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THE DREAMER GIRLS PROJECT

“Protecting Black Girls in Schools”

Policy Report

The SASH Lab at Yale

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Yale School of Public Health



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Dr. Ijeoma Opara

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The SASH Lab at Yale is directed by Dr. Ijeoma Opara, an Assistant Professor in the Department of Social and Behavioral Sciences at the Yale School of Public Health. At the SASH Lab, researchers are focused on conducting and disseminating strengths-based HIV and substance use prevention research by creating programs and solutions that are tailored for and by specific communities and youth of color. The SASH Lab's work is guided by three key principles:

1. Highlighting strengths and moving away from a deficit lens
2. Investigating the role of racial and ethnic pride in prevention programming
3. Acknowledging race and gender differences in prevention

As experts in the field, the SASH Lab has published 50 peer-reviewed manuscripts, focused on substance use and mental health, strengths-based approaches, and sexual health.

Additionally, we have published policy reports, lab reports, and policy briefs. You can find more information about the SASH Lab, ongoing projects, and our research on our website.

Research Priorities:

1. Reducing substance use among racial and ethnic minority youth
2. Preventing STIs and HIV incidence among racial and ethnic minority youth
3. Developing prevention initiatives and programs that are shaped by the voices of racial and ethnic minority youth



THE DREAMER GIRLS PROJECT

The Dreamer Girls Project was developed in response to the need for a racial and gender specific approach that improves sexual health and drug use prevention programming for Black girls. Using principles of community-based participatory research, the Dreamer Girls Project aims to develop an HIV and substance use prevention intervention designed by Black girls, for Black girls. After conducting focus groups with 75 Black teenage girls from across the nation, the research team analyzed the data and was able to understand risk and protective factors to using substances, sexual risk behaviors, and how racism and sexism impacts behavior. Using these findings, we will develop an HIV, STI, and substance use prevention program for Black girls that uses a strengths-based and empowerment framework to increase positive protective sexual practices (e.g., condom use), psychosocial skills (e.g., self-efficacy, HIV knowledge, perception of drugs) and knowledge about substances and their relationship with STI and HIV/AIDS.

PURPOSE

The Dreamer Girls Project Policy Report was developed in response to the disparities in sexual health and substance use that disproportionately impact Black teenage girls. Guided by findings from the Dreamer Girls Project study, this policy report seeks to:

- Advocate for comprehensive sex education that reflects the learning priorities and experiences of young Black girls
- Provide guidelines to transform schools and other educational institutions into environments that are accepting of Black girls as a whole, including their bodies, minds, and sexuality.
- Support the development and mental health of Black girls in the United States

METHODS

Researchers conducted focus groups with 62 Black girls aged 13 to 18 from mostly New Jersey and other states across the country, 4-8 girls participated in each focus group. Focus group questions explored their identity as a Black girl in America, their perspective on race and gender within their community, substance use behaviors, their knowledge of drugs, sexual risk behaviors, HIV and STI knowledge, how they make decisions, and how they see their friends influencing their decisions. Participants received \$30 for participating in the focus groups.

Once all focus groups were completed, selected participants were invited back to be a part of the Dreamer Girls Project Youth Advisory Board. A committee of 8 Black girls agreed to be a part of the board, which guided the development of the intervention and aided in interpreting the findings from focus groups. The youth advisory board members met bi-weekly for nine sessions and were compensated with \$30 for each session they attended. During the sessions, members provided insights on policy recommendations by discussing changes they would like to see in their own neighborhoods and schools and expanding on the findings from the focus groups.

POLICY RECOMMENDATIONS

1. Advocate for mandatory comprehensive sexual health education

In addition to advocating for comprehensive sexual health education, focus group participants, including the youth advisory board members collectively felt a need to incorporate the following themes within curricula.

- *Address and dismantle harmful stereotypes that Black girls face:*

Curricula should educate all students about harmful, gendered racist stereotypes faced by Black girls. Dismantling stereotypes is a path to improving ethnic identity and empowerment, which have been shown to play a role in reducing sexual risk behaviors (see References and oparalab.org/publications for evidence).

- *Incorporating sex positive language:*

There is a need for sexual health education to be destigmatized and framed as a normal teenage experience, which includes adding components about desire, pleasure, and routinely testing for STIs. Removing the shame from sexual health and education can help girls and young women who choose to have sex understand how to have a safe and enjoyable experience.

- *Discussing boundaries and communication:*

Black girls must be supported and taught how to harness their voices to communicate assertively. Consent and partner communication are essential components of a comprehensive sex education curriculum and can help Black girls establish boundaries in their romantic relationships.

- *Improving knowledge about their bodies:*

There is a lack of deep and intimate knowledge among Black girls regarding their bodies, since educators, parents/guardians, and families often treat their bodies as taboo. Girls in the study expressed an interest for period/menstruation education, a more in-depth review of their anatomy and physiology, understanding red flags for medical concerns, and better education regarding personal hygiene.

POLICY RECOMMENDATIONS (CONT'D)

QUOTES ”

Quotes from girls in the focus groups:

- “What I think other people assume about Black girls is that like, you know, they have sexual relations a lot, often, they think they’re very sassy”
- “When a Black person does something justified, society views them as being angry or being ghetto”
- “I feel like with the stereotypes, those negative stereotypes are on us all the time. I feel like it can give you like this kind of stress of like feeling like you have to live up to those impossible standards and like trying to defy those stereotypes. It can be like very exhausting and then, like also trying to do your own thing and figure out who you are, as a person as well, it can become very conflicting because do you want to do what you want to do, or like conform to other people’s like stereotypes, just because, like that’s, I don’t know.”

2. Offer contraceptives and feminine hygienic products in schools

Transforming schools into an environment supportive of Black girls’ sexual health extends past implementing an inclusive comprehensive sex education curriculum. Providing complimentary and accessible sexual and reproductive health products in educational institutions can promote positive health behaviors and school performance. Although this can include contraceptives such as condoms and pamphlets with information, the youth advisory board members were keen to advocate for free menstrual products such as pads, tampons, and menstrual cups. A recent study revealed that only 42% of respondents attended schools that provided appropriate menstrual products, and those that did often required students to pay for them. Additionally, a variety of pads and tampons sizes should be available to address varying needs. Finally, these resources should be free and readily available in the restrooms, rather than provided by the school nurse or health teacher.

3. Promote confidential HIV and STI testing services for ALL youth

Currently, many states offer free and confidential HIV and STI testing for youth aged 13 and over at clinics all over the nation. However, this service is not as accessible as it appears. When youth enter clinics for HIV and STI testing, they are at the whims of clinical service providers who determine whether or not they will need to provide insurance or have a parent/guardian present. This may be extra challenging for youth with little to no experience navigating health insurance and the health care system. Clinicians need to be kept up to date with protocols for youth HIV and STI testing, to provide a seamless experience that encourages youth to get tested routinely. Further, educators can do their part by outlining steps to get testing and providing information and resources about testing in their communities.

4. Establishing Anti-Racist and Anti-Sexist Dress Code Policies

Across the country, Black girls are being criminalized for their bodies, as a result of historic and contemporary hypersexualization and adultification. Within educational spaces, teachers and administrators' biases about Black girls, femininity, and bodies in general frequently result in the hypersexualization and punishment of Black girls, especially regarding dress code violations. Current dress code policies are often racist and sexist, banning items frequently worn by Black students, such as durags and hoodies. Participants from the Dreamer Girls Project study felt that dress code policies are grounded in old-fashioned and sexist ideologies that pathologize their bodies and sexuality, framing them in a negative light. Further, their experiences, similar to other studies, reflect that school administrators apply the dress code to disproportionately punish Black girls. When they try to stand up for themselves, they are perceived as angry, dangerous, and disrespectful leading to further reprimands from teachers and school administrators. The hypersexualization of Black girls by teachers often invites their male peers to contribute to this harmful practice. This leaves Black girls feeling insecure and uncomfortable in their own bodies.

QUOTES ”

"I just feel like they being sexist because all them boys came to here with tank tops, no shirts and basketball shorts, and he going to say, I can't wear leggings or biker shorts. Are you kidding me? What I'm supposed to wear sweatpants in 80 degree weather? You're crazy. I'm not."

"That's still weird, though, because it's like throughout history, women have come far and we still can't wear shorts. What? Like what century are we living in?"

And it's just legs. It's not nothing sexual about it."

"Different dress codes are required for different bodies. For example, shorts are inappropriate in ono body but not another, or girls have to wear a bra if they have big breasts but not girls with small breasts"

Based on our findings, we urge educational institutions to evaluate and adapt dress code policies using a participatory approach that includes the voices and concerns of students, particularly Black girls. New policies should be informed by youth and explicit, meaning they do not discriminate based on body types, and are not applied based on how an item of clothing looks on a particular body type. Importantly, educators should be aware of the historical hypersexualization of Black girls and the impact of racist and sexist policies such as dress code policies. Finally, Black girls have called for more teacher accountability, by developing a safe space informed by restorative justice principles where Black girls can advocate for their needs, voice their concerns and work towards reconciliation.



Substance Use and Mental Health

In our discussions with participants, mental health, poor coping mechanisms, and stress were all cited as reasons for substance use and engaging in sexual risk behaviors. Given the positive association between substance use, sexual risk behaviors, and STI and HIV incidence, prioritizing the mental health of Black girls is an important component to reducing the likelihood of drug use and supporting their sexual health. When Black girls are trapped in environments that are not supportive of their personal and academic development, and are underrepresented in empowering school activities, despite their need for attention, support, and encouragement during this critical period, the pressure to succeed can feel insurmountable. In addition, they must navigate and challenge negative stereotypes that are placed upon them by their peers, teachers, and even families. Black teenage girls are uniquely positioned to experience high levels of stress due to their frequent adoption of the Super Girl persona. Super Girl uses her feminine strength to adopt resilience and balance both strength and sadness in the face of regular social battles, decision-making, and ongoing self-esteem. Although Super Girl can be a tool to overcome hardship, it also comes with additional pressure to consistently rise above, succeed, and be able to achieve everything with a high degree of finesse. It is imperative that educational institutions create changes to better support the mental health of young Black girls and give them permission to rest and grow.

5. Curriculum should be expanded to address healthy coping mechanisms and alternatives for substance use in their community

Establishing healthy coping mechanisms in the face of stress can help Black girls feel rested, support their mental wellness, and improve their decision-making skills when it comes to substance use and sexual risk behaviors. Exploring realistic coping mechanisms and alternative activities to using substances should be included as a part of an effective comprehensive sex education. Particularly, connecting youth to skill development opportunities, events, and programs in their communities can improve their sense of community and connectedness.

Potential coping mechanisms or activities to improve mental health:

- Making a photo album
- Teaching a pet new tricks
- Journaling
- Writing a short story
- Volunteering in your community
- Community clean-up
- Playing sports
- Walking with friends
- Going on a hike
- Painting your nails
- Listening to a self-care or educational podcast
- Listening to music
- Painting with friends
- Meditating



POLICY RECOMMENDATIONS (CONT'D)

6. Implementing regularly scheduled mental health days at school

It is essential that adults take the initiative to teach girls that rest is productive. Implementing regularly scheduled (ie., monthly or bi-monthly) mental health days at educational institutions can provide students with a needed break for rest and relaxation. We do acknowledge that not all youth can stay home due to various factors and barriers. Schools should remain open for students who are unable to stay home, where they can watch a movie, rest or nap, read a book, or participate in other wellness practices.

QUOTES

"The idea of resting or completely stopping whatever I'm doing makes me stressed."

"I used to always keep working even if the results weren't good. Now I take a break from the negative cycle"

Stay Connected:

To find out more information about the Dreamer Girls Project, the SASH Lab, or other ongoing projects, please reach out via one of the methods below:



<https://oparalab.org>



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