

The background is a complex, layered image. At the top, a wireframe map of the African continent is rendered in glowing golden lines. A man's silhouette is superimposed over the map, appearing to walk across it. In the upper right corner, a full moon is visible against a dark sky. The bottom portion of the image shows a close-up of cracked, dry earth. In the center of the cracks, there is a small pile of white and yellow pills, some of which are scattered around. The overall mood is one of struggle and resilience.

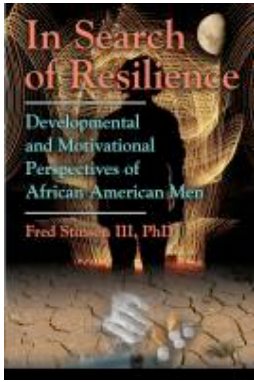
# In Search of Resilience

---

Developmental  
and Motivational  
Perspectives of  
African American Men

---

Fred Stinson III, PhD



*In Search of Resilience illuminates cognitive reconstructions, cultural challenges, and failed attempts of African American men who had become addicted to crack. This book presents the pathways to addiction and the unique challenges of sustained recovery. It demonstrates scientifically how resilient traits are common across individuals and how significant psychological relationships can influence your ability to transform your situations. Employing multidimensional fusion, this book expresses the manifestation of change.*

# **In Search Of Resilience: Developmental and Motivational Perspectives of African American Men**

**Order the complete book from**

**[Booklocker.com](http://www.booklocker.com)**

**<http://www.booklocker.com/p/books/8373.html?s=pdf>**

**or from your favorite neighborhood  
or online bookstore.**

**Enjoy your free excerpt below!**

# **IN SEARCH OF RESILIENCE**

Developmental and Motivational Perspectives  
of African American Men

Fred Stinson III

Copyright © 2015 Fred Stinson III

ISBN: 978-1-63490-943-3

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, recording or otherwise, without the prior written permission of the author.

Published by BookLocker.com, Inc., Bradenton, Florida, U.S.A.

Printed on acid-free paper.

BookLocker.com, Inc.  
2015

First Edition

## Chapter 1

### **Snapshot of People Who Use Crack Cocaine**

*God, Take my will & my life,  
Guide me in my recovery,  
Show me how to live.*  
-- Narcotic Anonymous 3rd Step Prayer

Illicit substance use disorders have been a national problem for several decades, and the problem continues to grow each year. Cocaine use in the United States (US) has been substantiated by longitudinal data from research conducted by the National Household Survey on Drug Abuse (NHSDA, 2002) and the Substance Abuse and Mental Health Services Administration (SAMHSA, 2012). In 1995, the National Institute on Drug Abuse (NIDA) estimated that 5.2 million people acknowledged using cocaine in the past year, and that 1.5 million were current cocaine users.

#### **WHO IS IMPACTED BY CRACK USE?**

Flynn, Joe, Broome, Simpson, and Brown (2003) estimated the prevalence of cocaine use had increased by 40% in one decade (NIDA, 2005). The NIDA (2008) estimated that, 35.9 million Americans 12 years of age and older reported using cocaine, 8.6 million reported having used crack cocaine, 2.1 million were current users of cocaine, and 610,000 were current users of crack cocaine. The data revealed that there were 906,000 new users of cocaine in 2007, and the vast majority of these new users were 18 years of age and older.

In 1998, African Americans comprised 9.7% of cocaine users (Brooks, 2008; NIDA, 1999; 2004; 2008; 2009). The percentage of African American cocaine users continued to rise in subsequent years. Most disturbingly, African Americans only accounted for 13% of the total US population; yet, they accounted for 62% of those incarcerated for alcohol and drug related crimes (Katz, 2000). Courtwright (1996) found that more than 787,000 African American men in their twenties were under criminal justice control for drugs. Drew (2014) found that treatment admissions for African Americans crack users were 64.9% for Metro Atlanta and 62.6 for the entire state of Georgia. The author asserted that 306,000 were behind bars, 351,000 were on probation, and 130,000 were on parole. Unfortunately, these numbers are strikingly different when compared to other races, especially with regard to the illicit use of crack.

Hinojosa (2009) illuminated the disproportion of drug use by race. Hinojosa found that compared with Caucasian Americans and Hispanic Americans, African American offenders comprised the majority of federal crack cocaine trafficking offenders (80.6%), Caucasian Americans comprised 10.2% of offenders, and Hispanics comprised 8.2% of offenders for the same crimes. Hispanic Americans were the majority offenders with regard to illicit powder cocaine (39.8%), followed by African Americans (30.2%), and Caucasian Americans (16.4%).

## **The Drug War**

Courtwright (1996) found that before the drug war in the mid-1980s more Caucasian Americans were arrested than African Americans. By 1990, African Americans were arrested more than twice as often as Caucasian Americans. From 1990

through 1995, Courtwright found African American drug arrest rates per 100,000 were five times that of Caucasian Americans. Courtwright cited that because of bias drug laws and sentencing that one of every three black American men in their twenties was in prison, on probation, or on parole. He cited that this is often considered the prime age for marriage and taking on responsibility.

Courtwright (1996) found that many African Americans were arrested for possession and sale of cocaine. The widespread use of cocaine was a large-scale social problem in African American communities. According to Courtwright African American residents of Georgia were 16 times more likely to be arrested for cocaine possession than Caucasian Americans. African Americans were 21 times more likely to be arrested for cocaine sales than Caucasian Americans. The author also reported that between 1991 and 1994, blacks made up from 18 to 38 percent of cocaine users. This arrest-rate disparity reflects the magnitude of cocaine related problems within black communities. The implication was that many African Americans had chosen to smoke the 'cheaper' type of cocaine, commonly referred to as crack cocaine (Chilcoat & Schutz, 1995).

## **Crack Cocaine**

Crack cocaine (or simply 'crack') is a stimulant, and it provides a powerful euphoria compared to the more 'expensive' powder cocaine (SAMHSA, 2002; 2003). Crack cocaine is highly addictive. The drug stimulates brain regions causing users to obsessively and compulsively seek out the drug at any cost (Lu, Taylor, & Riley, 2001). As a result of crack properties, criminality and laws associated with crack cocaine use are stiff causing many African American men to

become marginalized and criminalized when compared to other ethnic groups (Chilcoat & Schutz, 1995).

As the crack cocaine epidemic grew, researchers began to examine new cultural technologies to improve treatment and post-treatment outcomes (Chilcoat & Schutz, 1995; Gaines, 1997; Lu, Taylor, & Riley, 2001; Wallace, 1990). However, treatment for crack cocaine users is limited, especially when compared to the treatments available for alcohol and opioid-using populations (Chilcoat & Schutz, 1995; Brooks, 2008; Siegal, Li, Rapp, & Saha, 2001).

### **Supreme Court Ruling**

While both forms of crack and powder cocaine appear to be chemically identical, there are punishment disparities for using, producing, selling, and being charged with possession of the different types (U.S. Supreme Court, 2007). The case *Kimbrough v. United States* (2007) substantiated this viewpoint. The court ruled if a person is caught with more than five grams of crack cocaine he or she could receive a mandatory minimum sentence of five years in prison. In contrast, possession of an equal amount of powder cocaine did not carry a mandatory minimum sentence.

Courtwright (1996) argued that crack cocaine was primarily used by people from a lower socioeconomic status (SES). Conversely, powder cocaine was often used by people from a higher SES (U.S. Drug Enforcement Administration (DEA), 2006; U.S. Supreme Court, 2007). Unfortunately, Courtwright and others found that SES places crack users at a higher risk of being exposed to criminal charges (Bowser & Word, 1993; Cohen & Stahler 1998). Compared to other substance use groups, the criminal history of crack has deleteriously affected African American of lower SES ability to



recover from crack cocaine use (Agar, 2003; Bowser & Word, 1993; Cohen & Stahler 1998; Falck, Wang, & Carlson, 2007).

The research on African Americans and crack supports the magnitude of this problem (Brooks, 2008; Pena, Bland, Shervington, Rice, & Foulks; 2000; Ross, Timpson, Williams, & Bowen, 2007). Simpson (2004) argued the many aspects of US systems undermine African American males through institutionalized exclusionary practices.

### **The Legal System**

The legal system, for example, utilizes institutionalized and incarceration-based treatment to deal with the country's crack cocaine problems. Unfortunately, this creates situations where a significant number of African American men who used crack to lose hope and sink into despair (Agar, 2003; Bowser & Word, 1993; Cohen & Stahler 1998; Falck, Wang, & Carlson, 2007; Gaines, 1997). The results are absentee fathers, less-productive members of society, and burdens to the taxpayers (Brooks, 2008A; Gaines, 1997; Liddle, Jackson-Gilfort, & Marvel, 2006).

### **Self-fulfilling Prophecy**

Some have argued that the crack problems of African American men were related to self-fulfilling prophecy, stereotype threats, or pure selfishness (Adams, 2004; Gaines, 1997; Simpson, 2004). Regardless of the underpinning to such behaviors, this volume has found evidence in the literature that contrast prevailing thoughts. Hence, this study sought to investigate resiliency among this group of men. This research is important because it identifies how vulnerable men within this population have remarkably demonstrated the capacity to

rebound, transformed, and resourceful despite the odds against them (Maluccio, 2002).

### **Crack Addiction and Relapse**

The crack cocaine problem appears systemic, and many practitioners and researchers support that addiction, such as crack cocaine, is a disease (Beck, Wright, Newman, & Liese, 1993; Finlay, 2000; Inaba & Cohen, 2004; Nunes-Dinis & Barth, 1993). However, established treatment protocols are not working for many African American men crack users. Studies show that many health professionals continue to employ various methods such as the stages of change (SOC), (Prochaska et al., 1994), cognitive behavioral therapy (Beck et al., 1993), and self-efficacy (Bandura, 1977, 1997) to influence treatment outcomes.

Interestingly, few of the studies explain why many African American crack users prematurely terminate treatment and exhibit high numbers of relapses (Edwards et al. 2006; Velasquez, von Sternberg, Dodrill, Kan, & Parsons, 2005). The reasons for such high 'dropout' rates and relapses are unclear; yet, some men have successfully made the transition.

Without further investigation, the proverbial 12-step adage that those who refuse to study the past will be forced to repeat it in the future (Dubois, 1945; Narcotic Anonymous, 2003) is particularly noteworthy. In essence, if treatment is not effective then many African American men crack users will continue on the same path of degradation and despair.

### **Long-Term Effects of Crack Use**

Crack use is associated with long-term negative effects for substance users (NIDA 2004; 2008; SAMHSA, 2001, 2008).

Nunes-Dinis and Barth (1993) argued that crack and powder cocaine are the fifth epidemic in history. The literature substantiates their assertion. For example, Braun, Murray, Hannan, Sidney, and Le's (1996) cross-sectional results of clinical data of the coronary artery risk development in young adults (CARDIA) study from 1987-1992 found that compared to overall Caucasian American declines, African American cocaine use remained stable. They found that African American men represented the highest proportions of cocaine users, the highest number of unemployed, the most with single marital status, and lowest level of education. In 1987, African American men between 27-32 years of age had the highest prevalence for cocaine use and were 95% more likely to be a cocaine user than Caucasian Americans. These findings express the realizations and social disparities of cocaine use.

### **Treatment Models**

Nelson and Steele (2006) found that current drug prevention methods focused on traditional treatment modes of delivery such as (a) in-patient treatment, (b) out-patient full-day, and halfway treatment, (c) residential treatment, (d) outpatient treatment, and (e) individual psychotherapeutic treatment approaches. These treatment methods have shown questionable effectiveness at treating and preventing substance use among the general population (Marlatt, Blume, & Parks, 2001; Rawson et al., 1995). Wallace (1990) argued that some traditional methods are even less effective for African American crack cocaine users. Thus the reality is if treatment fails the individual, then social disparities and criminality will continue to increase in marginalized groups.

## Recidivism

In prisons all over the nation, statistics show disparities of minority substance users (Lu et al., 2001; SAMHSA, 2001, 2008). The blame for unsuccessful treatment and high relapse rates for African American men shifted back and forth in the literature (Brooks, 2008; Falck, Wang, & Carlson, 2007; Gaines, 1997). Regardless of who is the blame, the primary factors for recidivism remain fixed. They are home environment, cultural perceptions, lack of employment, lack of father figures, low motivation, and poverty (Chilcoat & Schutz, 1995; Brooks, 2008; Siegal, Li, Rapp, & Saha, 2001; Wallace 1989).

A poignant point however is that drug policy and treatment providers have not consistently addressed prevalent cultural issues related to drug use. In addition, shareholders have not shown how certain cultural variables such as development, motivation, coping style, attitude, and beliefs may interact with ineffective delivery systems and substance use among African Americans (Courtwright, 1996; Hawkins, Catalano, & Miller, 1992; Johnson, 1980).

Past conditions have not fully taken into account the complexities of individuals within ethnic minority groups (Bowser & Word, 1993; Brooks, 2008; Gaines, 1997; Liddle, Jackson-Gilfort, & Marvel, 2006). Thus, imposed patterns and practice of an oppressive nature continue to appear for many groups of substance abuse users (Birzer & Smith-Mahdi, 2006; Cohen & Stahler, 1998; Harrell 2000; Liddle, Jackson-Gilfort, & Marvel, 2006; Whaley, 2001). In support of change, many researchers have demonstrated that protective factors can improve treatment outcomes.

## **Self-Efficacy**

Substantial data supports that self-efficacy and protective factors influence drug use and recovery outcomes (Catalano et al. 1993; Glantz & Johnston, 1999; Hawkins, Catalano, & Miller, 1992; Wallace 1989). These protective factors include family support, education, peer groups, healthy leisure activities, and adjusted attitudes about drug use (Brooks, 2008; Hawkins, Graham, Williams, & Zahn, 2009; SAMHSA, 2004).

Researchers have also found that developmental and motivational factors deter substance use and promote healthy lifestyles for some individuals (Breda & Heflinger, 2004; Kaplan; 1999; SAMHSA, 2004). Surprisingly, many studies on developmental and motivational factors did not take into account the impact of personal life experiences (Adams, 2004; Baltes, 1987; Branje, Van Lieshout, Gerris, 2007; Wallace, 1989). The conclusion from many studies was resilience factors stem from an individual's exposure and reaction to certain biopsychosocial conditions.

## **Recovery Factors**

Morgenstern, Blanchard, Morgan, Labouvie, and Hayaki (2001) found key dimensions to how some African American men cope with alcohol and other drugs (AOD) use. For instance, they found in a study of 252 AOD participants (African American N = 100, cocaine users N = 91) that demographic predictors such as education, marital status, employment, income, and problem severity significantly influenced treatment outcomes.

Other key predictors of positive outcomes were treatment settings, specific treatment effects, treatment attendance, and therapeutic alliance. Morgenstern et al. (2001) also found that

science-based interventions did not prove superior when compared to 12-step or traditional approaches. Prochaska, DiClemente, and Norcross (1992; 1994) found that “consciousness raising” (p. 1109) with various addictions was a significant change agent. To date, consciousness raising outcome data for African American crack users is non-existent substantiating the importance of this study.

### **Failed Treatment and Systems**

It is argued that American society and its treatment providers have failed many African American men by virtue of not recognizing the importance of key experiences such as social growth and cultural identity. In support of this argument, Fisher’s (2001) ecological modernization theory (i.e., role of the state, the economy, science, and cultural environment) provides insight into the problems. Fisher argued that revising current treatment knowledge to service cultural minorities, are feasible but not widely utilized. He asserted that the most useful product is not always the one automatically chosen by self-regulating systems and treatment facilities. Fisher’s theory points out the gross injustices produced within the capitalist system that marginalizes various groups.

Beyond the synthesis of ecological modernization, Brooks (2008) discovered many African American crack users in Georgia exhibited resilience traits. He concluded that religiosity was the catalyst for positive change. Brooks found religious experiences to be significant to the development of prosocial coping skills. His list of activities included men’s support groups, testimonials, church attendance, and practicing Christian values and morals.

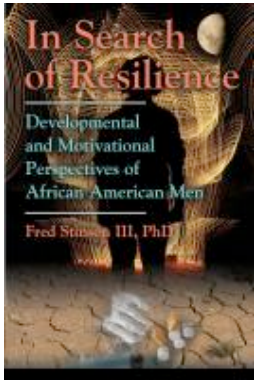
Paralleling to Brooks's findings, an African American resident of Georgia with 19 years of abstinence from crack use reported that addiction is an internal and external battle. He reported that the resolution to life issues led many crack addicts to, "a new way to live" (A. Marshall, personal communication, June 20, 2009). He cited that reducing recidivism is not entirely about religiosity, but a multitude of other influences such as the capacity to change, family systems, peers, and social resources. The literature of Narcotic Anonymous (2003) and other 12-step models echo the same conclusion (Vaillant, 2005; Van Horn & Frank, 1998). These activities deserve further investigation because African American lives matter.

### **Summary**

The people who use crack and the disparities that are associated with its use are real. Likewise, people who do not abuse substances and those who have used but became resilient to substance use disorders (SUDs) are real and live among us. The assumption is that resilience is a phenomenon and one of the many factors of recovery (Block & Block, 2006; Bonanno, et al., 2007; Cicchetti & Curtis, 2007; Luthar, Doernberger, & Zigler, 1993; Masten, 2007; Siega et al., 2001). A hypothesis would be what internal and external processes produce resilience and how do they relate to resilient African American men who used crack cocaine. One assumption is that resilience is actually a manifestation of developmental and motivational experiences (Cicchetti & Curtis, 2007; Luthar, Doernberger, & Zigler, 1993; Masten, 2007). Moreover, if resilience is part of sustained recovery, then stakeholders in the treatment community need to explore cultural-specific

practices that may improve future outcomes for substance users.





*In Search of Resilience illuminates cognitive reconstructions, cultural challenges, and failed attempts of African American men who had become addicted to crack. This book presents the pathways to addiction and the unique challenges of sustained recovery. It demonstrates scientifically how resilient traits are common across individuals and how significant psychological relationships can influence your ability to transform your situations. Employing multidimensional fusion, this book expresses the manifestation of change.*

# **In Search Of Resilience: Developmental and Motivational Perspectives of African American Men**

**Order the complete book from**

**[Booklocker.com](http://www.booklocker.com)**

**<http://www.booklocker.com/p/books/8373.html?s=pdf>**

**or from your favorite neighborhood  
or online bookstore.**