYC public school student I feel that to improve the schools that you should treat the environment as your home. If you put kids in a bad environment they will produce bad results. How do you expect kids to perform in schools with armed police officers standing in the hallways and messy bathrooms, and no classes about sex and STD's *which keeps them from having to drop out of school*. I know you say that these things aren't your fault but make an effort to help fix the problem. You cannot expect people to learn in these conditions.
> —Jermaine, emphasis added

> The past, our stories local and global, the present, our communities, cultures, languages and social practices—all may be spaces of marginalization, but they have also become spaces of resistance and hope.
> —Tuhiwai Smith, 1999, p. 4

This is a conclusion in three parts. The first will offer reflections on theory, in which I introduce a theory of school non-completion and then discuss *participant* perspectives on personal responsibility and educational and health disparities. The second offers thoughts on the use of (re)theorizing school dropout as a decolonizing methodology, methodological considerations for school resistance being health promoting, youth participatory action research, and limitations and future directions for this research study. Lastly, this chapter will end with a discussion on policy. This final section will include suggestions made by youth researchers and me.

Analyzing these data through a critical lens of schooling and listening to the voices and emotions—enraged, sad, worn down, resilient, beaten, love-filled, passionate, proud, hurt, tired,

frustrated, patient—of the youth participants has lent itself to a deep rethinking of how we conceive of school dropout. It is here where I will begin this final chapter.

Reflections on Theory (as Method)

(Re)Theorizing School Dropout: Towards a Theory of School Non-Completion

"This place is doing me harm."
—Vladimir, a patient in the film *Titicut Follies* (1967)

Here I come full circle. Taking the findings from this dissertation I now return back to where this document began; examining how national ideologies and racialized injustices in educational institutions operate in our daily lexicon and *manufacture* the dropout crisis. To begin I focus on the language of school dropout.

Language provides the means through which people come to an understanding of the world and of themselves (Madison, 1988). In order to lift the veil of silence and erasure that has shrouded dropouts in misrepresentation, and facilitated internalized racism and classism we must first use language that accurately represents this issue so that those dispossessed by their schools can reclaim their understanding of themselves *in the public sphere*. Revolutionizing the language of school dropout reconfigures power and shifts ownership: away from the bodies and lives of the subaltern onto Whites and the privatizing interests that dictate education policy.

To this end, I argue that we must erase the phrase "school dropout" from the landscape and rhetoric of education with as much fortitude as has been used to create, and maintain, the education debt (Ladson-Billings, 2006), a miseducation (Woodson, 2000/1933), the opportunity gap (Fine et al., 2004), cultural extinction (Adams, 1997) and exploitation (Grande, 2004), and institutional racism, classism and sexism (Feagin, 2006).

We must *replace* the singular term of school dropout, and keep the field moving in the direction of the emerging term "school pushout" (Browne, 2003). I argue that the broad rubric for discussing issues of diploma denial and educational dispossession (Fine & Ruglis, 2009) should be termed *school non-completion*, instead of school dropout; and under this umbrella term are six suggested categories, with new labels, of why students do not complete school.

The intention of this schematic is two-fold. First, these new categories of school dropout offer a *methodological frame* in which to ground research. Reframing dropout is a move towards a decolonizing methodology (Tuhiwai Smith, 1999; 2006) and critical race theory (Crenshaw, Gotanda, Peller & Thomas, 1995; Delgado & Stefancic, 2000; Ladson-Billings, 2000; Ladson-Billings & Tate, 1995): offering sites of possibility for counterstories, research, targeted policies and activism; and for youth and communities to reclaim, rename and reframe their existence apart from the imperial efforts of privatization, domination and White supremacy. The ultimate outcome of which is not only a fight for educational equity, access and achievement, but also for the improved health of youth, families and communities.

Second, (re)theorizing school dropout is a *conceptual analysis*, which as Machado & Silva (2007) state, "comprises the actions researchers engage in when they evaluate the language of their science" (p. 671). The objective of conceptual analysis is to increase the clarity of a theory though structured "clarifications and specifications of meaning" (p. 671). In order to do so, one must: 1) identify a theory's fundamental principles, characterize its domains and understand how it is used in particular cases, 2) increase the "explicitness of a theory by examining the grammar of its concepts", the goal of which is the ability of the theory to be tested or quantified, and 3) examine the consistency of the theory by applying it to a particular situation, which includes addressing underlying/unacknowledged assumptions (Machado & Silva, 2007, p. 678). This section follows these three principles providing a conceptual analysis of school dropout, the outcome of which is a (re)theorized construct of *school non-completion*. So too is this line of thinking influenced by Gayatri Spivak (1987, 1995), who "questions concepts found in the imperialist language of colonizers" (Dimitriadis & Kamberelis, 2006, p. 185).

The suggested categories of school non-completion are: *1) School pushout, 2) School leaver*, *3) School refuser (or resistor)*, *4) School forceout*, *5) School neglected, and 6) School denied*.

Notably, these categories are neither fixed nor exclusive: they are softly contained with porous boundaries; and a young person's experiences, identities and choices may exist across and within numerous categories. These represent the structural architecture of school dropout,

and they do two very important things. First, the labels either put the blame on educational institutions or they reflect power and resistance on behalf of those deprived of a diploma. Second, they are inherently malleable. That is, they provide a participatory identity. Each category clearly contains a set of experiences one must have to belong to the group; yet these experiences are entirely subjective in nature, allowing those dispossessed by schools to reclaim and name their identity as they see fit. All of the labels, by design, provoke power of the subject, and incite blame on the institution—*not* on schools as individual entities, but as systematic institutions that are rooted in larger globalized, racialized, neoliberal aims.

Similarly, this structural view is not meant to overlook issues of personal agency, resilience, and responsibility (I turn to a discussion of this later); nor is it meant to reify a rigid either/or dichotomy between the structural and the phenomenological. However, a focus on the individual has been the perspective most offered in the literature on causes of school dropout; and the choice to privilege its paradigm is a political decision that ensures hegemony is maintained. This structural view is also important for research on population health, for it offers a rubric for organizing the social factors influencing health. This schematic provides a dual advantage for health research because through highlighting negative educational experiences, these categories equally illuminate the distinct, antithetical experiences the privileged receive, and in doing so create a continuum in between of experiences for any given variable.

Below each of the categories is described. After each category, I provide a brief piece of data from this study to illustrate one possible lived experience of the category.

1. School pushout

Taking from the literature on the school-to-prison pipeline (Meiners, 2007; Wald & Losen, 2003; Advancement Project 2000, 2005; Browne, 2003), I extend this term to refer to the youth deliberately pushed out of the school system through the school-to-prison pipeline and over-policing of youth of color (Wacquant, 2001, Browne, 2003; Noguera, 2003), zero tolerance policies and practices (Noam, Warner & Van Dyken, 2001; Ayers, Dohrn & Ayers, 2001), marriages between education and police departments and the court system (New York City Department of Education, 2003), high stakes testing practices (Haney, 2002; Warren, Grodsky &

Lee, 2008), school promotion policies (Valenzuela, 2002), English-Only language and immigration policies (Spring, 2004; Mirón, Inda & Aguirre, 1998; Suarez-Orozco & Suarez-Orozco, 2001), and/or through being deliberately and wrongfully raced, labeled and tracked into special education (McNally, 2003).

This classification is a blend of both overt and covert policies aimed at maintaining the hegemony, whereby "the supremacy of a social group is manifested in two ways: as 'domination' and as 'intellectual and moral leadership" (Gramsci as quoted in & Borg, Buttigieg & Mayo, 2002, p. 29). For as Gramsci (1971) articulated: "Every relationship of 'hegemony' is necessarily an educational relationship" (p. 350). In this sense, the category a school pushout maintains class, race, ethnic and gender warfare through subterfuge of educational equity and, at the same time, attaching educational policies to larger State policies and movements—immigration policies, prison and military industrial complexes, fear of a majority minority nation, and zero tolerance.

Kamala: My complaint is you know how you get into an argument with somebody and then they say take it off the school grounds. Okay, that means if you take the fight off the school grounds, whatever happens Friday – because that's everybody's favorite day [for fights]. Whatever happens Friday, what's the sense of taking it off school grounds because Monday you go to school and then you get suspended for it? But it's like [the security officer] knew what was gonna happen, but you told me to take it off school grounds! And then when I take it off school grounds, you want to suspend me or give me a superintendent suspension for something that *you knew was gonna happen.*

Amanda: Or you'll get locked up.

Kamala : Yeah because if you knew it was gonna happen, you could've prevented it by keeping the kids in the school or sending somebody home. So it don't make no sense for me to come to school Monday [or again] and get arrested or suspended when you knew

ahead of time what was gonna happen.

Of the 221 Polling for Justice survey respondents who reported having been suspended or expelled, 34 percent report that they did not return to school after the disciplinary action.

2. School leaver

A school leaver can be used to describe a young person who either chooses to *or* is forced to choose to leave school due to responsibilities or burdens of: life outside of school (Rosenthal, 1998), family (Fine, 1986; Fine & Zane, 1989; Bridgeland, DiIlulio & Morison, 2006), pregnancy or parenting (Brindis & Philliber, 1998), health issues (Freudenberg & Ruglis, 2007), economic survival (Schargel & Smink, 2001; National Dropout Prevention Center, 2002), and migration—including negative psychosocial repercussions of the acculturation and assimilation aims of schooling (Mirón, Inda & Aguirre, 1998, Gibson, 1998, Zhou, 1998; Portes, 1996; Portes & Rumbaut, 2006; Suarez-Orozco, Suarez-Orozco & Qin, 2005). A system that isn't flexible enough to accommodate any "non-traditional" student or to provide supports to students and families that are struggling to survive again fail these youth. I also use this term to refer to youth who may name and describe the inadequacies of their schooling yet they take some personal ownership of not being able to succeed despite these shortcomings. In this case, a school leaver may take ownership of their decision to leave school without accounting for elements of how the system failed them; thereby—unfortunately—adopting a "blame the victim" (Kelly, 1997) or "bootstraps" (Villanueva, 1999) ideology. This category can involve messages garnered from media and popular culture (Giroux, 1997) and peer pressure.

Jessica: You mentioned some of your heart hurting for kids dropping out of school and your friends – could you maybe describe why you think your friends are dropping out or being pushed out of school? What's causing them to leave school?

Jermaine: Well, if you were to ask them, they would say because of the situation at home. At home. But I don't believe that. I just think that they are lazy, and I also blame the school also because they're not – in our school, it's a very small school. [The school administration]

> say that they – since it's a small school, they'll keep track of every single person, but I really don't believe that because you know there's – I think kid gives you signs from day one if they're gonna really stick with the school or drop out, and I know a lot of kids who from day one, they didn't show no interest in school, so they're just not getting attention and basically they're just not being pushed to stay in school.

3. School refuser (or resistor)

I urge the use of this term to describe youth who critically analyze and name the inadequacies of their school as the reason for their decision to leave. This term encompasses a continuum of refusers/resistors, incorporating youth who: decide to leave school as an act of resistance or critique of their school or school environment (Fine, 1991); are bored, unhappy, unsafe or not developing at school; deem school to not have a valuable social or economic return (Fine, 1986); sometimes believe that getting a GED is healthier and/or more efficient than the years it would take to complete high school (Tuck, 2008); or as Liz Sullivan (2007) refers to it, youth who refuse be "deprived of dignity" any longer. This category involves an analysis of political economy, in which an element of young person's decision to leave school is attached to the dwindling local labor market and globalization (Anyon, 2005; Tuck, 2008; Wilson, 1996). And a school refuser is also a young person who leaves due to lack of engagement in school because there is no relevance of the curriculum, no adults who foster meaningful, productive relationships, and because they are bored for lack of rigor, or too large classroom, or for the unqualified teachers in their classrooms. Best stated by Angela Valenzuela (1999, p. 5, emphasis in original), "They oppose a schooling process that disrespects them; they oppose not an education, but *schooling.*" They resist dehumanization.

> Karin: Everybody just go to school every day because at the end of the day everybody wants to get the education. They want a good job. But you put kids in the schools they don't want to be in because when you're in junior high school they tell you "apply for the high

school you want." And then when you don't get the high school, you get something like Theater High School. Alright, that's dancing, acting, singing. I don't want to do none of that. I want to be a pediatrician. Like, nothing in there has nothing to do with that *at all*, so I'm not interested in it. I'm not going to do what you ask because that's not what I want to do. And then if I don't do that, I fail. Then when I get left back and I'm in the tenth or eleventh grade again, I get too old, I'm just gonna drop out. I'm not gonna want to go, but all that could be prevented by just putting me in a school that has something to do with what I'm interested in!

Shakira: So you think, like, school kinda like pushed you out in a sense? Like if they don't have what you want, you really – it makes you stay away from coming to school every day?

Karin: Even if there's one class, that one class can make me want to go to school every day if it's something I'm interested in. But if all day I'm bored or not interested or not focused, then why would I go?

4. School forceout

This category refers to students for whom schools are often not safe; that can be described by the absence of educational, support, conflict resolution, substance abuse and peer programs, services or curricula for their needs; or for whom an element of moral judgment predicates their worth. Lesbian, gay, bisexual, transgender/transsexual, queer/questioning (LGBTQ) youth; homeless young people and youth in foster care (Burrell, 2003; Vera Institute, 2003; Finkelstein, Wamsley & Miranda, 2002); pregnant and parenting teens (Pillow, 2004; Benjamin, Keating, Lieberman, Lipman, Schissel, Spiro & Stubbs, 2006); adolescents suffering from depression and mental health issues; and legitimately classified special education students are the casualties—sometimes intentional, sometimes inadvertent—of educational policies. This category also encompasses those young people who lose their right to regular public schools because they are imprisoned due to the unfair policing practices in their communities (i.e.

Rockefeller drug laws and racially biased policing practices); as well as youth who are trapped in schools with high military recruitment efforts (Houppert, 2005; New York Civil Liberties Union, 2007). These youth end up out of the school system through actions rendering them more and more invisible and/or disposed of through policies that separate them from the rest of the student-body. In some cases, I'd argue that the intention isn't even covert politics, rather it's that the educational system often isn't equitably and justly set up (or have the capacity) to nurture these exceptional youth.

As Tracy states:

They didn't give me a chance to pick a school that I want to go to. I was in Iowa before, which is way different from New York, and I would cry every day because of all this things that goes on because I don't see it in Iowa. It's like Heaven there, and here is War Park. So when I go outside in gym and stuff the old men, they holler at you and stuff. I'm like, no; I got scared, and so I even brought a police report, everything, saying that I don't feel safe in this school, but they didn't let me transfer. Yeah, but now I'm kinda getting to like it, but still, I don't know.

But she then goes on to describe how her experience is even worse:

Tracy Like I came here only a couple months ago, and I was ready to graduate in Iowa as a Junior. I would have been graduated, but they told me that I have to pass the – all five –Regents in order to graduate here, and I have to do it within two years. I passed all the exams in my state. Yeah, and they didn't take my second language credit. A lot of my credits, they didn't take it over here, so I have to redo all of them.

Sophia: That is sad. I would have been extremely upset.

Shakira: Did you try to fight for it at all; get your parents to come here and explain to them this is equivalent because of this, and give them examples?

Tracy: Yeah, I did, but they were – the New York City School District thing is so much different from there, and so they were – they can't do anything about it. They just have to follow the rules, and so –

In response to the question, "In general, the public education system does a good job of educating young people like me," 54.3 percent of LGBTQ students disagreed or strongly disagreed, in comparison to 35.3 percent of straight students.

5. School neglected

Like the previous two categories, the schooling neglected *may* also suffer from unintended outcomes of educational practices. Youth that leave school via this circuit of dispossession attend schools in which the school infrastructure and environment are in various states of disrepair (including overcrowding, the presences of rats and roaches, not enough desks or textbooks, unsanitary or nonfunctioning bathroom facilities, educational neglect, polluted indoor air, mold and asbestos, contaminated drinking water) as is well evidenced in this dissertation, and who suffer from inequitable school financing policies (Fine, Burns, Payne & Torre, 2004). These are also students who suffer from low self-esteem, depression, and lack of interest or motivation, and for whom there are no guidance, social, mental or emotional health programs. Raced and classed site selection for schools also constitutes neglect (i.e. schools sited next to industrial plants, waste treatment facilities or abandoned landfills communicate to students a message about their worth, not to mention schools next to some of the busiest highways in the nation, which in turn contribute to some of the highest rates of childhood asthma in the nation) (See Akom, 2008b). Considering neglect is a sanctioned form of child abuse, lowered standards; low expectations by teachers; lack of certified and qualified teachers; an inaccessible, poor or unchallenging curriculum; not having a relationship with an adult at school; and excessive standardized testing imposed by NCLB are all forms of child abuse. Subsequently, many students who are "over-age and under-credit"—indicating their denial of an education while physically in school—are school neglected. This category can include English Language Learners (ELL) who graduate without English language proficiency, due to district ELL program policies, or Students

with Interrupted Formal Education who attend schools or school districts with inadequate services and programs.

Nearly 40 percent of all youth taking the Polling for Justice survey agreed or strongly agreed with this statement "In my school sometimes school rules, tests, the way school personnel treat students, and other elements of school make me feel pushed to leave school." And as Jermaine passionately narrates: "Look at the environment we're in. Messed up bathrooms, cops, scanning – it feels like we're in jail already. Like, sometimes, there's no heat in classrooms. Come on! Messed up, nasty food. If you ask anybody that's been to jail, they describe what we describe if we say a day in the life of public high schools in New York. Budget cuts. How are you cutting? Do we have to have books?"

6. School denied

This term recognizes youth who would like to attend school but do not due to either bureaucratic or policy loopholes concerning enrollment, registration, suspension/expulsion, credits, changing schools, immunization regulations and, more recently, the restructuring of the post-Katrina New Orleans School District (Tisserand, 2007). It encompasses youth for who time lapses between when they were forced out of one school and when they are placed in another; "wait-listed" if you will. This category holds for young people who attend night school and their programs are cut, are denied schooling due to truancy and attendance policies; or for pregnant or parenting teenagers who despite their *right* to be in school are encouraged (and sometimes even told) to do otherwise (Darling-Hammond, 1997). This category may be related to issues of morality and judgments of social norms and expectations by the dominant classes (i.e. what is constructed as in/out, good/bad, healthy/unhealthy, expected/deviant, normal/deviant, safe/risky, accepted/judged, tracked/free, successful/unsuccessful) (Ferguson, 2001; Foucault 1965, 1973, 1977). However, this category also includes youth who are denied schooling—that is an equitable, just education—while still technically *in* school, including: include special education students who are *wrongfully labeled and tracked* and/or students in alternative or juvenile detention schools. Youth in foster care and in the juvenile justice system are also especially likely to be school denied (Burrell, 2003).

Below is the personal experience of a young woman, who after her mother died suddenly, was sent to Massachusetts to live with her brother and attend school there. After returning back to NYC because an alternative living situation arose, she was denied school.

Alise: What I think in my true experience is that when you leave, you go to another place, and you try to come back, they won't accept you back. When I tried to get back into school, it wasn't happening.

Shakira: And why, did they give you hard time?

Alise: Yeah.

Shakira: Was it paperwork problems? What was the issue?

Alise: It was just that. When I came back into the state, they told me I have to go back to Massachusetts because when I brung my transcripts and everything, they said it wasn't good. They completely erased me from the New York City Department of Education, and I was only gone for less than a year. I was gone for like 6 months. They wouldn't let me in.

Shakira: And what grade was this that it happened in?

Alise: 10th or 11th. I came back last *year* and tried to get in to school a few times.

Shakira: So right now, you're currently not enrolled in school and you would like to be in school?

Alise: Yeah! It's boring.

Shakira: You want to go to school?

Alise: Yeah, I want to go to school just because I wanted to achieve my dream since I was little. I had plans on going to John Jay College to become a lawyer.

Regardless of which category a youth denied a diploma fits into, the bodies of these youth are as erased from schools as are the faces of the hundreds of thousands of Iraqi's that have been killed since the US occupation. And like the soldiers and Iraqis who bear witness to

this genocide, students attending schools today clearly describe the realities of education in urban America.

Each of the categories above is meant to emphasize one or more of the ways that urban schooling can be a form of structural violence (Galtung, 1969; Farmer, 2005) or symbolic violence (Bourdieu, 1992) in itself. My position is that conditions of structural, systemic and symbolic violence often *produce* outcomes and choices people have to make within the context of their life (or schooling).[55] Yet once this choice gets made, its onus becomes a personal act. This burden of responsibility/choice gets placed more heavily on certain "groups" of people—read the poor, women and communities of color—the same "groups" that actually have less societal choice and privilege. As Dorothy Roberts (1997) states: "Blacks are more likely [than whites] to be blamed for the poor choices they make" (p. 18).

I assert also that we should be pivoting these abhorrent scenarios into *opportunities* for building school community. Rendering students invisible and separating them from accountability for their actions, when they genuinely do "mess up", does little for developing community, awareness of one's actions on others, and the ability to think from different perspectives and points of view. Suspending students for disrespecting the physical environment of schools, teachers or other students only *reproduces* that pattern of behavior. Instead, imagining ways in which student acts of disrespect (or resistance) can be shaped into lessons of growing respect for self and others would do much for reshaping the social and educational climate of schools and society. In fact, two students spoke of desire for community at school specifically, with one young woman, Diana, reporting that school should be a "sustainable community" but as long as in (her) school "people steal, people lie, people don't like each other" it cannot achieve that aim.

You have read the words of young people throughout this and previous chapters taking ownership of their actions: they do not claim to be perfect or right all of the time, and they express emotions and actions of hurt and anger. They are structurally dismembered. Severed from their aspirations, from their right to attend school in a respectful built environment, and from a nurturing, rich, engaging curriculum. But while this theory for school non-completion offers a

[55] Or conversely that living in conditions with little systemic violence (or a good education/healthy school environment and experiences) provide for better health outcomes.

structural perspective on the issue, it is important to also introduce a discussion here of personal responsibility. I include this discussion very deliberately. I do not wish to romanticize youth and rigidly reify urban schooling. Responsibility of decisions youth make (e.g., to leave school, to fight, to bully, etc.) and their anger, frustration and "acting out" has been part of the participants' narratives throughout, and it is absolutely part of what's generating the graduation rate crisis. There is an individual actor who ultimately decides to go or not go back to school, to fight or not to fight. And I do not wish for this to be undermined.

Where this becomes a problem, is when personal responsibility is the *sole* rhetoric. Neoliberalism, as discussed in Chapter One, is helping forge this hard angle (although critical race theory is helping to make it less acute). We are shrouding the structural, psychological, symbolic barriers to educational opportunity, health equality and personhood, while at the same time telling young people that its their fault they didn't get to class on time even if they had to go through security and scanning for two hours, if they are overweight even though the grocery stores in their area don't sell healthy foods that are affordable to low-income people, and that pregnancy is a social atrocity even if they never learned safe sex or had access to social or educational supports and health care. But mostly, through the stories young people tell, we are asking young people to thrive in an environment that is akin to jail while at the same time psychologically assaulting them about their worth, and educationally underdeveloping them with lower standards, testing and unqualified teachers. In the next section I introduce accounts of the thickness of personal responsibility.

On Personal Responsibility and Internalized Oppression

The youth participants in this study do not implicate the system without taking personal responsibility for their actions. While narratives in this dissertation tell of structurally and symbolically violent conditions that produce many of the negative outcomes and "choices" youth make, the youth do oscillate between system-blaming, victim-blaming and internalized oppression (See also Fine et al, 2004). Fanon (1967, 1963) and DuBois (1903) have long ago argued that youth and children develop a sense of self from their social context: from the adults and peers in their life and from the institutions, environments and structures they are immersed in. What this

culture says about, and to, youth becomes, in part, internalized. As you saw in several places throughout this document already, youth spoke of the "laziness" of their peers or themselves, explaining dropout sometimes as "Yeah, like some people are just lazy." While I would suggest that this "laziness" is manufactured apathy, or internalized oppression, from continuously facing so many experiences of neglect and dispossession, the youth are *clear* that it is about accepting responsibility.

In the concluding question of the focus groups, we asked participants to offer their thoughts on the following two pieces of data, asking them how they made sense of each piece of information: 1) Nationally, only 50 percent of students of color (African American, Latino and American Indian) graduate from high school, while 75 percent of White students do, and 2) In 2005, the life expectancy for Whites is 78 years, while the life expectancy for Blacks is 73 years.

To explain the first question, Brittany shares:

> Some people just drop out just to drop out. A lot of African Americans, they drop out of school because of a consistency of – they want to get a job before they finish school, or they want to do different things before they finish school. Because I think they don't – I think they think they don't need school, so they do something else with their time. Sometimes, they think dropping out is the best thing for them because they don't think that they're going to finish school or anything. They think it's really hard.

This sentiment of economic hardship was echoed elsewhere in the focus groups and survey. But so was the diminished *right* to dream of a different future and the difficulty in school. And as Maxine Greene argues, "you can't become what you can't imagine" (See Greene, 1995). In a second exchange of theorizing the "opportunity gap", we see an even more nuanced understanding of life asymmetries, in which system critique, strategic dispossession, miseducation, and personal responsibility are all salient:

> Diana: I agree with it. I agree with it because we were just talking about it in Saturday school, and they said the SATs was designed so people that go to schools that I go to, regular schools, it's designed so they

can keep us out of college. And they said when they teach people in better schools, like [name of one the of elite public high schools in NYC] and everything, they teach them better things; we're not learning the same stuff.

Alise: I feel different, completely different about that because Black people are lazy, to tell you the truth, because if you think about it, the school in our community, look at them, some of them came out to do real good. Look at Colin Powell, graduated from Morris High School. Think about that, he's Black. Black people are lazy. They don't put enough effort into doing it. Some people go to school and do what they gotta do. But they don't go home and study. They don't think about the SATs until the SATs come.

But some Black people, not all, 10 percent, maybe even 5, go home and really do what they have to do just because they don't wanna grow up to be nothing. That's how I feel because White people already know what it is, "I'm gonna make me some money. When I get older, I'm gonna be rich," and Black people don't think like that.

Diana: They don't think about the money.

Shakira: So they don't have a motive. They don't do work when they go home.

Alise: Yes, if you think about it, Black guys, I'm gonna get straight to the point; they rely on sports into being rich. They rely on entertainment into being rich, basketball, rapping, no. If you ask them today, "What kind of education will you have?" That's why if a Black guy plays basketball, that's the only time he's going to school. That's the only time he will keep his grades up, is to get a scholarship.

Shakira: That's a good point. That's a good point, Alise.

Diana: That's true.

Shakira: If you ask a million, "What do you want to be?"

Alise: A basketball player. I wanna be a football player. They wanna play sports, or, "Yeah, I'm gonna be a rapper."

It's real. That *should be* a guy saying they wanna be a doctor or something. You don't even hear guys saying they wanna get their PhD or something, you don't hear that, you just hear, "I want a scholarship to go to college to make it to the NBA." "What you gonna do after the NBA when you get injured? How about that? Before you make it to the NBA and you get injured? Your career's over."

Diana: Yeah.

Alise: People don't think about that.

Here Alise is identifying responsibility of her "group" members for their laziness and under achievement and, yes, as the youth researchers confirm, a lot of their male peers do not dream of futures beyond sports and music. But what this also shows is that indeed Whites have the *capacity to aspire* (Appadurai, 2004), it is innate that they have future, according to CRT: indeed it is their birth*right.* And it is also dispossession (by accumulation) (Harvey, 2004) in which these young Black men have been dispossessed of any other future guaranteed by the State then prison or commodified sports and entertainment industries. So here too we see a dialectic: where personal responsibility is also always contingent upon there being an alternative.

With respect to the second, health disparities, statement the youth generally agreed. Some youth were surprised that Whites didn't live longer, and some were surprised that Blacks lived that long.

Alise: I'm surprised they live to be 73. Some of them don't even make it to 30.

Diana: Um-hum, some not til 18.

Alise: Um-hum. Fighting over a pair of shoes, stepping on my sneaker, yo, now I gotta shoot you, and all that.

Shakira: That's how who thinks?

Alise: That's how a Black person thinks. And a female, don't let me get started; they're plain stupid.

Diana: Fighting over baby daddies and all that.

Alise: It's not just fighting over baby daddies, they think because they're taking birth control, that's gonna protect them from AIDS; that's only protecting you from pregnancy. When you have unprotected sex, he ain't gonna tell you how many sex partners he had, and all them sex partners he had that they had. You can catch AIDS like that, and you're thinking birth control can protect you from that; no, it's not.

This conversation circles back to Chapter Six, where we saw the young men hypothesizing the detrimental effects of *lack of sexuality education* on the AIDS crisis and homophobia; and also of lack of trust and communication in intimate partner relationships. But we also see personal responsibility for meaningless violence (either neighborhood or partner), which is undeniable. Other young people have similarly portrayed racialized communal responsibility for health disparities in life expectancy, saying, "White people is health freaks, for one. For two, Black people is not just killing each other, they're killing themselves with these drugs and alcohol and all of that. The majority of Black people are alcoholics, and crack heads—and stuff like that, while some White people is health freaks, they're only eating salads. You *don't even hear about* them eating beef, and pork, and none of that. And a lot of Black people are dying of AIDS, cancer" (emphasis added). Here again, we hear personal responsibility, but we can see another thing clear. Reports of white drug use, white obesity rates and white crime do *not* make it into the media (save the recent downfall of global financial systems, but this white collar crime is itself an esoteric analog to forms of abuse and individual personal "risk" behaviors), nor do Whites make it into the neighborhoods and projects that all these youth live in. This brief passage, then, also illuminates hyper-segregated communities in NYC due to increasing rates of gentrification and neighborhood disinvestment.

Lisa makes sense of the health data in a different way: “Its about resources. Usually most white people go to private schools, and I’ve been to a private school during the summer, and they have really good resources in terms of health and education and generally. Minority people might not get the same resources as opposed to white people. Where do they get their education and how they move further in life and stuff?” While this is not true that most Whites go to private schools nationally, in New York City this is the case. Others echo this determinant of resources, stating that while they think “in general” it’s true, “it also depends on where you live,” and that “a lot of people can’t afford good health care when they live in urban areas.”

In this section we saw a continuum of victim and system blaming, through which ran threads of internalized oppression and personal accountability. In the next section, I turn to reflections of what this all means for method.

Reflections on Method (as Theory)

Methodological Considerations: Is Resistance Health Promoting?

As we have seen in this dissertation, educational conditions become internalized such that the social forces acting upon and through schools slowly begin to degrade and destroy the body. It is therefore important to consider the ways in which leaving school may be of greater benefit and provide more social support, social capital and social cohesion to a young person than staying in their school. How do we account for the contradictions that arise if one takes the perspective that an education is good for the body, yet schooling may be bad? That is, there are undeniable gains and benefits to earning a high school diploma or going to college. Yet while this *education* outcome is truly beneficial, the experience of *schooling* may be detrimental to some students. How can we thicken a definition of health to include the temporal and cultural flux of something being health promoting at one point in time, and health degrading at another?

Said another way, research on indigenous health in Australia has reported and acknowledged this phenomenon, concluding that “the role of schooling in preparing people for employment was widely acknowledged, although Western education was not generally recognized as having a positive influence on health” (Dunbar & Scrimgeour, 2007, p. 139). This may help to explain why, in the United States, a high school diploma does not confer the same

outcomes across racial/ethic groups (Western, 2006). The same cultural groups who are most dispossessed by education also have the most long-standing historical relationship of colonization, exploitation and oppression at the hands of the Western worldview in the imperial United States—Native Americans, African Americans, and Mexican Americans—to name a few. So there *is* something very significant about the role of conflict in the histories of the groups of youth who are faring the worst in schools today; the same groups who also have higher risks (and rates) of deleterious health outcomes (See Carson, Dunbar, Chenhall & Baile, 2007).

> By feeling part of a collective that stands in opposition to the dominant culture and through the social ties that reinforce this feeling, members of the collective are able to contest the dominant culture's images of themselves as morally marred or culturally deficient. This ability has positive health consequences. The positive impact of social integration and social support on health is said to rival in strength the detrimental impact on health of such known biomedical risk factors as cigarette smoking, obesity, and high blood pressure…Social support that serves as a buffer against race-related stress…, stigmatization…, lifestyle incongruity…, or culturally incompetent medical care…reaps critical advantages for Black health. *This is especially true where* residential and *school segregation,* although tacit rather than legally proscribed, *is an omnipresent physical symbolic representation to both Blacks and Whites of norms of Black inferiority* (Geronimus & Thompson, 2004, p. 253—emphasis added).

While this quotation specifically highlights racialized social differences it is an equally important methodological point to consider in how other axes of oppression get lived out in schools (i.e., sexual orientation, other ethnic/racial groups, gender, immigration status, language proficiency, SES, etc.), and for considering the health effects of such cultural incongruence with school dominant cultures.[56]

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[56] Again, it does so because the weathering hypothesis that generates this research is relevant specifically for explaining Black-White racial health disparities.

School Non-Completion as a Decolonizing Methodology

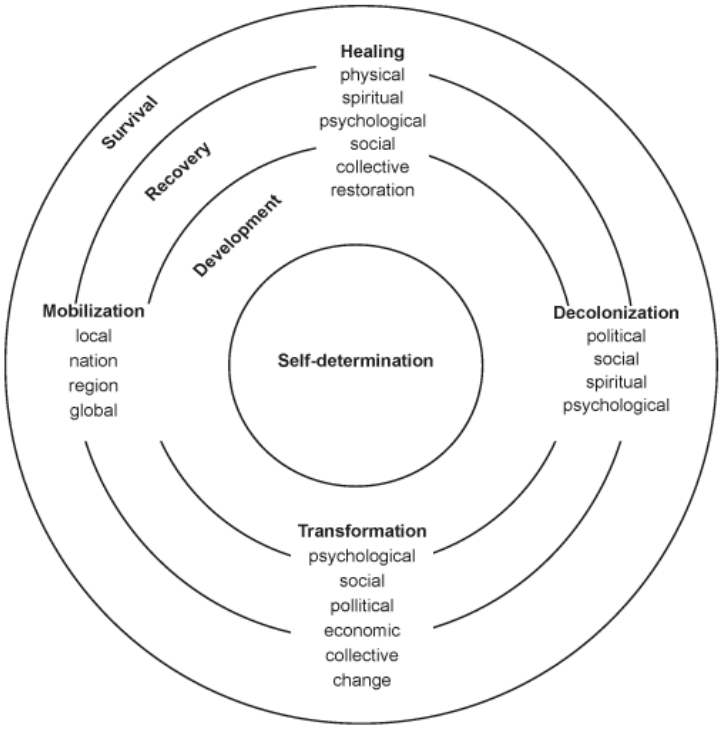
(Re)theorizing school dropout suggests a decolonizing methodology of research (Tuhiwai Smith, 1999, 2006). Where decolonizing research is imperative for studying forms of educational dispossession and their effects, since "research is a set of very human activities that reproduces particular social relations of power" (Tuhiwai Smith, 2006, p. 6). School non-completion, educational inequalities and health disparities are all rooted in power relations. Participatory action research (PAR), framed by the three principles of an indigenist approach—"resistance, political integrity, and privileging indigenous voices"—would help greatly in interrogating the tentacles of school non-completion (Tuhiwai Smith, 2006, p. 8).

Dropouts in many ways are akin to an indigenous group: they have been colonized, disciplined, have had their belief and knowledge systems denied, and they are positioned always as others; they have dynamic insider-outsider status, and their bodies are often rearranged and redistributed to other marginalized spheres of society. In this sense, an indigenous agenda for research maps onto the methodological resourcefulness of the each of the categories introduced above (*school pushout, leaver*, *refuser (or resistor)*, *forceout*, *neglected, and denied*) as well as onto youth participatory action research for transformational resistance (Cammarota & Fine, 2008). Using a metaphor of Maori ocean tides, where "tides represent movement, change, process, life, inward and outward flows of ideas, reflections and actions" (1999, p. 116), Tuhiwai Smith, provides a diagram (Figure 8.1, below) of an indigenous research agenda, the sum of which encapsulates the arc of the data and theories presented in this dissertation, of participatory action research's history and aims, and of what young people who do not finish school so rightfully need.

Tides are represented in this diagram as survival, recovery, development and self-determination, which can be said to be "the conditions and states" through which school non-completers (or urban public school students) are moving. Mobilization, healing, decolonization and transformation are *processes;* they symbolize the four directions of northern, eastern, southern and western. And like previous theories presented throughout this dissertation, process

necessarily involves a time and space continuum. In this diagram we then see how these *processes* can, and should, be integrated into research practices and methodologies.

Figure 8.1 *The Indigenous Research Agenda*



Original Source: Tuhiwai Smith, 1999, p. 117.

In this methodological context, each of the categories of school non-completion can be viewed in several different ways. Where each proposed research strands below not only accounts for the tides and processes of the research methodology, but also (and of course based on the methodology) *within* individual participants as well. These suggestions are not exhaustive.

The first way in which the categories of school non-completion can be used as a methodology is that they provide ideas for study samples: for populations of students, by *specific* educational experiences, to work with in research that attempts to explode conceptions of opportunity and achievement patterns. Second, they provide methodological frames for thinking about specific policies and practices to research. So too do they provide alternative frames for how to think about and ask questions of existing data, while at the same time lifting up areas in which critical research is needed in order to help shift educational dispossession away from students and onto the structures and experiences that shape their outcomes. The categories also

are methodological tools for thinking about “intervention” research. What the categories detail are specific harmful schooling experiences that prevent young people from completing school: so in their negative, they provide ways to think about programs, practices and research that schools and students *need*. Although they are broader than schools alone, as they implicate needs for ideological, decolonizing shifts in the public at large.

A brief word here on “interventions.” The other two critiques of public health out of which this work emerged (other then “education” being used as an objective benchmark) are a): schools have traditionally been mere “sites” for health interventions, as opposed to living, breathing, communities that are at once stretched so thin and also so rich with histories and cultures, and b) the field’s concern with “health behaviors,” devoid of the political economy that structure opportunities, resources and mechanisms for alternatives. Schools, however abysmal, need to be respected spaces: and the students, faculty, staff and educators within are the experts. The traditional interventionist and behavior modification approaches to health (Glanz, Rimer, Lewis, 2002) in schools can learn much from participatory action research, post-colonial studies, community collaboration, and from challenges to dominant disrespecting national ideologies of the de-professionalization and undervaluing of teacher workforces. Schools are more than objective sites; they are subjective ecologies. Interventions need to be tailored, targeted, and ground up—based on *articulated* needs—not imposed on a school or on particular groups of students for concerns of population health risks or based on judgments of “risky” health behaviors.

Similarly, people from the outside can’t look into schools and judge the obesity epidemic plaguing NYC youth, for example, without understanding policies that strategically under-develop opportunities for physical activity, food availability in and around schools and homes, and education and hands-on experience with new, healthier food sources. As Limban (2008) states: “The US is the only nation where healthy foods have been shown to be less accessible to poor people and people of color—and—where such disparities in access have been linked to patterns of food consumption and disease (Cummins and Macintyre 2005). This context is important for framing the practice of young people of color growing food as a strategy for reducing health

disparities." Simply making available fruits in schools may not change eating habits without sustained investments in teaching nutrition, growing food, and new (culturally grounded) cooking recipes and techniques. However, in recent years there is much excellent critical public health work and community based participatory research (CBPR) that has emerged within the field, led by such CBPR scholars as Nicholas Freudenberg, Barbara Israel and Eugenia Eng, to name a few (See Israel, Eng, Schulz & Parker, 2005). True partnerships are being established with schools, and these literatures were cited throughout this document.

Theories as Method

Ecosocial theory, embodiment and weathering tell us about two more important research considerations. First, these theories call for inclusion of the role educational opportunities and constraints play in structuring health disparities. This means that research is needed to effectively, creatively and in a participatory manner, investigate, detail, operationalize and document what school factors a) exist and b) can be categorized as opportunities or constraints. To this end, developing a PAR "comprehensive school needs assessment" would be an invaluable contribution to the field. This "needs assessment" (for lack of a better term right now) would then be used wherever a study was using "educational level" as a variable. This would help to thicken correlations between education and health by detailing specifically what any given's person's schooling experiences were that attributed to their education level to begin with and what psychosocial effects they had. Subsequently, I believe this would inform research on racial health disparities, the socioeconomic health gradient, and logic models of health.

Second, ecosocial theory, embodiment and weathering highlight the imperative nature of doing research over-time, or of capturing the effects of time in research. This too calls for new methods; which I suggest should be participatory action research longitudinal studies.

The focus groups speak truth to power by reminding us that youth must be positioned, viewed and involved as experts in research on both school dropout and the role that schools play in individual and community health. Another theme that has emerged from all of ProjectDISH's focus groups is the need to think of a school as a health entity in and of itself, and that a school plays a role in the health of the surrounding community. This deeply profound notion of a school

having a health status deserves much more attention. Related to this is a need generate research that rethinks and reimagines school architecture, design and spaces. We need to construct schools to be healthy spaces.

This dissertation also calls into question methods for researching consciousness. For example, when discussing the stress of school food the ProjectDISH youth researchers have said that it makes you feel as if you are "in jail, a slave, and animal, in the military. They all make you feel inferior and it's disempowering." To their synopsis of metal detectors, school safety and bars on windows they say: "feels incriminating, which makes you go crazy! Its offensive, a violation of civil rights and you have no privacy." And to the experience of wearing school uniforms, they say, "it takes away your rights to freedom and self-expression, and it affects social identity." In what way can we capture the role of consciousness in the production of health outcomes and the role of critical consciousness in the mediation of health outcomes?

So too does this call for research methods that visually document. We must *see* schools; we must see students *in contexts* so we can feel. We need research methods that allow for imagination, for imagination evokes our own embodiment, evokes our own lived experiences of how our contexts make us feel. Visual methods capture context, so we can pull back all of the layers and layers and scales and scales of all of the things missing in current knowledge and conceptions of possibilities for school reform and educational improvement. We are bound only by what we know, and the young people in the focus groups remind us that we need to go back and re-see the things in school that are opportunities for improvement. Youth-driven visual methods can also tell us simple solutions to pervasive problems that assault their humanity.

Lastly, this is a call to partner with the natural, clinical and medical sciences and introduce participatory action research ethics and practices to them. Including these professions in collaborating with youth and YPAR to training youth in how take, measure, record and analyze physiological and psychological measures (i.e. blood pressure, heart rate, signs of depression, etc.) could really assist in documenting the corporeal costs of a miseducation. I also suggest that this research consideration is an alternative learning model as well, providing youth with

educational and apprenticeship experiences contributing to their aspirations to different futures and to educational engagement.

I move now from what's ahead to what's behind, reflecting on my time and experiences with ProjectDISH.

Reflections on Youth Participatory Action Research (YPAR)

I begin with thoughts on participation. I have come to learn, to believe, that a definitive component of YPAR is that it must be flexible, even malleable, in nature. There must be a structure and a plan, but it must be open to exits and diversions along the way. In this sense, like the cyclic and iterative processes of PAR itself, YPAR projects must be cyclic in their progression, anticipating potential for change of the youth researchers into the design. Youth participation is full and genuine for however short or long their participation is. Due to the tremendous social, educational, transnational and economic constraints on many of these youths' lives, practitioners of YPAR must embed into their project/process fluid points of entry and exit, while at the same time creating a core, continual team of researchers. I addressed these often-competing needs in ProjectDISH through three avenues.

First, we could not welcome any more youth researchers after our first month of working together. After this time, we felt that anyone entering would lack the foundational and conceptual work that grounded our team. Second, the project was roughly structured into three month segments (education/background, research design/methods, data collection, data analysis & dissemination), and the end of each phase which could be a natural "exit point" for youth unable or uninterested in continuing on the project (very admittedly, the ways in which this would naturally influence the movement of youth researchers was not intentional in my design). Third, we developed and each signed a "Team Contract" (See Appendix) to hold ourselves accountable to the goals, mission and commitment of ProjectDISH. Despite all this, however, when doing YPAR, I have learned to account for the unpredictable. As discussed in Chapter Four, many of our youth researchers left at different points along the way and many participated with different intensities at different times. This process also took flexibility with understanding time, often having to meet on weekends, and for longer time to account for people showing up late and the

fun of socializing and bonding, which of course happens in all meetings. When we meet on weekends, we met for four hours at a time.

Two additional considerations for YPAR are worth mentioning here. First, in reflecting on my experience with ProjectDISH, I have come to believe I did the youth researchers a great disservice by not involving an adult in their life in the process. That is, I believe that a part of the YPAR research cycle must include communication and relationships with two “levels” of adults in the youth researchers lives: an adult in their personal life, i.e. a parent or guardian, and an adult in their social life, i.e. the school principal or teacher, if they are in school, or a case worker, community member or friend if they are out of school. The philosophical, political, pedagogical and epistemological commitment to youth researchers being fully trained, equal co-researchers brings with it a tremendous amount of responsibility for the youth—responsibility that is *for certain* in their sphere of capability but that may be outside their sphere of past experience. As such, involving adults into understanding the work and commitment of the youth researchers creates a social support network in their home community for their psychological and intellectual growth and development that results from participating in such a YPAR project. But it also reinvents an image of these youth in their home environment—something which is extremely important for identity development and also for school engagement. It is one thing to be understood as an intelligent, responsible researcher while at ProjectDISH, yet it is quiet another to have a school principal view a student of theirs as a leader and researcher.

YPAR for social justice and critical consciousness inherently involves learning and discussing very personal and difficult experiences. For example, after watching the segment of the PBS documentary series *Unnatural Causes* (Adleman & Smith, 2008) on the role of racism in infant mortality, I turned on the lights in the room to nearly all of the youth researchers either crying or stunned into silence. The emotional brevity of learning this new information about something that is so personal to them; about something that is *their lives* (as they are all students of color, and nearly all are Black/African American) I realized that there should be social support for these youth at home. That is, in addition to the stream of YPAR that promotes the development of critical consciousness, youth development, reclaiming and reshifting knowledge

and power; so too does there need to be an active stream the promotes the development, pride, recognition and support for these youth in their own social development that invariably happens through participating in such a deep and rigorous project.

The last lesson from YPAR concerns ethics of research and disclosure of findings. Magical moments happen in YPAR, most especially in the focus groups with were facilitated solely by youth researchers (three of the six). In these focus groups there were several moments in which the research hinged on peer mediation, sex education, feminist problem solving, and ways to navigate the system of schools. It was social capital, social support and networking at its finest. It is obvious when listening to these audio files and reading the transcripts that something very special happens during youth-to-youth research: sharing personal information and advice for ameliorating difficult situations goes hand-in-hand with the research. For example, in one focus group there was a lengthy discussion about one young woman's experience of sexual harassment in her school. While this conversation is a very relevant piece of data for our research, there is also something very particular about the feminist social supports and networking that occurred between the young women in the group, which included the facilitator, Shakira. They problem solved, offered solutions and suggestions, validated her experiences, and others shared their own. Which leads me to the question to several questions. The first concerns whether or not there are or should be different ethical and confidentiality practices in YPAR research projects? Does connecting youth to systems and sources of support need to be central to, or different in, YPAR research than just having the required IRB handout of mental health organizations in their communities? Should there be different boundaries regarding sharing (e.g., with principals or social workers at schools) information unearthed in interviews or focus groups? If you were concerned for someone's safety, how would you do this and not breach confidentiality? And how would these things hinge on or stretch definitions of confidentiality, ethics and research generated? Secondly, should there be different expectations amongst participants in YPAR projects for action? Is the action and activism sometimes *inside* the research acts themselves?

ProjectDISH recently presented at an academic conference at the University of Pennsylvania as part of a panel of YPAR projects. During the question and answer session at the end of the session, a woman in the audience asked: "Obviously PAR is a political stance, in which there are intentions for action…What are your [directed to each of the four youth researchers on the panel] intentions for this research? What intentions/actions do you want from this research?" The youth responded in different ways. The first young woman, from the other YPAR project represented, said "It's affected me; made me figure out what I want to do. I joined a social justice activist organization. I realized education was more than school." The second young woman, also from this sister project that was researching the school to prison pipeline said, "Nothing. This is it. To learn about this." Demeterios went next saying, "Each one teach one. I wanted to learn about the research, to grow, to share this information with my Social Issues class in my high school. The more people I share it with the more will be informed. I share this information in my community." Shakira, and the last to remark, simply stated that her intentions and actions from this project were "to learn." Clearly, these young people's responses and embodied intentions for activism communicate variants of what the Action component is traditionally framed as.

So I am also left reflecting on if, and how, intention and activism needs to be rethought in *Y*PAR. Activism to these youth is *participation*; critical academic opportunities in the contexts of their lives and school experiences are activism to them. And the research acts they participate in are equally activism as they get to share and grow and spread knowledge even with research participants and to their communities. And as I mentioned in Chapter Four, all of the remaining four ProjectDISH youth researchers' (De'Sean, Shadaisha, Shakira and Demeterios) definition and desire for activism is reciprocally educative in nature. They want to present at conferences and share this information in their schools and communities, and at places where public policy could be informed. In the process of this, they learn—about public speaking, presentation preparation, about other people and topics, and about themselves—and they teach so that others can learn. "For now, at least" they say. Here too, time needs to unfold.

I share here one more ProjectDISH youth researcher autobiography, also printed with her permission. Shakira was the naturally emergent leader of the collective. She never in our entire time together, missed one meeting. She and Demeterios have truly been my right and left hands. She facilitated half of the focus groups, where two of the three she did not facilitate were male focus groups so she was ineligible. Shakira is an extraordinary young woman. Organized, responsible, proactive, focused and remarkably smart, she has a more solid head on her shoulders than most people I know. She is also busier than most, engaging herself in as many opportunities for growth, transgression and travel as possible. In her own words, she describes herself and her participation in ProjectDISH, and it speaks precisely to the questions raised about what activism means to and for youth.

"My name is Shakira Morris, and I currently reside in the South Bronx. I am a senior in High School who partakes in many different programs and sports in my community. Some of the activities I have been involved in are being a member in two different clubs which travel abroad to perform community service to those in developing nations such as Dominican Republic, and Costa Rica. I am also a member of the girls varsity soccer and basketball team. In addition I serve as an assistant with my advisor to show leadership within my senior class to inform them of scholarships, and opportunities with college information that can help benefit their futures. I am looking forward to attending college to study Social Work and obtain my Masters Degree.

I am of African American descent with Caribbean roots from my father's ancestors that resides in Jamaica, West Indies. I will be the first of all my mothers nine children to complete secondary school. This I would have to say is my proudest accomplishment.

ProjectDISH has taught me to value other people's opinions, and realize that not every school is similar when it concerns students' best interest at heart. Whether it is the level of support students receive, opportunities available through the community based organizations, the fiscal budget on the school year or how education and their school community plays a role on their health today. All of these factors I learned are what upholds a sustainable community.

ProjectDISH in my opinion is not just a collaborative founded by one of CUNY Graduates, but an effort upheld by inspiring teens. As a youth member I joined personally because I am really

intrigued to learn more about how other teens across the city feel about how education promotes drastic changes in their life. Before leading focus groups and becoming certified to perform ethical research I never thought that so many problems existed within the public city school system. Situations varying from school policies, the environment, budget cuts, to stressful exams, the level of importance has increased in my life.

As a result of being an active member in ProjectDISH I plan to raise the awareness to others interested, help support those in our studies, and hopefully one day share our findings to those in public policy making to educate them about how as a city, many of the students have things they want changed. Not just financially, but if teachers knew how some of their students feel as though motivation would keep them from failing, then praising is what teachers should be taught. Remembering how participants said how they felt as though they were invisible, and don't even know if the teachers knew their name after being in a class for nearly 5 months. If my teacher gave me advice on how to do a better job, and motivate me more then this could have changed my High School experience.

I wish for a better community everyday, less crime, and less violence on peoples minds, but it has to start out with a group of people being destined to stand up for what they believe in. As a graduating senior I know that even though I will not be here in September 2009, I have family member and friends, and someday children who are in the Public School NYC system. So I would fight for things even if it meant personally I won't get to enjoy these changes later. Hopefully we inspire others and enlighten them with our voice. For I am Shakira Morris and my legacy has been heard!!!" (Shakira Morris, April 8, 2009).

Steeped in Shakira's words and my reflections, I am left at the end of these few years of working with ProjectDISH and Polling for Justice with one concrete conclusion about youth participatory action research. It must involve an intentional, planned critical pedagogy component throughout. Our youth researchers have learned about the educational system through *doing* research and *being* researchers, but the critical, transformative *education* piece is what resounds with them (See also Cammarota & Fine, 2008).

Limitations of this Study & Future Directions for Research

Notwithstanding the fact the Polling for Justice data is preliminary data, there are several limitations to this study. First, there were not enough male participants. Second, we did not conduct individual interviews. Perhaps this is why more data on drug use or personal sexual behaviors (particularly for the young women) was not yielded. Third, we did not have any study participants who dropped out of school by their own choosing and had not returned to school. This may have provided another interesting perspective. Fourth, our sample was contained to urban public school students attending “regular” schools (i.e., non-elite public high schools). Fifth, we did not have a citywide sample, as we did not have any focus group participant who attended school or lived on Staten Island, thereby also limiting generalizabilty to all five boroughs of New York City.

Synthesizing the findings and limitations of the study, I suggest seven immediate directions for future research. First, a youth participatory action research, ethnographic compositional study Weis and Fine’s (2004) of suburban schools, urban “regular” public high schools, urban elite public high schools and urban private schools to continue this research across juxtaposed groups. Second, a longitudinal study that documents and researches schooling processes, health and educational outcomes over time. Third, research on the role of trust (between peer-peer, student-authority, etc) in mediating stressors in school. Fourth, research on school architecture, the built environment and healthy environments. Fifth, creating integrated, sustainable school (and community) food programs that involve nutritional education, culinary arts, urban farming, green roofs, and physical fitness. Sixth, research on innovative social and mental health support programs in schools. Lastly, systematic research on health and sexuality education courses, programming, teacher certification, etc.

Reflections on Policy

Mr. Mayor!
Help! Share the wealth.
School is crashing and is in need of
a safety belt.
Bathrooms aren’t bathrooms
Knowledge isn’t power
We need help soon
because the children of
the future are dried flowers.
Help please! Please give us some

help. Education breeds confidence
not books on shelves. You're killing
my dreams and leaving
my life dirty like Harry. School
is a nightmare like prom with Carrie.
Bathrooms aren't bathrooms.
They are sewage. We need your
help because you can do it.
Don't be stupid, stupid.
Stupid. Dumb.
—Malik

ProjectDISH Youth Researcher Policy Recommendations

In a research meeting after we had analyzed our data, I asked the youth researchers to write their suggestions for what should be done to address many of the content themes that emerged from findings. Their recommendations suggest deep desire for recognition and respect, learning and expressing agency and autonomy, healthy relationships and selves, and for empathy, support and protection by the adults in their lives. Below are their suggestions in their own words. I should mention here, as an aside, that the culminating project they are working in, in addition to creating and facilitating a peer-to-peer youth researcher training workshop on how to do YPAR, they are also creating a youth policy report on the findings of our study and public policy recommendations.

Gossip

- Teachers, guidance counselors and social workers need to stop sharing information with other staff and students. Be confidential.
- Have teachers and students share ways to deal with their problems. (This also helps build relationships).
- Since the root of all problems is gossip, have a room, class or period for students to share and "air out" gossip. A teacher or an adult in the school should lead this class.
- Ways to reduce problems / fights is to have students talk about their problems so it won't escalate.

Teacher Quality

- Have students rate how effective teachers are in the classroom. (Like *Teacher Report Cards* or Student Evaluations in college).

- Have pop in visits from other school staff, so that teachers can't be "prepared" and staff can see what they do on regular, every days.
- Get rid of favoritism. It doesn't help or feel good to the students who are favored or those who are disliked.
- *As a research discussion elucidated one day,* ***all*** *youth researchers agreed: Favoritism "doesn't feel good" to those students being favored. As Shadaisha and Shakira went on to detail: "At first it does, then you think about what you did and it doesn't—you don't deserve it."*

Making School More Interesting

- Have more subjects in every school (culinary classes, home economics, construction, etc). This can't happen in NYC because of small schools, but could if there were big schools.
- Have better food, more availability of snacks, and more times to eat during the day.

Security/Safety

- Better training (including having more patience with students, and how to deal with fights when they break out, how to break fights up)
- Limit visibility of weapon
- Be more friendly

Guidance counselors

- Better training (be able to relate to students' lives, be put through realistic situations so they know what kids really go through, understand reality). Like they should understand when a kid says "there's abuse in my house, and the total household income is only 10K and we don't have any beds."
- More available (one for every 50 students, or ideally one for every 25 students)
- Experienced social workers
- Attend to specific needs (ex: scholarships, classes, college, etc.). Have many college advisors, one guidance counselor for transcripts, one guidance counselor for personal problems, one for scholarships, etc.

Dividing Big Schools Into Small Schools

- Allow students more one on one time with school staff
- More partnerships with programs (to get the supports and programs that large schools used to have)
- Sharing equally the school building / facilities / schedules
- Change school policy to include students opinions

Sex Education

- Mandatory freshman hands-on sex ed curriculum and assessments, including using videos throughout all grades of high school
- Raise awareness of pregnancy, diseases and health
- Have a health education course that includes learning about: sex education; whats good and bad for the body; diet, nutrition, obesity; stress; asthma and prevalent diseases; how to keep yourself healthy physically and mentally; healthy relationships with parents and family; healthy relationships with friends and partners.
- De'Sean: "We should create a health class on *Unnatural Causes. This* is what we should be learning!"

Relationships

- Learn how to trust your partner and how to be trusted
- Effective peer mediation groups, which include: consequences if rules aren't followed; actually solving the issue, *no matter how long it takes*; not rushing—don't try to get students back by the next class after an incident, or keep them afterschool—if not and mediation is rushed then the kids take it off school grounds and fight
- Respect
- Taking constructive criticism
- Abusive relationships
- Learning to be honest
- Healthy relationships with parents and family

Autonomy

- Have productive advisory with open discussions
- Talent shows
- Integration of student cultures into schools and school events
- Picking your own schedule (or some classes)
- These things, and having autonomy, makes you feel a sense of freedom, builds self esteem, sense of control, excited, happy, look forward to school, and you're inspired.

Policy Recommendations

Much of my suggestions for policy are interwoven throughout this document, or are so aptly stated by the youth researchers above. However, I suggest a few remaining thoughts for policy.

1. Critical Race Theory of Teacher Education and Educational Leadership

I propose a policy that teacher education and educational leadership must include a course on critical race theory in education (or LatCrit, etc.). Establishing a Critical Race Theory of teacher education, involves five themes that form its fundamental perspectives, research methodologies and pedagogy (Solorzano & Yosso, 2004).

The first theme is that *education must be acknowledged as being both central to, and intersecting with, proliferating race and racism.* This can be seen in the history of education, by how schools were structured and by schooling practices. Schools also provide a platform where racism converges with classism and sexism, as well as with ableism and language. The second theme for a CRT of teacher education is the *challenge to dominant ideology*. CRT educators must acknowledge "how notions of objectivity, neutrality, and meritocracy, as well as curricular practices, such as tracking, teacher expectations, and intelligence testing, have historically been used to subordinate students" while at the same time camouflaging "the self-interest, power, and privilege of dominant groups in U.S. society" (Solorzano & Yosso, 2004, p. 2).

The third theme is the *commitment to social justice*. This can be achieved by a research agenda that seeks to expose race, class, and gender oppression and to empower these underrepresented groups. The *centrality of experiential knowledge* is the fourth theme of a CRT

of education. This idea suggests the need to bring the lived experiences of generally marginalized students into educational discourse through: "storytelling, narratives, chronicles family history, scenarios, biographies, and parables" (Solorzano & Yosso, 2004, p. 3). *An interdisciplinary perspective* establishes itself as the last theme for a CRT of teacher education. This theme stresses the importance for educators to use interdisciplinarity as a means to contextualize racism by situating it within history. I will extend this tenet in the next subsection. A Critical Race Theory in teacher education would ask: How do educational institutions, structures, processes, and discourses function to maintain racism, classism, and sexism? How do students of color *resist* these forms of oppression within educational structures, processes, and discourses? And, how can education reforms help to end racism, classism, and sexism? (Solorzano & Yosso, 3).

Teacher education programs are extremely important to critical race theorists, because of the often-unexamined stereotypes and ideologies that get dispersed there. And I would also add that a CRT approach to teacher education *must include* critical whiteness studies (McCarthy, 2003; Hytten & Warren, 2003; Fine, Weis, Pruitt & Wong, 2004; Perry, 2002) as well as training in critical pedagogy & social justice curriculum development (Michelli & Kaiser, 2005; Apple, 2004, McCarthy, 1990; McCarthy & Crichlow, 1993) and language and culture in the classroom (See Delpit & Dowdy, 2002; hooks, 1994) are as much vehicles for damage, racism and underdevelopment as larger structuring forces of school segregation and under funding are, for example. So too must a CRT teacher education be interdisciplinary and be connected to other university departments where students can explore more deeply social, linguistic and cultural sciences that help to contextualize, provide history and critical theory to foster criticality and humanity towards the systems and communities in which their schools reside.

2. Interdisciplinary Studies in Education and Health

There are several professional training and degree programs around the nation that focus on an interdisciplinary approach to improving adolescent health and health disparities.[57] While integrating the fields of medicine, psychology, social work, public health, nutrition and nursing, the field of education is grossly missing. If these health science disciplines are where adolescent

[57] One such program is the Leadership Education in Adolescent Health (LEAH) Program. See: http://leah.mchtraining.net/index.php

health and development and health education, research and promotion expertise lies, and if the field of education is where expertise in schools, pedagogy, and education policy lies, then with great urgency we need to begin to forge connections between these disciplines. In order to begin to remedy the role that education and schooling plays in contributing to lifetime health outcomes and adolescent health; and to understand the ways in which health and nutrition influences education, institutional ties need to be made across schools and programs for joint education and collaboration between these disciplines.

3. Participatory Action Research for Educators: Education for Social Justice

Many of the solutions that participants and youth researchers identified for school improvement were small, local to their school building and classrooms, manageable and cost-negligible. Considering too young people's expressed desire for sustainable communities at schools and for the transformative, educative properties of participatory action research, I suggest policy for creating PAR courses for teacher education. If students had the opportunity, *in their schools*, to conduct PAR research and create change in their school, then perhaps many of these problems will be alleviated. If arguments keep coming from the top down that there is no money or resources for school change, then we need to start from the bottom up. PAR here is a paramount *opportunity* for student engagement *and* for educational renewal.

4. Policies Regarding Sexuality Education

Since sexuality education emerged as such a significant finding and desire for youth, I here suggest concrete policy recommendations for a variety of directions for state and local jurisdictions to consider in advancing the field of sexuality education.

1. Address and rethink the teacher shortage: perhaps community health workers and community sex educators need to be hired as staff for sexuality and health education.
2. Clarify/make more transparent the sequence and requirements of health education.
3. Increase the number of mandated lessons per year required on HIV/AIDS/STD education.
4. Enforce the health education graduation requirement, where students take an actual health education course with a certified health educator.
5. Create a sexuality component of health education in the state requirements.

6. Approach sexuality education more holistically, rather than being fragmented under different courses and regulations.
7. Require that all health and sexuality education must address numerous sexualities that students identify with, as well as issues of sexual violence and health communication.
8. Hold schools and districts accountable for not meeting the legislation for HIV/AIDS instruction and health education.
9. Require a full year course on health, development, social determinants of health and sexuality education in both 8th and 9th grades to promote school engagement and ease 9th grade transition—the most crucial period in school dropout.
10. Facilitate partnership with community and health based organizations for health education, services, activism, internships, and opportunities for PAR health projects.
11. Mandate bi-yearly curriculum evaluations to ensure that content accurately reflects advances and developments in research, diseases, prevention, and treatment.
12. Ground health and sexuality education in a global context.
13. Involve students in creating and running the mandated school-based health education teams.
14. Integrate health as an interdisciplinary component across the mandated (and elective) science, English, mathematics and social studies courses. Developing interdisciplinary curriculum through which health and social determinants of health are core content is another route to relevant, engaging, interesting and meaningful learning.

Conclusion

Youth organizer Christopher Goodman said it best on February 6, 2008 speaking out against the "historic underfunding" and budget cuts to the Maryland public schools, like is happening in so many districts around the nation: “Every year, they underfund our schools, they kill us" (Kumar, 2008).

Young people are literally fighting for their lives.

It is our job as critical educators, health practitioners and scholars to use all of the bones and might in our bodies, the energy and fortitude in our souls, and the relative privilege of our

occupations to engage in deep, participatory action research with youth: working to reclaim their right to education and health and the humanity of our nation, and to challenge educational institutions and policies for the degrading lifetime and intergenerational costs they strap to the backs and psyches of young people.

Yet we must also conceive, construct and research schooling as a social determinant of health and commit to a new language and worldview of school non-completion. Aligning scholarship with the main theses and findings outlined in this dissertation immediately creates possibilities for revolutionary opportunities, interventions, reform and research that will dually improve educational trajectories and lifetime health for entire generations of youth.

APPENDICES

ProjectDISH Research Timeline

ProjectDISH Research Timeline												
Project Activities	**2008**											
	Jan	**Feb**	**Mar**	**Apr**	**May**	**Jun**	**Jul**	**Aug**	**Sep**	**Oct**	**Nov**	**Dec**
Youth Researcher recruitment, consent												
Pilot Focus Group												
ProjectDISH PAR Collective Begins												
ProjectDISH Critical Education Phase												
ProjectDISH Development of Research Questions & Social Science Research Training												
ProjectDISH Development of Research Design, Methods & Protocols; Social Science Research Training												
ProjectDISH Youth Researcher Human Subjects Certification; Submit IRB Amendment												
IRB Revisions												
Training of ProjectDISH Youth Researchers as Focus Group Facilitators; Pilot Focus Group												
Conduct Focus Groups												
ProjectDISH Weekly Research Meetings												
Polling For Justice (survey component)												
	2009											
	Jan	**Feb**	**Mar**	**Apr**	**May**	**Jun**	**Jul**	**Aug**	**Sep**	**Oct**	**Nov**	**Dec**
ProjectDISH Data Analysis												
ProjectDISH Conference Presentations												
ProjectDISH Community Actions												
ProjectDISH Weekly Research Meetings												
Polling for Justice (survey component)												

ProjectDISH's Vision, Mission and Goals

I. Vision

When developing our guiding vision, the youth had two visions. One for our research and one for our research team. Interestingly, the distinction between these two "visions" maps well onto two distinguishing characteristics of PAR: individual development and growth and transformative research.

Vision for our research team:

- Be active
- Work together as a team
- Influence & be aware of our communities
- Support & respect one another
- Stick to the topic
- Ask questions & get answers
- Create change & a welcoming environment
- Build relationships with our community
- Be leaders & stand up for what **we** believe in as well as live
- Get our voices heard no matter how long or difficult the process
- Smile because we can see change

Vision for our research:

- To help create a change in the public school system by supporting existing information with qualitative research
- To fins out the reasons school actually affects health so we can attack the problem so that it no longer exists
- To have schools affect us in a positive way, not a negative way
- To have a school with a clean environment and helpful teachers
- Schools that students actually want to go to, where they can be in a clean environment and at the same time feel safe, supported, comfortable and loved
- Schools that are nurturing, supportive, positive learning environments that support growth, health, well-being and education; and that are free from racism, sexism, poverty and classism
- Schools with clean bathrooms, excessive tissue and soap; excellent lunches, breakfasts and snacks during the day. Clean hallways and classrooms, correct temperatures in the classrooms. Reduced authority and increased autonomy. Environment that is safe and productive. Teachers helping students. Students being able to confide in teachers (and other adults at school). Family-like environment.

And when asked to synthesize their vision into one sentence, the youth researchers developed this vision statement:

> "ProjectDISH's vision is of schools that are healthy, supportive learning environments that support growth, health, well-being and that are free from racism, sexism, poverty, violence and economic inequality."

II. Mission

> "Our mission is to increase understanding of how schools and school experiences influence one's body and mind."

II. Goals:

> "Our goals are to inform policy members and school administrators, create a new health curriculum, show how schools can harm and promote health, increase the number of school based health centers."

ProjectDISH Team Contract

We ProjectDISH Researchers created and approved this Contract.

As a researcher and member of projectDISH, I _____ agree to the responsibilities and conditions listed below. If I do not follow these agreements, I my teammates may want to have a discussion with me about my role in the project.

1. I will participate in every meeting by speaking at least once during the meeting.
2. I will always feel comfortable when speaking and I will voice my opinion and never back down from my beliefs.
3. I will always respect my co-researchers, and their thoughts and feelings
4. If I disagree with someone, I will say it in a polite manner and I will acknowledge that I respect their opinion.
5. I will help to create a safe and trusting space for myself and my co-researchers to share their feelings and emotions.
6. *One mic!* I will not talk over anyone.
7. I will keep a weekly journal.
8. If I am going to miss a meeting or be late, I will let the group know in advance by calling and/or emailing Jessica.
9. If I miss a meeting, I will contact one of my co-researchers to get the work I missed and to get an update.
10. If someone else misses a meeting, one of us will contact them to see if they are okay.
11. All meetings and discussions of projectDISH are *confidential*. That means, "Whatever happens in projectDISH stays in projectDISH."
12. I am committed to this team and research project until it ends.
13. I will do my best at each meeting.
14. I will have fun!
15. I will learn!
16. I will be creative!
17. I will make a difference!

_____
Print Name

_____
Signature

_____
Date

Focus Group Introductory Script

Hello and thank you for coming. We are happy you have joined us for this group discussion today. My name is _____ and I am a youth researcher in ProjectDISH. I am *(tell them about yourself)*. And I am _____ and I am a youth researcher in ProjectDISH. I am *(tell them about yourself)*. ProjectDISH (Disparities in Schooling and Health) is lead by Jessica Ruglis, a student at the Graduate Center of CUNY. This focus group is part of her dissertation. We are members of ProjectDISH, a collective that is learning about and researching how schools and health are connected.

The purpose of today's discussion is to find out about how you feel, see and think about how your school(s) and your health are related. We will be asking you a bunch of questions and you will also be participating in several activities—you will be drawing, acting, and writing. We want to remind you that you **do not** have to answer any question you don't feel comfortable answering. You will not be penalized. And if at any point in time, you decide you want to stop participating, you can. You will not suffer any penalty. Just let one of us know and we will give you your movie ticket.

Our conversations today will be tape-recorded. You will also notice that there is a video camera in the room. We want to be able to record the conversations and the visual products you will be creating and our discussions during the focus group today. We will be looking at lots of stuff that we won't be able to see on a tape recorder, and we want to document this stuff too!

Also, and very importantly, we ask that you keep what happens today in this room. Nothing that goes on in this room today should leave the room! However, we cannot guarantee confidentiality (that your identity and nothing you say will get repeated outside of this room), and you need to be aware of this. But if we all think about how we don't want what we say being shared by anyone else, then its easy to think about how we want to do unto others as we want done to ourselves.

Lastly, at the end of the session today, you will be given a list of free mental health services in NYC, incase anything we talk about today makes you feel uncomfortable, or brings up things you'd like to talk about with professionals more in depth. You are also welcome to talk to us afterwards. And you will be given snacks and a free movie ticket at the end of the session.

And again, thank you for participating today. We are really grateful and excited to have you here. Any questions?

* * * *

Before we begin, however, we have a few rules that we need to agree on.

1. One mic.
2. Respect.
3. Agree to disagree. No right or wrong answers. (You are the experts).
4. What happens in this room stays in this room. (Confidentiality).

Focus Group Protocol

15 minutes—Welcome

Have music playing. Participants arrive. Greet them on their way in. Introduce yourself briefly. Collect Consent Forms. If they forgot them, please give them another copy and have them sign it. Ask them if they have any questions. Offer them the snacks and beverages and tell them that we will begin in a few minutes. At about 10 minutes after it was supposed to start, makes sure everyone is around the table ready to begin

5 minutes—Read the Introductory Script and Rules

10 minutes—Introductions

Go around the table and have everyone introduce themselves by sharing the following info: Ask bullet 1 first, then when everyone has answered, go back around the room, asking each participant *by name* about bullet 2.

- What is your name, age, ethnicity, borough you live in, gender, grade, school (or for non-completers, ask what grade they were pushed out of school and/or left school in), one interesting thing about yourself
- When you hear the sentence, "Health and education are related/connected," what do you think of?

25 minutes—X-Ray Mapping Exercise (5 min for directions/start, 20 min for activity)

Introduce activity. Read the prompts below. Tell them that they can use any space in the room to work. But will ONLY have 20 minutes to draw. We will be discussing them afterwards.

PROMPT:

- We are going to start of today by drawing something. You will ONLY have 20 minutes to draw, but you can use any space in the room and any materials that are on the table.
- ASK: WHAT DO X-RAYS TELL US? And get responses from participants. (*X-rays tell us what's on the inside of something. They show us what's hidden*).
- So let's imagine what an x-ray of your body could reveal about what schools are doing to you, where the good and bad stuff in schools get hidden and located in your body.
- ***Draw an x-ray of what your a normal day in your school looks and feels like in your body.*** Where are your daily school experiences located in your body and what do they feel like? What does the x-ray of your body show us about schools?
- After you are done with your map, please turn the page over and write a 2-5 sentence "Artist's Statement" describing your map, telling us anything really important that you want us to know to be able to understand your map.

As soon as you read the prompts, put up the sign of this activity on the wall and reread it. Ask I there are any questions. Start.

10 minutes—Discuss X-Ray Maps

Ask each participant to describe her/his map briefly. Follow up on any questions that you have/may arise, during their explanations.

45 minutes—Discussion Questions

Overview

- Describe your school for us
- How would you describe your health? (What is your self-reported health status?)

Conceptions of health

- How do you define the word health?
- How do schools make you healthy?
- How do schools make you sick?

Psychological stress (testing, bullying, sexual harassment)

- What about your school makes you feel stressed? Give a specific example, or describe an incident.
- Do you feel comfortable in your school? If so, how? If not, how do you feel?
- Do you think that one's state of mind or emotions can affect one's health? How? In what ways?

Information about health (i.e. health class, sexuality education)

- Where in your school do you learn (information) about health? What do you learn? From whom? In what grade(s)?
    - What classes or places in your school do you learn about health related issues? What information do you learn?
- What information about sex and sexuality do you learn in school? Where do you learn this information? From whom? In what grade(s)?

Preventive care (holistically speaking) in school

- How does your school promote your health? How does your school harm it?
- Are condoms distributed in your school?
- What preventive care does your school provide?
- What do you think your school should be doing to improve your health?
- What foods are served or available in school?
- Is participation required for your gym class? Do you have a gym in your school building? Do you have outside fields/space at your school?

Health services in school

- What health services are offered at your school? Who can access these services? How do you access these services? What should be provided?
- If you had a health problem or question, would you speak with someone in school? If so, who? If not, why?
- Do you have any counseling or social work services in your school?
- Have you ever been sick at school? What happened? Who helped you?
- If you don't feel well, are abused, or experience violence, who do you normally tell? Give a recent example.
- Do you know of anyone who has gotten (or gotten someone) pregnant during the school year? What happened to this person?

Actual bodily experiences in school

- What about your school makes you feel good? Please explain. Give a specific example, or describe an incident.
- Have you ever had an experience in school that has made you feel like an animal? Please describe this experience.
- What happens in/at school that affects things going on in your body?
- What happens to you in school when you are hungry? What time(s) of day do you get hungry? What suggestions do you have to change this?
- Let's say you have to go to the bathroom during class, describe your experience of getting to the bathroom and then what the bathroom is like.

Health hazards (asbestos, fights in the corridor)

- Are there any things in your school that are health hazards? Please describe them.

- Describe your school building and school facilities. Is there anything that is bad for you or your health? Is there anything about the *building/facilities* that is good for you or your health?
- Describe an average classroom in your school? Are there enough seats for students?

Comparative Questions

- What were your earlier school experiences (elementary, middle school) like and how are the similar and different from your high school experiences? Did you feel different when you were in these earlier grades?
- Do you think there is any difference in the things in school that girls experience versus boys? White students versus students of color? Students who graduate and students who are pushed out? Students in special education vs. "regular" students?
- How do you make sense of the following pieces of information:
    - Nationally, only 50 percent of students of color (African American, Latino and American Indian) graduate from high school, while 75 percent of White students do. How do you make sense of this?
    - In 2005, the life expectancy for Whites is 78 years, while the life expectancy for Blacks is 73 years. How do you make sense of this?

15 minutes—Follow up Questions

Here, ask any discussion questions you {moderator} didn't get you that you wanted to, and/or ask any follow up questions that you noted during the focus group.

10 minutes—"Advice to the mayor"

Write a letter, poem, song, etc to the mayor telling him what schools should have (or do better) in order to make students healthy.

5 minutes—Closing / Metaphor

Close by going around the room and asking each participant to answer the following two questions:

- What did you think of your experience today?
- Do you have any questions for us?
- One metaphor/example of how school impacts your body?
- Revisit your map, use crayons to make any changes.

Lastly, tell the participants:

- We may be interested in doing follow-up individual interviews. If you are interested, please put your name, email and phone number on the sheet.
- The list of mental health services are being passed around, please take one (or more)
- Help yourself to refreshments

And MOST IMPORTANTLY, thank participants for coming and give them their movie ticket.

Polling for Justice Survey

paper PFJ survey December

1. Polling for Justice Survey 2008

Welcome to the Polling for Health, Education and Justice Project survey!! This is a survey written by youth for youth in New York City. 5,000 young people are filling out this survey just like you. Together, your answers will create a powerful voice that will improve young people's experiences with health, education and justice. If you have any questions or concerns, feel free to contact us at: polling4justice@gmail.com Thank you for your interest in taking the survey. It will take about 20 - 30 minutes.
When you finish the survey, we'll give you a **FREE MOVIE TICKET** to thank you for your time!

2. About You

1. What is your zip code?

2. What are the cross-streets near your house?
(for example: 35th street and 5th avenue)

3. What is your birth date?

for example: 01/23/1990

MM / DD / YYYY

4. Do you identify as:

- ☐ male
- ☐ female
- ☐ trans (gender/sexual)

5. What is your race and/or ethnicity? (check all that apply)

- ☐ Black or African American
- ☐ Afro Caribbean
- ☐ Asian, South Asian or Pacific Islander
- ☐ White
- ☐ Middle Eastern
- ☐ Other (please specify) _____
- ☐ Latino/Latina or Hispanic
- ☐ Native American or American Indian, Alaskan Native

6. What is your sexual orientation?

- ○ gay
- ○ bisexual
- ○ not sure
- ○ lesbian
- ○ straight
- ○ other _____

7. Do you have any conditions that would be considered a disability (like a mobility disability, blindness, deafness, ADHD, and/or a learning disability)?

- ○ yes
- ○ no

If yes, please indicate:

paper PFJ survey December

8. What country were you born in?

9. What is the highest level of schooling your mother/female guardian has completed?

- ◯ did not graduate from high school
- ◯ some college
- ◯ went beyond a B.A.
- ◯ graduated from high school
- ◯ graduated from college
- ◯ don't know

3. Concerns

10. Everybody has problems. When you are going through a hard time, how often do you turn to . . .

	always	frequently	sometimes	never
Adult family members (like: my mother/father/grandparent/guardian/aunt/uncle)	☐	☐	☐	☐
Peer family members (like: my brother/sister/cousins)	☐	☐	☐	☐
Friends (including boyfriend/girlfriend)	☐	☐	☐	☐
Adults at school (like: teachers/Guidance Counselor/Nurse)	☐	☐	☐	☐
Police (including School Safety Agent)	☐	☐	☐	☐
Other adults??? (like: youth program worker/organizer)	☐	☐	☐	☐
Other _____	☐	☐	☐	☐

11. What are the three most stressful things in your life?

1. _____
2. _____
3. _____

12. During the past week, how often have you felt . . .

	Rarely or none of the time (less than 1 day)	Some or a little of the time (1 - 2 days)	Occasionally or a moderate amount of time (3-4 days)	All of the time (5-7 days)
I was bothered by things that usually don't bother me	◯	◯	◯	◯
I had trouble keeping my mind on what I was doing	◯	◯	◯	◯
I felt depressed	◯	◯	◯	◯
I felt that everything I did was an effort	◯	◯	◯	◯
I felt fearful	◯	◯	◯	◯
My sleep was restless	◯	◯	◯	◯
I was happy	◯	◯	◯	◯
I was lonely	◯	◯	◯	◯
I could not "get going"	◯	◯	◯	◯
I felt that life isn't worth living	◯	◯	◯	◯

4. What do you think?

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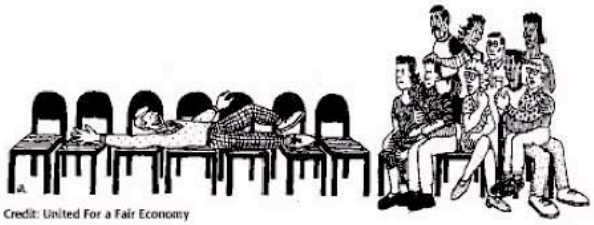
The United States right now is very much like this picture. A few people have most of the wealth in the country while a lot of people make do with what is left.



Credit: United For a Fair Economy

In fact, only **10%** of the U.S. population owns **71%** of all of American's wealth . . .

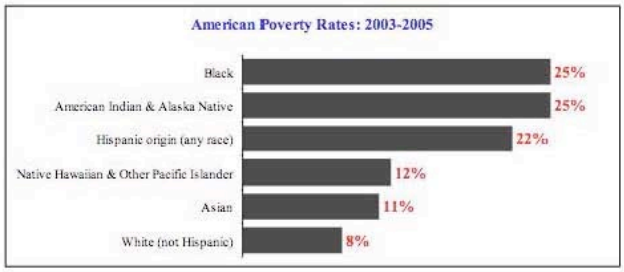
and on the other hand

the rest of the **90%** of the population owns only **29%** of all of American's wealth . . .

In other words, there is a huge gap between the very few wealthy and the rest; particularly the poor.

13. Help us understand what to make of this. Why are some people so wealthy and others so poor?

Some race and ethnic groups seem to have more wealth as a group than others. For example, look at the graph below. Only **8%** of the White community is living in **poverty while 25%** of the Black community is living in poverty, and **22%** of people of Hispanic origin are living in poverty.



14. Why do you think some racial and ethnic groups are more likely to be poor than others?

15. Is there anything that can or should be done about some groups being poorer or wealthier than others? Is there anything you have done about it?

5. About you and school

16. List all the high schools you have attended - starting with the most recent: school name:

1.
2.
3.

17. Your current educational level: (check all that apply to you)

	yes	no
I'm still in high school.	☐	☐
I left high school before graduating.	☐	☐
I graduated high school.	☐	☐
I'm in a GED program.	☐	☐
I have my GED.	☐	☐
I'm in college.	☐	☐

name of college:

18. What kind of security does your school have? (check all that apply)

☐ none ☐ cops ☐ other _____

☐ school safety agents ☐ cameras

☐ metal detectors ☐ not sure

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19. In my school . . .

	strongly agree	agree	disagree	strongly disagree
My teachers care about me.	☐	☐	☐	☐
My culture is respected.	☐	☐	☐	☐
I feel like people really know me.	☐	☐	☐	☐
My teachers have high expectations of me.	☐	☐	☐	☐
My teachers help me when I don't understand something.	☐	☐	☐	☐
Teachers do not listen to what students like me have to say.	☐	☐	☐	☐
Students in my class talk back or act rudely towards teachers.	☐	☐	☐	☐
I can talk to teachers about problems I am having in class.	☐	☐	☐	☐
I feel bored.	☐	☐	☐	☐
The school helps me feel prepared for college.	☐	☐	☐	☐
Too much class time is spent getting ready to pass Regents.	☐	☐	☐	☐
I worry that Regents exams could keep me from graduating.	☐	☐	☐	☐
I have had negative interactions with School Safety Agents.	☐	☐	☐	☐
It is overcrowded.	☐	☐	☐	☐
I care about getting good grades.	☐	☐	☐	☐
I feel challenged by what I'm learning.	☐	☐	☐	☐
Sometimes school rules, tests, the way school personnel treat students, and other elements of school make me feel pushed to leave school.	☐	☐	☐	☐

20. In my school, I have received help from teachers or guidance counselors with . . .

	strongly agree	agree	disagree	strongly disagree	I don't know
Questions about college.	○	○	○	○	○
Help with college applications.	○	○	○	○	○
Information and support with financial aid forms.	○	○	○	○	○

21. Have you ever:

	never	once	more than once
been held back in a grade?	☐	☐	☐
dropped out or been pushed out of high school?	☐	☐	☐
been suspended or expelled?	☐	☐	☐
entered a GED program?	☐	☐	☐
been homeless?	☐	☐	☐
been in foster care?	☐	☐	☐

6. About you and the criminal justice system.

22. In the past 6 months, have any of the following happened to you?

	never	yes, happened out of school	yes, happened in school
I was told to move by the police in a disrespectful way.	☐	☐	☐
I was arrested.	☐	☐	☐
I was helped by a police officer.	☐	☐	☐
I got a ticket/summons.	☐	☐	☐
I was given a "second chance" by a police officer.	☐	☐	☐
I was picked up for a PINS (person in need of supervision) violation.	☐	☐	☐
I was stopped by police for questioning.	☐	☐	☐
I was frisked (patted-down).	☐	☐	☐
I was strip searched.	☐	☐	☐
A police officer crossed the line (touched inappropriately) while searching me.	☐	☐	☐
I received "sexual attention" from the police.	☐	☐	☐
I was threatened and/or called a name by the police.	☐	☐	☐

23. Have you ever been in jail or prison?

○ yes ○ no

24. Has your parent ever been in jail or prison?

○ yes ○ no ○ I don't know

25. In general, the police in NYC protect young people like me.

○ strongly disagree ○ disagree ○ agree ○ strongly agree

7. Sex and Relationships

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26. Have you ever:

	yes	no	not sure
been in a romantic relationship?	◯	◯	◯
had sex with a male?	◯	◯	◯
had sex with a female?	◯	◯	◯
been tested for a sexually transmitted infection or disease?	◯	◯	◯
had a sexually transmitted infection or disease?	◯	◯	◯
had intercourse without a condom?	◯	◯	◯
had sexual pleasure or an orgasm with a partner?	◯	◯	◯
been pregnant or gotten someone pregnant?	◯	◯	◯
had an abortion (either you or your partner)?	◯	◯	◯
taken emergency contraception pills, also known as morning after pills, abortion pills, or Plan B? (either you or your partner)	◯	◯	◯
been forced to have any kind of sexual contact when you did not want to?	◯	◯	◯
been hit, slapped, or physically hurt on purpose by your boyfriend or girlfriend?	◯	◯	◯

27. The last time you had sex (sexual intercourse), which of the following did you use? (check all that apply)

- ☐ I have never had sex.
- ☐ used nothing
- ☐ condoms
- ☐ birth control pills
- ☐ Depo-Provera (injectable birth control/ a "shot")
- ☐ withdrawal or pull-out
- ☐ I don't know
- ☐ other _____

28. In the last 30 days have you:

	No	Once or twice.	Three or more times.	Every day.
Smoked a cigarette	☐	☐	☐	☐
Had a drink of beer, wine or other alcohol	☐	☐	☐	☐
Used marijuana	☐	☐	☐	☐
Used some other illegal drug (like, crack, cocaine, heroin, Ecstasy, crystal meth, LSD, angel dust, inhalants such as air freshener, glue, markers, paint, gasoline etc)	☐	☐	☐	☐
Used prescription pain killers (to get high)	☐	☐	☐	☐
Gotten into a fight that injured you	☐	☐	☐	☐
Injured someone else in a fight	☐	☐	☐	☐
Carried a weapon	☐	☐	☐	☐
Participated in gang activities.	☐	☐	☐	☐
Been hurt or felt threatened by a gang	☐	☐	☐	☐

8. Your thoughts on the U.S.

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29. How much do you agree or disagree with the following statements?

	Strongly disagree	Disagree	Agree	Strongly agree
Basically, people get fair treatment in the U.S., no matter who they are.	☐	☐	☐	☐
In the U.S. you have an equal chance no matter where you come from or what race you are.	☐	☐	☐	☐
The U.S. is a fair society where everyone has an equal chance to get ahead.	☐	☐	☐	☐
It makes me angry when I think about the conditions some people have to live in.	☐	☐	☐	☐
When I think about the hard times some people are going through, I wonder what's wrong with this country.	☐	☐	☐	☐
I get mad when I hear about people being treated unjustly.	☐	☐	☐	☐

30. Rate your answer:

	yes	maybe	no
If you could vote, would you?	○	○	○

31. Tell us about a time when you witnessed or experienced an injustice/unfairness that upset you.

9. Your health.

32. During the last month, how many days of school or work have you missed because of: (enter # of days between 0 - 31)

physical sickness (such as an injury, your period or infections)

mental health (such as feeling depressed, sad, anxious, or like you just couldn't 'get going')

taking care of family members (babysitting, going to court, taking someone to the doctor, etc.)

other (specify below)

33. If you had health education class, what grade was it in? (check all that apply)

- ☐ I haven't had it
- ☐ 6th grade
- ☐ 7th grade
- ☐ 8th grade
- ☐ 9th grade
- ☐ 10th grade
- ☐ 11th grade
- ☐ 12th grade

paper PFJ survey December

34. Which of the following did you learn about in your health class(es)? (check all that apply)

- ☐ sex education
- ☐ abstinence
- ☐ HIV/AIDS
- ☐ Sexually transmitted infections (STIs/STDs)
- ☐ sexual health / sexuality / sexual behavior
- ☐ sexual identity and orientation
- ☐ gender identity
- ☐ pregnancy (and pregnancy options)
- ☐ contraception
- ☐ sexual exploitation
- ☐ dating violence
- ☐ abuse
- ☐ nutrition
- ☐ obesity
- ☐ eating and/or body image disorders
- ☐ body systems (reproductive, circulatory, digestive, immune, etc.)
- ☐ physical activity
- ☐ alcohol, tobacco and other drugs
- ☐ growth and development
- ☐ safety
- ☐ emotional and mental health
- ☐ disability
- ☐ dental health
- ☐ disease prevention and control
- ☐ environmental and public health
- ☐ consumer health
- ☐ stress management
- ☐ first aid
- ☐ personal hygiene
- ☐ crime/safety/violence

35. In the last year, when you felt sick, have you gone to . . . (check all that apply)

- ☐ Haven't used health care in last year
- ☐ Private doctor
- ☐ Community or hospital clinic
- ☐ At school
- ☐ Hospital emergency room
- ☐ Botanica, acupuncturist or other alternative care
- ☐ Church/mosque/synagogue/place of worship and/or spirituality

some other place (please specify)

36. In the last year, have you ever needed health care but not gone because . . . (check all that apply)

- ☐ I had no one to go with me.
- ☐ my immigration status.
- ☐ language barrier.
- ☐ I have trouble communicating with health care providers.
- ☐ not enough money.
- ☐ no health insurance.
- ☐ I was scared of what I would learn.
- ☐ I didn't know how.
- ☐ Other _____

37. How do you pay for health care:

- ☐ With my own money
- ☐ With health insurance from my family
- ☐ Find places where health care is free
- ☐ Some other way

10. Last but not least . . . your reflections!

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38. How did you find out about this survey?

- [ ] friend
- [ ] another internet site
- [ ] other
- [ ] myspace
- [ ] a youth organization
- [ ] facebook
- [ ] school

if you answered youth organization, what is the name of youth organization:

39. What 3 questions do you think we should be asking other New York City teens?

1.
2.
3.

40. Are you, or have you ever been, in a special ed class?

- ◯ yes
- ◯ no
- ◯ not sure

41. Comment box! (write whatever you want)

Thank you for taking our survey!

~ the Polling for Justice research project
polling4justice@gmail.com
www.polling4justice.org

11. Useful Resources

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The list of organizations below provides free mental health services for adolescents. Several of the organizations provide 24 hour access for help.

LifeNet
A New York City Hotline that is open 24 hours a day, 7 days a week for mental, emotional or substance abuse problems.
- 1-800-LifeNet (1-800-543-3638) (English)
- 1-877-Ayudese 1-877-298-3373 (Spanish)
- 1-877-990-8585 (Asian LifeNet—for Cantonese and Mandarian language speakers)
- 1-212-982-5284 (TTY)

The Door
Provides free and confidential services to young people ages 12-21.
121 Avenue of the Americas
New York, NY 10013
Tel: 212-941-9090
Website: http://www. door.org

Mt. Sinai Adolescent Health Center
Provides free and confidential comprehensive medical, mental health, family planning, and health education services to young people between the ages of 10-21.
312 East 94th Street
New York, NY 10128
Information: 212-423-2900
Medical Appointments: 212-423-3000
Mental Health: 212-423-2981
Nurse: 212-423-2999
Website: http://www.mountsinai.org/msh/msh_program.jsp?url=clinical_services/ahc_about.htm

South Bronx Health Center for Children & Families (SBHCCF)
Provides comprehensive primary health care, mental health, counseling and legal services to adolescents, regardless of their ability to pay or their immigration status.
871 Prospect Avenue
Bronx, NY 10459
Tel: 718-991-0605 (24 hours/day; 7 days/week)
Website: http://www.montekids.org/programs/sbhccf

Safe Horizons
1.800.621.4673
Since 1979, Safe Horizon has operated Community Programs in New York City to support, educate, and advocate for victims of crime and abuse. Currently Safe Horizon has six Community Programs throughout the five boroughs serving more than 4,000 individuals each year. Safe Horizon's Community Programs offer the following services: Crisis Intervention, Case Management, Practical/Emergency Assistance, Information and Referrals, Individual Counseling, Support Groups, Advocacy, and Community/Public Education Presentations. Please call the Community Program for further information and/or to make an appointment.

12. Getting Involved! (optional)

42. We want to talk more with you! If you are interested in talking more about these issues, being interviewed, or being in a focus group, please give us your name and the best way to get in touch with you.

DETACH THIS SHEET and hand it in separately from your survey.

Someone from the Polling for Justice project will get in touch soon!

Name:

Address:

Address 2:

City/Town:

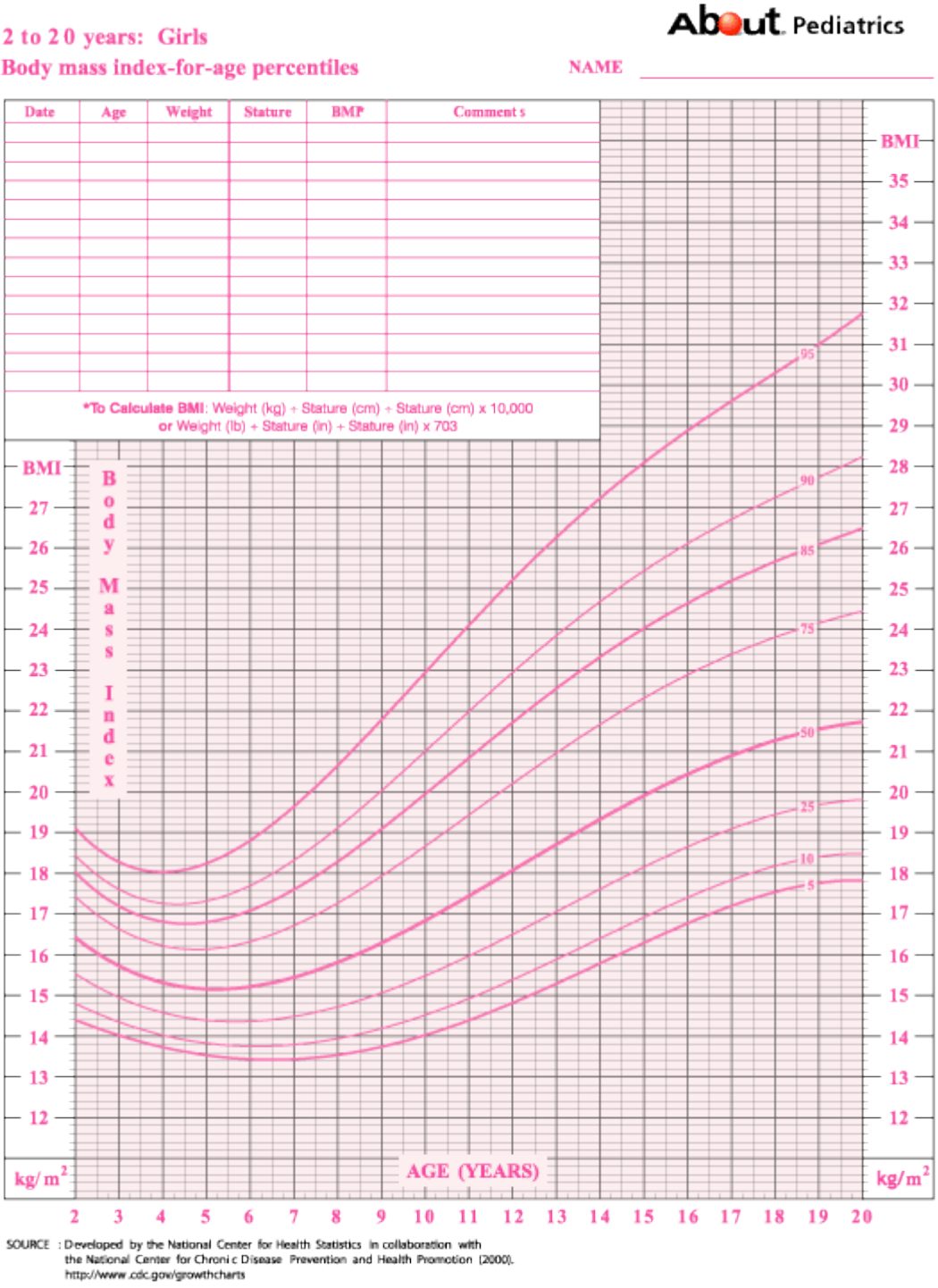
ZIP/Postal Code:

Country:

Email Address:

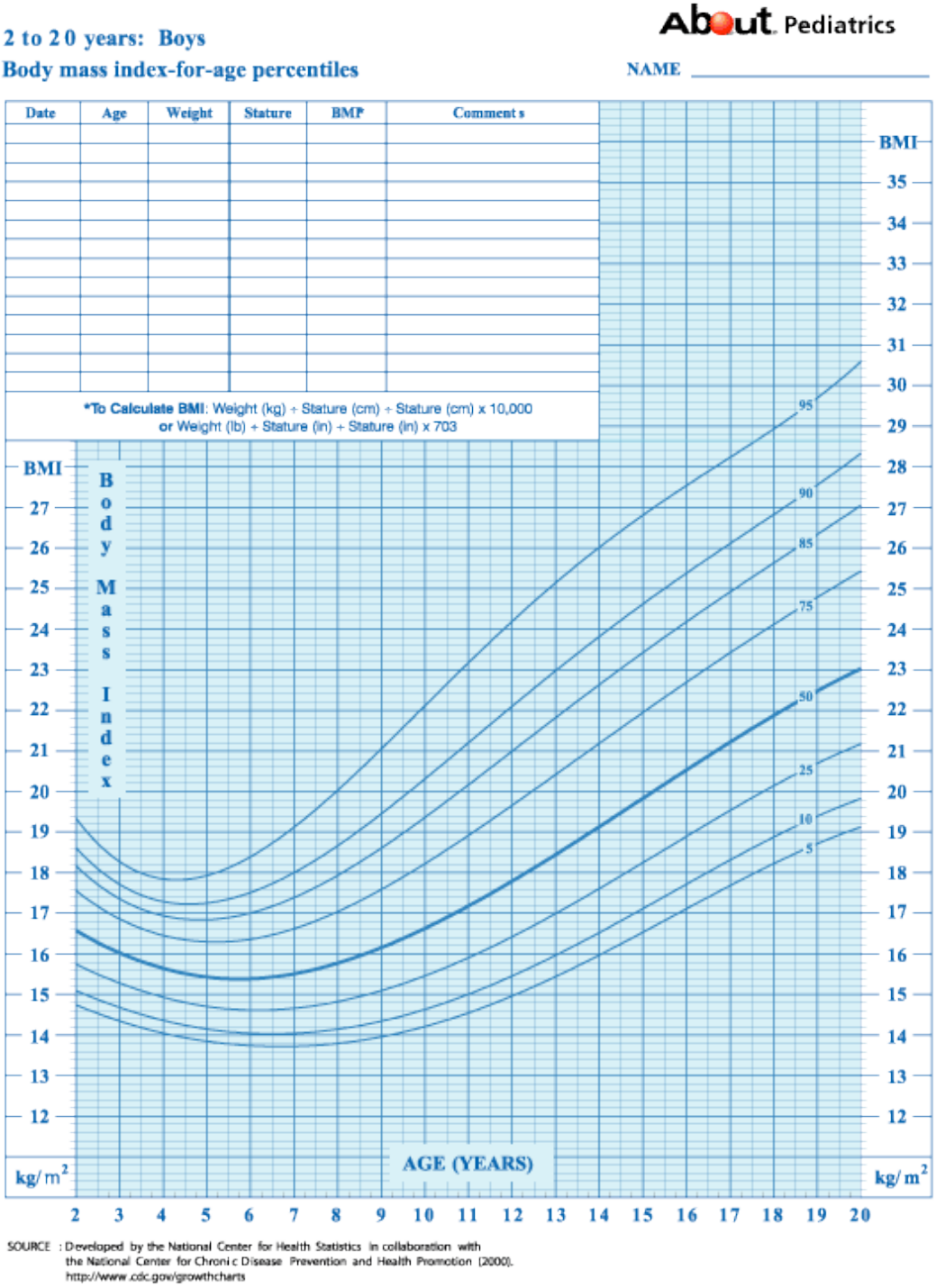
Phone Number:

BMI Growth Chart for Girls



SOURCE : Developed by the National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion (2000). http://www.cdc.gov/growthcharts

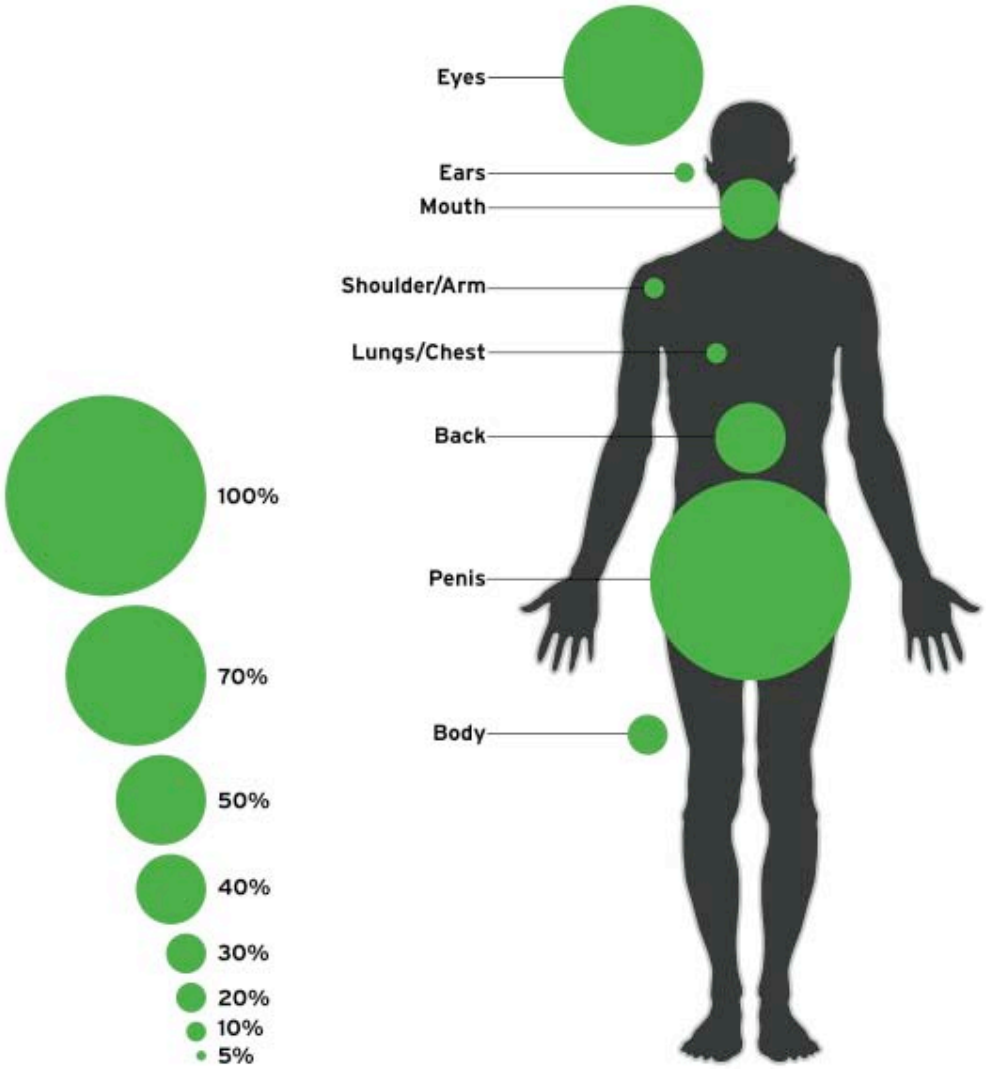
BMI Growth Chart for Boys



SOURCE : Developed by the National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion (2000). http://www.cdc.gov/growthcharts

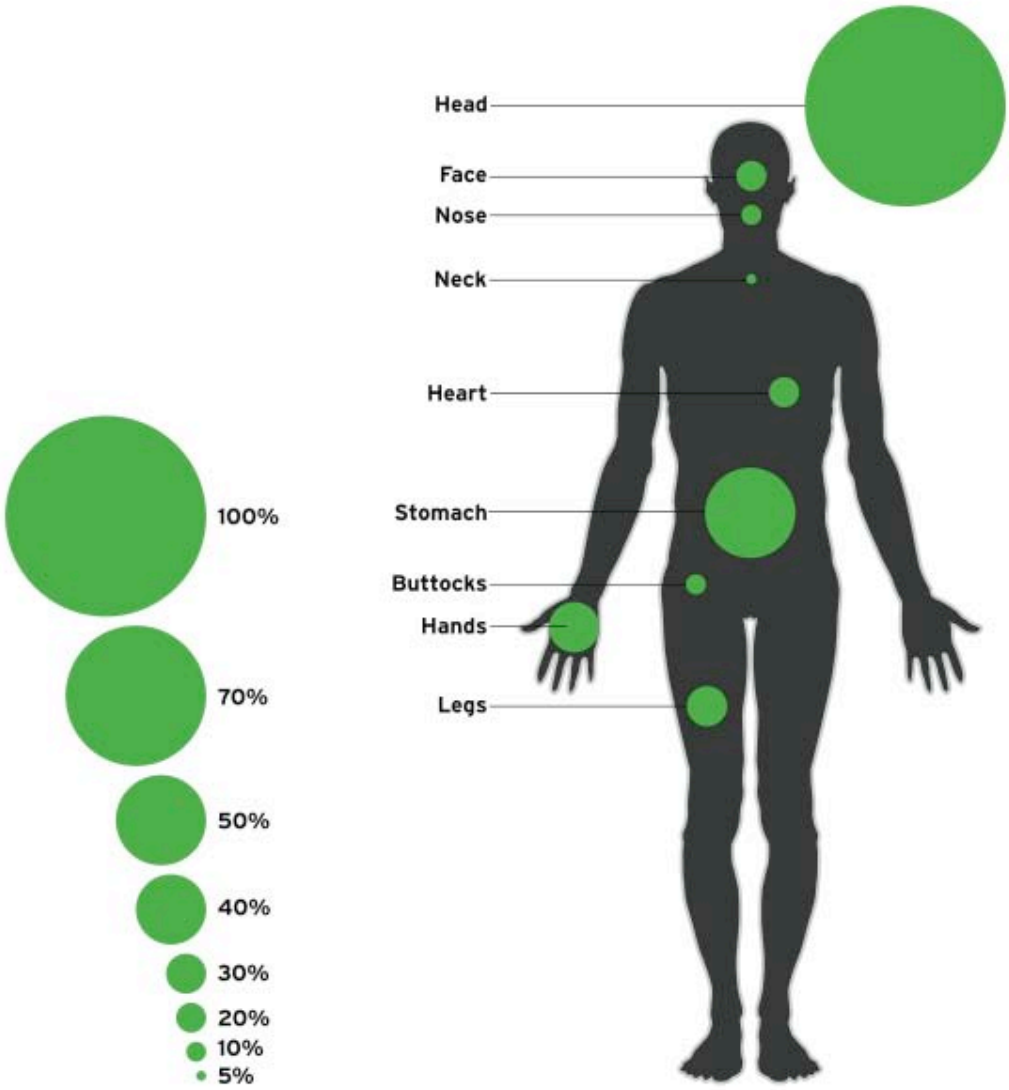
Data Analysis of Maps:

Quantification of Body Parts (Figure 7.9), Enlarged Image 1



Data Analysis of Maps:

Quantification of Body Parts (Figure 7.9), Enlarged Image 2



REFERENCES

Akom, AA. (2008a). Americtocracy and infra-racial racism: Racializing social and cultural reproduction in the twenty-first century. *Race, Ethnicity and Education, 11(3):* 205-230.

Akom, AA. (2008b). Towards an eco-pedagogy: Urban youth creating environmental justice in the toxic triangle. *Anthropology News, 49(8):* 51.

Akom, AA. (2009). Critical hip hop pedagogy as a form of liberatory praxis. *Equity & Excellence in Education, 42(1):* 52-66.

Akom, AA, Cammarota, J., Ginwright, S. (2008). Youthtopias: towards a new paradigm of critical youth studies. *Youth Media Reporter, 2(4):* 1-30.

Abrams, L. & Haney, W. (2004). Accountability and the grade 9 to 10 transition: The impact on attrition and retention rates. In G. Orfield (Ed.), *Dropouts in America: Confronting the Graduation Rate Crisis* (pp. 181-205). Cambridge, MA: Harvard Education Press.

Action for Healthy Kids. (n.d.) *Fact sheet: Nutrition, physical activity and achievement.* Skokie, IL: Action for Heatlhy Kids. Retrieved at: http://www.sboh.wa.gov/Meetings/2003/10_15/documents/pmTab08-Factsheet.pdf

Adams, D. W. (1997). *Education for extinction: American-Indians and the boarding school experience 1875-1928.* Lawrence, KS: University Press of Kansas.

Adler, N. E., Boyce, T., Chesney, M. A., Cohen, S., Folkman, S., Kahn, R., et al. (1994). Socioeconomic status and health: The challenge of the gradient. *American Psychologist; 49*(1), 15-24.

Adler, N. E., & Newman, K. (2002). Socioeconomic disparities in health: Pathways and policies. *Health Affairs, 21*(2), 60-76.

Adelman, L. (Producer) & Smith, L. (Producer). (2008). *Unnatural causes: Is inequality making us sick?* [Documentary Motion Picture]. United States: California Newsreel with Vital Pictures, Inc.

Advancement Project & Civil Rights Project. (2000). *Opportunities suspended: the devastating consequences of zero tolerance and school discipline.* Washington, D.C.

Advancement Project. (2005). *Education on lockdown: The schoolhouse to jailhouse track*. Washington,D.C.

Allensworth, D. D. & Kolbe, L. J. (1987). The comprehensive school health program: Exploring an expanded concept. *Journal of School Health*, *57*(10), 409–12.

Allensworth, D., Lawson, E., Nicholson, L., & Wyche, J. (Eds.). (1997). *Schools & health: Our nation's investment.* Washington, D.C.: National Academy Press.

Allensworth, E. M. (2004). Graduation and dropout rates after implementation of high-stakes testing in Chicago's elementary schools: A close look at students most vulnerable to dropping out. In: G. Orfield (Ed.), *Dropouts in America: Confronting the Graduation Rate Crisis*. Cambridge, MA: Harvard Education Press.

Alliance for Excellent Education. (2003a). The impact of education on: Crime. *Fact Sheet*. Available at: http://www.all4ed.org/publications/FactSheets.html

Alliance for Excellent Education. (2003b). The impact of education on: The economy. *Fact Sheet.* Available at: http://www.all4ed.org/publications/FactSheets.html

Allison, K., Burton, L., Marshall, S., Perez-Febles, A., Yarrington, J., Kirsh, L. et al. (1999). Life experiences among urban adolescents: Examining the role of context. *Child Development, 70*(4), 1017-1029.

Amin, R., Browne, D.C., & Ahmed, J. (2006). A study of an alternative school for pregnant and/or parenting teens: Quantitative and qualitative evidence. *Child & Adolescent Social Work Journal*, *23*(2),172-95.

Anderson, E. (1999). *Code of the street: Decency, violence, and the moral life of the inner city.* New York, NY: W.W. Norton & Co.

Anderson, J. (1988). *The education of blacks in the south, 1860-1935.* Chapel Hill, NC: University of North Carolina Press.

Anyon, J. (1997). *Ghetto schooling : A political economy of urban educational reform*. New York: Teachers College Press, Teachers College, Columbia University.

Anyon, J. (2005). *Radical possibilities : Public policy, urban education, and a new social movement*. New York: Routledge.

Anzaldua, G. (2007/1987). *Borderlands/la frontera: The new mestiza.* (3rd ed.). San Francisco, CA: Ante Lute Press.

Appadurai, A. (2004). The capacity to aspire: Culture and the terms of recognition. In Rao and Walton (Eds.), *Culture and Public Action* (pp. 59-84). Stanford, CD: Stanford University Press.

Appadurai, A. (2006). The right to research. *Globalisation, Societies and Education, 4*(2), 167–177.

Apple, M. (1995). *Education and power* (2nd ed.). New York, NY: Routledge.

Apple, M. W. (2004). *Ideology and curriculum* (3rd ed.). New York: RoutledgeFalmer.

Apple, M. (2006). *Educating the right way: Markets, standards, God, and inequality.* New York, NY: Routledge.

Au, W. (2009). *Unequal by design: High-Stakes testing and the standardization of inequality.* New York, NY: Routledge.

Auerbach, C. & Silverstein, L. (2003). *Qualitative data: An introduction to coding and analysis.* New York, NY: New York University Press.

Ayers, W., Dohrn, B., & Ayers, R. (Eds.). (2001). *Zero tolerance: Resisting the drive for punishment in our schools : a handbook for parents, students, educators, and citizens* New York: New Press

Barclay, L., Skarlicki, D., & Pugh, S. (2005). Exploring the role of emotions in injustice perceptions and retaliation. *Journal of Applied Psychology, 90,* 629–43.

Baker, M & Foote, M. (2006). Changing Spaces: Urban School Interrelationships and the Impact of Standards-Based Reform. *Educational Administration Quarterly, 42(1):* 90-123.

Banks, J. (2006). *Cultural diversity and education: Foundations, curriculum and teaching* (5th ed.) Boston, MA: Pearson, Allyn & Bacon.

Banks, J. (2007). *Educating citizens in a multicultural society* (2nd ed.). New York, NY: Teachers College Press.

Banks, J & Banks, CAM (Eds.). (2003). *Handbook of research on multicultural education* (2nd ed). San Francisco, CA: Jossey-Bass/Wiley.

Barton, P. (2005a). *Unfinished business: More measured approaches in standards-based reform.* Princeton, NJ: Educational Testing Service. Available at: http://www.ets.org/Media/Research/pdf/PICUNFIN.pdf

Barton, P. (2005b). *One third of a nation: Rising dropout rates and declining opportunities*. Princeton, NJ: Educational Testing Service (ETS). Available at: http://www.ets.org/Media/Research/pdf/PICONETHIRD.pdf

Battin-Pearson, S., Abbott, R. D., Hill, K. G., Catalano, R. F., Hawkins, J. D., & Newcomb, M. D. (2000). Predictors of early high school dropout: A test of five theories. *Journal of Educational Psychology, 92*(3), 568-582.

Baum, A., Revenson, T. A., & Singer, J. E. (2001). *Handbook of health psychology.* Mahwah, NJ: Lawrence Erlbaum Associates.

Baum, S. & Payea, K. (2004). *Education pays: The benefits of higher education for individuals and society*. New York, NY: College Entrance Examination Board.

Belfield, C. & Levin, H. M. (2007a). The economic losses from high school dropouts in California. *California Dropout Research Project Report #1.*Santa Barbara, CA: California Dropout Research Project.

Belfield, C. & Levin, H. M. (2007b). The return on investment for improving California's high school graduation rate. *California Dropout Research Project Report #2.* Santa Barbara, CA: California Dropout Research Project.

Belfield, C. & Levin, H. M. (2007c). Educational interventions to raise high school graduation rates. In C. Belfield & H. Levin (Eds.), *The Price We Pay: Economic and Social Consequences of Inadequate Education*, (pp.177-199). Washington, D.C.: The Brookings Institution.

Belfield, C. & Levin, H. M. (2007d). The education attainment gap: Who's affected, how much, and why it matters. In C. Belfield & H. Levin (Eds.), *The Price We Pay: Economic and Social Consequences of Inadequate Education,* (pp.1-20). Washington, D.C.: The Brookings Institution.

Belfield, C. & Levin, H. M. (Eds.). (2007e). *The price we pay: Economic and social consequences of inadequate education.* Washington, D.C.: Brookings Institution Press.

Bell, D. (1995). *Brown v. Board of Education* and the interest convergence dilemma. In K Crenshaw, N. Gotanda, G. Peller, & K. Thomas (Eds.), *Critical Race Theory: The Key Writings That Formed the Movement* (pp. 20-28). New York: The New Press.

Belot, M. & James, J. (2009). *Healthy school meals and educational outcomes.* University of Essex, UK: Institute for Social & Economic Research. Available at: http://www.iser.essex.ac.uk/publications#papers

Benjamin, E. R, Keating, A., Lieberman, D., Lipman, J., Schissel, A., Spiro, M., et al. (2006). *The rights of pregnant & parenting teens.* New York, NY: New York Civil Liberties Union Reproductive Rights Project.

Birden, S. (2005). *Rethinking sexuality identity in education.* Lanham, MD: Rowman & Littlefield Publishers, Inc.

Blum, R. W. (1998). Improving the health of youth: A community health perspective. *Journal of Adolescent Health, 23*, 254-258.

Blum, R. W. (2005). A case for school connectedness. *Educational Leadership, 62*(7),16-19.

Boesel, D. (1998). The street value of the GED diploma. *Phi Delta Kappan*, *80*(1), 65-66, 68, 96.

Bogden, J. (2000). *Fit, healthy, and ready to learn: a school health policy guide.* Alexandria, VA: NASBE,

Borg, C., Buttigieg, J., & Mayo, P. (Eds.). (2002). *Gramsci and education*. Lanham, MD: Rowman & Littlefield Publishers, Inc.

Bourdieu, P. (1977). Outline of a theory of practice. Cambridge: Cambridge University Press.

Bourdieu, P. (1986). The forms of capital. In J.G. Richardson (Ed.), *Handbook of theory and research for the Sociology of education* (pp. 241-258). Westport, CT: Greenwood Press, Inc.

Bourdieu, P. (1990). *The logic of practice*. (R. Nice, Trans.). Stanford, CA: Stanford University Press.

Bourdieu, P. (1992). *An Invitation to reflexive Sociology.* Chicago, IL: University of Chicago Press.

Bowles, S. & Gintis, H. (1976). *Schooling in capitalist America: Educational reform and the contradictions of economic life.* New York, NY: Basic Books.

Boxer, P., Goldstein, S., Musher-Eizenman, D., Dubow, E., & Heretick, D. (2005). Developmental issues in school-based aggression prevention from a social-cognitive perspective. *Journal of Primary Prevention*, 26(5), 383-400.

Bridgeland, J., Dillulio, J., Jr., & Morison, K. (2006). *The silent epidemic: Perspectives of high school dropouts.* Washington, D.C.: Civic Enterprises. Available at: http://www.civicenterprises.net/pdfs/thesilentepidemic3-06.pdf

Brindis, C. & Philliber, S. (1998). Room to grow: Improving services for pregnant and parenting teenagers in school settings. *Education and Urban Society, 30*(2), 242-260.

Bronfenbrenner, U. (1977). Toward an experimental ecology of human development. *American Psychologist, 32*(7), 513-531.

Brooks-Gunn, J., Guo, G., & Furstenberg, F. (1993). Who drops out of and who continues beyond high school? A 20-year follow-up of Black urban youth. *Journal of Research on Adolescence*, *3*(3), 271-194.

Browne, J. A. (2001). The abcs of school discipline: Lessons from Miami-Dade County. In W. Ayers, B. Dohrn, & R. Ayers (Eds.), *Zero Tolerance: Resisting the Drive for Punishment in our Schools: A Handbook for Parents, Students, Educators, and Citizens* (pp. 188-201). New York, NY: New Press.

Browne, J. (2003). *Derailed! The schoolhouse to jailhouse track.* Washington, D.C.: Advancement Project.

Browne, J., Losen, D., & Wald, J. (2001). Zero tolerance: Unfair, with little recourse. *New Directions for Youth Development, 92*, 73-99.

Brunner, E. (1997). Socioeconomic determinants of health—stress and the biology of inequality. *British Medical Journal, 314*, 1472–6.

Bryk, A. & Driscoll, M. (1988). *The High school as community: Contextual influences and consequences for students and teachers.* Madison, WI: National Center on Effective Secondary Schools.

Bryk, A & Schneider, B. (Eds.). (2002). *Trust in schools: A core resource for improvement.* New York, NY: Russell Sage Foundation.

Burch, P. (2009). *Hidden markets: The new education privatization*. New York, NY: Routledge.

Burdell, P. (1995). Teen mothers in high school: Tracking their curriculum. *Review of Research in Education*, *21*(1),163-208.

Burrell, S. (2003). *Getting out of the red zone: Youth from the juvenile justice and child welfare systems speak out about the obstacles to completing their education, and what could help.* San Francisco, CA and Washington, D.C.: Youth Law Center. Available at: http://www.ylc.org/viewDetails.php?id=99

Butchart, R. E. (1980). *Northern schools, southern Blacks, and reconstruction : Freedmen's education,1862-1875*. Westport, Conn.: Greenwood Press.

Cahill, C. (2004). Defying gravity? Raising consciousness through collective action. *Children's Geographies,* 2(2), 273-286.

Cahill, C. (2007). Doing research with young people: Participatory research and the rituals of collective work. *Children's Geographies, 5*(3), 297–312.

Cammarota, J. & Fine, M. (Eds.). (2008). *Revolutionizing education: Youth participatory action research in motion*. New York: Routledge.

Card, J. (1999). Teen pregnancy prevention: Do any programs work? *Annual Review of Public Health, 20*, 257-285.

Carson, B., Dunbar, T., Chenhall, R. D., & Baile, R. (Eds.). (2007). *Social determinants of indigenous health*. Australia: Allen & Unwin.

Cassady, J. C. & Johnson, R. E. (2002). Cognitive test anxiety and academic performance. *Contemporary Educational Psychology, 27,* 270-295.

Centers for Disease Control and Prevention. (1992). Health risk behaviors among adolescents who do and do not attend school—United States, 1992. *Morbidity & Mortality Weekly Report (MMWR)*, *43*(8),129-132.

Centers for Disease Control and Prevention. (2007). Cases of HIV infection and AIDS in the United States and Dependent Areas, 2007. *HIV/AIDS Surveillance Report, Vol. 19.* Atlanta, GA: Department of Health and Human Services, Centers for Disease Control and Prevention. Retrieved from: http://www.cdc.gov/hiv/topics/surveillance/resources/reports/

Centers for Disease Control and Prevention. (2009). *HIV testing among adolescents.* Retrieved at: http://www.cdc.gov/healthyyouth/sexualbehaviors/pdf/hivtesting_adolescents.pdf

Center on Educational Policy. (2003). *Effects of high school exit exams on dropout rates: Summary of a panel discussion.* Available at: http://www.cep-D.C..org/highschoolexit/1/hspanelsummary/hspanel.summary15mar03.pdf

Center on Hunger, Poverty, and Nutrition Policy. (1994). *Statement on the link between nutrition and cognitive development in children.* Medford, MA: Tufts University. Retrieved from: http://www.eric.ed.gov:80/ERICWebPortal/custom/portlets/recordDetails/detailmini.jsp?_nfpb=true&_&ERICExtSearch_SearchValue_0=ED374903&ERICExtSearch_SearchType_0=no&accno=ED374903

Charmaz, K. (2006). *Constructing grounded theory: A practical guide through qualitative analysis*. Thousand Oaks, CA: Sage Publications.

Charmaz, K. & Mitchell, R. (2001). Grounded theory in ethnography. In Atkinson, Coffey, Delamont, Lofland & Lofland (Eds.), *Handbook of Ethnography* (pp. 160-174). Thousand Oaks, CA: Sage Publications.

Chomsky, N. (2000). *Chomsky on miseducation*. Lanham, Md.: Rowman & Littlefield Publishers.

Clark, R., Anderson, N. B., Clark, V. R., & Williams, D. R. (1999). Racism as a stressor for African Americans: A biopsychosocial model. *American Psychologist, 54*: 805-816.

Cleveland, W. (1985). *Elements of graphing data*. Belmont, CA: Wadsworth.

Cleveland, W. (1993). *Visualizing data*. Summit, NJ: Hobart Press.

Cochran, S. (2001). Emerging issues in research on lesbians' and gay men's mental health: Does sexual orientation really matter? *American Psychologist, 56(11)*: 931-947.

Cole, E. R. (2008). Coalitions as a model for intersectionality: From practice to theory. *Sex Roles, 59*(5-6), 443-453.

Collins, P. H. (2000). *Black feminist thought: Knowledge, consciousness, and the politics of empowerment* (2nd ed.). New York, NY: Routledge.

Crenshaw, K. (1995). Mapping the margins: Intersectionality, identity politics, and violence against women of color. In K. W. Crenshaw, N. Gotanda, G. Peller, & K. Thomas (Eds.), *Critical Race Theory: The Key Writings That Formed the Movement* (pp. 357–384). New York: New Press.

Crenshaw, K., Gotanda, N., Peller, G., & Thomas, K. (Eds.). (1995). *Critical race theory: The key writings that formed the movement*. New York: The New Press.

Crimmins, E. & Saito, Y. (2001). Trends in healthy life expectancy in the United States, 1970-1990: Gender, racial, and educational differences. *Social Science & Medicine, 52*(11),1629-1641.

Cross, W. E., Jr. (2003). Tracing the historical origins of youth delinquency & violence: Myths & realities about Black culture. *Journal of Social Issues, 59*(1), 67-82.

Cummins, Steven; Macintyre, Sally. (2005). Food environments and obesity: Neighborhood or nation? *International Journal of Epidemiology*. *35(1):* 100-104.

Currie, J, DellaVigna, S, Moretti, E & Pathania, V. (2009). The effect of fast food restaurants on obesity. *NBER Working Paper No. 12421.* Cambridge, MA: National Bureau of Economic Research.

Dailard, C. (2001). Sex education: Politicians, parents, teachers and teens. *The Guttmacher Report on Public Policy*, 9-12. Available at: http://www.agi-usa.org/pubs/tgr/04/1/gr040109.pdf

Daniels, R. (2002). *Coming to America: a history of immigration and ethnicity in American life.* (2nd ed.). New York, NY: Perennial.

Darling-Hammond, L. (1997). *The right to learn: A blueprint for creating schools that work.* San Francisco, CA: Jossey-Bass, Inc.

Darling-Hammond, L. (2004). The color line in American education: Race, resources, and student achievement. *Du Bois Review, 1*(2), 213-246

Darling-Hammond, L., Berry, B., & Thoreson, A. (2001). Does teacher certification matter? Evaluating the evidence. *Educational Evaluation and Policy Analysis, 23(1):* 57-77.

Deaton, A. (2002). Policy implications of the gradient of health and wealth. *Health Affairs, 21*(2),13-30.

Delgado, R., & Stefancic, J. (Eds.). (2000). *Critical race theory: The cutting edge* (2nd ed.). Philadelphia, PA: Temple University Press.

Delgado, R. & Stefancic, J. (2001). *Critical race theory: An introduction*. New York, NY: New York University Press.

DeLongis, A., Coyne, J., Dakof, G., Folkman, S. & Lazarus, R. (1982). Relationships of daily hassles, uplifts and major life events to health status. *Health Psychology 1*(2), 119-136.

Delpit, L. & Dowdy, J. K. (2002). *The skin that we speak: Thoughts on language and culture in the classroom.* New York, NY: The New Press.

Denzin, N. K., & Lincoln, Y. S. (Eds). (2000). *Handbook of qualitative research*. (2nd ed.). Thousand Oaks, CA: Sage Publications, Inc.

Dey, I. (1993). *Qualitative data analysis: A user friendly guide for social scientists*. New York, NY: Routledge.

DeVise, D. & Chandler, M. (2009, April 27). Poor neighborhoods, untested teachers. *Washington Post.* Retrieved at: http://www.washingtonpost.com/wp-dyn/content/article/2009/04/26/AR2009042602861.html?hpid=moreheadlines

De Vogli, R., Ferrie, J., Chandola, T., Kivimäki, M., & Marmot, M. (2007). Unfairness and health: Evidence from the Whitehall II study. *Journal of Epidemiology Community Health, 61*(6), 513-518

Dimitriadis, G. & Kamberelis, G. (2006). *Theory for education.* New York, NY: Routledge.

Dinour, L, Fuentes, L & Freudenberg, N. (2008). *Reversing obesity in New York City: An action plan for reducing the promotion and accessibility of unhealthy food*. New York, NY: CUNY Campaign Against Diabetes and Public Health Association of New York City. Available at: http://www.phanyc.org/publications/index.html

Dixon, A & Rousseau, C. (Eds.) (2006). *Critical Race Theory in education: All God's children got a song.* New York, NY: Routledge.

Dogan-Ates, A. & Carrion-Basham, C. Y. (2007). Teenage pregnancy among Latinas: Examining risk and protective factors. *Hispanic Journal of Behavioral Sciences*, *29(4),* 554-69.

Dougall, A. & Baum, A. (2001). Stress, health, and illness. In Baum, Revenson & Singer, (Eds.). *Handbook of Health Psychology* (pp. 321-337). Mahwah, NJ: Lawrence Erlbaum Associates.

Doyal, L., & Pennell, I. (1979). *The political economy of health*. London: Pluto Press.

DuBois, W. E. B. (1903). *The souls of Black folks.* New York: Penguin Books.

Dudziak, M. L. (2000). Desegregation as a cold war imperative. In R. Delgado, & J. Stefancic (Eds.), *Critical Race Theory: The Cutting* Edge (2nd ed.). Philadelphia: Temple University Press.

Dumas, M. (2009). Theorizing redistribution and recognition in urban education research: "How do we get dictionaries at Cleveland?" In J. Anyon (Ed.), *Theory and Educational Research: Toward Critical Social Explanation*, pp. 81-108. New York, NY: Routledge.

Dunbar, T. & Scrimgeour, M. (2007). Education. In B. Carson, T. Dunbar, R. D. Chenhall, & R. Baile (Eds.), *Social Determinants of Indigenous Health* (pp. 135-152). Australia: Allen & Unwin.

Duncan-Andrade, J. (2004). Your best friend or your worst enemy: Youth popular culture, pedagogy and curriculum at the dawn of the 21st Century. *Review of Education, Pedagogy and Cultural Studies, 26(4*): 313-337.

Duncan-Andrade, J. (2006). Urban youth, media literacy, and increased critical civic participation. In S. Ginwright, P. Noguera, & J. Cammarota (Eds.), *Beyond Resistance: Youth Activism and Community Change: New Democratic Possibilities for Policy and Practice for American's Youth,* pp. 149-169. New York, NY: Routledge.

Duncan-Andrade & Morrell, E. (2008). *The art of crticial pedagogy: Possibilities for moving from theory to practice in urban schools.* New York, NY: Peter Lang.

Dunetz, M. (2009). *The comprehensive high school in transition: A study of small learning community reform.* [Unpublished doctoral dissertation]. Graduate Center of The City University of New York, New York, NY.

Dynarski, M. (2000). Making do with less: Interpreting the evidence from recent federal evaluations of dropout prevention programs. In, *Dropouts: Implications and Findings*. Mathematica Policy Research, Inc.

Dyson, M. E. (2005). *Is Bill Cosby right? Or has the Black middle class lost its mind?* New York, NY: Basic Civitas Books.

Eccles, J. S., Wigfield, A. & Schiefele, U. (1998). Motivation to succeed. In N. Eisenberg (Ed.), *Handbook of Child Psychology* (pp. 1017-1095). New York, NY: J. Wiley.

Eckholm, E. (2006, March 20). Plight depends for Black men, studies warn. *New York Times,* pp. A1.

Education Week. (2007). *Diplomas count*. (PowerPoint Presentation). Available at: http://www.edweek.org/ew/toc/2007/06/12/index.html

Ekstrom, R. B., Goertz, M. E., Pollack, J. M., & Rock, D. A. (1986). Who drops out of high school and why? Findings from a national study. *Teachers College Record*, *87*(3), 356-373.

Elliot, A. J. & McGregor, H. A. (1999). Test anxiety and the hierarchical model of approach and avoidance achievement motivation. *Journal of Personality and Social Psychology, 76*(4), 628-644.

Elliott, L., Orr, L., Watson, L., & Jackson, A. (2005). Secondary prevention interventions for young drug users: A systematic review of the evidence. *Adolescence, 40*(157), 1-22.

Emerson, R., Fretz, R., & Shaw, L. (1995). *Writing ethnographic fieldnotes*. Chicago, IL: University of Chicago Press.

Ensel, W. & Lin, N. (1991). The life stress paradigm and psychological distress. *Journal of Health and Social Behavior (32)*4, 321-341.

Ensminger, M. E., Lamkin, R. P., & Jacobson, N. (1996). School leaving: A longitudinal perspective including neighborhood effects. *Child Development, 67*(5), 2400-2416.

Escherich, K. (2008, January 15). Exclusive: President Bush in Saudi Arabia. *Nightline / ABC News* Retrieved from h http://abcnews.go.com/Nightline/Politics/story?id=4136209&page=1.

Essed, P & Goldberg, DT. (2002). *Race critical theories: Text and context.* Oxford, UK: Blackwell Publishing.

Evans, D., Fine, M., & Fox, M. (forthcoming). Producing selves and knowledges: Reflections on participatory youth inquiry. In N. Ares (Ed.), *Youth cultural practices as resources for learning and development.*

Evans, G. (2001). Environmental stress and health. In Baum, Revenson & Singer, (Eds). *Handbook of Health Osychology* (pp. 365-385). Mahwah, NJ: Lawrence Erlbaum Associates.

Fallis, R. K. & Opotow, S. (2003). Are students failing school or are schools failing students? Class cutting in high school. *Journal of Social Issues*, *59(1)*, 103-119.

Fals-Borda, O. (1979). Investigating reality in order to transform it: The Colombian experience. *Dialectical Anthropology, 4*(1), 33-55.

Fang, C. Y. & Meyers, H. (2001). The effects of racial stressors and hostility on cardiovascular reactivity in African-American and Caucasian men. *Health Psychology,* 20(1), 64-70.

Fanon, F. (1967*). Black skin, white masks*. New York, NY: Grove Press.

Fanon, F. (2004/1963). *The wretched of the earth*. New York, NY: Grove Press.

Farmer, P. (2004). *Pathologies of power: Health, human rights, and the new war on the poor, with a new preface by the author*. Berkeley: University of California Press.

Feagin, J. & Vera, H. (2001). *Liberation sociology.* Boulder, CO: Westview Press.

Feagin, J. (2006). *System racism: A theory of oppression.* New York, NY: Routledge.

Ferguson, A. A. (2000). *Bad boys: Public schools in the making of Black masculinity*. Ann Arbor: University of Michigan Press

Fergusson, D. M., Horwood, L. J., & Beautrais, A. L. (1999). Is sexual orientation related to mental health problems and suicidality in young people? *Archives of General Psychiatry, 56:* 876-880.

Fields, J. (2008). *Risky lessons: Sex education and social inequality.* Piscataway, NJ: Rutgers University Press.

Fine, M. (1986). Why urban adolescents drop into and out of public high school. *Teachers College Record, 87*(3), 393-409.

Fine, M. (1991). *Framing dropouts: Notes on the politics of an urban public high school.* Albany, NY:SUNY Press.

Fine, M. (2003). *Expert report of Michelle Fine.* Williams vs. State of California, Plaintiffs' Expert Reports. Available at: http://www.decentschools.org/expert_reports/fine_report.pdf

Fine, M., Bloom, J., Burns, A., Chajet, L., Guishard, M., Perkins-Munn, T., et al. (2004). *Echoes of brown: The faultlines of racial justice and public education.* New York: The Graduate Center of the City University of New York. Available at: http://www.gc.cuny.edu/studies/_Faultlines.pdf

Fine, M., Bloom, J., Burns, A., Chajet, L., Guishard, M., Payne, Y., et al. (2005). Dear Zora: A letter to Zora Neale Hurston 50 years after Brown. *Teachers College Record;* 107(3): 496-528.

Fine, M., Burns, A., Payne, Y., & Torre, M. E. (2004). Civics lessons: The color and class of betrayal. *Teachers College Record, 106*(11)*,* 2193-2223.

Fine, M., Freudenberg, N., Payne, Y.A., Perkins, T., Smith, K. and Wanzer, K. (2003). "Anything can happen with police around: Urban youth evaluate strategies of surveillance in public places. *Journal of Social Issues, 59(1):* 141-158.

Fine, M. & Ruglis, J. (2009). Circuits and consequences of dispossession: The racialized realignment of the public sphere for U.S. youth. *Transforming Anthropology; 17*(1): 20-36.

Fine, M. & Torre, M. (2004). Re-membering exclusions: Participatory action research in public institutions. *Qualitative Research in Psychology*, *1*, 15-37.

Fine, M., Torre, M. E., Boudin, K., Bowen, I., Clark, J., Hylton, D., et al. (2001). *Changing minds: The impact of college in a maximum security prison.* New York: Graduate Center of CUNY, Women in Prison at Bedford Hills Correctional Facility, Leslie Glass Foundation, The Open Society Institute.

Fine, M., Weis, L., Pruitt, L., & Wong, L. (2004). *Off white: Readings on power, privilege, and resistance* (2nd ed.). New York, NY: Routledge.

Fine, M. & Zane, N. (1989). Bein' wrapped too tight: When low-income women drop out of high school. In: L. Weis, E. Farrar, & H. Petrie (Eds.), *Dropouts From School: Issues, Dilemmas, and Solutions* (pp. 23-53). Albany, NY: State University of New York Press.

Finkelstein, M., Wamsley, M., & Miranda, D. (2002). *What keeps children in foster care from succeeding in school?: Views of early adolescents and the adults in their lives.* New York, NY: Vera Institute of Justice. Available at: http://www.vera.org/publication_pdf/169_280.pdf

Fiscella, K. & Franks, P. (2004). Should years of schooling be used to guide treatment of coronary risk factors? *Annals of Family Medicine, 2,* 469-473. Available at: http://www.annfammed.org/cgi/content/abstract/2/5/469

Flanagan, C & Gallay, L. (2008). Adolescent development of trust. *CIRCLE Working Paper 61.* Medfod, MA: The Center for Research on Civic Learning and Engagement (CIRCLE). Available at: http://www.civicyouth.org/?page_id=152

Fordham, S. & Ogbu, J. (1986). Black students' school success: Coping with the 'burden of acting White.' *Urban Review, 18*, 176-206.

Foucault, M. (1965/1988). *Madness and civilization: A history of insanity in the age of reason.* New York, NY: Vintage Books.

Foucault, M. (1973). *The birth of the clinic: An archaeology of medical perception* (1st American ed). New York, NY: Pantheon Books.

Foucault, M. (1977/1995). *Discipline & punish: The birth of a prison.* (2nd ed.). New York, NY: Vintage Books.

Fox, N. (1999). *Beyond health: Postmodernism and embodiment.* London: Free Association Books.

Freudenberg N, Fahs M, Galea S, Greenberg A. (2006). The impact of New York City's 1975 fiscal crisis on the tuberculosis, HIV, andhomicide syndemic. *American Journal of Public Health*, *96(3):* 424-34.

Freudenberg N, Galea S, Vlahov D. (Eds.). (2006). *Cities and the Health of the Public*. Nashville, TN: Vanderbilt Univsrity Press.

Freudenberg, N. & Ruglis, J. (2006). Redefining school dropout as a public health issue: A call to action. Submitted to *American Journal of Public Health.*

Freudenberg, N. & Ruglis, J. (2007). Reframing school dropout as a public health issue. *Preventing Chronic Disease, 4*(4).

Freire, P. (1982). Creating alternative research methods: Learning to do it by doing it. In B. Hall, A. Gillette, & R. Tandon (Eds.), *Creating Knowledge: A Monopoly* (pp. 29-37). New Delhi, India: Society for Participatory Research in Asia.

Freire, P. (2003/1970). Pedagogy of the oppressed. New York, NY: Continuum International Publishing Group.

Gagnon, J. & Leone, P. (2001). Alternative strategies for school violence prevention. *New Directions for Youth Development, 92*, 101-125.

Galeano, E. (1992). *The Book of Embraces*. New York, NY: W.W. Norton & Company.

Gallagher, C. (2002). Stories from the strays: What dropouts can teach us about school. *American Secondary Education, 30*(3), 36-60.

Galletta, A. & Cross, W. E., Jr. (2007). Past as present, present as past: Historicizing Black education and interrogating "integration." In, A. Fuligni (Ed.), *Contesting Stereotypes and Creating Identities: Social Categories, Social Identities, and Educational Participation,* New York, NY: Russell Sage Foundation.

Galtung, J. (1969). Violence, peace, and peace research. *Journal of Peace Research, 6*(3)*:* 167-191.

Gambone, M. A., Klem, A. M., Moore, W. P., & Summers, J. A. (2002). First things first: Creating the conditions & capacity for community-wide reform in an urban school district. Philadelphia, PA: Gambone & Associates

Gance-Cleveland, B. (2004). Qualitative evaluation of a school-based support group for adolescents with an addicted parent. *Nursing Research, 53*(6)*,* 379-386.

Garcia, O, Skutnabb-Kangas, T & Torres-Guzman, M. (Eds.). (2006). *Imagining multilingual schools: Language in education and globalization*. Clevedon: Multilingual Matters.

Garcia-Reid, P., Reid, R., & Peterson, N. (2005). School engagement among Latino youth in an urban middle school context: Valuing the role of social support. *Education and Urban Society*, *37*(3), 257-275.

Gee, J. (2004). *Situated language and learning: A critique of traditional schooling.* New York, NY: Routledge.

Geronimus, A. T. (1994). The weathering hypothesis and the health of African American women and infants: Implications for reproductive strategies and policy analysis. In G. Sen & R. Snow (Eds.). *Power and Decision: The Social Control of Reproduction*. Cambridge, MA: Harvard University Press

Geronimus, A. T. (2000). To mitigate, resist, or undo: Addressing structural influences on the health of urban populations. *American Journal of Public Health, 90*(6), 867-872.

Geronimus, A. T. (2001). Understanding and eliminating racial inequalities in women's health in the United States: The role of the weathering conceptual framework. *Journal of the American Medical Women's Association, 56*(4), 133-136.

Geronimus, A. T., Hicken, M., Keene, D., & Bound, J. (2006). "Weathering" and age patterns of allostatic load scores among Blacks and Whites in the United States. *American Journal of Public Health, 96*(5), 826–833.

Geronimus, A.T. & Thompson, J. P. (2004). To denigrate, ignore, or disrupt: Racial inequality in health and the impact of a policy-induced breakdown of African-American communities. *Du Bois Review: Social Science Research on Race, 1*(2), 246-279.

Gibson, M. (1998). Acculturation the issue? Promoting academic success among immigrant students: Is acculturation the issue? *Educational Policy, 12*(6), 615-633.

Gilbert, P. & Guire, M. M. (1998). Shame, status and social roles: Psychobiology and evolution. In, P. Gilbert & B. Andrews (Eds.), *Interpersonal Behavior, Psychopathology and Culture*. New York, NY: Oxford University Press.

Gilman, S. E., Cochran, S. D., Mays, V. M., Hughes, M., Ostrow, D., & Kessler, R. C. (2001). Risk of psychiatric disorders among individuals reporting same-sex sexual partners in the National Comorbidity Survey. *American Journal of Public Health*, *91*(6): 933-939.

Ginwright, S. & Cammarota, J. (2002). New terrain in youth development: The promise of a social justice approach. *Social Justice*, *29*(4), 82-95.

Giroux, H. (1997). *Pedagogy and the politics of hope: Theory, culture and schooling.* Boulder, CO: Westview Press.

Giroux, H. (2004). *The terror of neoliberalism: Authoritarianism and the eclipse of democracy*. Boulder, CO: Paradigm Publishers.

Giroux, H. (2008). *Against the terror of neoliberalism: Politics beyond the age of greed.* Boulder, CO: Paradigm Publishers.

Gladwell, M. (2005, August 25). The moral-hazard myth: The bad idea behind our failed health-care system. *The New Yorker.* Retrieved from: http://www.newyorker.com/archive/2005/08/29/050829fa_fact?currentPage=1

Glaser, B. G. (1994). *Basics of grounded theory analysis: Emergence versus forcing.* Mill Valley, CA: Sociology Press.

Glanz, K, Rimer, B & Lewis, FM. (2002). *Health behavior and health education: Theory, research, and practice.* 3rd edition. San Francisco, CA: Jossey-Bass.

Gay, Lesbian and Straight Education Network (GLSEN). (2009, April 9). *11-Year-Old hangs himself after enduring daily anti-gay bullying.* Retrieved from: http://www.glsen.org/cgi-bin/iowa/all/news/record/2400.html

Goodman, A. (Interviewer) & DeRose, J. (Interviewee). 2006). All New Orleans Public School Teachers Fired, Millions in Federal Aid Channeled to Private Charter Schools [Interview transcript]. Retrieved from Democracy Now! Website: http://www.democracynow.org/2006/6/20/all_new_orleans_public_school_teachers

Goodman, E., Slap, G. B., & Huang, B. (2003). The public health impact of socioeconomic status on adolescent depression and obesity. *American Journal of Public Health, 93*(11),1844-1850.

Gootman, E. (2008, August 26). A plan to test the city's youngest pupils. *The New York Times.* Retrieved at: http://www.nytimes.com/2008/08/27/education/27test.html?ei=5070&emc=eta1

Gordon, R., Piana, L. D., & Keleher, T. Zero tolerance: A basic racial report card. In W. Ayers, B. Dohrn, & R. Ayers (Eds.), *Zero Tolerance: Resisting the Drive for Punishment in our Schools: A Handbook for Parents, Students, Educators, and Citizens* (pp. 165-175). New York, NY: New Press.

Gottfredson, D. & Gottfredson, G. (2002). Quality of school-based prevention programs: Results from a national survey. *Journal of Research in Crime and Delinquency, 39*(1), 3-35.

Gottfredson, D. & Wilson, D. (2003). Characteristics of effective school-based substance abuse prevention. *Prevention Science 2003, 4*(1), 27-38.

Gramsci, A. (1971). *Selections from the prison notebooks.* New York, NY: International Publishers.

Grande, S. (2004). *Red pedagogy.* Lanham, MD: Rowman & Littlefield Publishers, Inc.

Greenbaum, T. (2000). *Moderating focus groups: A practical guide for group facilitation*. Thousand Oaks, CA: Sage Publications.

Greene, J. (2001 / 2002). *High school graduation rates in the United States*. New York, NY: The Manhattan Institute for Policy Research. Available at: http://www.manhattan-institute.org/pdf/cr_baeo.pdf

Greene, J. & Forster, G. (2002). *Public school graduation rates in the United States*. New York, NY: The Manhattan Institute for Policy Research. Available at: http://www.manhattan-institute.org/pdf/cr_31.pdf

Greene, M. (1995). *Releasing the imagination: essays on education, art, and social change.* San Francisco, CA: Jossey-Bass, Inc.

Grosz, E. A. (1994). *Volatile bodies : Toward a corporeal feminism*. St. Leonards, NSW: Allen & Unwin.

Grzywacz, J., Almeida, D., Neupert, S., & Ettner, S. (2004). Socioeconomic status and health: A micro-level analysis of exposure and vulnerability to daily stressors. *Journal of Health and Social Behavior, 45*(1), 1-16.

Guishard, M. (2009). The false paths, the endless labors, the turns now this way and now that: Participatory action research, mutual vulnerability, and the politics of inquiry. *The Urban Review, 41*(1), 85-105.

Guttmacher Institute. (2005). *Sex and STD/HIV education*. State Policies in Brief. Available at: http://www.guttmacher.org/statecenter/spibs/spib_SE.pdf

Guttmacher Institute. *U.S. teenage pregnancy statistics national and state trends and trends by race and ethnicity.* New York, NY: Guttmacher Institute. Available at: http://www.guttmacher.org/pubs/2006/09/12/USTPstats.pdfs

Guyll, M., Matthews, K. A., & Bromberg, J. T. (2001). Discrimination and unfair treatment: Relationship to cardiovascular reactivity among African-American and European-American women. *Health Psychology, 20*(5), 315-325.

Harber, C. (2004). *Scholing as violence: How schools harm pupils and societies.* London & New York: RoutledgeFarmer.

Haffner, D. E. (Ed.). (1995). *Facing facts: Sexual health for America's adolescents*. National Commission on Adolescent Sexual Health. Available at: http://www.siecus.org/pubs/Facing_Facts.pdf

Halfon, N. & Newcheck, P. (1993). Childhood asthma and poverty: Differential impacts and utilization of health services. *Pediatrics, 91*(1), 56-61.

Haney, W. (2002). Ensuring failure: How a state's achievement test may be designed to do just that. *Education Week, July 10, 2002,* 56-58.

Haney, W. (2003). Attrition of students from New York schools. *Regents Learning Standards and High School Graduation Requirements* (Public Hearing). New York Senate Standing Committee on Education.

Haney, W., Madaus, G., Abrams, L., Wheelock, A., Miao, J., & Gruia, I. (2004). The education pipeline in the United States 1970-2000. Chestnut Hill, MA: The National Board on Educational Testing and Public Policy. Available at: http://www.bc.edu/research/nbetpp/statements/nbr3.pdf

Haney, W., Russell, M., & Bebell, D. (2004). Drawing on education: Using drawings to document schooling and support change. *Harvard Educational Review*, *74*(3), 241-272.

Harding, S. (1998). *Is science multicultural? Postcolonialisms, feminisms, and epistemologies.* Bloomington: University of Indiana Press.

Harlow, C. (2003). Education and correctional populations. *Bureau of Justice Statistics Special Report*. Available at: http://www.ojp.usdoj.gov/bjs/pub/pdf/ecp.pdf

Harris Interactive and GLSEN (2005). *From teasing to torment: School climate in America, a survey of students and teachers*. New York, NY: GLSEN.

Hartwig, F. & Dearing, B. (1979). *Exploratory data analysis.* Sage University Press.

Harvey, D. (2004.) A geographer's perspective on the new American imperialism. *Conversations with History.* University of California at Berkeley, CA: Institute of International Studies. Retrieved at: http://globetrotter.berkeley.edu/people4/Harvey/harvey-con0.html.

Harvey, D. (2007). *A brief history of neoliberalism.* New York, NY: Oxford University Press.

Hauser, R. M., Simmons, S. J., & Pager, D. I. (2004). High school dropout, race/ethnicity, and social background from the 1970s to the 1990s. In: G. Orfield (Ed.). *Dropouts in America: Confronting the Graduation Rate Crisis* (pp. 85-106). Cambridge, MA: Harvard Education Press.

Haycock, K. (1998). Good teaching matters: How well-qualified teachers can close the gap. *Thinking K-16*, *3*(2).

Haynes, N. (2002). Addressing students' social and emotional needs: The role of mental health teams in schools. *Journal of Health and Social Policy, 16*(1-2),109-23.

Hemingway, H. & Marmot, M. (1999). Psychosocial factors in the aetiology and prognosis of coronary heart disease: Systematic review of prospective cohort studies. *British Medical Journal, 318,*1460–7

Henry J. Kaiser Family Foundation. (2002). Sex education in the U.S.: Policy and politics, *Update*. Available at: http://www.kff.org/youthhivstds/upload/Sex-Education-in-the-U-S-Policy-and-Politics.pdf

Hickman, L., Jaycox, L., & Aronoff, J. (2004). Dating violence among adolescents: Prevalence, gender distribution, and prevention program effectiveness. *Trauma, Violence & Abuse, 5,*123-142.

Hill, K. D. (2009). A historical analysis of desegregation and racism in a racially polarized region: Implications for the historical construct, a diversity problem, and transforming teacher education toward culturally relevant pedagogy. *Urban Education, 44*(1), 106-139.

Hofrichter, R. (Ed.). (2003). *Health and social justice: Politics, ideology, and inequity in the distribution of disease.* San Francisco, CA: Jossey-Bass.

Hooks, B. (1994). *Teaching to transgress: Education as the practice of freedom.* New York, NY: Routledge.

Horvat, E. M. & O'Connor, C. (Eds.). (2006). *Beyond acting White: Reframing the debate on Black student achievement*. Lanham, MD: Rowman and Littlefield.

Houppert, K. (2005, September 12). Military recruiters are now targeting sixth graders. Who's next? *The Nation*, 15-20.

Hurtado, A., Haney, C., & Garcia, E. (1998). Becoming the mainstream: Merit, changing demographics and higher education in California. *La Raza Law Journal, 10*(2)*,* 645-690.

Hytten, K., & Warren, J. (2003). Engaging whiteness: How racial power gets reified in education. *Qualitative Studies in Education 16*(1), 65-89.

Ingersoll, R. (2001). Teacher turnover and teacher shortages: An organizational analysis. *American Education Research Journal*, *38(3):* 499-534.

Institute for Children, Youth, and Families. (2003). Zero tolerance policies and their impact on Michigan students. East Lansing, MI: Michigan Nonprofit Association.

Institute of Medicine. (1997). *Schools and health: Our nation's investment.* Washington, D.C.: National Academy Press.

Israel, B., Schulz, A., Estrada-Martinez, L., Zenk, S., Viruell-Fuentes, E., Villarruel, A., et al. (2006). Engaging urban residents in assessing neighborhood environments and their implications for health. *Journal of Urban Health, 83*(3), 523-539.

Israel, B, Eng, E, Schulz, A & Parker, E. (2005). *Methods for community based participatory research*. San Francisco, CA: Jossey Bass.

Israel, B. & Schurman, S. J. (1990). Social support, control and the stress process. In, K. Glanz, F. M. Lewis, & B. K. Rimer (Eds.), *Health Behavior and Health Education: Theory, Research and Practice* (pp187-215)*.* San Francisco, CA: Jossey-Bass.

Jencks, C & Peterson, P. (Eds.). (1991).*The urban underclass.* Washington, DC: The Brookings Institution.

Jennings, J., Pearson, G., & Harris, M. Implementing and maintaining school-based mental health services in a large, urban school district. *Journal of School Health, 70*(5), 201-205.

Johnston, D. (2007, March 29). Income gap is widening, data shows. *The New York Times.* Retrieved from: http://www.nytimes.com/2007/03/29/business/29tax.html*.*

Jones, D. R. (2005). 47 percent of high school students drop out. *New York Amsterdam News, 96*(9), 5.

Junn, J. (2005). *The political costs of unequal education*. (Conference paper). The Social Costs of Inadequate Education. New York, NY: Columbia University. Available at: http://devweb.tc.columbia.edu/manager/symposium/Files/73_junn_paper.ed.pdf *(permission was obtained from the author to cite this paper).*

Juszczak, L., Schlitt, J., Odlum, M., & Barangan, C. (2003). *School-based health centers national census, school year 2001-02.* Washington, D.C.: National Assembly on School-Based Health Care.

Kaplan, E. (2005). *With God on their side: George W. Bush and the Christian right.* New York, NY: The New Press.

Karoly, L., Bigelow, J. (2005). The economics of investing in universal preschool education in California. Santa Monica, CA: RAND Corporation

Kaufman, P. (2004). The national dropout data collection system: History and the search for consistency. In G. Orfield (Ed.), *Dropouts in America*, (pp. 107-130). Cambridge, MA: Harvard Education Press.

Kelly, D. M. (2000). *Pregnant with meaning: Teen mothers and the politics of inclusive schooling*. New York: P. Lang.

Kelly, R. D. G. (1997). *Yo mama's disfunktional!* Boston, MA: Beacon Press.

Kerr, K. A. & Legters, N. E. (2004). Preventing dropout: Use and impact of organizational reforms designed to ease the transition to high school. In, G. Orfield (Ed.), *Dropouts in America : Confronting the Graduation Rate Crisis* (pp. 221-242). Cambridge, MA: Harvard Education Press.

Kessler, R. C., Mickelson, K. D., & Williams, D. R. (1999). The prevalence, distribution and mental health correlates of perceived discrimination in the United States. *Journal of Health and Social Behavior, 40*, 208-230.

Kidd, P. & Parshall, M. (2000). Getting the focus and the group: Enhancing analytical rigor in focus group research. *Qualitative Health Research, 10*(3), 293-308.

Kim, J. & Durden, E. (2007). Socioeconomic status and age trajectories of health. *Social Science & Medicine 65*(12), 2489-2502.

Kim, J. & Miech, R. (2009). The Black-White difference in age-trajectories in functional health over the life course. *Social Science & Medicine, 68,* 717-725.

Kincheloe, J. & Steinberg, S. (1997). *Changing multiculturalism*. Philadelphia, PA: Open University Press.

Kirby, D. (2002). The impact of schools and school programs upon adolescent sexual behavior. *Journal of Sex Research, 39*(1), 27-33.

Kitzinger, J. (1994). The methodology of focus groups: The importance of interaction between research participants. *Sociology of Health & Illness, 16*(1), 103-121.

Klein, J. (2009, January 28). Chancellor's Testimony Before the State Senate Finance Committee and Assembly Ways and Means Committee. *News and Speeches*. New York City Department of Education. Retrieved from: http://schools.nyc.gov/Offices/mediarelations/NewsandSpeeches/2008-2009/20090128_budget_testimony.htm

Kleinman, R, Murphy, JM, Little, M, Pagano, M, Wehler, C, Regal, K & Jellinek, M. (1998) Hunger in children in the United States: Potential behavioral and emotional correlates. *Pediatrics, 101(1):* e1-6.

Kolodner, M. (2008, December 11). 17,000 kids have no school library. *New York Daily News.* Retrieved from: http://www.nydailynews.com/ny_local/bronx/2008/12/10/2008-12-10_17000_kids_have_no_school_library-3.html

Kohn, A. (2000). *The case against standardized testing: Raising the scores, ruining the schools.* Portsmouth, NH: Heinemann.

Kop, W., Gottdiener, J., & Krantz, D. (2001). Stress and silent ischemia. In Baum, Revenson & Singer, (Eds.). *Handbook of Health Osychology* (pp. 669-682). Mahwah, NJ: Lawrence Erlbaum Associates.

Kozol, J. (1991). *Savage inequalities*. New York: Crown Publishers.

Krieger, N. (1990). Racial and gender discrimination: Risk factors for high blood pressure? *Social Science & Medicine, 30*, 1273-1281.

Krieger, N. (1999). Embodying inequality: A review of concepts, measures and methods for studying health consequences of discrimination. *International Journal of Health Services, 29*(2), 295-352.

Krieger, N. (2001). Theories for social epidemiology in the 21st century: An ecosocial perspective. *Int. J. Epidemiology. 30*(4), 668-677.

Krieger, N. (2005a). Embodiment: A conceptual glossary for epidemiology. *Journal of Epidemiology Community Health, 59*(5), 350-355.

Krieger, N. (Ed.). (2005b). *Embodying inequality: Epidemiologic perspectives*. Amityville, N.Y.: Baywood Publishers.

Krieger, N., & Sidney, S. (1996). Racial discrimination and blood pressure: The CARDIA study of young Black and White adults. *American Journal of Public Health, 86*, 1370-1378.

Krieger, N., & Smith, G. D. (2004). "Bodies count," and body counts: Social epidemiology and embodying inequality. *Epidemiologic Review, 26*(1), 92-103.

Kumar, R. (2008). Baltimore high schoolers 'die-in' for ed funds: 25 protesters detailed. *Baltimore Sun.*

Kumashiro, K. (2002). Troubling Education: Queer Activism and Antioppressive Pedgaogy. New York, NY: Routlege.

Kumashiro, K. (2008). *The seduction of common sense: How the right has framed the debate on America's schools.* New York, NY: Teachers College Press.

Kung HC, Hoyert DL, Xu JQ, Murphy SL. (2008). Deaths: final data for 2005. *National Vital Statistics Reports, 56(10).* Hyattsville, MD: National Center for Health Statistics.

Ladson-Billings, B. (1992). Reading between the lines and beyond the pages: A culturally relevant approach to literacy teaching. *Theory Into Practice, 31(4):* 312-320.

Ladson-Billings, G. (1995). But that's just good teaching! The case for culturally relevant pedagogy. *Theory Into Practice, 34(3):* 159-165.

Ladson-Billings, G. (2000). Racialized discourses and ethnic epistemologies. In, N. Denzin & Y. Lincoln (Eds.), *Handbook of Qualitative Research* (2nd ed.). Thousand Oaks, CA: Sage.

Ladson-Billings, G. (2004). Landing on the wrong note: The price we paid for *Brown*. *Educational Researcher, 33*(7), 3-13.

Ladson-Billings, G. (2006). 2006 presidential address: From the achievement gap to the education debt: understanding achievement in U.S. schools. *Educational Researcher, 35*(7), 3–12.

Ladson-Billings, G. & Donnor, J. (2005). The moral activist role of critical race theory scholarship. In N. Denzin and Y. Lincoln (Eds.), *The SAGE Handbook of Qualitative Research, Third Edition* (pp. 279-302). Thousand Oaks, CA: SAGE Publications.

Ladson-Billings G., & Tate, W. F. (1995). Toward a critical race theory of education. *Teachers College Record*, *97*(1), 47-68.

LaGuardia, A. (2006, February 3). Iran hits back at 'warmonger' Bush. *Telegraph UK.* Retrieved at: http://www.telegraph.co.uk/news/worldnews/middleeast/iran/1509475/Iran-hits-back-at-warmonger-Bush.html.

Lakoff, G. *Moral politics: How liberals and conservatives think.* (2nd ed.). Chicago, IL: The University of Chicago Press.

Lantz, P., House, J., Lepkowski, J., Williams, D., Mero, R., & Chen, J. (1998). Socioeconomic factors, health behaviors, and mortality: Results from a nationally representative prospective study of US adults. *JAMA, 279*(21)*,* 1703-1708.

LaVeist, T. (2005). Disentangling race and socioeconomic status: A key to understanding health inequalities. *Journal of Urban Health, Supplement 3, 82*(2), iii26-iii34.

Lazarus, R. & Folkman, S. (1984). *Stress, appraisal, and coping.* New York, NY: Springer.

Lear, J. G., Isaacs, S. L., & Knickman, J. R. (Eds.). (2006). *School health services and programs.* San Francisco, CA: Jossey-Bass.

Leary, J. D. (2005). *Post traumatic slave syndrome: America's legacy of enduring injury and healing.* Portland, OR: Uptone Press.

Leatherwood, H. (2006). *Comparison of teachers' and students' perceptions of academic performance and opportunities: A focus on pregnant and parenting students*: Online Submission.

Lehr, C., Hansen, A., Sinclair, M., Christenson, S. (2003). Moving beyond dropout towards school completion: An integrative review of data-based interventions. *School Psychology Review, 32*(3), 342-364.

Lepore, S. (1997). Social-environmental influences on the chronic stress process. In B. Gottlieb (Ed.), *Coping with Chronic Stress* (pp. 133-160). New York, NY: Plenum Press.

Lepore, S. & Evans, G. (1996). Coping with multiple stressors in the environment. In M. Zeidner & N. Endler (Eds.), *Handbook of Coping: Theory, Research, and Applications* (pp. 350-377). New York, NY: Wiley.

Liberatos P, Link B, Kelsey J. (1988). The measurement of social class in epidemiology. *Epidemiologic Reviews, 10*(1), 87-121.

Libman, K. (2007). Growing youth growing food: How vegetable gardening influences young people's food consciousness and eating habits. *Applied Environmental Education & Communication, 6*(1): 87 – 95.

Libman, K. (2008). Proceedings from Conference of the Royal Geographic Society Conference: *Children's Gardens, Urban Farms, and the Production of Urban Health*. London.

Link, B. G., & Phelan, J. (1995). Social conditions as fundamental causes of disease. *Journal of Health and Social Behavior, 35*, 80-94

Linville, D. (2009). Resisting Regulation: Teens and Discourses of Sexuality and Gender in High Schools. Unpublished Dissertation. City University of New York.

Lipman, P. (2004). *High stakes education: Inequality, globalization and urban school reform.* New York, NY: RoutledgeFarmer

Lock, M. & Farquhar, J. (Eds.). (2007). *Beyond the body proper: Reading the anthropology of material life.* Durham, NC & London, England: Duke University Press.

Lomawiama, K. T. (1995). Educating Native Americans. In J. A. Banks & C. M. Banks (Eds.), *Handbook of Research on Multicultural Education* (pp. 331–347). New York: Macmillan.

Lopez, G. (2003). The (racially neutral) politics of education: A critical race theory perspective. *Educational Administration Quarterly*, *39*(1), 68-94.

Losen, D., & Orfield, G. (Eds.). (2002). *Racial inequity in special education.* Cambridge, MA: Harvard Educational Publishing Group.

Lowe, L. (1996). *Immigrant acts: On Asian-American cultural politics*. Durham, NC: Duke University Press.

Lu, L (1991). Daily hassles and mental health. *British Journal of Psychology, 82:* 441-447.

Lui, M. (2009, March 23). The wealth gap gets wider. *The Washington Post.* Retreived from: http://www.washingtonpost.com/wp-dyn/content/article/2009/03/22/AR2009032201506.html.

Luker, K. (1996). *Dubious conceptions: The politics of teenage pregnancy*. Cambridge, MA: Harvard University Press.

Luttrell, W. (2003*). Pregnant bodies, fertile minds: Gender, race, and the schooling of pregnant teens*. New York: Routledge.

Lynskey, M. & Hall, W. (2000). The effects of adolescent cannabis use on educational attainment: A review. *Addiction*, *95*(11), 1621-1630.

Machado, A. & Silva, F. (2007). Toward a richer view of the scientific method: The role of conceptual analysis. *American Psychologist, 62*(7)*,* 671-681.

Madison, G. B. (1988). *The hermeneutics of postmodernity: Figures and themes*. Bloomington, IN: Indiana University Press.

Mandell, R. (2004). *A call for reform: Strengthening HIV/AIDS education in New York City's public schools.* New York AIDS Coalition. Available at: http://www.nyaidscoalition.org/binary-data/NYAC_ARTICLE/pdf_file/521-2.pdf

Marmot, M. & Wilkinson, R. G. (Eds.). (2006). *Social determinants of health* (2nd ed.). Oxford, UK: Oxford University Press.

Marshall & Rossman (1999). *Designing qualitative research*. (3rd ed.). Thousand Oaks, CA: Sage Publications.

Marsland, A., Bachen, E., Cohen, S., & Manuck, S. (2001). Stress, immunity and susceptibility to infectious disease. In Baum, Revenson & Singer, (Eds). *Handbook of Health Psychology* (pp. 683-695). Mahwah, NJ: Lawrence Erlbaum Associates.

Martin, E., Tobin, T., & Sugai, G. (2002). Current information on dropout prevention: Ideas from practitioners and the literature. *Preventing School Failure*, *47*(1), 10-17.

Marx, E., Wooley, S. F., & Northrop, D. (1998). *Health is academic: A guide to coordinated school health programs.* New York, NY: Teachers College Press.

Matte, T, Ellis, JA, Bedell, J, Selenic, D, Young, C & Deitcher D (2007). *Obesity in the South Bronx: A look across generations.* New York, NY: New York City Department of Health and Mental Hygiene.

Mauer, M., & Chesney-Lind, M. (Eds.). (2002). *Invisible punishment: The collateral consequences of mass imprisonment.* New York, NY: The New Press.

McCarthy, C. (1990). *Race and curriculum: Social inequality and the theories and politics of difference in contemporary research on schooling.* Bristol, PA: Falmer Press

McCarthy, C. (2003). Contradictions of power and identity: Whiteness studies and the call of teacher education. *Qualitative Studies in Education 16*(1), 127-133.

McCarthy, C. & Crichlow, W. (Eds.). (1993). *Race, identity, and representation in education.* New York, NY: Routledge.

McClelland, S. & Fine, M. (2006). Sexuality education and desire: Still missing after all these years. *Harvard Educational Review, 76*(3), 297-338.

McClelland, S. & Fine, M. (2008a). Embedded science: Critical analysis of abstinence-only evaluation research. *Cultural Studies, Critical Methodologies, 8*(1), 50-81.

McClelland, S. & Fine, M. (2008b). Rescuing a theory of adolescent sexual excess: Young women and wanting. In A. Harris (Ed.), *Next Wave Cultures: Feminism, Subcultures, Activism*. London: Routledge.

McClelland, S. & Fine, M. (2008c). Writing *on* cellophane: Studying teen women's sexual desires, inventing methodological release points. In K. Gallagher (Ed.), *The Methodological Dilemma: Creative, Critical and Collaborative Approaches to Qualitative Research,* (pp. 232-260). New York, NY: Routledge.

McCord, M., Klein, J., Foy, J., & Fothergill, K. (1993). School-based clinic use and school performance. *Journal of Adolescent Health, 14*(22), 91-98.

McCreary, L. (2009). Stumbling to a longer life. *Harvard Business Review.* Available at: http://hbr.harvardbusiness.org/web/2009/hbr-list/stumbling-to-a-longer-life

McEwen, B. S. (1998). Protective and damaging effects of stress mediators. *New England Journal of Medicine, 338,*171–9.

McEwen, B. S. (2004). *The end of stress as we know it*. Washington, D.C.: Joseph Henry Press.

McHoul, A. & Grace, W. (1993). *A Foucault primer: Discourse, power and the subject*. New York, NY: New York University Press.

McKinnon, J. (2001). *The Black population: 2000*. Available at: http://www.census.gov/prod/2001pubs/c2kbr01-5.pdf.

McPartland, J. M. & Jordan, W. J. (2004). Essential components of high school dropout-prevention reforms. In, G. Orfield (Ed.), *Dropouts in America : Confronting the Graduation Rate Crisis* (pp. 269-288). Cambridge, MA: Harvard Education Press.

McNally, J. (2003). A ghetto within a ghetto: African-American students are overrepresented in special education programs. *Rethinking Schools, 17*(3). Available at: http://www.rethinkingschools.org/archive/17_03/ghet173.shtml

McNeely, C. A, Nonnemaker, J. M., & Blum, R. W. (2002). Promoting school connectedness: Evidence from the national longitudinal study of adolescent health. *Journal of School Health*, *72*(4), 138-146.

McNeil, J. (2001). Americans with disabilities, 1997. *Current Population Reports*. Washington. D.C.: U.S. Census Bureau. Available at: http://www.census.gov/prod/2001pubs/p70-73.pdf

Medina, J. (2008, November 14). Cost of tracking schools is said to be $130 million. *The New York Times.* Retrieved at: http://www.nytimes.com/2008/11/14/nyregion/14account.html?ei=5070&emc=eta1

Meier, D. (1995). *The power of their ideas: Lessons for America from a small school in Harlem.* Boston, MA: Beacon Press.

Meiners, E. (2007). *Right to be hostile: Schools, prisons, and the making of public enemies.* New York, NY: Routledge.

Melamed, J. (2006). The spirit of neoliberalism: From racial liberalism to neoliberal mulitculturalism. *Social Text 89, 24*(4), 1-24.

Merleau-Ponty, M. (1962). *Phenomenology of perception*. London, UK: Routledge & Kegan Paul Ltd.

Merton, R. K. (1988). The Matthew effect in science, II: Cumulative advantage and the symbolism of intellectual property. *ISIS, 79*, 606–623.

Michelli, N. & Keiser, E. (Eds.). (2005). Teacher education for democracy and social justice. New York, NY: Routledge.

Mincy, R. (2006). *Black males left behind.* Washington D.C.: Urban Institute Press.

Mirel, J. (1999). *The rise and fall of an urban school system: Detroit, 1907-81.* (2nd ed.). Ann Arbor, MI: The University of Michigan Press.

Mittelstadt, J. (1997). Educating "our girls" and "welfare mothers": Discussions of education policy for pregnant and parenting adolescents in federal hearings, 1975-1995. *Journal of Family History,* 22(3), 326-53.

Molla, M., Madans, J., & Wagener, D. (2004). Differentials in adult mortality and activity limitation by years of education in the United States at the end of the 1990s. *Population and Development Review, 30*(4), 625-646.

Montecel, M., Cortez, J., & Cortez, A. (2004). Dropout-prevention programs: Right intent, wrong focus, and some suggestions on where to go from here. *Education and Urban Society, 36*(2),169-188.

Moran, M. (2007). *Colonizing leprosy: Imperialism and the politics of public health in the United States.* Chapel Hill, NC: The University of North Carolina Press.

Moretti, E. (2007). Crime and the costs to criminal justice. In C. Belfield & H. Levin (Eds.), *The Price We Pay: Economic and Social Consequences of Inadequate Education* (pp.142-159). Washington, D.C.: The Brookings Institution.

Morone, J., Kilbreth, E., & Langwell, K. (2001). Back to school: A health care strategy for youth. *Health Affairs, 20*(1-2), 122-136.

Morrison, G., Anthony, S., Storino, M., Cheng, J., Furlong, M., & Morrison, R. (2001). School expulsion as a process and an event: Before and after effects on children at risk for school discipline. *New Directions for Youth Development, 92*, 45-71.

Muckelbauer, R, Libuda, L, Clausen, K, Toschke, AM, Reinehr, T & Kersting, M. (2009). Promotion and provision of drinking water in schools for overweight prevention: Randomized, controlled cluster trial. *Pediatrics, 123(4):* e661-e667.

Muenning, P. (2007). Consequences in health status and costs. In, C. Belfield & H. Levin (Eds.), *The Price We Pay: Economic and Social Consequences of Inadequate Education* (pp. 125-141). Washington, D.C.: Brookings Institution Press.

Mukherjee, E. (2007). *Criminalizing the classroom: The over-Policing of New York City schools.* New York, NY: New York Civil Liberties Union and American Civil Liberties Union.

Mullings, L. (2005). Interrogating racism: Toward an antiracist anthropology. *Annual Review of Anthropology, 34,* 667-693.

Murphy, J., Pagano, M., Nachmani, J., Sperling, P., Kane, S., & Kleinman, R. (1998).The relationship of school breakfast to psychosocial and academic functioning. *Archives of Pediatric Adolescent Medicine, 152:* 899-907.

Mytton, J., DiGuiseppi, C., Gough, D., Taylor, R., & Logan, S. (2002). School-based violence prevention programs: Systematic review of secondary prevention trials. *Archives of Pediatric and Adolescent Medicine, 156*(8), 752-762.

National Center for Chronic Disease Prevention and Health Promotion. (n.d.). *Coordinated school health programs*. Atlanta, GA: U.S. Centers for Disease Control and Prevention.

National Center for Health Statistics. (1998). *Health, United States, 1998: With socioeconomic status and health chartbook*. Hyattsville, MD.

National Center for Health Statistics. (2001). *Health, United States, 2001: With urban and rural health chartbook.* Hyattsville, MD.

National Center for Health Statistics. (2004). *Health, United States, 2004: With chartbook on trends in the health of Americans*. Hyattsville, MD.

National Center for Health Statistics. (2009). *Health, United States, 2008 with chartbook.* Hyattsville, MD: National Center for Health Statistics.

National Dropout Prevention Center/Network. (1998). *Why students drop out*. Clemson, SC: Clemson University. Available at: http://www.dropoutprevention.org/stats/quick_facts/why_drop.htm.

National Dropout Prevention Center/Network. (2004). *Effective strategies for dropout prevention*. Available at: http://www.dropoutprevention.org/effstrat/effstrat.htm

National Research Council & Institute of Medicine (2003). *Engaging schools: Fostering high school students' motivation to learn.* Washington, D.C.: The National Academies Press.

New York City Dept of Education, Office of Communication and Media Relations. (2003). *Mayor Michael R. Bloomberg and schools chancellor Joel I. Klein announce new school safety plan: New school safety initiatives based on successful NYPD crime-fighting initiatives to address problem schools and problem students.* Press Releases 2003. Retrieved from: http://www.nycenet.edu/Administration/mediarelations/PressReleases/2003-2004/12-23-2003-13-2-36-874.htm#

New York City Department of Education. (2005). *HIV/AIDS curriculum: A supplement to a comprehensive health curriculum*. Available at: http://schools.nyc.gov/Academics/FitnessandHealth/StandardsCurriculum/HIVAIDScurriculum

New York City Department of Education, Division of Budget Operations and Review. (2006). *School based expenditure reports*. Retrieved from: https://www.nycenet.edu/offices/d percent5Fchanc percent5Foper/budget/exp01/. See also: http://schools.nyc.gov/Offices/DBOR/SBER/default.htm

New York Civil Liberties Union. (2007). *We want you(th)!: Confronting unregulated military recruitment in New York City public schools.* New York: NYCLU. Available at: http://www.nyclu.org/node/1349

New York Civil Liberties Union. (2008). *Protecting two generations: The need to preserve and expand services for New York City's pregnant and parenting students*. New York, NY: NYCLU, Reproductive Rights Project. Available at: http://www.nyclu.org/files/ProtectingTwoGenerations_12.22.08.pdf

New York State Education Department. (n.d.). Health, physical education, family and consumer sciences resource guide. Available at: http://emsc32.nysed.gov/guides/health/ and http://emsc32.nysed.gov/guides/health/partI1.pdf

New York State Education Department. (1995). *Curriculum, instruction, and assessment preliminary draft framework*. Available at: http://www.emsc.nysed.gov/ciai/pe/pub/hpeframe.pdf

Noam, G., Warner, L., & Van Dyken, L. (2001). Beyond the rhetoric of zero tolerance: Long-term solutions for at-risk youth. *New Directions for Youth Development, 92,* 155-182.

Noguera, P. (1995). Preventing and producing violence: A critical analysis of responses to school violence. *Harvard Educational Review,65*(2),189-212.

Noguera, P. (2003). Schools, prisons, and social implications of punishment: Rethinking disciplinary practices. *Theory Into Practice, 42*(4), 341-350.

O'Connor, C. (1997). Dispositions toward (collective) struggle and educational resilience in the inner city: A case analysis of six African-American high school students. *American Educational Research Journal, 34*(4), 593-629.

O'Connor, C. (1999). Race, class, and gender in America: narratives of opportunity among low-income African American youths. *Sociology of Education, 72*(3), 137-157.

O'Connor, C. (2006). The premise of Black inferiority: An enduring obstacle fifty years post-Brown. *Yearbook of the National Society for the Study of Education, 105*(2), 316-336.

Omi, M. & Winant, H. (1994). *Racial formation in the United States from the 1960s to the 1990s* (2nd ed.). New York: Routledge.

Orfield, G. (2001). *Schools more separate: Consequences of a decade of resegregation.* Cambridge, MA: The Civil Rights Project.

Orfield, G. (Ed.). (2004). *Dropouts in America: Confronting the graduation rate crisis.* Cambridge, MA: Harvard Education Press.

Orfield, G., & Lee, C. (2005). *New faces, old patterns? Segregation in the multiracial South*. Cambridge, MA: The Civil Rights Project at Harvard University.

Orfield, G., Losen, D., Wald, J., & Swanson, C. (2004). *Losing our future: How minority youth are being left behind by the graduation rate crisis.* Cambridge, MA: The Civil Rights Project at Harvard University.

Osher, D., Sandler, S., & Nelson, C. L. (2001). The best approach to safety is to fix schools and support children and staff. *New Directions for Youth Development, 92*, 127-153.

Pappas, G., Queen, S., Hadden, W., & Fisher, G. (1993). The increasing disparity in mortality between socioeconomic groups in the United States, 1960 and 1986. *New England Journal of Medicine, 329*(2), 103-109

Parenti, C. (2000). *Lockdown America: Police and prisons in the age of crisis.* New York, NY & London, U.K.: Verso.

Parke, R. (1978). Children's Home Environments: Social and Cognitive Effects. In I. Altman & J. F. Wohlwill (Eds.), *Children and the Environment,* pp. 33-81. New York, NY: Plenum Press.

Parke, R., & Sawin, D. B. (1979). Children's privacy in the home: Developmental, ecological, and child-rearing determinants. *Environment and Behavior, 11*(1), 87-104.

Parker, L. (2001). Statewide assessment triggers urban school reform: But how high the stakes for urban minorities? *Education and Urban Society*, *33*(3), 313-319.

Parker-Pope, T. (2009, March, 30). School water fountains to prevent obesity. *The New York Times*. Message posted to: http://well.blogs.nytimes.com/2009/03/30/school-water-fountains-to-prevent-obesity/

Payne, Y. & Hamdi, H. (2009). "Street love": How street life oriented U.S. born African men frame giving back to one another and the local community. *The Urban Review, 41*(1), 29-46.

Perez, M. (2009). Low-income Latina parents, school choice, and Pierre Bourdieu. In J. Anyon (Ed.), *Theory and Educational Research: Toward Critical Social Explanation*, pp. 135-148. New York, NY: Routledge.

Perlstein, D. (2004). *Justice, justice: School politics and the eclipse of liberalism* (Vol. 40). New York: Peter Lang Publishing.

Perrin, K. K., & DeJoy, S. B. (2003). Abstinence-only education: How we got here and where we're going. *Journal of Public Health Policy, 24*(3-4), 445-459.

Perry, P. (2002). *Shades of White: White kids and racial identities in high school.* Durham, NC: Duke University Press.

Pettit, B. & Western, B. (2004). Mass imprisonment and the life course: Race and Class inequality in U.S. incarceration. *American Sociological Review, 69*(2)*,* 151-169.

Pew Center on the States. (2008). *One in 100: Behind bars in America 2008.* Washington, DC: The Pew Charitable Trusts.

Phelan, J & Links, B. (2005). Controlling disease and creating disparities: A fundamental cause perspective. *Journals of Gerontology, Series B, 60B(Special Issue II)*: 27-33.

Philliber, S., Brooks, L., & Lehrer, L. P. (2003). Outcomes of teen parenting programs in New Mexico. *Adolescence*, *38,* 535-53.

Pillow, W. (2004). *Unfit subjects: Educational policy and the teen mother*. New York: RoutledgeFalmer

Pillow, W. (2006). Teen pregnancy and education: Politics of knowledge, research, and practice. *Educational Policy, 20*(1), 59-84.

Pollitt, E. (1995). Does breakfast make a difference in school? *Journal of the American Dietetic Association, 95(10):* 1134-9.

Pollitt, E., & Mathews, R. (1998). Breakfast and cognition: An integrative summary. *American Journal of Clinical Nutrition, 67* (4): 804S-813S.

Portes, A. (Ed.) (1996). *The new second generation.* New York, NY: Russell Sage Foundation.

Portes, A. & Rumbuat, R. (2006). Immigrant America. (3rd ed.). Berkeley, CA: University of California Press.

Prevatt, F. & Kelly, F. (2003). Dropping out of school: A review of intervention programs. *Journal of School Psychology, 41,* 377-395.

Rabin, RC. (2009, March 25). Proximity to fast food a factor in student obesity. *The New York Times.* Retrieved at: http://www.nytimes.com/2009/03/26/health/nutrition/26obese.html

Reason, P., & Bradbury, H. (2008). Handbook of action research. *Participative Inquiry and Practice* (2nd ed.). London, England: Sage Publication.

Reich, R. (2007). *Supercapitalism: The transformation of business, democracy and everyday life.* New York, NY: Vintage Books.

Ren, X. S., Amick, B. C., & Williams, D. R. (1999). Racial/ethnic disparities in health: The interplay between discrimination and socioeconomic status. *Ethnicity and Disease, 9*(2), 151-165.

Resnick, M. D., Bearman, P. S., Blum, R. W., Bauman, K. E., Harris, K. M., Jones, J., et al. (1997). Protecting adolescents from harm: Findings from the national longitudinal study on adolescent health. *JAMA*, *278*(10), 823-832.

Revenson, T. (1990). All other things are *not* equal: An ecological perspective on the relation between personality and disease. In H. Friedman (Ed.), *Personality and Disease* (pp. 65-94). New York, NY: John Wiley.

Reynolds, A., Temple, J., Robertson, D., & Mann, E. (2001). Long-term effects of an early childhood intervention on educational achievement and juvenile arrest: A 15-year follow-up of low-income children in public schools. *JAMA, 285,* 2339-2346.

Roberts, D. (1997). *Killing the Black body: Race, reproduction, and the meaning of liberty.* New York: Vintage Books.

Rosenthal, B. (1998). Nonschool correlates of drop-out: An integrative review of the literature. *Children & Youth Services Review* , *20*(5), 413-433.

Ross, C. E. & Mirowsky, J. (2001). Neighborhood disadvantage, disorder, and health. *Journal of Health and Social Behavior, 42*(3)*,* 258-276.

Ross, C. E., & Wu, C. (1995). The links between education and health. *American Sociological Review, 60*(5)*,* 719-745.

Rothstein, R. (2004). *Class and schools: Using social, economic and educational reform to close the Black-White achievement gap.* Washington, DC: Economic Policy Institute.

Rouse, C. E. (2007). Consequences for the labor market. In C. Belfield & H. Levin (Eds.), *The Price We Pay: Economic and Social Consequences of Inadequate Education* (pp. 99-124). Washington, D.C.: The Brookings Institution.

Ruglis, J. (2007). Dropout. In, Mathison & Ross (Eds.), *Battleground Schools*, *Volume 1, (p*p. 194-203. Westport, CT: Greenwood Publishing.

Rumberger, R. W. (1995). Dropping out of middle school: A multilevel analysis of students and schools*. American Educational Research Journal, 32*(3), 583-625.

Rumberger, R. W. (2004). Why students drop out of school. In G. Orfield (Ed.), *Dropouts in America: Confronting the Graduation Rate Crisis* (pp. 131-156)*.* Cambridge, MA: Harvard Education Press

Rumberger, R. W. & Palardy, G. J. (2005a). Test scores, dropout rates, and transfer rates as alternative indicators of high school performance. *American Educational Research Journal, 42*(1), 3-42.

Rumberger, R. W. & Palardy, G. J. (2005b).Does segregation still matter? The impact of student composition on academic achievement in high school. *Teachers College Record, 107*(9), 1999-2045.

Rumberger, R. W. & Thomas, S. L. (2000). The distribution of dropout and turnover rates among urban and suburban high schools. *Sociology of Education, 73*(1), 39-67.

Russell, S., & Joyner, K. (2001). Adolescent sexual orientation and suicide risk: national study. *American Journal of Public Health*, *91*(8): 1276-1281.

Sadler, L., Swartz, M., & Ryan-Krause, P. (2003). Supporting adolescent mothers and their children through a high school-based child care center and parent support program. *Journal of Pediatric Health Care, 17*(3), 109-117.

Safren, S. A., & Heimberg, R. G. (1999). Depression, hopelessness, suicidality, and related factors in sexual minority and heterosexual adolescents. *Journal of Consulting and Clinical Psychology*, *67*(6): 859-866.

Sallis, J., Conway, T., Prochaska, J., McKenzie, T., Marshall, S., & Brown, M. (2001). The association of school environments with youth physical activity. *American Journal of Public Health, 91*(4), 618-620.

Saltman, K. J., & Gabbard, D. (Eds). (2003). *Education as enforcement : The militarization and corporatization of schools*. New York, NY: RoutledgeFalmer.

Sassen, S. (2001). *The global city: New York, London, Tokyo* (2nd ed.). Princeton, NJ: Princeton University Press.

Schargel, F. P. & Smink, J. (2001). *Strategies to help solve our school dropout problem*. Larchmont, NY: Eye On Education

Scholl, M. F. (2007). Educating adolescent parents: Proactive approaches by school leaders. *Delta Kappa Gamma Bulletin*, *73*(3), 28-32.

Schulz, A., Israel, B., Williams, D., Parker, E., Becker, A., & James, S. (2000). Social inequalities, stressors and self reported health status among African American and White women in the Detroit metropolitan area. *Social Science & Medicine, 51*(11), 1639-1653.

Schulz, A., Zenk, S. N., Israel, B. A., Mentz, G., Stokes, C., & Galea, S. (2008). Do neighborhood economic characteristics, racial composition, and residential stability predict perceptions of stress associated with the physical and social environment? Findings from a multilevel analysis in Detroit. *Journal of Urban Health, 85*(5), 642-661.

Schultz, K. (2001). Constructing failure, narrating success: Rethinking the “problem” of teen pregnancy. *Teachers College Record*,*103*(4), 582.

Schweinhart, L., Montie, J., Xiang, Z., Barnett, W., Belfield, C., & Nores, M. (2005) *Lifetime effects: The High/Scope Perry preschool study through age 40*. (Monographs of the High/Scope Educational Research Foundation, 14). Yipsilanti, MI: High/Scope Press; 2005.

Scott, J. (1990). *Domination and the arts of resistance: Hidden transcripts.* New Haven, CT: Yale University Press.

Sen, A. (1983). *Poverty and famines: An essay on entitlement and deprivation.* New York, NY: Oxford University Press.

Sered, S & Fernandopulle, R. (2005) *Uninsured in America.* Berekeley & Los Angeles, CA: University of California Press.

Sexuality Information and Education Council of the United States. (2004). New York State profile. *SIECUS Public Policy Office State Profile*. Available at: http://www.siecus.org/policy/states/2004/mandates/NY.html

Sexuality Information and Education Council of the United States. (2005a). *A brief explanation of federal abstinence-only-until-marriage funding*. Available at: http://www.siecus.org/policy/states/2004/explanation.html

Sexuality Information and Education Council of the United States (SIECUS). (2005b). What the research says. *SIECUS Public Policy Office Fact Sheet*. Available at: http://www.siecus.org/policy/research_says.pdf

Sexuality Information and Education Council of the United States (SIECUS). (2008). *A Brief History: Abstinence-Only-Until-Marriage Funding.* Available at: http://www.nomoremoney.org/index.cfm?pageid=947

Sharma, S., Malarcher, A., Giles, W., & Myers, G. (2004). Racial, ethnic and socioeconomic disparities in the clustering of cardiovascular disease risk factors. *Ethnicity & Disease, 14*(1), 43-48.

Shephard, R.J. (1997). Curricular physical activity and academic performance. *Pediatric Exercise Science, 9:* 113-126.

Shavelson, R. & Towne, L. (Eds.). (2003). *Scientific research in education.* Washington, D.C.: National Academies Press.

Skiba, R. (2000). *Zero tolerance, zero evidence: An analysis of school disciplinary practice* (Policy Research Report #SRS2): Indiana Education Policy Center.

Skiba, R. (2001). When is disproportionality discrimination? The overrepresentation of Black students in school suspension. In W. Ayers, B. Dohrn, & R. Ayers (Eds.), *Zero Tolerance: Resisting the Drive for Punishment in our Schools: A Handbook for Parents, Students, Educators, and Citizens* (pp. 176-187). New York, NY: New Press

Skiba, R. & Knesting, K. (2001). Zero tolerance, zero evidence: An analysis of school disciplinary practice. *New Directions for Youth Development, 92,*17-43.

Skiba, R., Michael, R., Nardo, A., & Peterson, R. (2000). *The color of discipline: Sources of racial and gender disproportionality in school punishment.* (Policy Research Report #SRS1): Indiana Education Policy Center.

Skrtic, T. (Ed.). (1995). *Disability & democracy: Reconstructing (special) education for postmodernity*. New York: Teachers College Press.

Sleeter, C. (Ed.). (2007). *Facing accountability in education: Democracy and education at risk.* New York, NY: Teachers College Press.

Sleeter, C. & McLaren, P. (Eds.). (1995). *Multicultural education, critical pedagogy, and the politics of difference.* Albany, NY: SUNY Press.

Smith, L. T. (1999). *Decolonizing methodologies: Research and indigenous peoples*. New York, NY: Zed Books & Palgrave.

Smith, L. T. (2006). On tricky ground: Researching the native in the age of uncertainty. In N. Denzin & Y. Lincoln (Eds.), *Critical and Indigenous Knowledges* (pp. 85-107). Thousand Oaks, CA: SAGE Publications.

Smith, T. (2003). Who values the GED? An examination of the paradox underlying the demand for the general educational development credential. *Teachers College Record, 105*(3), 375-415.

Smith, P., Ananiadou, K., & Cowie, H. (2003). Interventions to reduce school bullying. *Canadian Journal of Psychiatry, 48*(9) 591-599.

Smith, S. S. (1998). Health in the U.S. tied to income and education. U.S. Department of Health and Human Services: *Public Health Reports, 113:* 557.

SocialistWorker. (2009, February 27). Teachers put to an unfair test. Retrieved from: http://socialistworker.org/2009/02/27/teachers-put-to-an-unfair-test

Solórzano, D. G. & Bernal, D. D. (2001). Examining transformational resistance through a critical race and LatCrit theory framework. *Urban Education*, *36*(3), 308-342.

Solórzano, D. & Yosso, T. (2001a). Critical race and LatCrit theory and method: Counter-storytelling. *Qualitative Studies in Education*, *14* (4), 471-495.

Solorzano, D. & Yosso, T. (2001b). From racial stereotyping and deficit discourse toward a critical race theory in teacher education. *Multicultural Education*, *9*(1), 1-8.

Somers, C. & Piliawsky, M. (2004). Drop-out prevention among urban, African-American adolescents: Program evaluation and practical implications. *Preventing School Failure, 48*(3), 17-22.

South, S. J., Baumer, E. P., & Lutz, A. (2003). Interpreting community effects on youth educational attainment. *Youth & Society*, *35*(1), 3-36.

Spade, J. Z., Columbia, L., & Vanfossen, B. E. (1997). Tracking in mathematics and science: Courses and course-selection procedures. *Sociology of Education*, *70*(2), 108-127.

Spivak, G. C. (1987). *In other worlds: Essays in cultural politics*. New York, NY: Routledge.

Spivak, G. C. (1995). Can the subaltern speak? In, B. Ashcroft, G. Grifiths, & H. Tiffin (Eds.), *The Postcolonial Studies Reader.* New York, NY, Routledge.

Spring, J. (1998). *Education and the rise of the global economy*. Mahwah, NJ: Lawrence Erlbaum Associates.

Spring, J. (2002a). *Political agendas for education: From the religious right to the Green Party.* (2nd ed.). Mahwah, NH: Lawrence Erlbaum Associates.

Spring, J. (2002b). *Political agendas for education*. (2nd ed.). New York, NY: Lawrence Erlbaum Associates, Inc.

Spring, J. (2004). *The American school: 1642-2004. (*6th ed.). New York, NY: McGraw Hill.

Stanton-Salazar, R. (2001) *Manufacturing hope and despair: The school and kin support networks of U.S.-Mexican youth.* New York, NY: Teachers College Press.

Statler, J. K. & Petersen, G. J. (2003). Learning theory and its application to at-risk programs for elementary school children. In, *Annual Meeting of the American Educational Research Association.* Chicago, IL.

Stevenson, W., Maton, K. I., & Teti, D. M. (1998). School importance and dropout among pregnant adolescents. *The Journal Of Adolescent Health: Official Publication Of The Society For Adolescent Medicine.22*(5), 376-382.

Stoudt, B. (2009). The role of language & discourse in the investigation of privilege: Using participatory action research to discuss theory, develop methodology, & interrupt power. *The Urban Review, 41*(1), 7-28.

Stovall, D. (2006). We can relate: Hip-Hop culture, critical pedagogy, and the secondary classroom. *Urban Education, 41(6)*: 585-602.

Strauss, A. & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques*. Newbury Park: Sage.

Street, P. (2005). *Segregated schools: Educational apartheid in post-civil rights America.* New York, NY: Routledge.

Stringer, S., 67th AD. (June 2003). *Failing grade: Health education in NYC schools - an analysis of k-8 education in New York City's public school system.* Available at: http://assembly.state.ny.us/member_files/067/20030622/

Suarez-Orozco, C., & Suarez-Orozco, M. (2001). *Children of immigration.* Cambridge, MA: Harvard University Press.

Suarez-Orozco, M., Suarez-Orozco, C & Qin, D. B. (Eds.). (2005). *The new immigration: An interdisciplinary reader.* New York, NY: Routledge.

Suicide Prevention Resource Center. (2008). *Suicide risk and prevention for lesbian, gay, bisexual, and transgender youth.* Newton, MA: Education Development Center, Inc.

Sullivan, L. (2007). *Deprived of dignity: Degrading treatment and abusive discipline in New York City & Los Angeles public schools.* New York, NY: National Economic and Social Rights Initiative.

Swanson, C. B. (2003a). *Caps, gowns, and games: High school graduates and NCLB.* Washington, D.C.: The Urban Institute. Available at: http://www.urban.org/url.cfm?ID=310777.

Swanson, C. (2003b). *Keeping count and losing count: Calculating graduation rates for all students under NCLB accountability.* Washington, D.C.: The Urban Institute. Available at: http://www.urban.org/url.cfm?ID=410843.

Swanson, C. (2003c). Ten questions (and answers) about graduates, dropouts and NCLB accountability. *Learning Curve: Facts and Perspectives Brief No. 3*. Washington, D.C.: The Urban Institute. Available at: http://www.urban.org/url.cfm?ID=310873.

Swanson, C. (2004a). *Who graduates? Who doesn't? A statistical portrait of public high school graduation, class of 2001*. Washington, D.C.: The Urban Institute.

Swanson, C. (2004b). *The real truth about low graduation rates: An evidence-based commentary.* Washington, D.C.: The Urban Institute.

Swanson, C. (2004c). Sketching a portrait of public high school graduation: Who graduates? Who doesn't? In, G. Orfield (Ed.), *Dropouts in America: Confronting the Graduation Rate Crisis* (pp. 13-40). Cambridge, MA: Harvard Education Press.

Swanson, C. (2004d). The new math on graduation rates. *Education Week, 23*(43), 40-41. Available at: http://www.urban.org/url.cfm?ID=1000675

Swanson, C. (2008). *Cities in crisis: A special analytic report on high school graduation.*

Bethesda, MD: EPE Research Center.

Swanson, C. & Chaplin, D. (2003). *Counting high school graduates when graduates count: Measuring graduation rates under the high stakes of NCLB.* Washington D.C.: The Urban Institute. Available at: http://www.urban.org/url.cfm?ID=410641.

Symons, CW, Cinelli, B, James, TC & Groff, P. (1997). Bridging student health risks and academic achievement through comprehensive school health programs. *Journal of School Health, 67*(6), 220-227.

Taras, H. & Potts-Datema, W. (2005). Chronic health conditions and student performance at school. *Journal of School Health, 75*(7), 255-266.

Tate, W. (1994). From inner city to ivory tower: Does my voice in matter in the academy? *Urban Education*, *29*(3), 245-269.

Tate, W. (1995). School mathematics and African-American students: Thinking seriously about opportunity-to-learn standards. *Educational Administration Quarterly*, *31*(3), 424-448.

Teachers put to an unfair test. (2009, February 27). *Socialistworker.org.* Retreived from: http://socialistworker.org/2009/02/27/teachers-put-to-an-unfair-test

The Civil Rights Project. (2005). *Confronting the graduation rate crisis in California: Executive summary*. Cambridge, MA: Harvard University. Available at: http://www.civilrightsproject.harvard.edu/research/dropouts/dropouts05.pdf

Thompson, W. C. (2003). *Undercounted and underserved. New York City's 20,000 school-aged young mothers.* New York, NY: City of New York, Office of the Comptroller. Available at: http://www.comptroller.nyc.gov/bureaus/opm/reports/Teen_Mothers.pdf

Thorpe, L, List, D, Marx, T, May, L, Helgerson, S & Frieden, T. (2004). Childhood obesity in New York City elementary school students. *American Journal of Public Health, 94(9):* 1496-1500.

Tisserand, M. (2007, September 10). The charter school flood. *The Nation*.

Tomlinson, S. (1995). The radical structuralist view of special education and disability: Unpopular perspectives on their origins and development. In T. Skrtic (Ed.), *Disability and Democracy: Restructuring (Special) Education for Post Modernity* (p. 132). New York, NY: Teachers College Press.

Torre, M. & Fine, M. (2006). Researching and resisting: Democratic policy research by and for youth. In S. Ginwright, P. Noguera & J. Cammarota (Eds.), *Beyond Resistance!: Youth Activism and Community Change* (pp. 269-286). New York: Routledge.

Tuck, E. (2008). Gate-ways and get-aways: Urban youth, school push-out, and the GED. Unpublished dissertation manuscript.

Tuck, E., Allen, J., Bacha, M., Morales, A., Quinter, S., Thompson, J., et al. (2008). PAR praxes for now and future change: The collective of researchers on educational disappointment and desire. In, J. Cammarota and M. Fine (Eds.), *Revolutionizing Education: Youth Participatory Action Research in Motion. New* York, NY: Routledge

Tukey, J. (1977). *Exploratory data analysis*. Reading, MA: Addison-Wesley.

Tufte, E. R. (1983). *The visual display of quantitative information*. Graphics Press.

In N. Denzin & Y. Lincoln (Eds.), *Critical and Indigenous Knowledges* (pp. 1-44). Thousand Oaks, CA: SAGE Publications.

Tufte, E. R. (1990). *Envisioning information*. Cheshire, CT: Graphics Press.

Tufte, E. R. (1997). *Visual explanations: Images and quantities, evidence and narrative*. \ Cheshire, CT: Graphics Press.

Tufte, E. R. (2006). *Beautiful evidence*. Cheshire, CT: Graphics Press

Twine, F. W., & Warren, J. W. (2000). *Racing research, researching race: Methodological dilemmas in critical race studies.* New York, NY: New York University Press.

Tyack, D. (1974). The one best system: A history of American urban education. Cambridge, MA: Harvard University Press.

U.S. Department of Education, National Center for Education Statistics. (2004). *The condition of education 2004*. Washington, D.C.: U.S. Government Printing Office.

U.S. Department of Education, National Center for Education Statistics. (2007). *Enrollment in educational institutions, by level and control of institution: Selected years, fall 1980 through fall 2007.* Retrieved from: http://nces.ed.gov/programs/digest/d07/tables/dt07_002.asp?referrer=report

U.S. Department of Education. (n.d.) No child left behind (NCLB) website. Retrieved from: http://www.nclb.gov/

Valenzuela, A. (1999). *Subtractive schooling: U.S.-Mexican youth and the politics of caring.* Albany, NY: State University of New York Press.

Valenzuela, A. (2002). High-stakes testing and U.S.-Mexican youth in Texas: The case for multiple compensatory criteria in assessment. *Harvard Journal of Hispanic Policy*, *14,* 97-116.

Van Manen, M. (1990). *Researching lived experience: Human science for an action sensitive pedagogy.* Albany, NY: SUNY Press.

Van Wye, G, Kerker, BD, Matte, T, Chamany, S, Eisenhower, D, Frieden, TR & Thorpe, L. (2008). Obesity and diabetes in New York City, 2002 and 2004. *Preventing Chronic Disease, 5(2).* Retrieved at: http://www.cdc.gov/pcd/issues/2008/apr/07_0053.htm

Vera Institute of Justice. (2003). *Foster children & education.* New York, NY: Vera Institute of Justice. Available at: www.vera.org/publication_pdf/241_452.pdf

Villanueva, V. J. (1999). *Bootstraps: From an American academic of color*. Urbana, Illinois: National Council of Teachers of English.

Vossekuil, B., Fein, R. A., Reddy, M., Borum, R., & Modzeleski, W. (2002). *The final report and findings of the safe school initiative: Implications for the prevention of school attacks in the United States.* Washington, D.C.: United States Department of Education, Office of Elementary and Secondary Education, Safe and Drug-Free Schools Program and U.S. Secret Service, National Threat Assessment Center.

Wacquant, L. (2001). Deadly symbiosis: When ghetto and prison meet and mesh. *Punishment & Society, 3*(1), 95-133.

Waite, R. (2009). Jamie's food fuels pupils' brain power. *The Sunday Times Online.* Available at: http://www.timesonline.co.uk/tol/life_and_style/food_and_drink/article5627478.ece

Waitzkin, H. (2005). The social origins of illness: A neglected history. In N. Krieger (Ed.), *Embodying Inequality: Epidemiologic Perspectives* (pp. 21-50). Amityville, NY: Baywood.

Wald, M. & Losen, D. (2003) *Deconstructing the school to prison pipeline.* San Francisco, CA, Jossey-Bass.

Waldfogel, J., Garfinkel, I., & Kelly, B. (2007). Welfare and the costs of public assistance. In C. Belfield & H. Levin (Eds.), *The Price We Pay: Economic and Social Consequences of Inadequate Education,* (pp. 160-174). Washington, D.C.: The Brookings Institution.

Walsemann, K. M., Geronimus, A.T., and Gee, C. G. (2008). Accumulating disadvantage over the life course: Evidence from a longitudinal study investigating the relationship between educational advantage in youth and health in the middle age. *Research on Aging, 30*(2), 169-199.

Walter, H. (2001). School-based prevention of problem behaviors. *Child and Adolescent Psychiatric Clinics North America, 10,* 117-127, ix.

Wang, C. C., Morrel-Samuels, S., Hutchison, P. M., Bell, L., & Pestronk, R. M. (2004). Flint photovoice: Community building among youths, adults, and policymakers. *American Journal of Public Health, 94*(6), 911-913.

Wang, C. C. & Redwood-Jones, Y. A. (2001). Photovoice ethics: Perspectives from Flint photovoice. *Health Education & Behavior, 28*(5), 560-572.

Warren, J. R., Grodsky, E., & Lee, J. C. (2008). State high school exit examinations and postsecondary labor market outcomes. *Sociology of Education, 81,* 77-107.

Washington, H. A. (2006). *Medical apartheid: A dark history of medical experimentation on Black Americans from colonial times to present.* New York, NY: Doubleday.

Wasley, P. A., Fine, M., Gladden, M., Holland, S. P., King, N. E, Mosak, E., et al. (2000). Small schools great strides: A study of new small schools in Chicago. New York, NY: Bank Street College of Education.

Wehlage, G. G. & Rutter, R. A. Dropping out: How much do schools contribute to the problem? *Teachers College Record, 87*(3), 374-392.

Weis, L., & Fine, M. (2004). *Working method: Research and social justice*. New York: Routledge.

West, C. (1995). Foreword. In G. Crenshaw, N. Gotanda, G. Peller, & K. Thomas (Eds.), *Critical Race Theory: The Key Writings that Formed the Movement*. New York: The New Press. Wheelock, A., Bebell, D., & Haney, W. (2000). Student self-portraits as test-takers: Variations, contextual differences, and assumptions about motivation. *Teachers College Record.*

Western, B. (2006). *Punishment and inequality in America.* New York, NY: Russell Sage Foundation.

Wheaton, B. (1994). Sampling the stress universe. In WR. Avison & I. Gotblib (Eds.), *Stress and Mental health: Contemporary issues and prospects for the future* (pp. 77-114). New York, NY: Plenum Press.

Wheelock, A., Bebell, D., & Haney, W. (2000a). What can student drawings tell us about high-stakes testing in Massachusetts? *Teachers College Record* Available at: http://www.tcrecord.org/Content.asp?ContentID=10634

Wheelock, A., Bebell, D., & Haney, W. (2000b). Student self-portraits as test-takers: Variations, contextual differences, and assumptions about motivation. *Teachers College Record.* Available at: http://www.tcrecord.org/content.asp?ContentID=10635

Wilkinson, S. (1998a). Focus group methodology: A review. *International Journal of Social Research Methodology*, 1(3), 181-203

Wilkinson, S. (1998b). Focus groups in feminist research: Power, interaction, and the co-construction of meaning. *Women's Studies International Forum, 21*(1), pp. 111-125.

Wilkinson, S. (1998c). Focus groups in health research: Exploring meanings of health and illness. *Journal of Health Psychology, 3*(3), 329-348

Wilkinson, S. (1999). Focus groups: A feminist method. *Pyschology of Women Quarterly, 2*(2), 221-244.

Williams, D. R., Yu, Y., Jackson, J., & Anderson, N. B. (1997). Racial differences in physical and mental health: Socioeconomic status, stress, and discrimination. *Journal of Health Psychology, 2*, 335-351.

Williams, J. E. (1991). Modeling test anxiety, self concept and high school students' academic achievement. *Journal of Research and Development in Education, 25,* 51–57.

Willis, P. (1977). *Learning to labor: How working class kids get working class jobs.* New York, NY: Columbia University Press.

Wilson, W. J. (1996). *When work disappears: The world of the new urban poor.* New York: Alfred A. Knopf

Winkleby, M., Jatulis, D., Frank, E., & Fortmann, S. (1992). Socioeconomic status and health: How education, income, and occupation contribute to risk factors for cardiovascular disease. *American Journal of Public Health, 82*(6), 816-820.

Wishon, P. & Geringer, J. (2005). Struggle and moral purpose in American education 50 years after *Brown*. *Early Childhood Development and Care, 175*(3), 243-247.

Woods, E. (1995). *Reducing the dropout rate*. Portland, OR: NW Regional Educational Laboratory.

Woodson, C. (2000/1933). *The mis-education of the Negro.* Chicago, IL: African American Images.

World Health Organization. (1948). Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19-22 June, 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of the World Health Organization, no. 2, p. 100) and entered into force on 7 April 1948. Available at: http://www.who.int/about/definition/en/

World Health Organization Expert Committee on Comprehensive School Health Education and Promotion. (1997). Promoting health through schools: Report of a WHO expert committee on comprehensive school health education and promotion. *WHO Technical Report Series 870.* Geneva, Switzerland: World Health Organization.

World Health Organization. (2004). *The physical school environment: An essential component of a health-promoting school.* Geneva, Switzerland: World Health Organization. Available at: http://www.who.int/school_youth_health/media/en/physical_sch_environment.pdf

Wright, W. (1982). *The social logic of health.* Hanover, NH: Wesleyan University Press.

Yamada, T., Kendix, M., & Yamada, T. (1996). The impact of alcohol consumption and marijuana use on high school graduation. *Health Economics, 5*(1), 77-92.

Yosso, T. J. (2006). *Critical race counterstories along the Chicana/o educational pipeline* (3rd ed.) New York: Routledge.

Zachry, E. M. (1005). Getting my education: Teen mothers' experiences in school before and after motherhood. *Teachers College Record, 107*(12), 2566-2598.

Zhou, M. (1998). “Parachute kids" in Southern California: The educational experience of Chinese children in transnational families. *Educational Policy, 12*(6), 682-704.

Zimmerman, J. (2002). *Whose America: Culture wars in the public schools.* Cambridge, MA: Harvard University Press.