A REPORT ON THE QUALITY OF LIFE OF BLACK GIRLS IN COLUMBUS, OHIO
The Commission on Black Girls was charged with understanding the quality of life of Black girls in Central Ohio in order to share their story with the entire community.

Black girls will thrive in Central Ohio!
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July 2020
INTRODUCTORY LETTERS
It is with great pleasure that I bring you this inaugural report of The Commission on Black Girls. This work has been my personal passion, but it has by no means been a solo endeavor. The Commission on Black Girls, as chartered by Columbus City Council in the Summer of 2018, has initially been composed of a stellar group of 25 accomplished professionals whose expertise touches everyone in our community, including Black girls.

I am honored that The Commission members willingly and graciously donated their time and wisdom. They made valuable contributions to the need for the Columbus and Central Ohio community to begin to gain an appreciation of the quality of life of an extremely vulnerable, yet extraordinarily promising, segment of our society, who, from conception, are cloaked in the race and gender issues that continue to challenge our humanity.

The initial task embarked on by The Commission was to solicit information from throughout a society still seeking to embrace the diversity that is the essence of being a Black girl. The role of The Commission in this capacity was not to verify, refute, or statistically aggregate the data compiled, but rather to listen, understand, and absorb the input received in order to develop recommendations to improve the quality of life for Black girls.

The culmination of The Commission’s inquiry into the question of “What is the quality of life of Black girls?” is an in-depth snapshot that can perhaps be summed up in a single word: the quality of life of a Black girl is “complicated.” This phenomenon can best be explained by the stories behind the statistics.

Black females have historically joined and increasingly led the ranks of accomplished girls and women in all aspects of society, an astounding feat in light of the systemic obstacles facing them. Using as a comparative group her peers who are not encumbered with both race and gender inequities, a Black girl is more likely to be born into poverty, if she does not first succumb to infant mortality. She is more likely to be raised in a single-parent, female-headed household in a lower-income neighborhood. This can perpetuate the trajectory of relative economic hardship and may result in some period of housing instability such as eviction or homelessness, or food insecurity leading to hunger or obesity. The lack of reproductive health education for Black girls often lends itself to increased risk for teen-age pregnancy. She is statistically more likely to remain caught in this cycle without social change interventions.

These types of stressors are among the contributors to educational achievement disparities Black girls as a group are more likely to encounter versus their non-Black peers. A Black girl’s academic accomplishments can also be impacted by the possibility that she has not had the same out-of-school preparation or support and is more harshly disciplined by school authorities as well as the law enforcement and juvenile justice systems. A Black girl’s physical, emotional, and mental health are
more likely to be neglected or ineffectively treated in the context of this plethora of possible traumas encountered by her and her family members and others in her neighborhood.

Even Black girls raised in more middle class or affluent circumstances face real or perceived scrutiny, in ways such as being viewed as not being smart enough or being too smart in the explicitly or implicitly biased eyes of other youth or adults. Positive messages and personas of success that bear resemblance to them and their situations are scarcer than the negative stereotypical images that pervade youth-oriented multimedia. Affirming multicultural content is often lacking in their schools and social environments. The insecurities that can become prevalent among all girls throughout their maturation are exacerbated by the intersectionality of race, sexism, and gender identity.

However, in spite of these complexities, Black girls in our community demonstrate the type of extraordinary resilience for which Black women have become known in the face of historical and contemporary challenges. There is an abundance of stellar examples of Black girls overcoming barriers and making incredible strides in all aspects of our society. Black girls report drawing their strength from their mothers, their faith, positive role models, and each other. Black girls boldly express their aspirations for a better quality of life, ranging from lofty career goals to the mere desire to improve the daily situations encountered by their families and themselves.

The quality of life for a Black girl is so complicated, yet so promising. It is this stunning dichotomy that continues to drive the work of The Commission on Black Girls. As we make strides to create a more inclusive environment for Black females, we must seek to understand and address racism, sexism, and the impact of the social determinants of health (including economic stability, housing, education, safety, social connections, and food and nutrition).

The community must encourage, affirm and support our Black girls. Our community can never reach its greatness if all of our members cannot meet their full potential. Moving forward, I envision that the work of The Commission on Black Girls must involve sharing their story with the entire community, along with the resultant strategies and recommendations. The Commission will utilize these strategies and recommendations to guide the work, which will include the following overarching recommendation:

I recommend that The Commission on Black Girls evolve from its current two-year temporary status into a permanent entity. The Commission will focus on engaging the community in deliberating and implementing the strategies and recommendations proposed in this report from the inaugural Commission. The input collected and presented in this report will serve as the basis for launching the establishment of the permanent Commission as a data-driven center of excellence to positively transform quality of life outcomes for Black girls in Columbus and Central Ohio.

Priscilla R. Tyson  
Columbus City Council
The greatest asset of any city is its people. Columbus is in a time of unprecedented growth, with record low unemployment and the fastest growing economy in the Midwest. But while two-thirds of our residents are doing very well, the remaining third are struggling to make ends meet. Our greatest asset is our people, and we cannot fully reach our potential as America’s Opportunity City until we first become America’s Equal Opportunity City.

The Commission on Black Girls is tasked with bringing awareness to the unique needs and challenges facing Black girls in Columbus and Central Ohio, and ultimately building partnerships, recommending solutions and advocating to create change in this community. I commend Columbus City Councilmember Priscilla R. Tyson for her vision in assembling this Commission and the Commissioners for their work. These recommendations coincide with the goals of the Columbus Women’s Commission to dismantle barriers to economic success for women. Both groups ultimately recognize and embrace the fundamental belief that women and girls must have opportunities to succeed.

This initial report of The Commission on Black Girls underscores the work this community must do to enhance and improve the quality of life for Black girls in our community. Our collective quality of life is improved when we come together to remove obstacles and eliminate barriers that exist for anyone.

Sincerely,

Andrew J. Ginther
Mayor of the City of Columbus
When I think about my journey, I think of the phenomenal women that I encountered over the years. I see my mother, grandmother, and countless others who served as community stewards and leaders.

Whether public servants, teachers or women in church and in the community, I had a village of women that pushed me to reach beyond myself and to strive for excellence. For that reason, it is imperative that our Black girls have a village just like our Black boys.

In order for us to move the needle and make Columbus a more equitable city, we must highlight the areas of need for our Black girls. Black girls of promise grow into Black women of virtue. Those same Black women will ultimately mentor and support young Black boys and girls who will also grow into the men and women leaders of the future.

I fully support the work of The Commission on Black Girls and look forward to future collaboration between The Commission and My Brother’s Keeper. Both of these initiatives establish a framework of success that keeps Columbus moving forward, benefiting each of our residents. Ultimately, we cannot support our Black boys and ignore our Black girls.

On behalf of my colleagues, I want to thank Councilmember Priscilla R. Tyson for her leadership in bringing this issue to the forefront. I also want to thank each of the Commissioners for their commitment to improving the quality of life for Black girls. These problems were not created overnight, but together we can ensure every Black girl has the opportunity to succeed.

Sincerely,

Shannon G. Hardin
Columbus City Council President
A MESSAGE FROM THE COMMISSION ON BLACK GIRLS CO-CHAIR
FREDERIC BERTLEY, PH.D.

The universe does not make mistakes. The incredulous times in which we find ourselves in America, indeed around the world, have gripped us and caught our attention in ways unseen and unexperienced in almost a century. While there are numerous characters to this contemporary play, two very prominent realities are the Black Lives Matter and the Me Too movements. Both of these civil rights causes are both timely and necessary to uplift our station to the best of behaviors for treatment of all of our citizens.

Well, a clear and obvious intersection of the important Black Lives Matter and Me Too movements is our Black girls. Listening to, understanding, supporting, and providing opportunities for Black girls is a critical component not just for Black and Brown communities, but is necessary to ensure the American Dream for all of our communities. Black girls become Black girlfriends, wives, mothers, aunts, grandmothers, and ultimately, the matriarchs of the Black community; in fact, they become, like the rest of female Americans, the matriarchs of the American community and thus play a significant role in the amelioration of our communities.

Such a preface dictates the necessity of a mini-movement to learn more about Black girls’ wants, needs, and barriers to success, and create an ecosystem of care and resources to ensure their capacity to achieve what poet Maya Angelou has eloquently penned, the capacity to “Still Rise.” The Commission on Black Girls, established and directed by Columbus City Councilmember Priscilla R. Tyson, is that “mini-movement.” Councilmember Tyson’s vision and stewardship of this Commission’s work are unmatched, and remain a beacon for our great City of Columbus and State of Ohio. Under Councilmember Tyson’s prolific leadership, this Commission, and its work, represent a potential national model for best practices and outcomes around how to research the condition of our brave, resilient, and capable Black girls.

It is a pleasure to humbly serve as Co-Chair of this timely, yet forward-thinking, Commission on Black Girls, and be part of historically relevant great work. I look forward to the dissemination and implementation of the many important learnings of The Commission. It will unquestionably positively contribute to the Black Lives Matter and Me Too movements and elevate all of society. After all, it is The Columbus Way.

Frederic Bertley, Ph.D.
President and CEO
Center of Science and Industry (COSI)
A MESSAGE FROM THE COMMISSION ON BLACK GIRLS CO-CHAIR
FRAN FRAZIER

It is an exciting process to serve as Co-chair of the City of Columbus Commission on Black Girls. Our girls need space to tell their stories and share their lived experiences. The work of The Commission has given them that space.

Historically, the voices of Black women and Black girls have been ignored, disregarded, muted, forgotten, or silenced. When our voices were heard, the value of our contributions depended on who was listening and regarded what we said as important.

What this report offers to the residents of our city is not only the voices of over 400 Black girls in Columbus. We now have direction on how to increase the quality of their lives and the lives of their families. This is the depth of what this work offers to our city.

The dedication of the members of The Commission shows the commitment of leaders from many fields of service who have said “Yes!” to the call of making the lives of our girls meaningful and significant.

Black girls from Columbus and Central Ohio have said they want the people who can make the difference in their lives to notice them. The mission and vision of The Commission on Black Girls is doing just that.

I look forward to the response from our community; people who will join us as we create a new space for Black girls to live full and productive lives.

Fran Frazier, M.A.
Founder
Rise Sister Rise Network
ACKNOWLEDGEMENTS
COMMISSION MEMBERS

The Commission on Black Girls consisted of the following community leaders from various disciplines who came together to assess factors that impact the quality of life for Black girls in Columbus and Central Ohio:

Frederic Bertley, Ph.D., Center of Science and Industry (COSI), Commission Co-Chair
Fran Frazier, Rise Sister Rise, Commission Co-Chair

Reverend Timothy Ahrens, First Congregational Church
Sergeant Lindsey Alli, Columbus Division of Police
Linda Brown, The Columbus Chapter of The Links, Incorporated
Crystal Causey, National Coalition of 100 Black Women Inc., Central Ohio Chapter
Clytemnestra Clarke, First Church of God
LaShanda Coleman, National Pan-Hellenic Council of Columbus
Michael Corey, J.D., Human Service Chamber of Franklin County
Lisa Courtice, Ph.D., United Way of Central Ohio
Mary Cusick, Community Leader
Kevin Dixon, Ph.D., Franklin County ADAMH Board
Honorable Elizabeth Gill, Juvenile and Domestic Relations Division, Franklin County Court of Common Pleas

Alesia Gillison, Columbus City Schools
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Tosha Safford, The Center for Healthy Families
Wendy Smooth, Ph.D., The Ohio State University
Charles Spinning, Franklin County Children Services
Ben Tyson, Easton, Steiner + Associates *
Jennifer Peterson, Easton, Steiner + Associates
Paiden Williams, Rise Sister Rise, Black Girls Think Tank

*Sdenotes former member of The Commission on Black Girls

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Research Team: Lathania Butler, Ph.D., and Rebecca Zwickl, Thoughtwell
Alexis Little and Tiffany Steele, The Ohio State University
The Commission on Black Girls would like to thank the following programs and organizations for their contributions to this work:

Academy for Urban Scholars
Big Lots Behavioral Health Services - Nationwide Children’s Hospital
Black Girls Think Tank
Brown Girls Mentoring
Center of Science and Industry (COSI)
Citywide Training and Development, City of Columbus
Columbus Area Integrated Health Services, Inc.
Columbus City Schools
Columbus School for Girls
Columbus State Community College
Community Mediation Services of Central Ohio
Community Shelter Board
Delta Sigma Theta Sorority, Incorporated, Columbus (OH) Alumnae Chapter
Directions for Youth and Families
Eryn PINK
Franklin County Children Services
Franklin County Court of Common Pleas, Division of Domestic Relations and Juvenile Branch
HandsOn Central Ohio
Kaleidoscope Youth Center
Malaika Mentoring Program, Franklin County Children Services
National Youth Advocate Program
PrimaryOne Health
Radio One
Rise Sister Rise
Ruling Our eXperiences (ROX)
Sling Shot Media Group, LLC
Star House
The Center for Healthy Families
The Ohio State University, Department of Teaching and Learning
The Ohio State University, Department of Women’s Gender and Sexuality Studies
The Olive Tree Foundation
Zeta Phi Beta Sorority, Inc., Gamma Zeta Zeta Chapter

A heartfelt thank you to the Black girls and young women who live their stories every day, and to the individuals and organizations that assisted them in sharing their stories with The Commission on Black Girls.

One of the traditions being implemented by The Commission on Black Girls is to use our events and social spaces to regularly showcase Black girls and women who embody the essence of our work. I am pleased to personally acknowledge one such individual, Columbus City Council Legislative Aide Nicole Harper, for lending her energy and intelligence to the inaugural work of The Commission.

~ Columbus City Councilmember Priscilla R. Tyson

The Commission on Black Girls report design courtesy of COSI
INTRODUCTION

“School has many programs, yet most programs have nothing to do with self-care, acceptance, or facing everyday problems and challenges”

“Create programs for girls who don’t have the confidence to be successful”

“Be there for me when I need someone to talk to”

“If I would’ve known there were Black Girl Scouts, perhaps I could’ve made better choices”

“There aren’t many options out there for single moms”

“Sometimes I want to play sports because it keeps me entertained”

“The lack of support and advocacy, options for care”

“We need some grocery stores instead of corner stores that are more in reach”

“My biggest challenge I face is childcare, because I have no way to go to school”

“Focus on graduation so I can have my own place”

“Like studying the Underground Railroad, kids (usually white), would turn and look at me, but I was never picked on for it”

“I have never done anything like this; I haven’t been introduced to any programs or support systems for Black women in particular”

“Sexism and the color of my skin”

“We live up to everyone’s opinions, we always live for others and not ourselves”

“I don’t need a counselor because I tell my mom everything”

“Finding pride in being Black; we are always learning about white people in school”

“I have had a lot of experiences that I’ve gone through that I would not like to write on paper”

“I try to have self confidence and not let people get to me”

Quotes from Black girls
How can our community work together to assess factors that impact the quality of life for Black girls in Columbus?

How does a city embark on a quest to understand concerns about the complicated social complexities of inequities, racism, sexism, and implicit biases that may disproportionately shape the trajectory of Black girls’ lives and their ability to grow uninterrupted, fully embraced in all their greatness that’s yet to be discovered?

These are the types of questions that shaped the foundation on which the 25-member Commission on Black Girls sought to build a community-wide response.

In July 2018, Columbus City Council adopted resolution 0208-2018 to create a Commission on Black Girls, the result of the vision of Councilmember Priscilla R. Tyson. The 25-member Commission was initially authorized by Columbus City Council to exist through December 31, 2020, unless prior to that date, Council enacts legislation to make The Commission permanent.

The Commission was chartered to initially participate in fact-finding and education to learn more about the current quality of life for Black girls in Columbus and Central Ohio. As such, the role of The Commission during its first year was to understand and reflect on information shared by subject matter experts, key community stakeholders, and Black girls themselves, while at this time not significantly adding to or statistically aggregating the data.

This report contains insights based on what was learned, along with strategies and recommendations to guide the continuous work to support Black girls.
As The Commission on Black Girls began to explore the meaning of Quality of Life (QOL), it was important to acknowledge subjectivity in the QOL concept and its meaning.

The Commission sought to define the parameters by which the lens of understanding the Quality of Life should focus, based on considering responses, inquiries, and perceptions garnered from the community, service providers, parents, stakeholders, and Black girls ages 11-22.

“Quality of Life” is an overarching term for the quality of various domains in life. It is a standard level of the expectations for a good life, for an individual or society. These expectations are guided by the values, goals, and socio-cultural context in which an individual lives. QOL is a subjective, multidimensional concept that defines a standard for emotional, physical, material, and social wellbeing [1].

Research purports that Quality of Life can be understood by the degree of consensus between personal values, life conditions, and personal satisfaction [2]. The Encyclopedia Britannica [3] defines QOL as a subjective, inherently ambiguous concept in which an individual is healthy, comfortable, and able to participate in and enjoy life events. QOL can refer to an individual’s experience or individuals’ collective environments.

We can find QOL assessments, directives, and guidelines related to chronic health conditions, work environments, neighborhood conditions, and economics. However, Quality of Life as an independent concept is not easily defined, nor is it one that equates to an absolute of a fact. For example, does a family that lives in an affluent suburb inherently have a higher Quality of Life than a single-head-of-household family living in a middle-class neighborhood? Or should there only be some threshold that society determines is unacceptable, such as homelessness?

What we do know is that QOL is what connects our inner needs, wants, and desires to our ability to have access, experience equity, and share in the equality of life experiences within a self-defined framework of culture and ethnic relevancy. A literature search for the term “Quality of Life” yields an abundance of scholarly material that will generically refer to the term QOL as an individual’s “well-being.”

Other terms that could be used to decipher scholarly writings and research studies related to the quality of life for Black girls are disparities, equity, equality, race, ethnicity, education, marginalized, social determinants, youth development, mentoring, behavioral health, safety, and community support. Additionally, where the measure of exploring QOL was based on an individual’s ability to self-report happiness or some defined measure of quality, these narratives were sometimes absent of direct input from Black girls which, even if gathered, may have had biases not uncommon with self-reported data.
Black women are resilient. In the face of historical and contemporary challenges, Black women have made great strides in educational attainment and intergenerational income mobility. Black women continue to be a stabilizing, consistent force in their households and communities. Even when the challenges are great, Black women continue to strive to beat the odds.

However, the presence of the Black woman’s resilience should not lead observers to ignore the long-standing systemic inequities that continue to present significant challenges in the lives of Black women vs. their non-Black peers, even from their childhoods. Racial disparities persist in nearly all socioeconomic indicators, including income, wealth, education, and health.

Policy and community action meant to improve the quality of life of Black women are important to the continued development of Columbus. If policymakers and community leaders intend on shifting the experience of Black families, it is critical that they start with the experience of the Black woman. The prevalence of female-headed households within the Black community makes this especially true. About 60% of Black children in Columbus live in single mother households [4]. Intervening in the experiences of Black women while they are still girls may be the most effective way of improving their future outcomes.

Before policymakers and community leaders develop intervention strategies, it was important for them to deepen their understanding of...
the strengths of Columbus’ Black girls, as well as the challenges they face. If these issues are effectively addressed, then the assets Black girls can contribute can be harnessed to generate even better socioeconomic outcomes for themselves and society.

The Commission on Black Girls (COBG) process envisioned by Columbus City Councilmember Priscilla R. Tyson is meant to contribute to that deepening of understanding. Specifically, The Commission began its work by asking, “What is the quality of life of Black girls in our city?”

Although quality of life can feel like an all-encompassing concept, this report focuses on three fundamental elements in the life of a Black girl: her academic experience, the economic context in which she lives, and support for her mental health and emotional wellbeing. Quality of life indicators were provided by local subject matter experts who spoke to The Commission during its monthly meetings. Girls from all over the city were engaged with the COBG through listening sessions, focus groups, and a survey to provide information on their lives and their perceptions of living and thriving as Black girls in Columbus.

This report is the first known project of its kind in which a city is focused on understanding the current quality of life for Black girls.
The inaugural Commission on Black Girls used the following methods to begin its investigation of the quality of life for Black girls in Columbus and Central Ohio:

**Review of Prior Research**
Both quantitative and qualitative data from previous research were included in the formulation and exploration of the research questions. Secondary data gathered from sources like the U.S. Census Bureau and the Centers for Disease Control and Prevention allowed the research team to provide perspective reflecting the Black girl's experience.

**Survey**
A survey was distributed online via social media and direct request of the research team and various community stakeholders. It was completed by 422 Black girls ages 11-22 from all over the city of Columbus. The survey was designed to assess the girls' quality of life from their perspectives. Specifically, it asked questions about their academic experience, economic context, and support for emotional well-being.

**Listening Sessions**
Listening sessions were held at Columbus Public Health to hear from parents, guardians, caregivers, service providers, and Black girls ages 11-22 residing in the city of Columbus. The groups were asked three questions related to experiences, resources, and strategies that The Commission can engage in to improve quality of life outcomes.

**Focus Groups**
Focus groups were split by age group consisting of 11-14, 15-18, or 19-22 year old Black girls. In total, 29 girls and young women participated. The focus groups were held at locations that were convenient for the participants, such as schools or local community centers. Participants were asked about their academic involvement, household context, and support network.

**Monthly Learning Meetings**
The Commission met monthly to hear from local subject matter experts (SMEs) in the field who responded to questions about the quality of life (QOL) for Black girls ages 11-22, and what The Commission can do to improve, support, or enhance the QOL for Black girls. Summaries of the SMEs presentations can be found later in this report and are referenced in this section only as needed for context.
*SURVEY LIMITATIONS*

The following should be noted regarding the survey process:

- The survey respondents skewed toward the 15-17 year olds. Because it is difficult to easily survey young people, the team reached out to schools for assistance in facilitating survey-taking during school hours. Although this helped the research team achieve the number of survey responses needed, it means the age distribution from 11-22 is not the same as the age distribution in the general population of Black girls in Columbus.

- The survey was very long because there were many topic areas that were important to explore. As a result, there was a risk of girls dropping off and not completing the survey. That was apparent in the survey results; although 422 girls completed the survey, more than 200 others started the survey and did not complete it, so their responses were not utilized.

- Many of the topic areas were emotional and/or sensitive. This level of inquiry was necessary in order to assess important components of quality of life, such as sexual/reproductive health and trauma, that reportedly disproportionately and negatively affect Black girls. However, some girls may have felt uncomfortable and either skipped responding or chose not to complete the survey as a result of the questions asked.

- Questions related to gender identity and sexual orientation were worded based on recommended best practice literature. However, after the survey was released, some subject matter experts in the Columbus LGBTQ+ community suggested there may have been more inclusive ways to ask these questions. The research team recommended that if this survey is replicated, questions related to family structure, sexual orientation, and gender identity be developed in conjunction with members of the LGBTQ+ community.

- It is not uncommon for self-reported data to result in under-reporting or over-reporting of the status, behaviors, feelings, and experiences of the respondents.
Black Girls Speak is a compilation of the voices of Black Girls. Their voices are reflected throughout the report, and represent their collective participation in the COBG survey, Listening Group, and Focus Groups.
SURVEY RESPONDENTS HIGHLIGHTS

Survey respondents ages 11-15

- 47% live with their mothers only
- 22% live with both parents
- 66% attend public schools
- 40% have GPAs of 3.1 or higher
- 26% participate in extracurricular activities every year
- 57% have some form of leadership experience
- 57.7% struggle with feelings of depression and anxiety
- 71.3% would like leadership roles in extracurricular activities or community groups
- 59.5% live with families who reside in rental homes or apartments

- 45.9% report being bullied at school
- 56.9% attend church
- 47.9% report discussing their mental health with a physician, nurse, counselor, or other mental health provider
- 49.7% have parents who have not been arrested

The top three responses to the question “What makes you happy?” were:

- 85.3% Music
- 79.7% Family
- 78% Friends
Survey respondents ages 16-22

34% live at home with parents
18% have children
23% have experienced homelessness
56% have a job
26% have had a job in the past
87% are in school
11% are pursuing a college degree
71.9% struggle with feelings of depression and anxiety
62.4% would like leadership roles in extracurricular activities or community groups
73.1% live with families that reside in rental homes or apartments

52.8% report being bullied at school
51.1% attend church
52.3% report discussing their mental health with a physician, nurse, counselor, or other mental health provider
37.9% have parents who have not been arrested

The top three responses to the question “What makes you happy?” were:
73.8% Music
73.3% Family
72.1% Friends

All survey respondents

70% have received detention, suspension, or expulsion from school

The respondents also varied in age, gender identity, and sexual orientation – 29% of the respondents were 11-14 years old; 57% were 15-17 years old, and 14% were 18-22 years old. Ten respondents identified as transgender. About 15% of respondents reported being bisexual and 3.3% of respondents identified as gay.
Survey responses were submitted by Black girls from all over the city of Columbus, with a higher representation from the urban core. Figure 1 maps the self-reported residential zip codes of respondents. Their household compositions varied – 49% lived only with their mothers; 21% lived with both their parents; 8% went between their mother’s house and their father’s house; 6% lived with their grandparents, and 4% lived only with their fathers. Other household arrangements included living in foster care, with another family member, or in a group home or shelter. A few of the older respondents headed their own households.
BUILDING ON PRIOR RESEARCH

Socioeconomic disparities are good motivators for intervention, but they do not provide a sufficient lens for a vision of the future. The American Psychological Association’s Task Force on the Resilience and Strength of Black Children and Adolescents suggests a shift toward a resilience framework that looks to place children “at promise” as opposed to focusing only on the ways that they are “at risk” [5]. They propose a portrait of resilience that encompasses critical mindedness, active engagement, flexibility, and communalism.

Critical mindedness refers to the perspectives young people use to facilitate critique of existing social conditions and to protect against discrimination; active engagement includes agentic behavior in school, at home, and with peers; flexibility speaks to the young person’s ability to adapt to different contexts and challenges, and communalism includes the important social bonds and duties that support healthy development. A good quality of life for Black girls would facilitate the development of critical mindedness and flexibility; present opportunities for active engagement, and provide a supportive, communal environment.

The research study “Rise Sister Rise: Placing Black Girls at Promise” surveyed 411 African American girls ages 11-18 years old in four Ohio cities. The survey asked questions that allowed researchers to better understand how girls perceive themselves, care for themselves, and assess their lived experiences of trauma and resiliency[6].

The survey found respondents:

**Liked a lot about themselves.**
- Most of the girls reported liking their intelligence and friendliness. About three-quarters liked their face (76.6%), independence (74.9%), skin tone and complexion (77.3%), their abilities to stick up for themselves (75.6%), and their hair (76.1%). Two-thirds liked their grades (64.8%) and their body (69.6%). Over half liked their contribution to the household (59.6%).

**Had significant relationships with their family.**
- Half of the girls listed their mother as the biggest influence in their lives right now (52.3%), and almost one-third of girls (29.2%) reported seeking advice from their mothers. Almost two-thirds of the girls said their relationship with their parent/caregiver was excellent or good (65.4%), and 31.1% said their relationship was alright but could be better.

**Enjoyed their relationships with their friends.**
- Best friends were the most reported source of advice (34%). Almost all girls (88.7%) reported having at least two close friends.

**Attended religious services or reported a relationship with a higher power.**
- Almost all the girls (96.7%) indicated it was very important or somewhat important to them to have a relationship with God or some higher power. Over half of the girls (52.6%) said their relationship with a higher power was good or excellent, and over an additional one-third of girls (41.8%) said it was alright.
but could be better. Over half of the girls (50.6%) reported weekly attendance at religious services such as a church or mosque, with another one-quarter (23.9%) attending monthly or several times a year. Two-thirds (61.8%) of the girls reported praying weekly or daily.

Believed they had been treated unfairly because of their gender, but still liked being girls.

- Almost all girls (97%) reported they love being a girl. However, two-thirds (61%) said they had been treated unfairly because they are a girl. And about one-fifth (16%) of the girls said life would be easier if they were a boy.

Loved being Black although they believed they had been treated unfairly because of their race.

- Almost all girls (96%) reported that they love being Black, although about two-thirds of girls (62%) reported having been treated unfairly because they are Black. Almost one-quarter (24%) said life would be easier if they were not Black.

Were engaged in sports and household chores.

- 75.7% of girls reported playing at least one sport, and 80.6% listed at least one job or chore responsibility such as cleaning the kitchen and doing dishes, cleaning her bedroom, babysitting, and cleaning the bathroom.

The importance of this type of engagement among girls appeared to be corroborated by a national survey conducted by Ruling Our eXperiences (ROX). Among the study’s findings was that girls of all races began to lose confidence in middle school. However, girls who played sports reported higher levels of confidence at all ages[7].
To understand the assets girls need to thrive, the Rise Sister Rise report used the Search Institute Profiles of Student Life: Attributes and Behavior Survey [6]. These assets, categorized as internal and external, show the value of support, opportunities and relationships, and self-determination needed to have a healthy lifestyle.

The Commission on Black Girls research builds on the foundation of these prior research projects by incorporating their emphasis on identifying assets in addition to challenges. Given The Commission's goal of informing policy and programmatic action, The Commission's conclusions focus on factors that can be affected externally in the near and long term:

- Economic context of Black girls
- Academic experience of Black girls
- Support of mental health and emotional wellbeing of Black girls
Background

In 2017, the real median household income of Black Americans was $40,258, compared with $68,145 for non-Hispanic White Americans [8]. Scholars have proposed various reasons for this disparity, including residential segregation[9][10], differences in school quality[11][12], discrimination in the labor market, differences in family structure[13][14], and lack of intergenerational income mobility[15]. All these elements – to one extent or another – contribute to the economic context in which Black girls are raised.

There are approximately 50,000 Black girls and young women in Columbus ages 24 and under [16]. The most recent Census estimates show that about half (48%) of all Black children under age 18 live in poverty [17]. Sixty percent of Black children in Columbus live in single mother households, which have much higher rates of poverty than married couples or single father households [4]. Nearly four in ten (38%) Black households with a female householder and children under 18 live in poverty, compared to 22% of households led by a single male householder and 20% of married couple families [18].

Black girls in Columbus are also less likely than white girls to live in houses owned by their parents [19]. Only about 34% of housing units occupied by Black householders are owner-occupied, compared to 51% among white householders. This discrepancy can lead to housing instability, particularly since local data show that eviction rates are much higher among Black or African American women. Community Mediation Services of Central Ohio reported to The Commission on Black Girls that 64% of their eviction clients in the past year were women and 61% were African American; in addition, 68% of the young women eviction clients between ages 18-24 were African American and 64% of the served African American households had children [20].
ECONOMIC EXPERIENCE FINDINGS

The economic experience of a Black girl’s parents forms the primary backdrop for her own economic context. While children are very unlikely to be able to report their parents’ income, they are often more aware of the parents’ educational attainment. This attainment has been shown to have consistent correlation with income. The figure below shows the median weekly earnings in 2017 by educational attainment. According to these figures from the Bureau of Labor Statistics, individuals with the highest levels of educational attainment—doctoral and professional degrees—had incomes that more than triple those with the lowest level—less than a high school diploma. Workers with at least a bachelor’s degree earned more than the $907 median weekly earnings for all workers.

Individuals with bachelor’s degrees make about 65% more in weekly earnings than those with only a high school diploma

Median Weekly Earnings (dollars)
Columbus women who have bachelor’s degrees make about $20,000 more per year than women who have only a high school diploma.

Median Earnings

Source: U.S. Census Bureau, 2016 American Community Survey 5-Year Estimates
About 61% of respondents who knew the educational attainment of their parents had two parents who had graduated from high school [21]. Only 18% reported that both parents graduated from college [21]. This means that if parents earned the median income based on their educational attainment, most respondents would be living with parents who make $37,000 or less. The figure below gives the frequency of replies about parents’ educational attainment.

As previously noted, about 60% of Black children in Columbus live with single mothers, meaning they only have one parent contributing to the household income. Of women with a high school degree or less in the Columbus metro area, 19% live below the poverty level. As the educational attainment of women increases, their likelihood of living in poverty decreases; only 4% of women with a bachelor’s degree or higher live in poverty [4].
Work experience is one way girls can experience economic mobility so that even if they grow up in a low-income home, they can work toward improving their own economic situation. We asked respondents who were over 15 years old about their employment; 45% had part-time employment and 10% were working full-time. An additional 26% of respondents had been employed in the past but were currently unemployed.

**Housing stability is another factor that plays a significant role in the economic experience of children.** Stability gives children time to build community and to gain traction in their academic pursuits. When children move frequently, that move often entails switching schools. If this is the case, they must put their energies toward adjusting to their new academic and social context, hindering their academic growth. The delay in growth can affect their future earning potential. Instability then not only means being inconvenienced or set back in the short term, it can have long term impacts as well. When we asked our respondents how often they had moved, 12% said they moved at least once per year, and another 20% said every 2-3 years. *Moving frequently can get in the way of building necessary human and social capital.*
Frequency of movement is correlated with housing tenure, whether families own or rent their homes. When families rent, the decision to stay or move can be an annual decision over which they do not always have control. And if families do stay in the same rental property for a long time, there is no opportunity for the home to serve as a wealth-building asset for the family. Almost 70% of respondents lived in rental properties.

<table>
<thead>
<tr>
<th>Housing Tenure</th>
<th>Percent</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents or other adult(s) rent the apartment or house</td>
<td>61.3%</td>
<td>252</td>
</tr>
<tr>
<td>Parents or other adult(s) own the house</td>
<td>28.0%</td>
<td>115</td>
</tr>
<tr>
<td>I rent the apartment myself or with a partner/roommate</td>
<td>6.1%</td>
<td>25</td>
</tr>
<tr>
<td>I own the apartment myself or with a partner/roommate</td>
<td>0.7%</td>
<td>3</td>
</tr>
<tr>
<td>Other</td>
<td>3.9%</td>
<td>16</td>
</tr>
</tbody>
</table>

Of course, housing instability in its most severe form is manifested in experiences of homelessness. When asked whether they had ever experienced homelessness, only 60% of respondents said no without a caveat. When considering only the responses of girls 16 and over, only 54% said no without a qualifier. Additionally, 21% of all respondents said they had not been completely homeless before but have had to stay with family and friends for a while. This also implies a significant level of housing instability. One in five (20%) respondents over the age of 16, and 17% of all respondents, said they had been homeless in the past, and 3% were homeless at the time the survey was taken. Homelessness poses not only economic risk but also risks to girls’ mental and physical health.
ACADEMIC CONTEXT

Background

Historically, national reports on racial disparities in education tended to disaggregate by race and not gender. This led to the conflation of Black boys’ and girls’ experiences. However, as scholars began to investigate education with consideration of racial and gender identifiers, they found that **Black girls consistently outperformed their male peers**. In some cases, Black girls outperformed or were comparable to their non-Black peers, even though Black girls faced overwhelming inequity in education. Their higher academic achievement in secondary and post-secondary education led some scholars to argue that Black girls and women are the new model minority[22].

Black women also excelled above their Black male counterparts in higher education attainment. In 2015, Black women obtained 69.6% of all master’s degrees and 65.9% of all doctoral degrees obtained by Black students [23]. Until 2013, Black women were the largest female minority group to receive bachelor’s degrees, representing over 12% of conferred bachelor’s degrees; since then, Hispanic women now account for a larger percentage of bachelor’s degrees than Black women [24].

In Columbus, **white women are slightly more likely to have at least a high school degree than Black women (92% to 87%)** [25]. White women also outpace Black women in bachelor’s degree attainment, which can account for part of future earnings disparities.

### Educational attainment, Columbus women 25 and older

![Bar chart showing educational attainment in Columbus for women 25 and older.](chart)

Source: 2013-2017 American Community Survey 5-Year Estimates
The accomplishments of Black girls do not come in the absence of significant barriers. One factor inhibiting Black girls’ academic success is their systematic removal from school. This phenomenon is partially attributed to adoption of zero tolerance (ZT) policies and approaches to school discipline developing in the late 1980s-early 1990s. This shift was in response to increasing levels of juvenile crime and violence, and in 1994 ZT became a federal policy with the passing of the Gun-Free Schools Act. As national cases of juvenile crime decreased among adolescents, schools utilizing ZT policies and exclusionary punishments (student removal) increased. The U.S. Department of Education’s Office for Civil Rights periodically produces reports on school discipline, including annual reports from 2009-2014 [26]. Each report showed a persistent school discipline gap along the lines of race.

Black girls have been disproportionately punished in comparison to their non-Black female peers. Research studies show that the majority of infractions responsible for removing Black girls from school are not actually ZT nor are they serious or violent offenses. In fact, Black girls are removed for non-violent discretionary offenses involving behavior (being viewed as insubordinate, loud, threatening, etc.) and dress code [27]. Even when Black girls are referred to their school’s administrative offices for identical infractions as their non-Black female peers, they are punished more harshly due to teachers’ and administrators’ implicit racial biases [28].

More than one in ten Black girls have been suspended, compared to only 2% of White girls

Source: U.S. Dept of Education, Office for Civil Rights, Civil Rights Data Collection, 2011-2012
In comparison to their white female peers, Black girls are perceived as needing less nurturing, protection, support, and comfort, and as being more independent and more knowledgeable about adult topics, including sex [29]. Teachers and administrators are more likely to perceive Black girls as adults and therefore read Black girls' behavior as they would an adult [29]. In addition to this type of adultification, racial stereotypes (such as being loud, promiscuous, and violent) impact how educational personnel address Black girls. Black girls are also less likely to be considered for gifted programming or advanced placement courses. This lack of exposure can potentially translate into underachieving or undermatching in terms of college choice.

ACADEMIC CONTEXT FINDINGS

Survey respondents reported a number of positive experiences with school. Attendance, particularly if there are issues with chronic absenteeism, can negatively impact girls’ academic success. The girls that were surveyed, though, reported going to school every day or only missing if they were sick 78% of the time (85% for girls under 16 years old). Approximately 22% of the sample would be considered chronically absent because they miss 2-3 days a month; however, only 3% of the girls said they miss more than 5 days a month, and most of those girls are 16 years old and older, including a number of college students.

A total of 60% of the surveyed girls have a GPA higher than 2.6, including 41% with a GPA in the A range (3.1 or higher). The relatively high GPAs may have also positively affected future aspirations; 85% of the girls said they could go to college if they wanted to. The girls’ future plans included college (55%), a master’s degree (35%), or a law (13%) or medical (24%) degree. More than one out of every 10 survey respondents (13%) want to get a Ph.D in their chosen field.

IDEEAL CAREERS OF SURVEY RESPONDENTS
Survey respondents also reported **high rates of extracurricular involvement**; 83% have in the past or currently participate in an extracurricular activity, with 29% saying they do so every school year. In one of the focus groups, nearly all of the girls participated in at least one sport, and several participated in two or three. Some girls said their parents push them to participate in sports in order to secure college scholarships. While experiences varied, some girls reported that their parents did not believe they could get into college on their academic ability and **pushed sports as an alternative route to college.**

In order to succeed, the girls who were surveyed could possibly require some academic support. Fortunately, the majority of the girls get academic support from someone, including teachers (73%), a friend or peer (63%), or a parent (59%).

Some girls said their parents push them to participate in sports in order to secure college scholarships. While experiences varied, some girls reported that their parents did not believe they could get into college on their academic ability and pushed sports as an alternative route to college.
As noted in the Academic Context background section, many Black girls do not have access to the same academic resources and opportunities as other students. Based on the adultification stereotype and its link to implicit bias, Black girls are assumed to need less nurturing and protection, and are seen as stronger than other girls. This can lead to a lack of support by adults as well as a lack of access to support systems such as mentorship and leadership opportunities, because girls who are seen as adults do not need mentors and leadership programs. In turn, characteristics that are seen as indicative of strong leaders in adult men, such as forthrightness or assertiveness, are seen as disruptive and rowdy in Black girls and can lead to school disciplinary action. Rather than receiving guidance for pruning raw leadership potential, Black girls are punished. This pattern is reflected in the Commission survey responses as well; although 64% of girls have had a leadership role in the past and 118 (28%) have participated in a specific leadership development program, school disciplinary action rates are also very high. Just 30% of surveyed girls have never received detention, a suspension, or an expulsion. Almost one out of every ten (9%) have been expelled and 40% have received an out-of-school suspension.

40% of survey respondents report receiving out-of-school suspensions*

* Sum of percentages exceed 100 because respondents were allowed to choose all the options that applied.
A girl’s approach to leadership is also influenced by how she is treated in school. Several girls in the focus groups spoke about challenges at school due to teacher perceptions of their attitudes and abilities. One girl said, “as a Black girl, you have to work twice as hard.” She recalled that when she attended a National Honor Society event, people were surprised to see her there because of her race, even going so far as to make comments about it. Other girls echoed similar sentiments, saying they were told not to try going to college, or were diagnosed with non-existent learning disabilities.

Focus group participants also spoke about the lack of representation of Black women in school leadership and connected this lack to their experience with implicit bias. The girls complained about their inability to see themselves in their teachers and believed this lack of relatability affected their teachers’ ability to show faith in Black girls’ capacity to achieve. A few high school age girls also reported being assaulted by a School Resource Officer (SRO) for minor offenses. They felt that, overall, they received undue and harsh punishment.

Some older Black girls who participated in a Listening Session also pointed out one way in which lack of administrative sensitivity can affect Black girls - if young ladies become pregnant, academic doors can close due to a lack of support. A Listening Session attendee told her story of premature exit from college after pregnancy. She was unable to get her professors to accommodate her when she went into labor during the course of the semester. Her GPA declined, she lost her scholarship, and she was forced to transfer. Another attendee bemoaned the lack of flexible, affordable childcare.

“Being in college with a child, there was no assistance...there’s no real advocacy for people like me. It makes it really hard for single moms to finish school and do anything.”

-Listening Session attendee
MENTAL HEALTH AND EMOTIONAL WELL-BEING CONTEXT

Background

Mental and emotional health are critical aspects of overall health. Support is necessary for the optimization of these aspects of life, especially if threats to their stability are consistently presented throughout one’s life. For example, higher levels of poverty have been correlated with higher levels of psychological distress, but the extent to which poverty negatively affects an individual or group of individuals’ health is mitigated by their level of support or the presence of various coping mechanisms [30]. This is why different racial groups have different levels of prevalence of serious psychological distress even if they share economic similarities.

Higher poverty is correlated with higher prevalence of serious psychological distress but Black people have lower levels across the board (2013 – 2014)*

<table>
<thead>
<tr>
<th>Percent of Poverty Level</th>
<th>African American</th>
<th>Non-Hispanic White</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 100%</td>
<td>7.4%</td>
<td>10.7%</td>
</tr>
<tr>
<td>100% - less than 200%</td>
<td>3.5%</td>
<td>6.5%</td>
</tr>
<tr>
<td>200% - less than 400%</td>
<td>2.3%</td>
<td>2.7%</td>
</tr>
</tbody>
</table>

* Serious psychological distress is measured by a six-question scale that asks respondents how often they experienced each of the six symptoms of psychological distress in the past 30 days. Respondents must have answered all six questions to have a computed K6 score. Only those with K6 scores were included in this analysis. See Appendix for explanation of serious psychological distress


Support can come through formal or informal relationships. Black adults are less likely than white adults to use many of the more formal channels. Estimates of formal mental health service utilization among adults were similar for adults reporting two or more races (17.1%), white adults (16.6%), and American Indian or Alaska Native adults (15.6%). These estimates of mental health service use in the past year were higher for these groups than the estimates for individuals who identify only as Black (8.6%). There is also significant difference based on gender. Black women are about half as likely as white women to seek support through formal mental health services, but they are far more likely than Black men. **An average of only 10% of Black women sought mental health services between 2008 and 2012.**
Mental health service use in the past year among adults, by race and service type, 2008 - 2012

*Source: Substance Abuse and Mental Health Services Administration, Racial/ Ethnic Differences in Mental Health Service Use among Adults. HHS Publication No. SMA-15-4906.

Mental health service use in the past year among adults, by race and gender, 2008 - 2012

*Source: Substance Abuse and Mental Health Services Administration, Racial/ Ethnic Differences in Mental Health Service Use among Adults. HHS Publication No. SMA-15-4906.
The **reasons for not engaging in formal support are varied**. In the National Survey on Drug Use and Health, 45% of Black respondents cited costs or lack of mental health insurance coverage as their reason for not seeking formal support; 25% said their concern about prejudice or discrimination prevented them; 24% said they just did not feel as though they needed it. Other reasons included the presence of structural barriers, and not thinking the mental health services would work. These reasons may help explain the low levels of mental health utilization among Black women with mental health issues. The Substance Abuse and Mental Health Services Administration estimates that **only a third of Black women who had mental illness actually sought mental health services between 2008 and 2012**.

### Mental health service use in the past year among adults with Any Mental Illness, by race and gender, 2008-2012

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Female (%)</th>
<th>Male (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BLACK/AFRICAN AMERICAN</td>
<td>32.2%</td>
<td>25.3%</td>
</tr>
<tr>
<td>WHITE</td>
<td>37.7%</td>
<td>29.4%</td>
</tr>
<tr>
<td>HISPANIC</td>
<td>29.4%</td>
<td>24%</td>
</tr>
</tbody>
</table>

*Source: Substance Abuse and Mental Health Services Administration, Racial/ Ethnic Differences in Mental Health Service Use among Adults. HHS Publication No. SMA-15-4906.

“We often feel like we have to be strong for other people. We are not allowed to be vulnerable. We have to be okay... But [in reality] we need to be able to talk to someone and get help.”

-Listening Session attendee
**A Note on Adverse Childhood Experiences (ACEs)**

Adverse Childhood Experiences (ACEs) were first explored in detail by the Centers for Disease Control and Prevention (CDC) and Kaiser Permanente from 1995-1997. Through this work, researchers established the ACE pyramid that posits that ACEs can lead to disrupted neurodevelopment; social, emotional, and cognitive impairment; adoption of health-risk behaviors; disease, disability, and social problems; and eventually early death [31]. The ACE questionnaires ask about abuse, household challenges, and neglect that occurred during the participants’ first 18 years of life. Results of the initial study, and subsequent studies, have shown that exposure to some ACEs is relatively common; only about 36% of all initially surveyed participants had zero ACEs before age 18 and more than 20% reported three or more ACEs. However, there also seems to be a dose-response relationship, implying that the more ACEs a child experiences, the more likely she is to be at risk for a range of negative outcomes, including illicit drug use, financial stress, sexually transmitted diseases, suicide attempts, and poor academic achievement. A more recent study that looked at outcomes by race and ethnicity found that 60% of Black children have at least one ACE and about 34% of Black children had 2 or more [31]. Individuals living in poverty were more likely to have higher ACEs although high ACEs were not exclusively found in economically disadvantaged situations. Approximately 40% of children living in households with income less than 200% the poverty level have 2 or more ACEs, whereas only 14% of Black children in households more than 400% of the poverty level have 2 or more ACEs. The exposure to various ACEs may be having an impact on the mental health and emotional well-being of Black girls and therefore, it was explored in this study.

**33.8% of Black children had 2 or more ACEs; as poverty increases, prevalence of 2+ ACEs increases**

<table>
<thead>
<tr>
<th>Overall % of children with 2+ ACEs</th>
<th>All Children</th>
<th>Black</th>
<th>White</th>
<th>Hispanic</th>
<th>Asian</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall % of children with 2+ ACEs</td>
<td>21.7%</td>
<td>33.8%</td>
<td>19.2%</td>
<td>21.9%</td>
<td>6.4%</td>
<td>28.3%</td>
</tr>
<tr>
<td>Income &lt;200% of Federal Poverty Level</td>
<td>31.9%</td>
<td>39.9%</td>
<td>34.7%</td>
<td>25.1%</td>
<td>9.0%</td>
<td>44.4%</td>
</tr>
<tr>
<td>Income 200-399% of Federal Poverty Level</td>
<td>19.0%</td>
<td>29.4%</td>
<td>17.2%</td>
<td>19.8%</td>
<td>7.0%</td>
<td>24.5%</td>
</tr>
<tr>
<td>Income &gt;=400% of Federal Poverty Level</td>
<td>9.2%</td>
<td>14.1%</td>
<td>8.6%</td>
<td>12.1%</td>
<td>3.6%</td>
<td>10.5%</td>
</tr>
</tbody>
</table>

MENTAL HEALTH AND EMOTIONAL WELL-BEING FINDINGS

The Commission on Black Girls survey asked girls about several threats to their mental and emotional well-being: bullying, insufficient sense of safety, interactions with the judicial system, and adverse childhood experiences (ACEs).

Bullying is a prevalent problem for young people and is now more far-reaching because social media makes it easier to bully anonymously or behind a keyboard or phone screen. Even if the bullying does not actually occur on social media, hateful messages and videos can be spread that exacerbate the effects of in-person bullying. **Half of the girls surveyed reported having been bullied at school and 20% reported being bullied directly on social media.**

Racism and colorism can also contribute to bullying. **Twenty two percent of girls have been bullied or harassed a few times because of their skin color and 9% have been bullied or harassed a lot because of their skin tone.** Of the 31% who have been bullied because of their skin color, 42% said they have dark skin, 41% have light skin, and 17% reported having neither particularly light nor dark skin. Several girls who attended the focus groups and listening sessions complained about intra-racial conflict over skin color and bemoaned the impact that this conflict, in addition to the racism of the wider society, had on their self-confidence. Several girls mentioned instances of stereotyping and subsequent detachment from Black female peers. Some said they are told they “act white” or are the “whitest person <they> know.” One girl observed, “I don’t know how you act a color.” Another common refrain was that, “when they (white people) do it it’s cool, when we do it, it’s ghetto.” As the focus group participants spoke about their experiences in school, several mentioned appreciating the opportunity to sit together with other Black girls to discuss their lives and experiences. The participants **longed for connection with Black female peers** but felt as though this was not sufficiently facilitated.

Sexual violence or exploitation is another factor that threatens the mental and emotional health of some of the girls surveyed. **Twenty-one percent of all survey respondents said they had experienced unwanted sexual contact with someone.** Additionally, about 40% of respondents (164 girls) reported being sexually active and of that population, almost 50% said they had sex before the age of 16.
The incarceration of a parent was the final threat to mental health explored. Well over half (58%) of the respondents said they had at least one parent who had been arrested at some point in the past. Most often, the respondent’s father was the only parent who had experienced arrest (28%), but 21% of the girls knew of the arrest of both parents. Almost 40% of respondents said their parents had spent more than a month in jail. If a respondent said both parents had been arrested, she was more likely to have been arrested herself.

“One of our biggest challenges is lack of self-confidence. We experience the things another girls experience with the addition of racial negativity.”
-Listening Session attendee

“I got talked about a lot at school. When I was younger I thought I was beautiful, but by the end of middle school, I thought I was ugly.”
-Listening Session attendee
58% of Survey Respondents had at least one parent who has been arrested.

383 of the 422 survey respondents answered all the ACE score questions. The average ACE score was 3 but about 40% of girls had higher scores.

As ACE score increases, so do the risks of disease, social, and emotional problems. Those with ACE score of 4 or more are more at risk for development of the following:

- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease
- Depression
- Fetal death
- Smoking
- Illicit drug use
- Ischemic heart disease
- Liver disease
- Poor work performance
- Poor academic performance
- Intimate partner violence
- Sexually transmitted diseases
- Autoimmune diseases

Source: Center of Disease Control, About the CDC-Kaiser ACE Study
https://www.cdc.gov/violenceprevention/acestudy/about.html
When asked how frequently they feel happy, most of the girls surveyed reported they are happy most times (39%) or all the time (13%). One-quarter of girls (26%), though, said they are sometimes, rarely, or never happy. Family, friends, and music were highest on the list of things that make the girls happy. Interestingly, though the vast majority of respondents use social media (96%), only 40% said it makes them happy (Note: responses were not exclusive and girls were asked to select all that apply).

### Sources of happiness for Black girls

- **Music**: 78.7%
- **Family**: 76%
- **Friends**: 74.6%
- **Faith**: 54%
- **Watching TV/Movies**: 52.3%
- **Social Media**: 40.5%
- **Talking on the Phone**: 40%
- **Texting**: 37.6%
- **Extracurricular Activities**: 29%
- **School**: 16.1%
- **Nothing**: 2.9%

*Sum of percentages exceed 100 because respondents were allowed to choose all the options that applied.*
When asked explicitly about feelings of anxiety or depression, close to 40% of girls reported feeling depressed or anxious some or most of the time. Only about half of survey respondents said they would talk to a professional about mental health problems or feelings. Of the girls who said they were not very likely to seek professional help, many said some variation of not being able to trust an outsider, being concerned about sharing private details, or not feeling represented or understood by the professionals they had encountered in the past.

Almost 30% of survey respondents said they were always or most times depressed

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always:</td>
<td>11.1%</td>
</tr>
<tr>
<td>Most times:</td>
<td>14.7%</td>
</tr>
<tr>
<td>Sometimes:</td>
<td>25.6%</td>
</tr>
<tr>
<td>Often enough:</td>
<td>14.5%</td>
</tr>
<tr>
<td>Rarely:</td>
<td>21.7%</td>
</tr>
<tr>
<td>Never:</td>
<td>12.3%</td>
</tr>
</tbody>
</table>

Only about half of survey respondents said they were likely to discuss mental health with professionals

<table>
<thead>
<tr>
<th>Likelihood</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very likely:</td>
<td>23.3%</td>
</tr>
<tr>
<td>Sometimes likely:</td>
<td>27.2%</td>
</tr>
<tr>
<td>Not sure:</td>
<td>20.0%</td>
</tr>
<tr>
<td>Somewhat unlikely:</td>
<td>11.1%</td>
</tr>
<tr>
<td>Very unlikely:</td>
<td>18.3%</td>
</tr>
</tbody>
</table>
Several of the young women in the college-age focus group expounded on the mistrust and unawareness of services. They said they do not believe a mental health professional can spend enough time with them to truly understand their lives and perspectives. Several also spoke of a strong fear of the professional sharing details about their lives with others. Girls in middle and high school were also concerned about sharing private information with an unknown entity, particularly because of the stigma of seeking mental health care. Focus Groups participants mentioned a feeling in the Black community that you do not seek help unless you are having very severe symptoms; if you seek mental health help you are “crazy.” Although the stigma against mental health treatment exists in all demographic groups, the girls felt the Black community in particular has a negative outlook on professional help.

Although girls may not be eager to speak to a professional about their concerns or mental health problems, they do understand the importance of support - 84% said they believed support was important or very important. They reported having someone to talk to about their problems all or almost all the time (25%), frequently (17%), or sometimes (24%). The majority of girls are comfortable talking to their friends (64%) or mother (51%) when having problems.
FOCUS GROUPS

The girls introduced themselves by stating a fun fact and sharing three words of their choice to describe themselves. Girls described themselves as pretty, creative, unique, clever, focused, determined, confident, brave, nice, outgoing, and passionate. It should be noted that girls also described themselves as loud, rebellious, goofy, shocking, kooky, and light (no explanation of “light” was provided). The most frequent descriptive terms used by all age groups were:

- smart
- funny
- nice
- intelligent
- loving

Themes for the remaining time spent with the girls in the Focus Groups were about experiences at school, including activities in and out of school settings, access to and interest in leadership experiences, lifestyles and living arrangements, and access to safe spaces and individuals who they can talk to. Specifically, girls were asked if they would ever consider talking with a mental health professional. Overwhelmingly, most girls stated they “would NOT talk with an identified mental health professional.”

Differences with regard to the engagement of girls in the Focus Groups varied primarily by age, including considerations such as some girls who are parents, and whether some girls were employed or seeking work.

Some girls were young parents who were experiencing housing independence, working, and engaged in some form of education. Some girls indicated they were experiencing food and housing insecurities at the time of the Focus Group.
LISTENING SESSION: COMMENTS FROM BLACK GIRLS

Concerns about Black girls:
Black girls indicated their biggest challenges were around succeeding in school, finding a place of their own, and feelings of reported “haters” focused on negative behaviors and gestures toward them. Some girls indicated that their financial insecurity was the premise for their focus on doing well in school—as one stated “I hope that my studying will allow my family to be better off because I will have better career choices.” Girls stated that they were expected to fail as a Black girl, “having to work 10X harder to be respected for my knowledge.”

A few girls commented on sexism and the color of their skin being a primary challenge in school or employment. Some girls were concerned that their schools lacked girls that looked like them. As teens and young parents, some girls reported challenges with getting themselves and their child up for the day. Some girls also reported feeling inadequate, and measuring their successes and challenges based on those of other girls and wanting to be like them.

Recommendations for The Commission on Black Girls:
Leadership opportunities • advance placement/college credit courses • ACT support and funding • program for career placement • stop expecting us to conform • more non-profit organizations for younger girls • have my back in difficult situations • be there when I need someone to talk to • mentoring programs for us, with people who look just like us • more statewide programs for Black girls • more Black teachers • weekly programs for Black girls to speak about what’s going on at school, home, and in our neighborhoods • 24-hour day care • more baby resources • stop the bullying NOW • more opportunities to speak with key leaders in the city • help me with my homework • create a Council for African American girls
LISTENING SESSION: COMMENTS FROM PARENTS AND CAREGIVERS

Concerns about Black girls:
Lack confidence • unhealthy relationships • lack awareness of technology • unknown career options • identity crisis • difficulty transitioning to adulthood • suicidal ideation • drug addictions • self-worth • parental involvement • expectations placed on them from others • navigating systemic racism • mental health challenges • social media pressures • non-Black peers • domestic violence • poverty • navigating biased systems • looking for love • being first to change dynamics in family system • access to family planning resources • culturally competent healthcare providers

Black girls have difficulty accessing needed services such as:
Access to health insurance coverage • culturally informed programs • Black providers of all services
Parents and Caregivers knowledge of resources available to Black girls:

Aspiring Grace LLC · Panther Prep · Pink Panthers · Restorative Justice Program · Ruling Our Own eXperiences · Girls on the Run · Proyecto Mariposas · in-school counseling · Invention Convention · STEM awareness · Rise Sister Rise

Recommendations for The Commission on Black Girls:

Organizations work collaboratively · provide holistic programming for families and schools · case management for transitioning-age youth · improve technology with county agencies · provide access to support groups · mental health educators · demonstrate ways parents can personally improve the QOL for girls · develop programs for elementary school girls · teach journaling · develop programs to teach hygiene/health · money management courses · build pathways and encouragement to college entrance, retention, and career opportunities · better opportunities for Black women in a variety of careers and roles of influence in the community · partner with local libraries for additional supportive services
Organizations provide the following services, resources, and programs to girls and Black girls:

Civic leadership development • public benefits and home visitation • behavioral health substance use/misuse, education, and treatment • trauma-informed care, mentoring, scholarships, leadership academies, LGBTQ+ advocacy, cultural sensitivity and implicit bias training • the arts, physical health care, and pharmacy support • comprehensive women’s care, physical therapy, intervention programming focused on developing healthy self-esteem • life skills, afterschool programming • prevention services, access to food, early intervention, summer programming • research fields • STEM programs • housing and homelessness prevention • interpersonal coaching • sex education and reproductive care • juvenile justice • disability services • parental supports

Service Providers were concerned that Black girls are challenged with:

Basic reading skills • social media • food management • nutrition • family stability • available role models • poor self-esteem • colorism • ACEs • special education services • historical trauma • maladaptive coping skills • intergenerational poverty and incarceration • loss of identity • housing and food insecurities • (un)der-employment • safe adults and neighborhoods • “angry Black girl” label • “attitude problem” • girls “who do well and those who are not well”

Service Providers believed Black girls are:

Resilient • thriving in spite of challenges • hopeful • finding their voices
Recommendations to The Commission on Black Girls:

Real-life experiential opportunities • Engagement of non-traditional schools • Keep the divide clear between girls and women • Engage churches • Mentoring • Safe havens • Provide support to mothers of young girls • Bring back basics in school curriculums • Extend school year or programming • Give time • Leadership training • Quality, consistent community programming • Increase opportunities for more communication • Bridge advocacy programs • Support volunteerism • Teach ACE in school settings • Trauma-informed curriculum • Build centers for women’s services • Engage community organizing methodology • Connect with early childhood providers • Address stress • Build up parents • Create sense of community • Better housing/rental services • Sex education • Develop resiliency programs • Etiquette courses • Create positive PSAs • Create sleep health initiatives • Exposure to positive role models • Fund existing community empowering programs • Implement bias screening at entry level careers • Mental health services • Hire based on population served • Assess what Black/African American girls desire • Training for non-traditional roles • Improve income to families • Address stigma of mental illness • Eliminate criminalization • Address food deserts • Address discrimination • Encourage sexual identity and orientation • Increase school social workers and counselors • Engage Columbus City Schools • Restoration and healing • Job skills training • Boots on the ground/Be present • Financial education • Provide safe spaces • Treat neighborhoods equally • Wrap-around services • Address impact of toxic masculinity on young women in the Black community • Offer college prep courses • Implement school-based health centers • Provide free feminine hygiene products • Increase community gardening • Physical exercise • Support groups • Better public education • More funding

Black girls deserve better!
SUMMARY OF FINDINGS

Black girls in Columbus are not monolithic in their personalities or experiences. They vary in their economic experiences, their academic context, and their mental health and emotional well-being. Still, the research conducted allows for a general sense of the assets Black girls possess and challenges they face. These assets and challenges come together to form the foundation of their quality of life.

The girls involved in The Commission on Black Girls research had many assets related to their academic life. Most girls are rarely absent from school and 60% have a GPA higher than 2.6, including 41% with a GPA in the A range (3.1 or higher). A third of the girls participate in extracurricular activities every year. These Black girls fill leadership positions and engage in leadership development programs. Many older girls also gain work experience while they are in school.

The Black girls studied also have high aspirations and are very ambitious. When asked whether they believed they could go to college, 85% said yes. Their future plans often included college (55%), a master’s degree (35%), or a law (13%) or medical (24%) degree. More than one out of every 10 survey respondents (13%) want to get a Ph.D. in their chosen field. The desires expressed by these girls should not only be encouraged, but also directed through clear, goal-oriented, career-specific mentorship.

The emotional support girls receive from their families and friends is also an asset, as is their high level of participation and engagement with religious institutions since Black girls tend not to engage as much with formal mental health providers. These relationships cannot replace mental health care, but they can provide support for Black girls in the absence of formal arrangements.

Challenges were also observed in addition to assets. Although the girls tended to have good grades and leadership experience, they also experienced a high rate of punishment. At least 40% had experienced some type of suspension and 9% had been expelled. This is concerning because of the psychological impact that harsh disciplinary measures can have on a girl’s sense of self and place in the world. It is also concerning because suspensions and expulsions have negative impacts on their higher education options. Many girls who participated in focus groups also complained about the lack of representation that they perceived to be the root of a lot of misunderstandings that later lead to punishment. It is important that
both the approach to punishment and the lack of representation are addressed.

Current economic experiences also came with challenges. Many girls lived only with their mothers. Often, mothers would not have earned the level of education that can lead to higher wages. Additionally, many girls reported a concerning level of housing instability. When asked about their experience with homelessness and housing instability, 21% of all respondents said they had not been completely homeless before but have had to stay with family and friends for a while. One in five (20%) respondents over the age of 16 and 17% of all respondents said they had been homeless in the past, and 3% were homeless at the time they were completing the survey. Homelessness poses not only economic risk but also risks to a girl’s mental and physical health.

The prevalence of incarcerated parents is also a challenge that was confirmed through research. Well over half (58%) of the survey respondents said that they had at least one parent who had been arrested at some point in the past. Most often, the respondent’s father was the only parent who had experienced arrest (28%) but 21% of the girls knew of the arrest of both parents. Almost 40% of respondents said their parents had spent more than a month in jail. If a respondent said both parents had been arrested, she was more likely to have been arrested herself.

Finally, Black girls are challenged by an unwillingness to engage in formal mental health systems. This is especially important because many of Columbus’ Black girls have had high levels of adverse childhood experiences. Although 40% of girls surveyed reported feeling depressed or anxious some or most of the time, only about half of survey respondents said they would talk to a professional about mental health problems or feelings. Of the girls who said they were not very likely to seek professional help, many said some variation of not being able to trust an outsider, being concerned about sharing private details, or not feeling represented or understood by the professionals they had encountered in the past. The underutilization of this resource may mean slower paths of emotional and mental healing; this is another challenge that ought to be addressed if society hopes to improve the quality of life for Black girls.
LOCAL SUBJECT MATTER
EXPERTS SPEAK
MONTHLY LEARNING MEETINGS

Monthly Commission Learning Meetings were an opportunity for The Commission on Black Girls to convene and hear from Central Ohio subject matter experts (SMEs) on all facets of the quality of life of Black girls in Columbus. Specific topics included physical and spiritual health and teen pregnancy; mental and behavioral health and well-being; education; child welfare and homelessness; juvenile justice; social media; leadership; safety; community engagement, gender identity and sexual orientation, and mentoring.

Information presented by these SMEs was integrated as needed for additional context into the analyses of The Commission’s primary research conducted via survey, focus groups, and listening sessions, as detailed in the “Black Girls Speak” section of this report. A summary of SME presentations appears in this section, with the complete presentations available on The Commission’s website: (www.thecommissiononblackgirls.org).

SMEs were asked to deliver brief presentations in response to the following questions, consistent with The Commission’s initial fact-finding mission:

1. What is the current quality of life for Black girls ages 11-22 who reside in the City of Columbus, Franklin County?
2. What can The Commission on Black Girls and the community do to enhance the quality of life for Black girls?

In addition to responding to these two questions, SMEs were asked to provide information specific to the organizations they represented, to the extent the information was relevant:

- The number of Black girls served in their programs
- The type of service(s) provided to support Black girls ages 11-22
- Outcomes specific to provided service(s) or interventions
- Challenges experienced with providing services relevant to Black girls
- Programs that address social determinants and their impact on Black girls ages 11-22

The monthly Commission Learning Meetings were grouped around themes that served as a framework for cohesive discussions. The central themes were:

- Physical and Reproductive Health
- Mental Health and Emotional Well-Being
- Education
- Gender Identity and Sexual Orientation
- Child Welfare
- Homelessness
- Mentoring and Leadership
- Juvenile Justice
- Social Media
The Center for Healthy Families
Columbus Public Health
PrimaryOne Health

The Columbus Public Health (CPH) Commissioner presented to The Commission on Black Girls regarding the connection between the social, economic, and environmental determinants of health and their impact on quality of life outcomes. The Commissioner cited data such as U.S. Census Bureau statistics showing that 29% of Franklin County females ages 12-24 live in poverty, and 37% of all African American adolescent girls in Franklin County live in poverty compared to 25% of their white peers.

CPH advised The Commission of resulting specific health-related concerns, such as the fact that 5% of African Americans ages 12-17 do not have health insurance coverage, compared to 4.1% of white individuals ages 16-24 insured, and compared to 6.6% of white individuals overall. A lack of insurance can significantly impact access to health and reproductive care.

PrimaryOne Health, a Federally Qualified Health Center (FQHC) with sites throughout Central Ohio, provided The Commission with a snapshot of family healthcare services they provide, targeted to those with financial, cultural, and social barriers. The number of PrimaryOne Health patients seeking contraceptive management and health services related to pregnancy is nearly triple the combined total of patients seeking care for any other form of primary healthcare such as obesity.

While it could be viewed as positive that reproductive healthcare is sought, it leaves open the question of whether other types of preventive and routine care are being overlooked by comparison. CPH data presented to The Commission offered some encouragement in this regard, noting services such as CPH immunizations that were provided to African American females age 11-22 in addition to visits to the CPH sexual health and women’s health clinics.
(25.4% vs. 9.0%). This data is consistent with research from CelebrateOne, created in 2014 to carry out the recommendations of the Greater Columbus Infant Mortality Task Force. Among the Task Force’s findings and conclusions were that pregnant and parenting teens are at increased risk for poor birth outcomes, and that the zip code where one lives should not determine that individual’s health or the health of a baby. When a teen becomes pregnant, it is important that services are readily available, culturally relevant, and accessible.

According to CelebrateOne’s research, there are neighborhoods in Columbus where lower graduation rates, higher rates of unemployment, less access to nutritious food, and lack of timely access to prenatal care create increased chances that women, and more specifically teen mothers, may deliver too soon or have low or extremely low birth weight babies, which are major factors in infant mortality.

CPH also reported to The Commission regarding high levels of sexually transmitted disease among Black girls. During a recent four-year period, 75% of chlamydia cases and 67% of gonorrhea cases reported to CPH occurred among 10-to-24-year-old African American females.
MENTAL HEALTH AND EMOTIONAL WELL-BEING

Big Lots Behavioral Health Services - Nationwide Children’s Hospital
Columbus Area Integrated Health Services
Directions for Youth and Families
PrimaryOne Health
Rise Sister Rise

Representatives from Big Lots Behavioral Health Services at Nationwide Children’s Hospital informed The Commission on Black Girls that nationally, 1 in 3 Black non-Hispanic children have experienced 2-8 Adverse Childhood Experiences (ACEs), compared to 1 in 5 White non-Hispanic children. The more ACEs a child experiences, the more likely she is to be at risk for a range of negative outcomes.

In a recent six-month period, 32 Black girls received trauma treatment at the hospital, which addresses child maltreatment with evidence-based interventions. Black youth are 3 times more likely to be victims of reported child abuse and neglect but represent a smaller number of youths receiving services, according to hospital clinicians who expressed concern to The Commission about remediating the gap between the number of Black youths victimized and those receiving treatment.

A related major issue that impacts the quality of life for Black girls is the misidentification of mental health issues and behavioral issues (PrimaryOne Health, 2018). African American girls have higher percentages of traumatic stressors than other racial and ethnic groups of similar ages (Rise Sister Rise, 2011). These stressors can extend into adulthood and affect the girls’ overall quality of life (PrimaryOne Health, 2018). PrimaryOne Health reported to The Commission that 1,561 Black girls received healthcare services in a recent 12-month period. Behavioral health care was provided to 176 (11%) of these girls.

Behavioral health services in Franklin County provide for a wide span of potential support to Black girls, including services that address restorative justice, services that address trauma and resiliency, and temporary nonsheltered resting places.

The importance of providing culturally competent care by clinical providers who represent the population served is as important as the location in which the services are delivered, as reported to The Commission by Directions for Youth & Families (DFYF). DFYF believes community-based behavioral health organizations such as theirs must recognize the need to prioritize recruitment efforts to hire Black clinicians if they are committed to improving the quality of life for Black girls who need to know they are heard and that the community cares about them.

DFYF attributes the type of encouraging outcomes they have experienced with the 879 girls of color ages 11-22-years-old served in a recent year to their trauma-informed, healing responsive, culturally sensitive programming they characterize as providing “support versus surveillance.” Services offered include academic support, leadership development, life skills education, expressive arts programming, and social and emotional skill development. The life situations addressed include generational poverty, neglect, sexual and physical abuse, and exposure to other forms of personal and neighborhood violence.

For example, home and community-based services (HCBS) allow individuals and families to receive support in their own homes and communities rather than in segregated settings. This is an example of the measures DFYF has taken to overcome the challenge of the perceived social stigmas involved in seeking help.

DFYF recommended that community advocacy efforts such as those being considered by The Commission should include dialoguing, convening, collaborating, educating, advocating, and supporting to help remedy societal responses to Black girls that, quoting Monique Morris, author and co-founder of the National Black Women’s Justice Institute, “…engage in policies and practices that criminalize them for who they are, not what they’ve done.”
Secondary research confirms likely historical inequities in the ability of clinicians to relate to the mental health needs of Black girls and other minorities, based on data that in 2012, 90% of the behavioral health professionals were non-Hispanic white, whereas ethnic minorities represented 30% of the U.S. population.

PrimaryOne echoed to The Commission the need for more culturally sensitive and responsive healthcare, community outreach, and school-based health workers to serve populations whose stress and lifestyle-related needs include high incidents of depression, anxiety, and other mental disorders.

Possible assistance in addressing the circumstances for which Black girls are disproportionately at risk can be found in the type of encouraging information presented to The Commission on Black Girls regarding “strength-promoting resources” that help African American girls overcome the risk of stumbling on their paths to their quality of life goals. This was explained to The Commission by a subject matter expert from the Rise Sister Rise study. Nearly 90% of the girls in the study reported having a positive view of their futures, fueled by self-esteem and a sense of purpose.

The main strength-promoting resources relied on by 101 Black 5th-12th grade girls surveyed as part of the Rise Sister Rise study were family and non-family kinship networks, neighborhoods and communities, and religious involvement. More specifically, nearly half of the girls surveyed reported they seek advice as needed from their best friends, with another 30% indicating they look to their mothers for advice, and almost 60% naming their mothers as the person who has the most influence on them.
These strength-promoting resources can help overcome risk factors and are key in building resiliency. Of those resources, 26.3% of the Rise Sister Rise girls surveyed reported having an excellent relationship with a higher power (God, Allah, Jesus, or other spiritual connection); equally 26.3% of the girls reported having a good relationship with a higher power. The girls reported that second to their mothers (59.6%), Jesus/Allah/God or other spiritual connection (27.3%) has the most influence in their lives, followed by sisters, brothers, and grandparents. Interestingly, the girls reported their pastor (1%) as having the least amount of influence on them. The girls stated that the church can provide additional supports to them by having after-church services, counseling support, and assistance with reading.

However, the barriers to be overcome for mental and emotional well-being among Black families are extensive, as the Rise Sister Rise project reported to The Commission, given factors such as poverty, victimization, financial uncertainties, and gaps in education, employment, and relationship stability. For example, nearly half of the girls surveyed as part of the Rise Sister Rise project lived in one-parent households, with only 22% living with both birth parents.

Columbus Area Integrated Health Services cited issues such as parental denial, overwhelmed families, and transportation as challenges to their ability to provide mental health and addiction services to their clients, including Black girls, whose quality of life they described as being “significantly vulnerable.”

They also noted that their community relationships with organizations such as CARE Coalition, Nationwide Children’s Hospital, Columbus Urban League, and Franklin County Juvenile Drug Court, as well as current and aspiring professionals such as graduate level student interns and summer student volunteers, were important to their successes in supporting Black girls. They suggested a role for The Commission that would include supporting and providing funding for community initiatives to empower Black girls, and helping increase the number of Black mental health professionals.
EDUCATION

Academy for Urban Scholars High School
Columbus City Schools
Columbus State Community College
The Olive Tree Foundation – Columbus School for Girls

Educational systems presumably have the responsibility of ensuring Black girls are given the same opportunities for academic success as their non-Black peers. Challenges in bringing forth this quality of life reality can be daunting, given the historical tendency to view education through legislation and policy lenses without seeing the intersection of race, culture, ethnicity, class, and gender.

For example, the Chief Academic Officer for Columbus City Schools (CCS), the largest public school district in the State of Ohio, spoke to The Commission on Black Girls regarding the importance of CCS stakeholders understanding the need to mitigate the “Belief Gap.” Secondary research explains this is a perspective that minority and economically disadvantaged students do not have the intellectual efficacy to achieve academically to the same extent as their suburban non-minority counterparts. This belief can lead to the need to dispel negative “distorted reality” stereotypes of Black girls held by some in the community and the girls themselves.

Visual illustrations of these types of “distorted reflections” of students of color and their futures were presented to The Commission in the form of hip-hop entertainment and reality show images, along with discussions of similar stereotypical communication through the mass media and social media. This negative imagery was compared with positive visuals of successful Black female CCS graduates that were shown to The Commission.

CCS recommended to The Commission an “all hands in” approach in which all stakeholders, including parents, staff, students, community members and partners, and government, understand the importance of mitigating the Belief Gap.

Research suggests that nowhere is the need greater for closing societal achievement gaps than within the educational realm. Regardless of a Black girl’s specific quality of life goals, progress toward and beyond key milestones has been shown to be correlated to her level of education and/or training related to key hard and soft competencies. The quality of this preparation has been shown to vary based on pervasive race and gender inequity.

Author Monique Morris, co-founder of the National Black Women’s Justice Institute, cautions that beginning with preschool, Black girls nationwide are being subjectively pushed out of the education system as shown by achievement metrics gaps that she attributes in large part to low expectations. The CCS Chief Academic Officer shared statistics with The Commission demonstrating disparities in key factors contributing to school success such as attendance and suspension rates.

Concerns about parity in educational outcomes persist even for Black girls who live in the Columbus City Schools district but attend private schools. The Commission heard from students and adults within environments that offer enriched educational opportunities, but without the culturally relevant and sensitive pedagogical approaches shown to help mold diverse quality of life outcomes. A related question raised by a Commission subject matter expert was whether regardless of the school or district, a Black girl’s home zip code most defines her educational opportunities.

The president of the Olive Tree Foundation, which supports “talented young women” whose needs include career and societal mentoring, presented The Commission with statistics from Columbus School for Girls (CSG), a private school she attended as a young Black girl. Currently 14% of the more than 500 lower, middle, and upper school CSG students are African American. The 52 of 80 (65%) CSG African American students who receive some form of financial
aid represent 40% of all students receiving financial aid at the school. About one-third (35%) of CSG African American students pay full tuition. Olive Tree Foundation also provides scholarships to fund costly extracurricular activities at private schools.

Black girls attending CSG presumably benefit from national research presented showing that all-girl education results in increased confidence, heightened career aspirations, and belief in self and capabilities. CSG’s mission is “empowering girls to discover their distinct potential as learners and leaders” and their Promise is “She will know her power.” However, The Commission learned that quality of life issues facing Black girls at private schools included pressures characterized as “code-switching:” the burden of feeling they represent the entire race to non-Black students and faculty who have little exposure to others who look like them, while at the same time having their “Blackness” questioned by other minorities outside of their private school environments.

Among CSG’s reported efforts to create a more culturally competent environment to support Black girls are curricular adjustments, student affinity groups, a Board diversity committee, and attempts to increase the 3% of CSG faculty who are African American.

The Commission also learned of support initiatives underway at Columbus State Community College, where Black female student participation in student success initiatives such as first-year experiences and tutoring increased by 52% over the past five years.

Similar encouragement was provided to The Commission by the principal of the 10-year-old CCS Columbus City Preparatory School for Girls (CCPSG), who shared “workable solutions” to educational disparities. Best practices shared included the hiring of African American teachers, the elimination of implicit bias, and restorative practices to build healthy relationships for disciplinary reasons and to enhance the overall school culture. The motto for the 300 students (77% African American) is “well-read, wellspoken.”

CCPSG girls are collectively trending downward in discipline rates and upward in attendance rates and preparation for high school and the 21st century, earning a B rating on the State of Ohio’s academic achievement report card. In response to the hypothetical question “What do Black girls want?,” the answer presented to The Commission on behalf of CCPSG was “They want to be heard (‘we are not loud, we just want to be heard’), they want to be respected, they want to be supported.” CCPSG’s student paradigm shifts include Peace Circles to resolve conflict, Student Center Learning Lounges vs. in-school suspensions, quotes of the week, journaling, discussions, and open door policies.
GENDER IDENTITY AND SEXUAL ORIENTATION

Kaleidoscope Youth Center

The Commission heard from subject matter experts from Kaleidoscope, a non-profit provider of empowerment and safety support to LGBTQ+ youth between the ages of 12-20. Forty-nine percent of the youth served there are transgender or non-binary, and 25% identify as Black or otherwise connected to a community of color.

Research informs that little is known about the effects stress may have on gender-minority people of color.

In general, LGBTQ+ youth report having fewer adults to talk with and support their needs; particularly youth of color report feeling more conflict in their efforts to combine their racial, ethnic, religious, cultural, sexual, and gender identities. Black youths’ non-heterosexual orientation can come to the attention of behavioral health providers through multiple referral processes. Unaddressed trauma or the result of a serious behavioral health crisis is typically the agitator that leads to behavioral health services.

Many LGBTQ+ Black youth present for treatment with complex trauma that has been mirrored in generations of inferior and subjective care, with partial and at times no treatment specific to their experiences such as sexual assault, domestic victimization, abuse, neglect, substance use, cognitive impairments, out-of-home placements, and parental discord.

Kaleidoscope confirmed that LGBTQ+ youth struggle with quality of life issues such as bullying and school absenteeism; anxiety, depression, and lower self-esteem; substance abuse and risky sexual behavior; trafficking and exploitation; self-harm; survival crimes, and housing insecurity and homelessness.

The Commission was informed that the best form of intervention for LGBTQ+ youth is to have proactive prevention services at every entry point of services provided by any service provider. Kaleidoscope surveys show that 80% of youth who participated in their tailored programming reported improved anger management and problem-solving, and 60% reported improved relationships.

Suggestions for family and third-party support for LGBTQ+ youth include respect for pronoun preferences, non-gender language, behaviors, and clothing choices; productive and inclusive listening and conversations; and increasing understanding and humility regarding diversity.
Franklin County Children Services
National Youth Advocate Program

The Commission on Black Girls heard from Franklin County Children Services (FCCS), the public child protection agency mandated by federal law to help ensure the safety and well-being of the county’s children who are deemed to be abused, neglected, or dependent (Franklincountyohio.gov, 2018).

Black girls make up 21% of the population served by FCCS. According to the Statewide Automated Child Welfare Information System (SACWIS, 2018), Black girls between the ages of 6-10 represent the largest (26%) group by age receiving FCCS services in Franklin County. Black girls between the ages of 1-5 are the second largest group by age (22%) receiving services. Black girls between the ages of 11-18 represent a combined total of 39%, while Black female babies younger than 1 year of age represent 13% of the population of Black girls receiving services.

When children cannot remain within their family unit, child protection agencies are tasked with the mandatory responsibility to seek alternative family care settings. There are four types of alternative settings or placement settings in Franklin County: foster homes, kinship homes, residential centers, and group homes.

Foster home placements for Black girls ages 11 and older represented 51% of all alternative care placements for that age group. Kinship settings were 25% of placements, 17% of placements were to residential centers, and group homes represented 7% of the placements (SACWIS, 2018).

Experts agree that care is most effective when it is developed to support the family (Child Welfare Information Gateway, 2019). FCCS partners with more than 100 community-based organizations, much of which is designed to support the family with respect to culture. The practice of culturally integrated care planning is essential to positive outcomes of the family unit, according to the National Youth Advocate Program (NYAP). In a recent calendar year, 246 Black girls ages 11-15 and 480 Black girls ages 16-22 received outpatient mental health services from NYAP, according to statistics presented to The Commission.
HOMELESSNESS

Community Mediation Services of Central Ohio
HandsOn Central Ohio
Star House

The Commission on Black Girls received data from HandsOn Central Ohio, the 211 information hub for the City of Columbus, regarding clients who were potentially facing homelessness. Of nearly 23,000 individual data records coded from January 1, 2015-December 31, 2017, 28% of the individuals in this data set were coded as African American females under age 19.

Community Mediation Services of Central Ohio reported to The Commission that 64% of their eviction clients in 2017 were women and 61% were African American. In addition, 68% of the young women eviction clients between 18-24 were African American and 64% of the served African American households had children.

This data is consistent with indications from The Commission’s survey of Black girls that housing instability, which can jeopardize children’s academic, emotional, and eventually financial well-being, is a foundational quality of life issue to be addressed.

When asked how often they had moved, 12% of Black girls participating in The Commission’s quality of life survey said they moved at least once per year, and another 20% said every 2-3 years. Almost 70% of respondents reported living in rental properties. One in five (20%) respondents over the age of 16 and 17% of all respondents said they had been homeless in the past, and 3% were homeless at the time they took the survey.

The Commission also learned of community resources such as STAR House, which provides non-residential support to homeless youth. Young Black girls and other young adults under age 24 experiencing housing instability - for reasons that can include aging out of the foster care system, pregnancy, and being in some type of recovery - can go to STAR House for safe respite from the streets, for support in developing plans that can lead to obtaining permanent housing and employment, and to be connected to community-based organizations such as Directions for Youth and Families, the Center for Family Safety and Healing, and the National Youth Advocate Program. STAR House reported serving nearly 1,000 African American guests between 2016-2018, of which 69% were female.
LEADERSHIP AND MENTORING

Black Girls Think Tank
Brown Girls Mentoring
Delta Sigma Theta, Incorporated, Columbus (OH) Alumnae Chapter
Eryn PINK
Malaika Program
The Ohio State University
Zeta Phi Beta Sorority, Inc., Gamma Zeta Zeta Chapter

The Commission on Black Girls heard from the Associate Dean of Diversity, Equity and Inclusion for the College of Arts and Sciences at The Ohio State University, along with an Associate Professor in the College’s Department of Women’s Gender and Sexuality Studies, regarding contradictions girls of color may have in their self-representation. For example, Black girls may identify themselves as leaders and want to be a “boss,” but also see themselves only as they see others who look like them (“You can’t be what you can’t see!”).

“The Obama Factor” in Black girl leadership identity formation was discussed, pertaining to the accessibility of relatable images of former U.S. President Barack Obama and First Lady Michelle Obama as one recent way Black girls are able to construct a vision of what it means to be a leader. It was recommended that there needs to be leadership development curricula centered in balanced identity-based cultural affirmations of young womanhood that is “unapologetically Pro-Black /Pro-Girl of Color.” Otherwise, girls of color may be given the perception that “what they have to offer is not what is valued by society, adults or educational institutions.”

The Commission also heard presentations about community efforts already underway to convey firsthand positive quality of life possibilities to Black girls, most notably in the form of a wide variety of mentoring and leadership training programs.

Mentoring program sponsors that presented to The Commission were well-established organizations
such as the alumnae chapters of Delta Sigma Theta and Zeta Phi Beta sororities; ad hoc groups such as Brown Girls Mentoring and Eryn PINK, and public sector entities such as the Columbus Division of Police and Franklin County Children Services (FCCS). Collectively, these types of mentoring opportunities serve Black girls spanning a wide range of income levels, family structures, current academic success, public, private, and suburban schools, and societal statuses.

These mentoring efforts share the purpose of presenting positive messages, role models, and opportunities. Programming is sometimes uniquely targeted in ways such as offering tours of historically Black colleges and universities, providing exposure to science, technology, engineering, and math (STEM) opportunities, and enhancing foundational educational skills such as reading. The Columbus Police Department mentoring program is multi-faceted in that it seeks to enhance police-youth relationships through activities such as basketball leagues and small discussion groups. The program also exposes youth to policing as a career in response to data showing low-single-digit instances of female and female Black applicants to the Division resulting in final hires.

The Malaika mentoring program also meets a unique need as a cultural and gender-specific program that epitomizes the meaning of non-familial kinship by matching Black girls under the care of FCCS with Black women.

Obstacles commonly faced by existing mentoring programs include transportation challenges, the need for more funding and volunteer resources, and girls who may be being distracted from participating by the same types of societal issues that have led to the need for mentoring.
An individual’s experience with the justice system can occur as a victim, an offender, or an observer. The Columbus Division of Police reported to The Commission that there were 8,063 interactions with Black girls between the ages of 11-21 in 2017. More than 27% of the 8,063 interactions were reports of missing persons, and 15% (1,185) of the total interactions were for assault. Responding to domestic calls was the third highest category of law enforcement interactions with Black girls between the ages of 11-22. In this same year, law enforcement had 357 calls for menacing, 298 calls for criminal damaging, 229 calls for aid and transports, and 216 calls involving rape.

The Columbus Division of Police informed The Commission that Black girls between the ages of 11-22 are twice as likely to be victims of crime than white girls in the same age group. The Division further spoke to the dilemmas of traumatic interactions between Black girls and the police, mutual distrust between police and the Black community, and continued disproportionately low racial and gender diversity within the Division’s ranks.

The efforts of researchers, judges, court personnel, community service workers, and funders in Central Ohio provided an opportunity for Franklin County to become part of a longitudinal research study project called the Behavioral Health Juvenile Justice Initiative (BHJJ), which included 56 Black girls from Franklin County.

The Commission was informed by the Franklin County Court of Common Pleas, Division of Domestic Relations and Juvenile Branch, about the work of the BHJJ Initiative and its data reflecting a snapshot of what Black girls encounter in Franklin County. During the years 2006-2017, 20% of all females reported a history of sexual abuse, 36% talked about suicide and 15% had made attempts, and 53% of the females had family members diagnosed or exhibiting behavioral signs of depression.

Nationally, Black girls have kept pace with their non-Black peers in a 44% decline in offender court filings. Nationwide, Black girls make up 10% of all juvenile filings. Data on Black girls in Franklin County show the same trend of 44% declination of juvenile filings as the national trend, slightly better than the 43% of the total filings in Franklin County. Overall, Black girls represent 38% of all filings in Franklin County. Black girls on probation are more likely to complete supervision and are less likely to re-offend.

The Court asserted to The Commission that there is considerable attention paid to justice-involved Black girls beyond their alleged offense, and heightened concern about the well-being of Black girls. At-risk factors could include research suggesting that Black girls are slowly introduced to the criminal justice system by disciplinary policies throughout society, including schools that harshly punish girls based on stereotypes about Black femininity.

Additionally, BHJJ research presented to The Commission by the Juvenile Court system showed that parents surveyed indicated that nearly 50% of the youth have lived in a household with someone convicted of a crime. This slightly surpassed other traumatic life situations noted in the BHJJ parent surveys, including nearly half of the youth who had run away or had a biological family member with a drinking or drug problem.
### Black girls as victims | 2017

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Black girls in this age group are 1.5 times more likely to be a victim than white girls in the same age group.

### Black girls as suspects | 2017

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Black girls 11-21 are 2 times more likely to be a suspect than white girls in the same age group.

### Black girls as victims | 2018

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Slight decrease in interactions as victims, yet 2 times more likely to be a victim compared to the 1.5 times in 2017.

### Black girls as suspects | 2018

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No notable change in percentage from 2017 to 2018.
SOCIAL MEDIA

Radio One
Sling Shot Media Group, LLC

Social media plays a critical role in Black girls’ socialization and self-esteem. Their impressions, images, and independence are often interpreted by the number of social media “likes” they receive, as explained to The Commission on Black Girls by a millennial-aged multimedia professional and spiritual leader.

Black girls may make a loose association between their regard for self and others and the urgency of achieving a “like” status. The real-life disconnect that Black girls can experience between these two quality of life decisions can often lead to unhealthy and cruel behaviors assigned to the girl behind the post.

The chart below depicts the responses of the girls surveyed by the Commission on the question of which social media platforms they use:

Of the Black girls participating in The Commission’s quality of life survey, only 6.2% under age 16 and 2.1% ages 16-22 had no social media accounts at all. Twenty percent reported that social media had been used to engage in what they believed to be bullying against them. Bullying is a prevalent problem for young people and is now more far-reaching because social media makes it easier to bully anonymously or behind a keyboard or phone screen. Even if the bullying does not occur on social media, it can easily spread hateful messages and videos that exacerbate the effects of in-person bullying.
When asked if any form of social media is used, girls responded as shown in the chart below:

The social media subject matter expert presenting to The Commission suggested that Black girls may not even have a response to hypothetical social media usage questions such as: “Can you live without it? Where does it rank in your day? Can you control it, or does it control you?”

Other responses were mainly YouTube and TikTok.
STRATEGIES AND RECOMMENDATIONS

COMMISSION ON BLACK GIRLS
THE COMMISSION ON BLACK GIRLS
STRATEGIES AND RECOMMENDATIONS

The action-oriented focus of The Commission on Black Girls (COBG) requires moving beyond merely learning or just understanding the information received and reviewed during the first phase of the COBG’s work. The Commission will begin prioritizing and implementing strategies and recommendations, under the purview of its overarching recommendation:

OVERARCHING RECOMMENDATION

The Commission on Black Girls will evolve from its current two-year temporary status into a permanent entity. The Commission will focus on engaging the community in implementing the strategies and recommendations in this report. The input collected and presented in this report will serve as the basis for launching the establishment of the permanent Commission as a data-driven center of excellence to positively transform quality of life outcomes for Black girls in Columbus and Central Ohio.

The Commission’s preliminary synthesis of the information summarized throughout this report resulted in the identification of 3 strategies and 18 recommendations, encompassing key quality of life indicators reflected in the data collected by the COBG during its inaugural year. It should be noted that the information shared, data collected, and recommendations strategized are reflective of the current circumstances and tailored needs of Black girls ages 11-22.

This report of the COBG’s work thus far is intended to be a “living document” that serves as the initial foundation for strategies that are responsive to existing and new opportunities, resulting in COBG action steps that:

▶ **Mobilize** the stakeholders needed to begin or enhance best practices targeted toward minimizing disparities in comparable statistics between Black girls and their similarly situated non-Black peers.

▶ **Leverage** Commission members’ abilities to individually and collectively influence the pace, dispersion, and funding of equitable remedies throughout the relevant systems.

▶ **Engage** thought leaders with decision-makers and collaborators in developing a process to encourage individuals and organizations to come forward with breakthrough innovative ideas that result in short-term and long-term programmatic successes.

▶ **Expand** the public understanding of the intersectionality of racism, sexism, social determinants of health, and the quality of life aspirations of Black girls.
Strategies and Recommendations

STRATEGY #1
Create an environment that is free of racism that impairs the ability of Black girls to see themselves and be seen in a manner that fosters their ability to develop and maintain positive quality of life perspectives to the same extent as their non-Black peers.

“I can see all that I can be.”
“We see all that she can be.”

Recommendations

1.1 Address historical practices of institutional and systemic racism

- Provide education on the historical, systematic racial disenfranchisement that has subjected Black girls to increased hardships.
- Advocate for anti-racist policies across the lifespan of Black girls.

1.2 Training

- Seek information to understand the root causes of issues and address vulnerabilities that Black girls have endured due to implicit biases.
- Advocate for implicit and explicit bias training opportunities focused on a broad range of key stakeholders impacting all aspects of the quality of life of Black girls.

STRATEGY #2
Create and strengthen holistic, systemic approaches to address and disrupt pervasive cycles of education, health, and economic societal inequities that adversely impact the progress of Black girls toward their individual quality of life goals.

Recommendations

2.1 Education

- Create breakthrough conversations that entice more innovative educational paradigms to surface among educators and school districts. Foster similar innovation among key external stakeholders such as parents, families, faith communities, policymakers, and service providers.
- Promote models that move away from exclusionary discipline to strategies that create restorative justice environments in schools. Support school personnel in understanding how to provide behavioral modification support and transform schools into centers of safety and healing.
- Support girls in obtaining their high school diplomas and promote education beyond high school, including college, skilled trades, and certification programs that are pathways to livable wage jobs.
- Address overwhelming restrictions and eligibility requirements that create barriers to access services.

- Increase mentoring programs as self-empowering clubs and activities.

- Encourage recruitment of Black staff and faculty.

- Expand curriculum to include self-regulating courses and classwork to engage the “whole brain.”

- Support reproductive health education curriculum in schools and other settings.

- Strengthen Black history curriculum within school systems.

- Support science, technology, engineering, arts, and mathematics (STEAM) education for Black girls.

### 2.2 Primary Health and Mental and Emotional Well-being

- Advocate for age-appropriate, gender-neutral, trauma-informed medical, dental, reproductive, and behavioral health services in all schools.

- Advocate for trauma-informed, culturally competent practices and practitioners within the healthcare systems.

- Provide resources that address bullying, self-harming behaviors, suicide, child maltreatment, and prevention services.

- Advocate for more comprehensive health education that is inclusive of healthy food, exercise, and reproductive health, as well as training on behavioral health and identifying personal triggers.

- Ensure that collaborative efforts to provide tailored broad-ranging behavioral health services focused on ‘what the girls believe’ will aid, enrich, and develop their lives.

- Facilitate conversations with colleges and universities for the need to recruit and retain more Black students in behavioral health and medical programs.

- Encourage the recruitment and retention of African American healthcare professionals.

- Increase mental health literacy as a means of eliminating the stigma of seeking mental health services.

- Create and promote safe, accessible spaces with walk-in hours.

- Advocate for funding for community based clinicians and community health workers.

- Create and fund a marketing campaign that will encourage, affirm, and support our Black girls.

- Promote social-emotional integration
  - Create opportunities for Black girls to engage in Fashion, Literary, and Performing Arts
  - Support opportunities for Black girls in the Culinary Arts
  - Expose Black girls to Mechanical Arts
  - Provide funding for Black girls to participate in sport activities
2.3 Economics

- Promote models that are transitioning strategies to survive into strategies to thrive:
  - Minimum wage to living wage
  - Homelessness to home ownership
  - Underinsured/uninsured to insured
  - Joblessness/underemployed to career skill development
  - Food insecurity/obesity to nutritional healthy food security
  - High school graduation to college, skilled trades, and certification programs

- Advocate for summer employment and/or internship opportunities for girls.
- Encourage and support entrepreneurship for Black girls.
- Advocate for trauma-informed workforce development programs.

STRATEGY #3
Advocate for resources and initiatives that will enhance successful quality of life pathways for Black girls.

Recommendations

3.1 Teen Pregnancy

- Advocate for funding of support services for teen mothers and fathers.
- Support affordable, quality childcare programs that are welcoming to teen mothers and understand the needs/barriers young mothers face.

3.2 Gender Identity and Sexual Orientation

- Increase and strengthen LGBTQ+ programs and services.
- Encourage safe, affirming, and inclusive spaces, policies, language, and services for those serving LGBTQ+ youth and families.
- Increase visibility and representation in leadership spaces.
- Increase education and training in LGBTQ+ language, intersectionality, and cultural competency.

3.3 Child Welfare

- Advocate for service models that support the family as a unit and kinship care versus isolating children receiving services.
- Encourage Black families and individuals to volunteer as mentors. Increase community engagement that facilitates the fostering and adoption of Black children.
- Support volunteers who work with youth who are transitioning to independent living.
3.4 Homeless Youth

- Address housing insecurities using a prevention framework.
- Support funding for emergency, transitional, and permanent housing.

3.5 Mentoring, Leadership, and Creating Connections

- Increase mentorship opportunities and models centered in identity-based cultural affirmations of young womanhood that are unapologetically pro-Black.
- Create a funded signature event that serves as a celebratory and learning summit linking providers of mentoring services, Black girls, prospective mentors, key community stakeholders, and nationally known role models and subject matter experts.
- Help Black girls develop life goals and facilitate the execution of objectives related to those goals.
- Advocate for roundtables, listening circles, and other forums that provide a platform for Black girls to talk about issues, create connections, get advice, and receive support.
- Support culturally relevant leadership programming that focuses on Black girls.
- Increase awareness of the need for Black professionals and pathways for entry into occupations with low and disparate representation.
- Support educational opportunities and funding to train culturally competent professionals with an emphasis on increasing the number of Black professionals in occupations that will likely work with Black girls.

3.6 Safety, Community Engagement, and Juvenile Justice

- Address the differential response rates to Black girls’ victimization from early education systems, child welfare systems, healthcare systems, and justice systems.
- Create frequent facilitated, equity-based dialogues of understanding intended to minimize Black girls’ contacts with law enforcement and juvenile justice systems.
- Support the work of the Behavioral Health Juvenile Justice (BHJJ) initiative.
- Advocate for alternative response models that support restorative justice practices.
- Create partnerships and encourage Black girls to learn more about careers in law enforcement.

3.7 Spirituality

- Convene faith communities to advocate for identification of contemporary means of establishing proactive, ongoing outreach and engagement among Black girls and their families.

3.8 Collective Self-Development Virtual Communities

- Convene collaborative partnerships to create and sustain positive multimedia networking platforms for and by Black girls.
3.9 Self-Governance
- Encourage self-awareness and self-affirming behaviors among Black girls and their parents based on historical cultural values.

3.10 Intimate Relationships
- Promote and support organizations that provide education and resources on healthy relationships to Black girls.

3.11 Parenting Gaps
- Establish a task force of parents of Black girls to recommend and implement community-level approaches to promoting parental engagement.
- Increase information sessions to all communities so that Black girls, parents, guardians, and caregivers are aware of resources.
- Develop a repository of resources for all Black girls.

3.12 Transportation
- Explore transportation support to widen accessibility to available services and programming.

3.13 Data disaggregation
- Advocate for data to be disaggregated whenever possible to facilitate analyses of relative impacts on Black girls and comparable groups.

The Commission on Black Girls invites the community’s continued participation and input into its ongoing work to maximize the quality of life of Black girls in Columbus, OH.

Website: www.thecommissiononblackgirls.org
Facebook: The Commission on Black Girls
Instagram: the commission on black girls
Columbus City Councilmember Priscilla R. Tyson
PRTyson@columbus.gov.
APPENDIX
Columbus Girls’ Focus Group
Black girl Quality of Life in Columbus, Ohio
10.20.2018

An Important Note for Participants
Welcome and thank you for joining us to discuss factors affecting Black girls’ quality of life in our city! We have partnered with Council Member Tyson and The Commission on Black Girls to conduct this research that is meant to increase our understanding of the day to day experiences of young ladies like you. As part of our research process, we are listening to your stories and recommendations for future action.

Please place your name and signature in the “Agreement to Participate” section below to indicate that you understand that participation today is voluntary and you are free to leave at any time. Your signature also confirms that you understand that the feedback you offer here will be reported without your name or identifying information about who you are. If you are under the age of 18, please ask your parent or the adult who accompanied you to this focus group to complete their portion of the form.

There are no wrong or right answers. Your answers are anonymous.

Also, we will be recording the session purely for the purposes of taking notes. No one outside of the research team will be given access to these recordings. If you are not comfortable with being recorded, please let the focus group facilitator know.

Lastly, in order to be respectful to everyone’s voice and perspectives, we ask that one person speak at a time and that all phones remain silent for the duration of this session.

AGREEMENT TO PARTICIPATE IN THE LISTENING SESSION
I have read the consent form and I agree to take part in this focus group. I understand that my participation is voluntary; that I am free to leave at any time; and that statements from this focus group may be published in the future but that I cannot be identified.

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Focus Group Questions (Girls Under 15)

1. Let’s start by introducing ourselves. Why doesn’t everyone go around the room and say their first name, age, and one fun fact about you.

2. If you could choose any three words to describe yourself, what would they be?

3. How would you describe your experience at school?
   a. Are you having a good, thriving experience? If so, why? If not, why not?

4. How many of you are involved with activities like sports or clubs? Can you talk more about what activities you participate in and why? If you don’t participate in any activities – why?
   (Prompt – ask about leadership-related activities if doesn’t come up naturally)

5. Who do you live with most of the time?
   a. Are you happy with your living situation? Why or why not?
   b. When you need help do you feel like you can talk to the people you live with? Why or why not?

6. Everyone faces challenges. Whenever you face challenges, who do you talk about it? Why have you chosen that person (or those people)?
   a. Would you ever consider talking to a mental health professional? Why or why not?

7. Have any of you moved within the last 6 months? One year? Can you talk about that experience?
   a. Have any others moved frequently? What was that like?
   b. Have any of you had to switch schools frequently? If so, can you talk about that experience?

8. Do you feel safe in your community? Why or why not?
   a. What about in your…school? (may include bullying prompt)

9. What are your goals for the future? (Prompts – school, work, etc.)

10. Do you feel like your family is supportive of your goals? Explain why or why not.
    a. Are there other people you look to for support? (Prompts if needed – teachers, friends, neighbors, religious leaders, etc.)

11. Is there anything that the adults in your life could do to make it better for you? If so, what?

12. Do you have anything else you’d like to add?
Focus Group Questions (Girls 15-18)

1. Let’s start by introducing ourselves. Why doesn’t everyone go around the room and say their first name, age, and one fun fact about you?

2. If you could choose any three words to describe yourself, what would they be?

3. How would you describe your experience at school?
   a. Are you having a good, thriving experience? If so, why? If not, why not?

4. How many of you are involved in activities like sports or clubs? Can you talk more about what activities you participate in and why? If you don’t participate in any activities – why?
   (Prompt – ask about leadership-related activities if doesn’t come up naturally)

5. How many of you are employed or have been employed (internships included)?
   a. Can you tell us about that experience? How did you gain that employment, where was it, and was it a meaningful or useful experience?

6. Who do you live with most of the time?
   a. Are you happy with your living situation? Why or why not?
   b. When you need help with anything do you feel like you can talk to the people you live with? Why or why not?

7. Everyone faces challenges. Whenever you face challenges, who do you talk about it? Why have you chosen that person (or those people)?
   a. Would you ever consider talking to a mental health professional? Why or why not?

8. Have any of you moved within the last 6 months? One year? Can you talk about that experience?
   a. Have any others moved frequently? What was that like?
   b. Have any of you had to switch schools frequently? If so, can you talk about that experience?

9. Do you feel safe in your community? Why or why not?
   a. What about in your…school? (may include bullying prompt)

10. What are your goals for the future? (Prompts – school, work, etc.)

11. Do you feel like your family is supportive of your goals? Explain why or why not.
   a. Are there other people you look to for support? (Prompts if needed – teachers, friends, neighbors, religious leaders, etc.)

12. Is there anything that the adults in your life could do to make it better for you? If so, what?

13. Do you have anything else you’d like to add?
Focus Group Questions (Ladies 19-22)

1. Let’s start by introducing ourselves. Why doesn’t everyone go around the room and say their first name, age, and one fun fact about you.

2. If you could choose any three words to describe yourself, what would they be?

3. How would you describe the experience you had in school (K-12)?
   a. Did you have a good, thriving experience? If so, why? If not, why not?

4. Were you involved with activities like sports or clubs? Can you talk more about what activities you participated in and why? If you didn’t participate in any activities – why?
   (Prompt – ask about leadership-related activities if doesn’t come up naturally)

5. Are any of you in college?
   a. What has that experience been like? Do you feel as though you were adequately prepared

6. How many of you are employed?
   a. Can you tell us about that experience? How did you gain that employment, where is it, and has it been a meaningful or useful experience?

7. Who do you live with most of the time?
   a. Are you happy with your living situation? Why or why not?
   b. When you need help with anything do you feel like you can talk to the people you live with? Why or why not?

8. Everyone faces challenges. Whenever you face challenges, who do you talk about it? Why have you chosen that person (or those people)?
   a. Would you ever consider talking to a mental health professional? Why or why not?

9. Do you feel safe in your community? Why or why not?

10. What are your goals for the future? (Prompts – school, work, etc.)

11. Do you feel like your family is supportive of your goals? Explain why or why not.
   a. Are there other people you look to for support? (Prompts if needed – teachers, friends, neighbors, religious leaders, etc.)

12. Is there anything that The Commission on Black Girls or community leaders could do to improve your quality of life? If so, what?

13. Do you have anything else you’d like to add?
Listening Session with Councilmember Tyson and Members of The Commission on Black Girls:
Black girl Quality of Life in Columbus, Ohio
09.27.2018

An Important Note for Participants (15 years and older)
Welcome and thank you for joining us to discuss factors affecting Black girls’ quality of life in our city! We are grateful for your willingness to share your views on this important issue. You will be able to respond to the guiding questions using this form. If you would like to verbally communicate your response to one of these questions, you may be given an opportunity to do so. You will be guided through this process. Even if you are not verbally communicating your responses, please respond to the questions on this sheet and submit it to the facilitator before you leave. If you have no response, feel free to leave it blank. If you do not want to answer a question, leave it blank. This is not a test so it will not be credited against you. Only say as much as you want to say.

There are no wrong or right answers. We expect that you will have differing points of view. Please feel free to be open and share your point of view even if it differs from what others have said. What you say here will not be linked back to your name; we want to include your thoughts and ideas in the report. Your participation today is voluntary and you are free to leave with your guardian at any time.

Please place your name and signature in the “Agreement to Participate” section below to indicate that you understand that participation today is voluntary and you are free to leave at any time. Your signature also confirms that you understand that the feedback you offer here will be reported without your name or anything that would help someone identify who you are. If you are under the age of 18, please ask your parent or the adult who accompanied you to this meeting to complete their section of the form.

If you take the opportunity to speak at the mic, please identify yourself by the number on the right hand corner of this page and not your name. If you choose to say your name, it will be included in a publicly available recording but will not be included in the report.

We ask that you turn off your cell phones or place them on silent so we are not interrupted.

AGREEMENT TO PARTICIPATE
I have read the consent form and I agree to take part in this research. I understand that my participation is voluntary, that I am free to withdraw from the study at any time, and that data from the research may be published in the future but that I cannot be identified.

Print Your Name   Signature      Age

__________________________________________   _______________________________  ________

Parent/Guardian Name  Signature     Date

__________________________________________   _______________________________  __________
Questions Guiding Today’s Discussion

1. Do you face major challenges that prevent you from succeeding in school, thriving in employment, or otherwise living a healthy life? If so, what are some of your greatest challenges?

2. Have you been given access to resources or programs (e.g. tutoring services, counseling, and career development programs) that help you to overcome the challenges you face? If so, what are they and do you find them to be helpful? Why or why not?

3. Tell us one thing that community leaders could do to help you to live out your full potential.
Listening Session with Councilmember Tyson and Members of The Commission on Black Girls:
Black girl Quality of Life in Columbus, Ohio
09.18.2018

An Important Note for Parents or Guardians
Welcome and thank you for joining us to discuss factors affecting the Black girls’ quality of life in our city! We are grateful for your willingness to share your views on this important issue. You will be able to respond to the guiding questions using this form. If you would like to verbally communicate your response to one of these questions, you may be given an opportunity to do so. You will be guided through this process. Even if you are not verbally communicating your responses, please respond to the questions on this sheet and submit it to the facilitator before you leave. If you have no response, feel free to leave it blank.

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Print Your Name __________________________ Signature __________________________ Date ___________

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Questions Guiding Today’s Discussion

1. What significant challenges has your daughter(s) or ward(s) faced that seem to be impeding her success in school or preventing her from living a healthy life?

2. Has she been given access to resources or programs (e.g. tutoring services, counseling, and after-school programs) that help her to overcome the challenges she faces? If so, what are they and do you find them to be helpful? Why or why not?

3. Do you have any ideas for specific strategies that the City could use to improve quality of life outcomes for Black girls?
Listening Session with Councilmember Tyson and Members of The Commission on Black Girls:
Black girl Quality of Life in Columbus, Ohio
09.18.2018

An Important Note for Service Providers
Welcome and thank you for joining us to discuss factors affecting the Black girls’ quality of life in our city! We are grateful for your willingness to share your views on this important issue. You will be able to respond to the guiding questions using this form. If you would like to verbally communicate your response to one of these questions, you may be given an opportunity to do so. You will be guided through this process. Even if you are not verbally communicating your responses, please respond to the questions on this sheet and submit it to the facilitator before you leave. If you have no response, feel free to leave it blank.

There are no wrong or right answers. We expect that you will have differing points of view. Please feel free to be open and share your point of view even if it differs from what others have said.

Please place your name and signature in the “Agreement to Participate” section below to indicate that you understand that participation today is voluntary and you are free to leave at any time. Your initial also confirms that you understand that the feedback you offer may be linked to the name of the organization you are representing today.

We ask that you turn off your cell phones or place them on silent so we are not interrupted.

AGREEMENT TO PARTICIPATE
I have read the consent form and I agree to take part in this research. I understand that my participation is voluntary, that I am free to withdraw from the study at any time, and that data from the research may be published in the future with my organization, role, and name identified.

Print Your Name

Signature

Date
Questions Guiding Today’s Discussion

1. What significant challenges have you observed Black girls facing that seem to be impeding their success in school or preventing them from living a healthy life?

2. What types of resources or programs has your organization provided that may be helpful to Black girls? How effective have they been and what are the opportunities for growth that you have identified?

3. Do you have any ideas for specific strategies that the City could use to improve quality of life outcomes (e.g. income, physical health, and mental health) for Black girls?
REFERENCES

[1] Centers for Disease Control and Prevention, Health Related Quality of Life (HRQOL) https://www.cdc.gov/hrqol/


[4] American Community Survey 2017 1-year estimates, City of Columbus


[16] U.S. Census Bureau, 2012-2016 American Community Survey 5-year Estimates, Columbus city, Ohio, Table B17029B
[17] U.S. Census Bureau, 2017 American Community Survey 1-year Estimates Columbus city, Ohio Table B17010B

[18] U.S. Census Bureau, 2017 American Community Survey 1-Year Estimates, Columbus city, Ohio, Table S2502


[21] The Commission on Black Girls survey results, 2018


[31] https://www.cdc.gov/violenceprevention/acestudy/about/html Retrieved 11/30/2018
Additional Publications Reviewed to Inform the Work


[23] Sling Shot Media, presentation to Columbus Commission on Black girls, December 13, 2018

[24] Columbus Area Integrated Health Services (CAIHS), presentation to Columbus Commission on Black girls, October 25, 2018


[26] The Community Toolbox, Center for Community Health Development at the University of Kansas, https://ctb.ku.edu/en


