

The background of the top section is a dark blue-tinted photograph of laboratory glassware, including several large glass bottles and a smaller vial, arranged on a surface. The lighting is soft, creating a professional and scientific atmosphere.

# White/Black: Part 2 Descendants of the Crack Epidemic

Historical Trauma and  
Addiction in the Black  
Community

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# Today's Agenda

- 1 Summary of White/Black Pt. 1
- 2 Additional Consequences of the War on Drugs Campaign
- 3 Case Study 1 & 2
- 4 National Response to Drug Use Throughout the Years
- 5 Benefits of Culturally Adapted EBPs
- 6 Tools and Tips to Implement in Practice



# Part One: Summary of White/Black Pt. 1

# Summary

WHITE/BLACK PT. 1



Racially Motivated Riots and Massacres



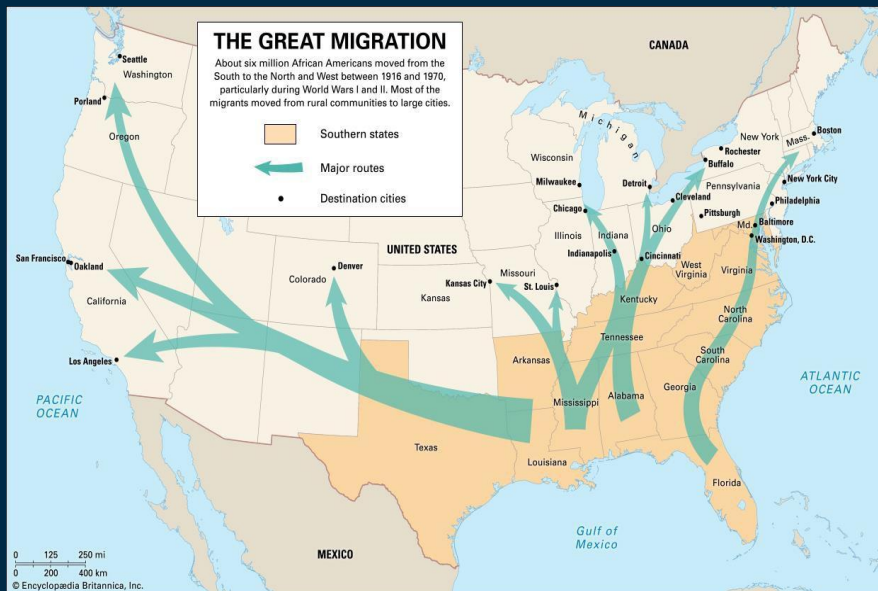
Discriminatory Practices  
Seen in Homeownership



The Crack Epidemic and the  
War on Drugs Campaign



Disparities in Treatment options



www.Britannica.com

- From 1916 through the 1970s an estimated 6 million Blacks migrated from the Deep South to Northeastern, Western and Midwestern cities
- Racial Violence, segregation, Northern labor shortages, escaping Jim Crow Laws, as root causes
- Estimated 3,500+ Black Americans lynched between 1882-1968

September 30<sup>th</sup> – October 1<sup>st</sup> - Elaine, AK

White Publications

**NEGROES PLAN TO  
KILL ALL WHITES**

SLAUGHTER WAS TO BEGIN WITH  
21 PROMINENT MEN AS THE  
FIRST VICTIMS.

**"WE JUST BEGUN" PASSWORD**

Blacks Had Armed Themselves and  
Planned to Kill Every White  
Person in Sight When Plot  
Was Exposed.

**VICIOUS BLACKS  
WERE PLANNING  
GREAT UPRISING**

All Evidence Points to  
Carefully Prepared  
Rebellion

**BEGUN PREMATURELY**

Blacks Suspected Officers  
Who Stopped Near Church  
by Accident.

**ORDER IS RESTORED NOW**

**SALE OF ARMS BANNED.**  
The Mayor, Chicago, in a proclamation today, prohibiting Attorney E. W. Devanney and Sheriff U. M. Nichol placed a ban on the sale of fire arms and ammunition in Jefferson county and the Black South Judicial District, following the killing of King's Legion. They declare the law will be rigidly enforced. Their statement:

"In view of the conditions now existing relative to some trouble in various parts of the country, and particularly Phillips county, and wishing to avoid any trouble in this county and district, we deem it necessary to call attention to the law in the matter of the sale of fire arms and ammunition. The Eleventh Judicial District includes the counties of Jefferson, Lincoln, Arkansas and DeWitt.

By William A. Wilson,  
Mayor, Chicago.

It is hereby ordered that every person who sells, transfers, leases and the delivery on the same and the receipt of the same in the lower part of this county since the beginning of the present year, to a carefully planned insurrection among a certain class of negroes, and that these plans were brought to a bold premature by the killing of one of the

Chicago Defender: Black Pub.

**THE Defender**  
GREATEST WEEKLY

Only Paper of the Race That Protects the Public's Interest

VOL. XIV NO. 42 SATURDAY CHICAGO, OCTOBER 11, 1936 SATURDAY PRICE FIVE CENTS

**BURN THREE AT STAKE IN GEORGIA**

Prisoners Given to Bloodthirsty Whites by Sheriff Who Sees Them Lynched

**Mobs Slay Arkansas Families**

Thousands Are Driven From South at Point of Guns

**Attorney Taylor Driven From South**

President of Equal Rights League Ordered From Georgia, Miss.

**TORCH LAW SANCTIONED**

**R. R. MEN CONVENE AT EIGHTH REG. ARMORY**

Disrupter Now Returning to Every State in the U.S.  
E. L. Mayo President

**VICTIMS OF BURNING ROTERS**

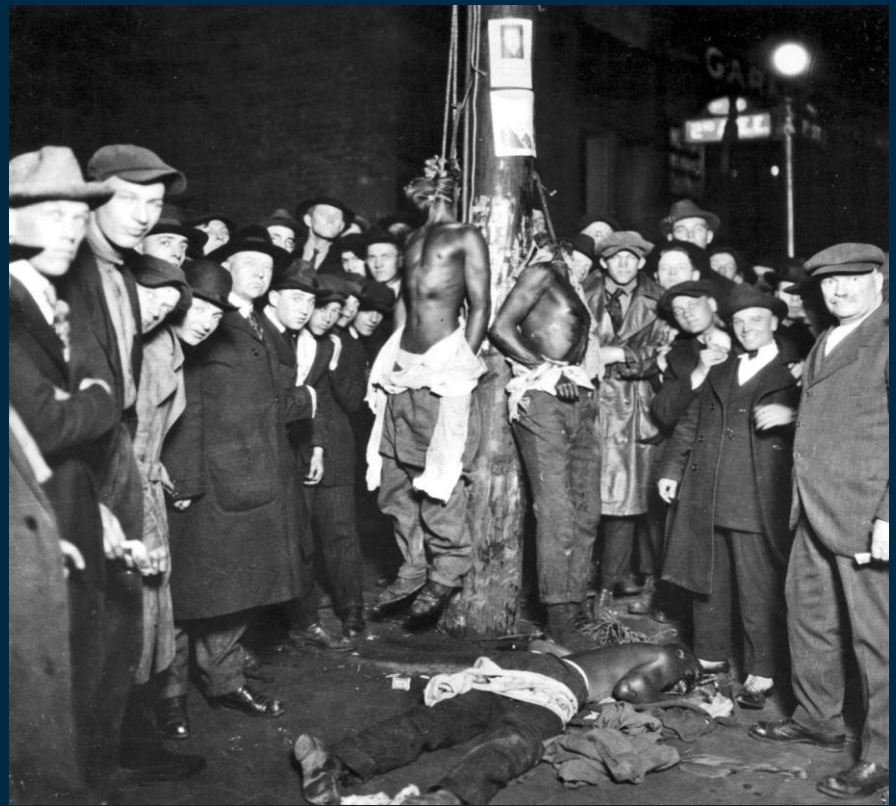


## The Red Summer of 1919- Total Incidents

| Date               | Place                        |
|--------------------|------------------------------|
| January 22         | Bedford County, Tennessee    |
| February 8         | Blakeley, Georgia            |
| March 12           | Pace, Florida                |
| March 14           | Memphis, Tennessee           |
| April 10           | Morgan County, West Virginia |
| April 13           | Jenkins County, Georgia      |
| April 14           | Sylvester, Georgia           |
| April 15           | Jenkins County, Georgia      |
| May 5              | Pickens, Mississippi         |
| May 10             | Charleston, South Carolina   |
| May 10             | Sylvester, Georgia           |
| May 21             | El Dorado, Arkansas          |
| May 26             | Milan, Georgia               |
| May 29             | New London, Connecticut      |
| May 27-29          | Putnam County, Georgia       |
| May 31             | Monticello, Mississippi      |
| June 13            | Memphis, Tennessee           |
| June 13            | New London, Connecticut      |
| June 27            | Annapolis, Maryland          |
| June 27            | Macon, Mississippi           |
| July 3             | Bisbee, Arizona              |
| July 6             | Dublin, Georgia              |
| July 7             | Philadelphia, Pennsylvania   |
| July 8             | Coatesville, Pennsylvania    |
| July 9             | Tuscaloosa, Alabama          |
| July 10-12         | Longview, Texas              |
| July 11            | Baltimore, Maryland          |
| July 15            | Louise, Mississippi          |
| July 15            | Port Arthur, Texas           |
| July 19-24         | Washington, D.C.             |
| July 20            | New York City, New York      |
| July 21            | Norfolk, Virginia            |
| July 23            | New Orleans, Louisiana       |
| July 23            | Darby, Pennsylvania          |
| July 26            | Hobson City, Alabama         |
| July 27 - August 3 | Chicago, Illinois            |
| July 24            | Newberry, South Carolina     |
| July 31            | Bloomington, Illinois        |
| July 31            | Syracuse, New York           |
| July 31            | Philadelphia, Pennsylvania   |
| August 1           | Whatley, Alabama             |
| August 3           | Lincoln, Arkansas            |
| August 4           | Hattiesburg, Mississippi     |
| August 6           | Texarkana, Texas             |
| August 21          | New York City, New York      |
| August 22          | Austin, Texas                |
| August 27-29       | Ocmulgee, Georgia            |
| August 30          | Knoxville, Tennessee         |
| August 31          | Bogalusa, Louisiana          |
| September 10       | Clarksdale, Mississippi      |
| September 28-29    | Omaha, Nebraska              |
| September 29       | Montgomery, Alabama          |
| October 1-2        | Elaine, Arkansas             |
| October 1-2        | Baltimore, Maryland          |
| October 31         | Corbin, Kentucky             |
| November 2         | Macon, Georgia               |
| November 11        | Magnolia, Arkansas           |
| November 13        | Wilmington, Delaware         |
| December 27        | West Virginia                |

\*Based on a New York Times report

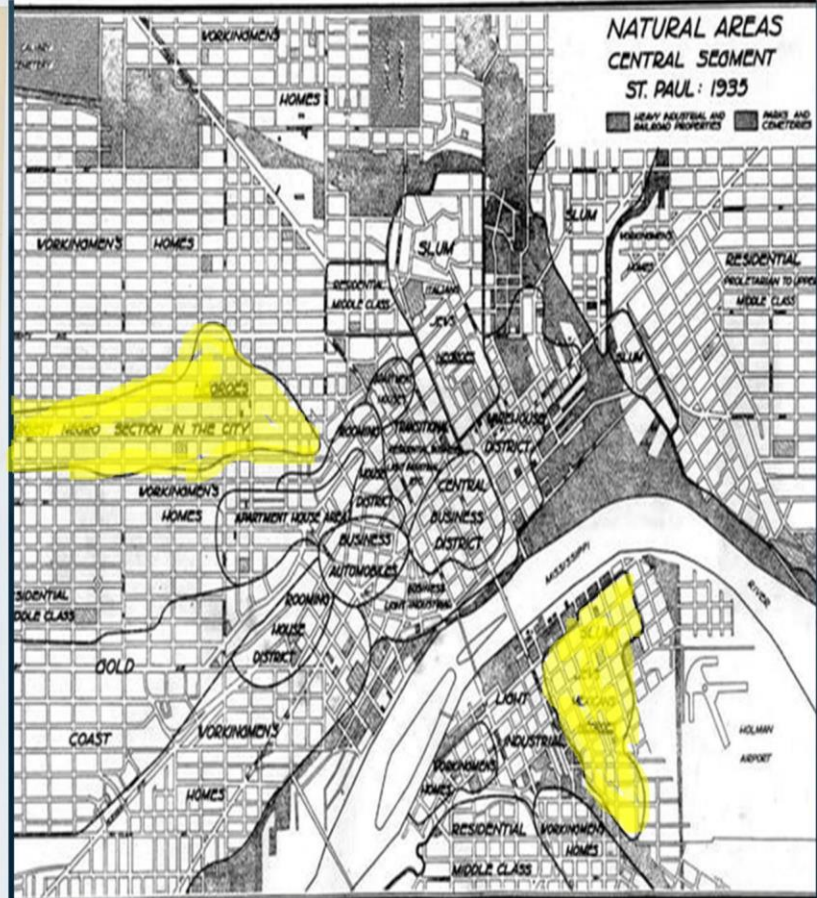
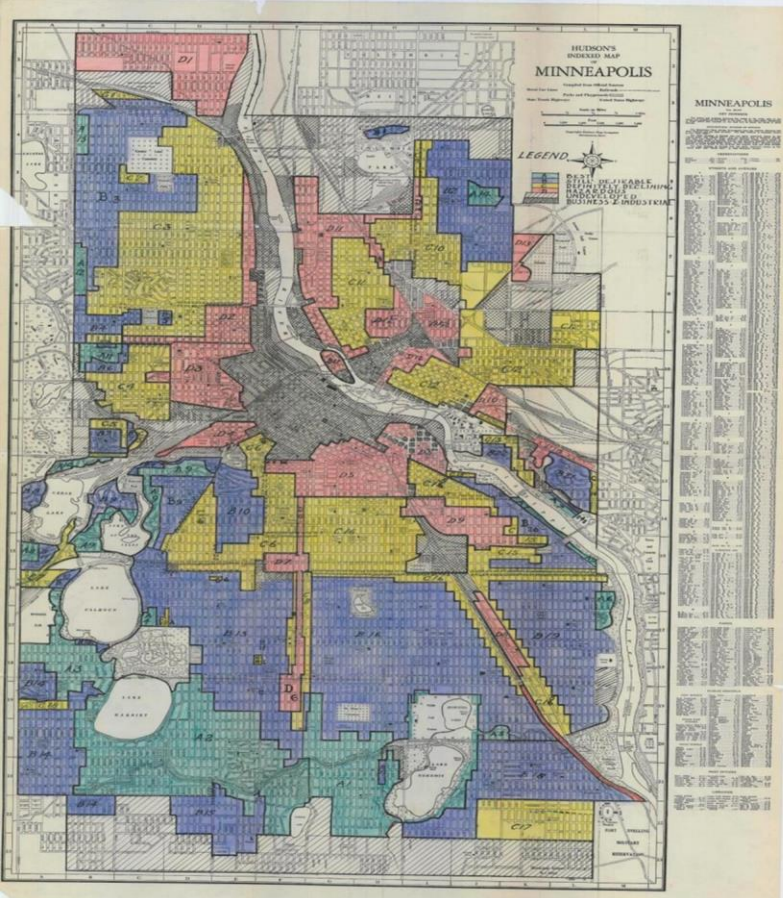




## Discriminatory Home Ownership Practices

SEPARATE BUT UNEQUAL

- Exclusionary Zoning and Racial Covenants
  - ✓ Both introduced in early 1900s
  - ✓ Restrictive covenants (agreements) written into real estate instruments (deeds)
  - ✓ Purpose: Keep Blacks from owning homes in middle/upper class neighborhoods (racial segregation)
- G.I. Bill
  - ✓ low-cost mortgages, low-interest loans to start businesses, unemployment aid
  - ✓ Many Black American WW2 veterans were not allowed access to this benefit
- Redlining
  - ✓ Home Owner's Loan Corp. Act of 1933
  - ✓ Credited with creation of redlining
  - ✓ Fed gov. denial of various services (i.e. home loans, homeowners insurance)
  - ✓ Targeted Population: Poor Black communities





## Summary of White/Black Pt. 1

### The War on Drugs

- 1989- African Americans represented 12-15% of all drug use in the U.S.—they made up 41% of all arrests, an increase of 38% from 1988
- White individuals comprised 47% of those in state-funded treatment facilities—they made up less than 10% of those sent to prison
- 80% of people in federal prison, and 60% in state prison for drug related offenses are Black or Latino
- 1993—88% of federal crack cocaine distribution convictions were Black, only 4.1% were white
- 1993—2,100 federal prisoners serving time for crack convictions, 92% were Black

## Summary of White/Black Pt. 1

### DISCRIMINATORY PRACTICES IN RECEIVING TREATMENT

- Lack of access to prescription pain medication
- Preconceptions, racial biases and stereotyping of Black people seeking pain relief:
  - ✓ Black people are perceived as drug seeking
  - ✓ More likely to abuse drugs
- In 2012, 20 years of published research found Blacks were 34% less likely than whites to be prescribed opioids for conditions such as backaches, abdominal pain and migraines
- 14% less likely to receive opioids for pain caused by traumatic injuries or surgery
- White children with appendicitis were three times more likely to receive opioids in the emergency room than Black children

# Disparities in Treatment Options

**Table. Demographic Characteristics Associated With Buprenorphine Prescribing in Outpatient Care in the United States in 2004-2007 and 2012-2015**

| Variable                          | 2004-2007  |   | 2012-2015  |   | Adjusted OR (95% CI) <sup>b</sup> |
|-----------------------------------|--|---|--|---|-----------------------------------|
|                                   | Visits Without Buprenorphine (n = 244 274), % <sup>a</sup> | Visits With Buprenorphine (n = 183), % <sup>a</sup> | Visits Without Buprenorphine (n = 204 527), % <sup>a</sup> | Visits With Buprenorphine (n = 718), % <sup>a</sup> |                                   |
| <b>Race/ethnicity<sup>c</sup></b> |  |   |  |   |                                   |
| White                             | 83.5   | 90.5  | 83.1   | 94.9  | 1.00                              |
| Black                             | 11.5   | 6.5   | 10.6   | 2.7   | 0.23 (0.13-0.44)                  |
| Other                             | 5.0  | 3.0   | 6.3  | 2.4   | 0.27 (0.08-0.90)                  |
| <b>Payment method</b>             |  |   |  |   |                                   |
| Private insurance                 | 52.0   | 19.8  | 49.2   | 33.9  | 1.00                              |
| Medicare/Medicaid                 | 35.1   | 31.5  | 38.1   | 18.9  | 1.16 (0.74-1.82)                  |
| Self-pay                          | 4.5  | 37.8  | 4.5  | 39.6  | 12.27 (6.86-21.91)                |
| Other or unknown                  | 8.5  | 11.0  | 8.2  | 7.5   | 1.35 (0.78-2.35)                  |
| <b>Sex</b>                        |  |   |  |   |                                   |
| Female                            | 58.8   | 47.5  | 58.3   | 39.7  | 1.00                              |
| Male                              | 41.2   | 52.5  | 41.7   | 60.3  | 2.22 (1.82-2.70)                  |
| <b>Age, y</b>                     |  |   |  |   |                                   |
| <30                               | 29.9   | 40.0  | 25.4   | 30.3  | 1.00                              |
| 30-50                             | 23.8   | 47.5  | 21.4   | 47.2  | 1.68 (1.33-2.12)                  |
| >50                               | 46.3   | 12.5  | 53.2   | 22.4  | 0.38 (0.27-0.52)                  |

Abbreviation: OR, odds ratio.

<sup>a</sup> Analyses were completed using survey design elements accounting for visit weight, clustering, and stratification to generate nationally representative estimates.

<sup>b</sup> Adjusted odds ratios (AOR) were generated using logistic regression (1 = buprenorphine prescribed; 0 = no buprenorphine), including the variables reported in the Table. The AOR reflects the OR for buprenorphine treatment

for a given visit characteristic during 2012 to 2015. The 2004 to 2007 visit characteristics are provided for comparison; they are not included in the logistic regression.

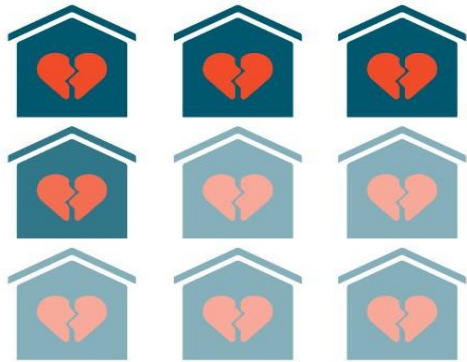
<sup>c</sup> White (Hispanic and non-Hispanic), black (Hispanic and non-Hispanic), and other (Asian, native Hawaiian/Pacific Islander, American Indian/Alaskan native, and multiple race, both Hispanic and non-Hispanic).

- From 2012-2015, out of the 13.4 million patients receiving buprenorphine prescriptions, white patients accounted for 12.7 million, and minorities accounted for only 363,000.
- Studies show Black patients are 77% less likely to be prescribed buprenorphine and more likely to receive methadone treatment
- Lack of access to full range of treatments due to: restrictive protocols, insurance status, geography

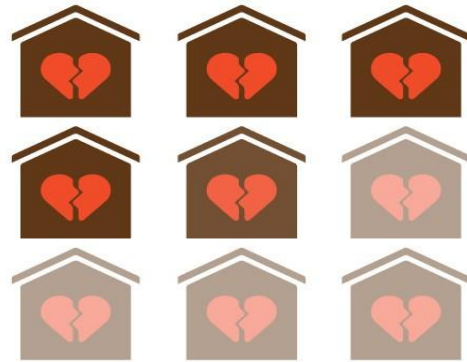


## Part Two: Additional Consequences of the War on Drugs Campaign

**Over one-third of American children**  
**have been the subject of a child abuse/neglect investigation**

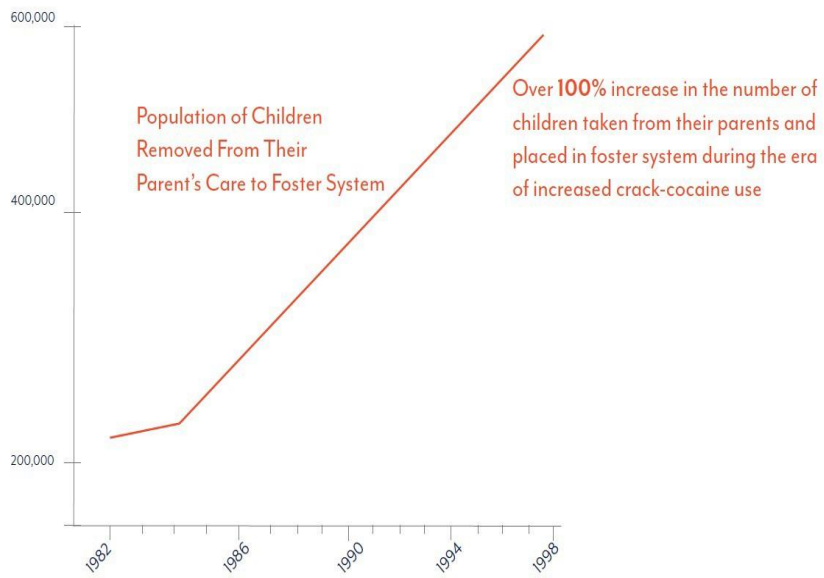


**and over half of Black children**  
**have been the subject of a child abuse/neglect investigation**



<https://www.movementforfamilypower.org/>





<https://www.movementforfamilypower.org/>

# Between 2000 and 2011



✓ US Pop: 60%



✓ US Pop: 12%



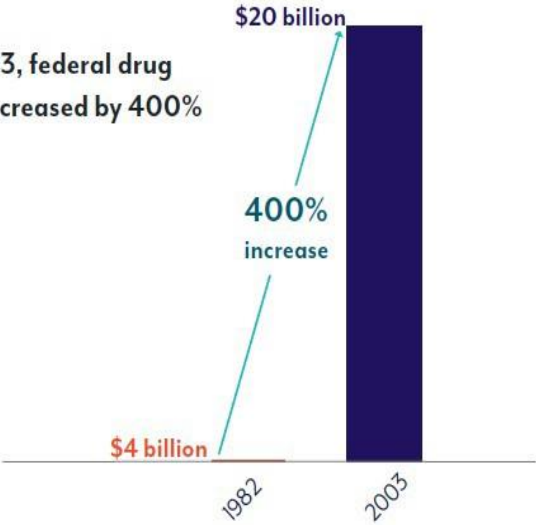
✓ US Pop: 1.3%

2019 U.S. Census Bureau Estimates

**had been removed from their parents' care.**

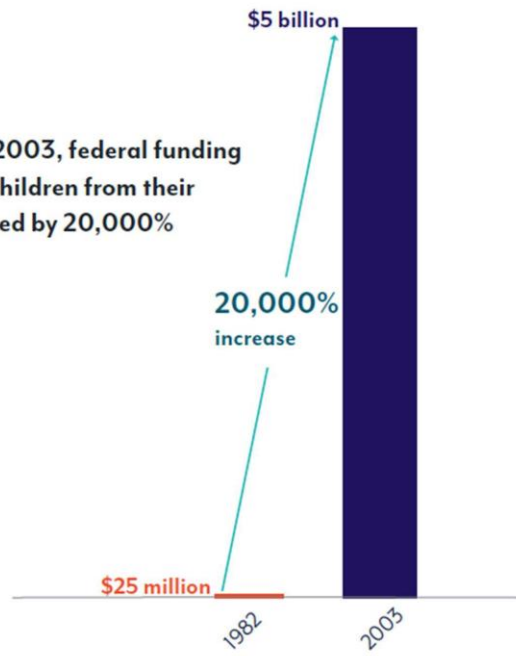
<https://www.movementforfamilypower.org/>

From 1982 to 2003, federal drug control funding increased by 400%



<https://www.movementforfamilypower.org/>

From 1982 to 2003, federal funding for removing children from their homes increased by 20,000%



<https://www.movementforfamilypower.org/>



# Case Study #1

# Case Study #1

CPS AND THE WAR ON DRUGS

- J.D.
- Age: 43
- Black American woman
- High School Graduate
- Resides in N. Minneapolis
- Parents (deceased)
- 3 Children- 1 male child currently in home
- Mother worked multiple jobs

# Case Study #1

CPS AND THE WAR ON DRUGS

- Role as CM— to advocate for student at his school
- While working with student— discovered two older siblings were placed in foster care
- Mother regretted getting police involved

# Case Study #1

CPS AND THE WAR ON DRUGS

- Partner was arrested, and mother was questioned by law enforcement regarding capacity to care for children
- Questions revolved around drug use
- CPS case was opened—accused of parental negligence
- The mother's two children were eventually placed in foster care





# Part Three: National Response to Drug Use Through the Years

## History of Drug Laws in the U.S.

| 8,000 BC<br>Drug<br>Consumption   | 1875<br>First Drug<br>Law   | 1880<br>Angell Treaty<br>of 1880   | 1909<br>Opium<br>Exclusion Act   | 1914<br>Harrison Narcotics<br>Act   |
|---|---|--|--|---|
| <p>Humans have been consuming substances with the goal of altering consciousness forever. Actual evidence exists dating as far back as 10,000 years ago</p> | <p>The first drug law passed in the US was a local ordinance in San Francisco meant to curb the proliferation of opium dens. Anti-Chinese sentiment was growing</p> | <p>The Angell Treaty, intended to formalize aspects of the US relationship with China, included a clause that outlawed the importation of opium by Chinese nationals (but not US citizens)</p> | <p>Fully banned the import of opium and its derivatives into the US. The law was a thinly-veiled attempt to appease anti-Chinese sentiment growing throughout Western US</p> | <p>First major federal drug law that set the stage for US drug policy for decades to come. Specifically applying to opiates and cocaine, it led to creation of black market</p> |

## History of Drug Laws in the U.S.

| 1937<br>Marijuana<br>Criminalization  | 1950s<br>“Tough on<br>Crime”  | 1970<br>Controlled<br>Substances Act  | 1971<br>War on Drugs<br>Declared   | 1973<br>Rockefeller Drug<br>Laws  |
|---|---|---|--|---|
| <p>Henry Anslinger, commissioner of the newly formed US Narcotics Bureau, spread fear about Mexican immigrants to push 46 states to outlaw cannabis</p> | <p>Politicians began to adopt the “tough on crime” stance, in response to rising crime rates “inner cities” across the country. In the 60s, Nixon ran for president on this message</p> | <p>The CSA regulated the manufacture, distribution, sale of certain substances. It also created the Scheduling system of drugs and medications. It set the stage for the War on Drugs</p> | <p>The Nixon Administration declares the war on drugs during a special message to congress. Funding increased, DEA was created, and eventually mandatory minimum laws passed</p> | <p>Under these laws, penalties for possession, sale or manufacturing skyrocketed. Sale or possession of 2ozs or more (cocaine, opium, cannabis) were minimum 15 years</p> |

## History of Drug Laws in the U.S.

### 1982 Reagan's War on Drugs

Ronald Reagan announced his own War on Drugs, shifts responsibility from state to the federal level and oversees an increase in budgets of DEA, FBI and DoD

### 1985 Crack Epidemic Begins

Crack cocaine is introduced to cities across the US. Famously, it has been alleged that the US Govt played a role via CIA funding to Nicaraguan Contras

### 1986 Anti Drug- Abuse Act

Much harsher penalties for possession, sale of drugs. Notably the 100-1 discrepancy was included: 5g of crack = 500g powder cocaine (5 years)

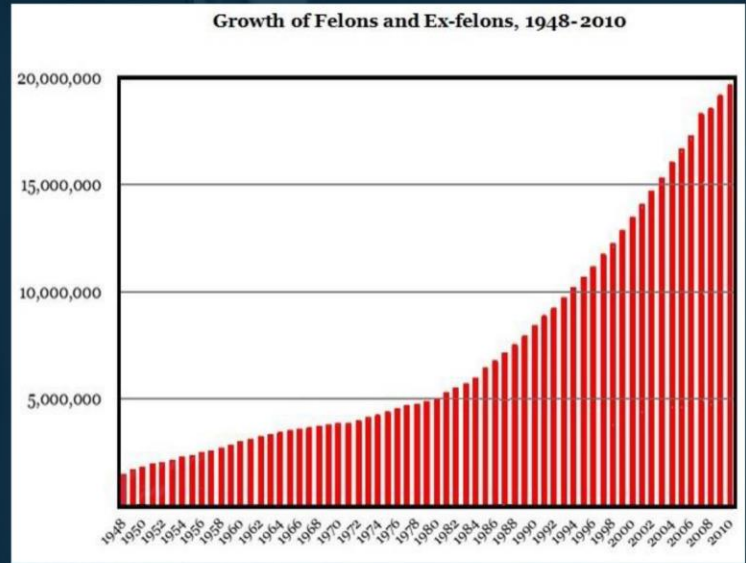
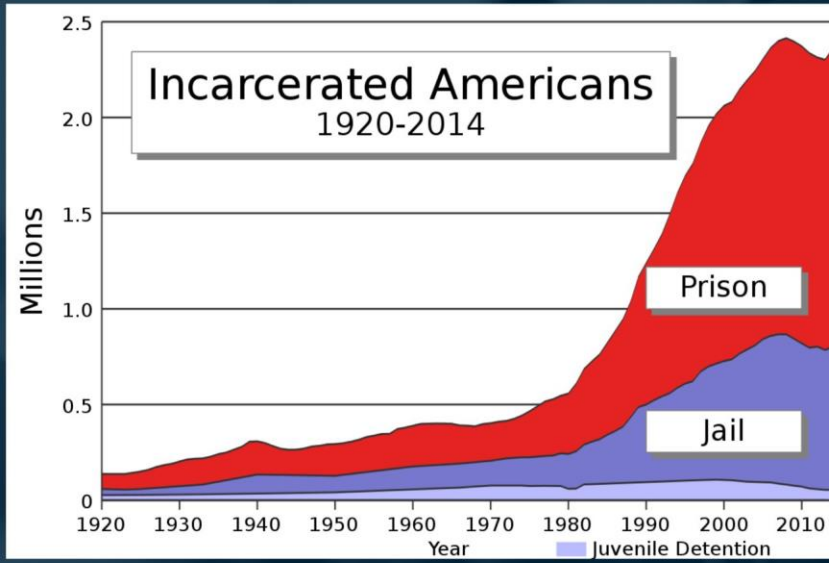
### 1994 Clinton Crime Bill

Written by then-senator Biden, this bill included \$30B in anticrime funding. The 3-Strikes portion of the law contributed to the largest increases in state and federal inmate populations than any admin

### 2010 Fair Sentencing Act

Congress finally passed the Fair Sentencing Act to repair the crack-to-cocaine discrepancies, but only reduced them to 18-to-1

# Incarceration & Felony Rates Soar

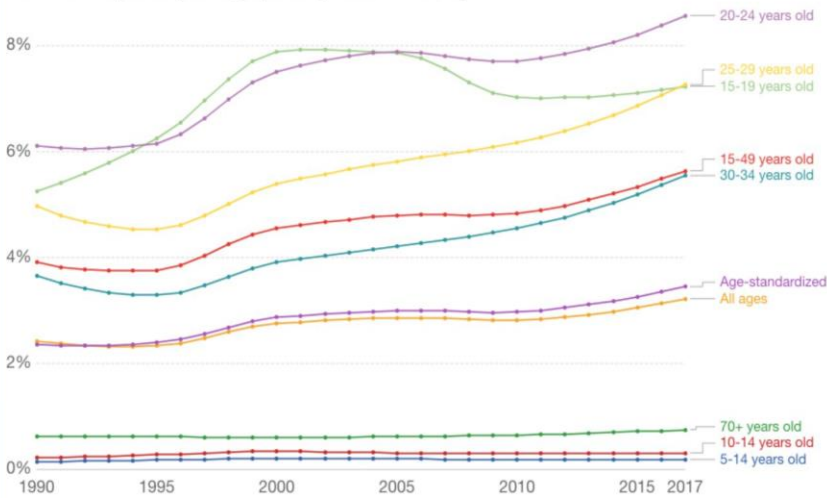


# While Drug Use Disorder OD Deaths Rise

## Prevalence of drug use disorders by age, United States

Share of population within each category suffering from drug use disorders. Drug dependence is defined by the International Classification of Diseases as the presence of three or more indicators of dependence for at least a month within the previous year. Drug dependency includes all illicit drugs.

Our World in Data

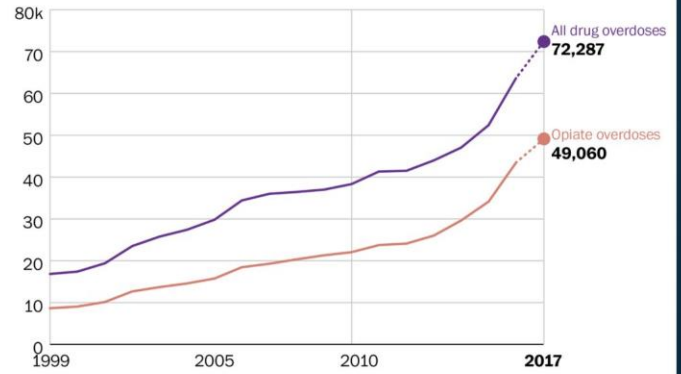


Source: IHME, Global Burden of Disease

CC BY

## Overdose deaths hit record high in 2017

Annual deaths from all drug overdoses and opiate overdoses



Note: 2017 figures are provisional

Source: Centers for Disease Control and Prevention

WAP0.ST/WONKBLOG









VS



VS



## Racism and Drug Criminalization:



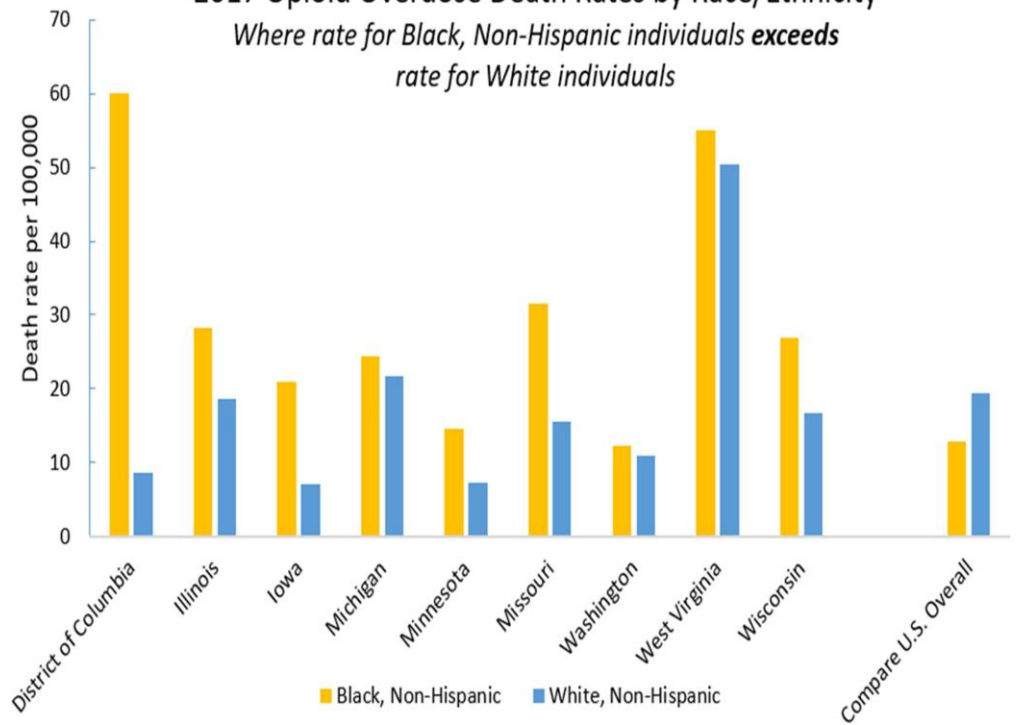


# Updated Opioid Overdose Figures

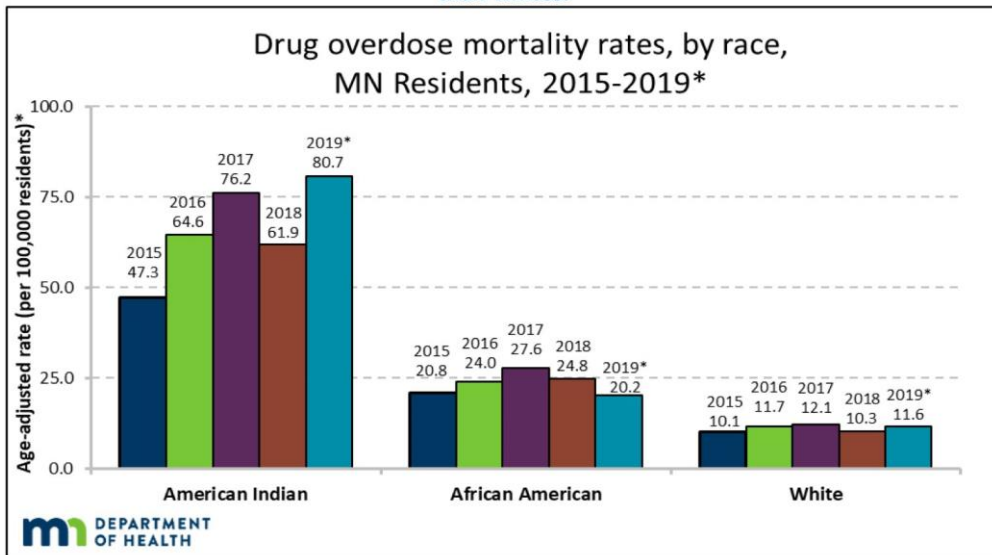
# Overdose Deaths Due to Opioids in MN

## 2017 Opioid Overdose Death Rates by Race/Ethnicity

Where rate for Black, Non-Hispanic individuals **exceeds** rate for White individuals



**CHART 2. In 2019, African Americans were almost two times more likely to die of a drug overdose than whites. American Indians were seven times more likely to die of drug overdose than whites.**



SOURCE: Minnesota death certificates, Injury and Violence Prevention Section, Minnesota Department of Health, 2015-2019\*

**NOTE: 2019 data are preliminary and are likely to change when finalized.**

# Opioid Fatal and Non-Fatal Overdoses

COVID-19 IMPACT IN PHILADELPHIA, PA

Table. Mean Monthly Counts of Fatal and Emergency Medical Service-Attended Nonfatal Opioid Overdose by Race/Ethnicity

| Race/ethnicity     | Period A, April to June 2019 |                   | Period B, December 2019 to February 2020 |                   | Period C, April to June 2020 |                   | P value        |                |
|--------------------|------------------------------|-------------------|--|-------------------|------------------------------|-------------------|----------------|----------------|
|                    | Total, No.                   | Monthly mean (SD) | Total, No.                               | Monthly mean (SD) | Total, No.                   | Monthly mean (SD) | Period A and C | Period B and C |
| <b>Fatal</b>       |                              |                   |  |                   |                              |                   |                |                |
| Non-Hispanic Black | 96                           | 32 (3.6)          | 91                                       | 30.3 (10.4)       | 146                          | 48.7 (3.1)        | .004           | .04            |
| Non-Hispanic White | 139                          | 46.3 (2.1)        | 136                                      | 45.3 (4.2)        | 106                          | 35.3 (7.2)        | .06            | .11            |
| Hispanic           | 49                           | 16.3 (3.1)        | 38                                       | 12.7 (1.5)        | 42                           | 14 (3.5)          | .43            | .57            |
| <b>Nonfatal</b>    |                              |                   |  |                   |                              |                   |                |                |
| Non-Hispanic Black | 253                          | 84.3 (3.1)        | 264                                      | 88 (9.2)          | 309                          | 111 (28.8)        | .19            | .26            |
| Non-Hispanic White | 361                          | 120.3 (2.5)       | 336                                      | 112 (5.6)         | 333                          | 103 (6.9)         | .02            | .15            |
| Hispanic           | 127                          | 42.3 (6.0)        | 113                                      | 37.7 (4.9)        | 124                          | 41.3 (6.4)        | .85            | .48            |





## Case Study #2

# Case Study # 1

## DEMOGRAPHICS

- J.D.
- Age 40
- Black American man
- High School Graduate
- Grew up in S. Minneapolis
- Oldest of two
- Has one adult child
- Currently homeless (at time of interview)



## Case Study # 1

- Mental health issues: anxiety, depression, PTSD, suicidal ideation
- Attended primarily white high school, was bullied
- Has been shot on two separate occasions
- Growing up parents were addicted to crack cocaine

## Case Study # 1

- As an adult he worked with a therapist for one year
- Therapist did not attempt to connect with client
- A therapeutic alliance was not established
- Lack of empathy and compassion
- Pushed him to work on homework instead of talking to him

## Culturally Adapted EBPs

- Racism and discrimination have traumatic effects
- Making it difficult to develop and maintain feelings of self-worth and self-esteem
- The field of psychotherapy has been heavily biased towards the investigation and treatment of white, middle class individuals
- Historically, psychotherapeutic approaches have focused on the therapeutic needs of upper-and middle class Euro-Americans.

# Traditional Cognitive Behavioral Therapy (CBT)

## WHAT IS CBT?

- ✓ A commonly used psychotherapeutic approach
- ✓ It aims to adjustment unhelpful cognitive distortions and behaviors,
- ✓ improving emotional regulation
- ✓ Develop personal coping strategies that target solving current problems

- CBT may exacerbate ethno-racial minority clients' psychological distress
- It typically does not identify and address effects of prejudice and discrimination on the client
- EBPs may not be adequately addressing the psychological harm associated with systemic and institutional racism

## Traditional CBT vs A-CBT

- Several meta-analytic studies indicate that culturally adapted mental health interventions have overall positive effect
- Culturally adapted mental health interventions may be more effective when adaptations are specific or targeted to a particular racial/ethnic group
- Studies found that A-CBT group produced a greater decrease in depressive symptoms when compared to demographically-matched African American women receiving non-adapted CBT in the same clinic.



# Tips and Tools

## Clinical pearls

This section is dedicated to individuals who work with Black Americans

- Be mindful when speaking with Black mothers about their substance use. As we discussed earlier there is historical precedent on the significant issues regarding how CPS and the foster care system interact with Black families.
- Mental health professionals must earn trust. The first several sessions should be more conversational, developing a rapport with the client.
- Listen to their story and understand their individual and cultural experience. Ask questions about what it means to them to be Black in America.
- There is extensive trauma seen in the Black community, PTSD being underdiagnosed, particularly in Black men.
- Don't look at resistance or lack of disclosure as a red flag.

## Clinical pearls

This section is dedicated to individuals who work with Black Americans

- Reframe from using worksheets or homework until you have established a sound working alliance and trust of the client.
- Many of us come into this work assuming that the trust and rapport is already established because we are the professional.
- Communities of color have seen things go bad when they are honest and disclose personal and private information, be mindful of this.
- Disclosing information about your own addiction history as the one of the means of gaining trust and rapport building is over relied upon.



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