Teens, Mental Health, and Moving to Opportunity

Susan Clampet-Lundquist
Saint Joseph’s University
What Did We Expect from MTO?

• Given what we know from neighborhood effects research...
  • Less poor neighborhoods for the experimental “compliers” (those who used their low-poverty voucher to move) should allow for improved well-being for adults, children, and teens, relative to those in the control group.
  • For teens, these improvements can include risk behavior, education, and mental health.
Previous MTO findings for adolescents

- Results from the MTO Interim Survey four to seven years after random assignment show:
  - Girls in experimental group scored significantly lower than those in control group on psychological distress and anxiety; but no difference for boys.
  - Girls in experimental group less likely to smoke marijuana than control group; but experimental boys more likely to engage in risk or problem behavior than control boys.
Research questions

- Do gender and treatment group interact for a measure of psychological distress for MTO Baltimore teens (14 – 19 years old)?
- How does a qualitative sample of MTO Baltimore teens talk about mental health and stressors in their lives, such as family issues and neighborhoods?
Mixed-methods analysis

- Quantitative section:
  - Provides a large sample with standardized questions

- Qualitative section:
  - Offers respondents a chance to tell their story, so we can learn about processes and tease out the relationship between a housing mobility program and outcomes like mental health.
Focus on Baltimore

Classic downtown

Lexington Terrace & Murphy Homes
Findings from the survey

- Control boys (14 – 19 years old) had a mean level of 19% on the psychological distress scale (calculated from six questions).
- Boys in the experimental group had a mean level of 30%, showing greater psychological distress.*
- Difference between girls in experimental and control group was not meaningful.
- Experimental treatment appears to interact with gender – negative effect on boys for psychological distress.

* p<.10
Methods - Qualitative

- Using in-depth interview data to try to push for a deeper understanding of how an initiative like MTO might affect the psychological distress of teenagers.

- For this analysis, only experimental compliers (females N=11, males N=7) and controls (females N=17, males N=19).
Individual & Family-level Stressors

- Family Conflict
  - When asked what made them “sad” or “down,” the experimentals discussed minor family conflicts; whereas the controls were more likely to discuss more serious family issues such as parental mental illness or addiction.
- Abuse – witnessed or victim
  - No stories in the experimental group
  - Two control males, five control females
Emily (18 year-old control):

He was hitting me, yes. He tried to, he really, really tried to hurt me. [I: Did your mom know about this fight?] Yes, she did. [I: And what did she do?] Nothing... And I was like back and forth over my aunt’s house. I moved over there once before. It has been... a couple times she didn’t believe what I had to say. She choose other people’s sides over her own child.
Anger

- None of the experimentals mentioned having a problem with anger.
- One control female, and 40% of the control males said that they had a problem with anger.
- Three of these male teens were placed in a psychiatric hospital or residential treatment facility to deal with their anger issues, while one other was placed on medicine for his violent rages.
Community factors
Reggie (16 year-old control):
I don’t even know what a safe neighborhood is. What does a safe neighborhood mean?... I don’t think there’s such a thing as a safe neighborhood... Because you could kill or somebody could do anything to you anywhere, but it may happen more places than another. And you can say that around here, you might wind up getting involved. Not to say it happens a lot, but it does happen.
Drug-trafficking & Gun Violence

• While not completely absent from experimentals’ narratives, drug-trafficking and gun violence are much more prevalent in the neighborhoods of the control group members.

• Notably, the one experimental male who described violence at a similar level was one who had moved back to a poor neighborhood.
Jacob (15 year old control):

Sometimes like drug dealers, they’ll like cheat somebody. They like snatch their money and then run from them, and then the dude’ll come back. Like one day, the dude came over there and he banged them and took the money. And they didn’t get him any drugs. They ran up in their house across from ours and ran up in there. And the dude came back with a gun and tried to kill them.
Conclusion

• Gender differences:
  • Not salient in the qualitative analysis – males and females in experimental group similar in narratives on sadness, stressors, and neighborhood environment.
  • Gender differences in survey may be linked to other areas that are more indirectly related to mental health such as fitting into low-poverty neighborhoods.
Conclusion, cont.

- The difference in anger among control and experimental males points to a new potential benefit for male teens in the experimental group.
- Not surprisingly, community stressors such as drug-trafficking and gun violence – stressors strongly associated with mental health – are much more prevalent in neighborhoods of the teens in the control group.