

**Girls in the 'hood:
Reframing safety and its impact on health and behavior**

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“Foul. Just like in any other projects....They'll call them “Bs,” hos, tramps, sluts, stuff like that. They don't care. They don't have no respect for females at all. They beat up females over here and all that, throw them out of windows. Oh, my God. These projects is crazy. They throw their girlfriends out of windows and everything else, pull out guns on them and stuff. They don't really too much care for females over here.”

Tonya,¹ a girl growing up in the projects in Los Angeles, answering an interviewer's question about how men treat women and girls in her neighborhood.

Adolescents growing up in neighborhoods marked by concentrated poverty are at risk for a range of negative outcomes, including poor physical and mental health, risky sexual behavior and delinquency (Leventhal & Brooks-Gunn, 2001, 2000, Sampson et al., Ellen & Turner 1997). And, as Tonya's description of life in her neighborhood indicates, girls growing up in high poverty face specific risks because of their gender—the demoralizing effects of omnipresent and constant harassment; the pressure to become sexually active at increasingly younger ages; the pervasive domestic violence; and the high risk of sexual assault. Early sexual initiation brings its own hazards: pregnancy, the risk of sexually transmitted disease, and dropping out of school to care for children (Albert et al., 2003; Alan Guttmacher Institute, 1994; Cooksey et al., 1996; Tubman et al., 1996). All of these hazards have serious, long-term implications for the life chances of low-income adolescent girls (Furstenberg, Brooks-Gunn, and Morgan, 1987; Kendall-Tackett et al., 1993).

Most attempts to improve outcomes for low-income adolescents target specific behaviors such as sexual activity or substance use rather than addressing the family or neighborhood socioeconomic factors that may place them at risk (Kirby, 2001; Weinberg et al., 1998). And most large-scale demonstration programs directed at improving economic outcomes for poor families—typically in the context of welfare and

¹ All names in this paper are pseudonyms.

employment programs for parents—do not directly address adolescent outcomes (Morris et al., 2001).

The federal government's Moving to Opportunity for Fair Housing Demonstration (MTO) represents a unique effort to try to improve the life chances of very poor families with children by helping them leave the disadvantaged environments that contribute to poor outcomes. MTO targeted families living in some of the nation's worst neighborhoods—distressed public housing—and used housing subsidies to offer them a chance to move to lower poverty communities. The hope was that moving would provide access to safer neighborhoods with better schools. In these safer neighborhoods, adolescents—both girls and boys—should be exposed to fewer negative influences, such as gangs and drugs, and would then be at lower risk for mental health problems and delinquency and other risky behavior such as early sexual initiation and substance use. In this paper, we explore how these changed neighborhood environments may have influenced outcomes for adolescent girls, focusing specifically on how moving to lower poverty has affected their mental health and behavior. Using data from in-depth interviews and ethnographic fieldwork, we explore how certain dimensions of neighborhood safety gained by moving to lower poverty neighborhoods may have unique effects on girls' outcomes.

The U.S. Department of Housing and Urban Development (HUD) launched MTO in 1994, based largely on the evidence from studies of the Gautreaux housing desegregation program in Chicago (Rubinowitz and Rosenbaum 2000). Congress made a special appropriation of \$70 million and HUD selected five sites for the demonstration: Baltimore, Boston, Chicago, Los Angeles, and New York City. MTO was designed as a voluntary relocation program. Local program managers invited very low-income residents of public housing, all in high-poverty neighborhoods to participate (Goering and Feins 2003; Orr et al. 2003). Over 5,300 families, most of whom were African American or Hispanic, applied, and just over 4,600 met basic eligibility requirements. These families were randomly assigned to one of three treatment groups: a control group (families retained their public housing unit but received no new assistance), a Section 8 comparison group (families received the standard counseling and voucher subsidy, for use in the private market), or an experimental group. The experimental-group families received *special relocation counseling* (focused on opportunities to live in low poverty areas) and *search assistance*. They also received a voucher useable only in a low poverty neighborhood (less than 10 percent poor as of the 1990 census), with the

requirement that the family live there for at least a year. Of the 1,820 families assigned to the experimental group, just under half (48 percent or 860) found a suitable apartment and moved successfully (“leased up”).

Findings on Adolescent Outcomes from MTO

HUD initially funded individual teams of researchers to conduct site-specific evaluations. The aim of this strategy was to inform a five-year, cross-site Interim Evaluation (Goering and Feins 2003). We briefly summarize the findings on adolescent health and behavior from the single-site studies and the Interim Evaluation, focusing on comparisons between the experimental treatment group, which was offered the opportunity to move to low-poverty neighborhoods and the controls who stayed in public housing in high-poverty neighborhoods (see Table 1). In particular, we highlight the ways in which boys and girls may have been differently affected by moving to lower-poverty communities.

Early site-specific findings. Both the Boston and the New York City sites conducted evaluations of children and adolescents’ mental health at two and a half years post-move. Using maternal report data on children six- to 15-years of age, the Boston evaluation found that experimental boys displayed fewer of a total of six behavior problems (e.g., disobey parents, trouble sitting still) than control boys; no program effects were found for girls (Katz et al., 2001). In New York City, among children eight to 18-years of age, experimental boys self-reported fewer behavior problems (related to anxiety/depression and dependency) than control boys; again, no program effects were found for girls (Leventhal & Brooks-Gunn, 2003). For older male youths in Baltimore, there was a significant favorable program impact on arrests for violent crime, as assessed by juvenile arrest records. These early findings lead the policy makers and researchers working on MTO to expect that the full demonstration was likely to have powerful effects on reducing the risk of boys’ delinquency and crime.

Interim Evaluation. Instead, counter to the early site-specific evaluations, the five year Interim Evaluation found program effects on mental health and risky behavior outcomes that benefited only adolescent girls in the experimental group (Kling et al., 2005; Orr et al., 2003). Specifically, experimental girls reported less psychological distress, anxiety, and substance use and were less likely to be arrested (especially for violent and property crimes) relative to control girls. In contrast, experimental adolescent

boys reported *more* behavior problems and substance use and were *more* likely to be arrested for property crimes than control boys.

The Interim Evaluation findings have been very controversial, with much research and policy attention focused on why the boys seem to have fared so badly and why these results were so different than those from the early, site-specific evaluations. However, by focusing solely on the negative results for the boys, researchers and policy makers have discounted the powerful positive effects for girls; clearly MTO was very successful in improving the overall well-being of girls who moved to low-poverty neighborhoods. By exploring the mechanisms that may have led to these unexpectedly positive outcomes, we can learn a great deal about the important benefits of good neighborhood environments for adolescents. In this paper, we focus on the impact of improved neighborhood safety, specifically what Gordon and Riger (1989) term “the female fear”—the fear of sexual victimization, verbal and physical harassment and sexual exploitation—and argue that it is the reduction in this fear that is a likely explanation for the striking improvements in girls’ mental health and behavior.

Neighborhood Effects on Adolescent Girls’ Mental Health and Risky Behavior

To put the MTO findings on adolescent girls in context, we briefly review the non-experimental literature on the effects of neighborhood residence on adolescent girls’ health and behavior. This work stemmed from researchers’ recognition that neighborhoods are a prominent social context for adolescents by providing as well as organizing opportunities for social interactions and activities (Bronfenbrenner & Morris, 1989; Furstenberg, et al. 1999), coupled with rising concern over the potential adverse consequences of growing in neighborhoods of concentrated poverty, such as those where MTO families originally resided (Massey & Denton, 1993; O’Hare & Mather, 2003; Wilson, 1987). A sizeable body of non-experimental research using data from national and community-based samples compares adolescents’ mental health, problem behaviors, and sexual activity in socioeconomically disadvantaged neighborhoods with that of adolescents in more advantaged neighborhoods (Leventhal & Brooks-Gunn, 2001, 2003). Several studies find that, controlling for family socioeconomic status (SES), neighborhood structural disadvantage is associated with adolescent poor mental health including depressive and aggressive problems (Aneshensel & Sucoff, 1996; Kowaleski-

Jones, 2000). Almost none of this work has examined differences in associations by gender.

Links between neighborhood low-SES and adolescents' participation in delinquency and crime also exist (Sampson & Groves, 1989; Sampson et al., 2005; Loeber & Wilkston, 1993; Peeples & Loeber, 1994). Because of the low rates of these behaviors among female youth, much of this work focuses on adolescent males. A recent study designed to address this gap reports that girls rated high on several domains of problem behavior are over-represented in socioeconomically disadvantaged neighborhoods (Hipwell et al., 2005). Investigations of associations between neighborhood disadvantage and adolescents' substance use are less common than other risk behaviors, with studies reporting mixed results (Hoffman, 2002; Reardon et al., 200x).

In contrast to the research on mental health, delinquency/crime, and substance use, a number of studies have specifically examined associations between neighborhood SES and adolescent girls' sexual behavior. Across several studies based on national data sets, the presence of advantaged socioeconomic conditions, such as affluent or professional neighbors, was associated with a decreased risk of older adolescent girls' non-marital childbearing (Billy & Moore, 1992; Brooks-Gunn et al., 1993; Crane, 1991; South & Crowder, 1999); whereas, the absence of such resources, including high poverty, was adversely associated with a range of girls' (and in some cases boys') sexual risk behaviors (Baumer & South, 2001; Ramirez-Valles, Zimmerman, & Juarez, 2002; Ramirez-Valles, Zimmerman, & Newcomb, 1998; South & Baumer, 2001; South & Crowder, 1999). The risks for adolescent girls from neighborhood disadvantage may be greatest in the most extremely disadvantaged neighborhoods (Crane, 1991; South & Crowder, 1999).

Neighborhoods and Safety for Adolescent Girls

In line with the MTO findings, the non-experimental research points to the negative consequences of neighborhood disadvantage for adolescent girls' health and behavior, especially high-poverty neighborhoods such as the distressed public housing developments where MTO families lived initially. However, the non-experimental literature generally has not highlighted gender differences in neighborhood effects. Nor

has it illuminated the mechanisms through which a neighborhood's structural conditions are likely to influence adolescent girls' health and behavior.

Recent research suggests several potential mechanisms through which adolescent girls might benefit by relocating from high- to low-poverty neighborhoods: (1) improvements in neighborhood social organization (community norms and values) that promote monitoring of residents' behavior and consequent reductions in threats of neighborhood danger, disorder, and associated conditions (Browning et al., 2005; Sampson et al., 2006); (2) greater community resources for youth and their families, notably high quality schools, youth programs, health services, and the like (Jencks & Mayer, 1990; Leventhal & Brooks-Gunn, 2001); (3) changes in peer groups that result in affiliation with less deviant peer groups (Brody et al., 199x; Elliot et al, 1997); and (4) adjustments in parents' well-being and behavior that promote positive family functioning (Simons et al., 1994; refs). Results of the MTO Interim Evaluation show that of these potential mechanisms, changes in neighborhood social conditions, notably safety, are the most plausible explanation (Orr et al., 2003). Alternative mechanisms do not seem to be affected by the MTO program except for maternal mental health.² We propose an expanded model of safety beyond exposure to drug trafficking and gang violence well-documented in the Interim evaluation (Orr et al. 2003) that may be specific to adolescent girls. **[WE MIGHT WANT TO PUT FOOTNOTE ON C-L STUDY IN DISCUSSION—or to our schools paper re the lack of change in resources]**

The social disorganization framework has been very influential in understanding both individual- and community-level violent crime and delinquency (Sampson & Groves, 1989, Sampson, 1997; Sampson et al, 1997). According to recent formulations of social disorganization theory, the extent of community-level social connections or collective efficacy—residents' mutual trust, shared values, and willingness to intervene on behalf of the community—influences a community's ability to monitor residents' behavior (Sampson, Morenoff, & Earls, 1999; Sampson et al., 1997). The capacity of community institutions to monitor residents' behavior is hypothesized to be a function of specific community structural characteristics including low-SES, racial/ethnic diversity, residential

² Qualitative work by Clampet-Lundquist and colleagues (2006) in two MTO cities (Baltimore and Chicago) attempting to unpack gender differences in program effects finds evidence the experimental girls were less likely than control girls to have friends who engaged in risky behavior as well as fewer social ties to the neighborhood.

instability, and single-parenthood (Coulton et al., 1995; Sampson, 1992; Sampson & Groves, 1989). The breakdown of community mechanisms of control gives rise to social and physical threats and incivilities such as crime, violence, public loitering, drinking, and drug use, prostitution, vandalism, litter, graffiti, and abandon buildings (Ross; Sampson & Raudenbush; refs).

Some scholars have criticized the social disorganization framework for failing to address factors that might be unique to adolescent girls' health and behavior (Kroneman et al., 2004). When neighborhood control mechanisms fail, as is the case in many high-poverty neighborhoods comprised of public housing where MTO families lived, the physical and social threats differ for adolescent boys and girls. Safety factors that pose unique challenges for girls' health and behavior include the "female fear"—the fear of sexual victimization, verbal and physical harassment, and sexual exploitation (Gordon & Riger, 1989). Girls everywhere experience verbal and physical harassment, but in the socially isolated world of distressed public housing, the pressures for sexual activity are much greater, the threats more blatant, and the risk of victimization very real (Popkin et al. 2000). Women who grew up in these dangerous environments often report having to run a gauntlet of men and boys every time they left their apartments.

There is a large body of research evidence documenting the particular risks that female adolescents face. In a community survey of over 1,000 young and middle adolescent girls, a striking 20 percent reported some type of unwanted sexual contact during the past year, with more than one-third of this group reporting forced sexual intercourse (Small & Kerns, 1993). Among adolescent girls from high-risk neighborhoods, 38 percent reported some form of victimization more generally (including being physically threatened or hurt by someone trying to have sex with them) during any given year; most girls experienced repeated victimization (Menard & Huizinga, 2001). Not surprisingly, fear of sexual victimization accounts for gender differences in adolescents' fear of other forms of victimization (May, 2001). Research on distressed high-rise public housing suggests that such environments are especially dangerous for low-income, urban adolescent girls; a high proportion experience sexual violence at a young age (Popkin et al., 2000). In these communities, girls' sense of danger posed by sexual victimization may be compounded by the risk of contracting AIDS and other sexually transmitted diseases. Girls in urban contexts are more likely than their suburban counterparts to voice fear of the physical dangers associated with sexual

intercourse (i.e., vulnerability to AIDS and pregnancy) (Tolman, 1996). In short, fear of sexual victimization corresponds to the actual risks posed to adolescent girls, especially those in high-poverty neighborhoods.

A number of qualitative studies have highlighted the sexually exploitive attitudes that adolescent males frequently hold towards their female peers in distressed neighborhoods. For instance, the ethnographic work of Anderson (1999) revealed how male peer groups emphasized sexual conquest and bravado. Gang activity, in particular, promotes the sexual exploitation of adolescent girls. Bourgois (1996) vividly described the ways in which young male drug dealers used sexual violence to demonstrate their toughness, routinely using gang rape as a means of initiating new members into their group. According to reports of low-income, urban parents and youths, girls frequently barter sex for gang protection in dangerous neighborhoods (Vera et al., 2006). In addition, sexually exploitive attitudes are prevalent in dating relations. A comparative qualitative study of adolescents from a low-income neighborhood found that male youth were more likely to view dating partners as possessions or objects of sexual gratification and to condone infidelity; whereas, female youth focused on the dyadic or intimate nature of dating relationships, held expectations for their own fidelity, and expressed concern for their relative position (versus other girlfriends) with dating partners (Harper et al., 2004). Edin and Kefalas (2005) document the pressures for early sexual activity from male partners and the limited choices poor adolescent girls face that often lead them to stay in relationships with abusive and risky partners. In summary, low-income, girls in high-poverty neighborhoods confront normative orientations that emphasize macho sexual values, female objectification, and early (and potentially risky) sexual activity.

Safety and Adolescent Girls' Mental Health and Risky Behavior

Reframing safety for low-income adolescent girls in high-poverty, urban neighborhoods by incorporating dimension of sexual victimization, harassment, and exploitation leaves open the question of how changes in this "female fear" may have affected MTO experimental girls' mental health and risky behavior. We suggest several possible means: less exposure to the risk behaviors in question; reduced victimization

and consequent engagement in risk behaviors; and increased sense of personal efficacy or agency. These alternative paths are not mutually exclusive.

Our first argument posits that decreasing experimental adolescent girls' exposure to pressures for sexual activity is likely to reduce the odds of engaging in these behaviors. In support of this hypothesis, several studies of urban adolescents found that a measure of perceived neighborhood "ambient hazards"—including experience of personal threats as well as disorder—was positively associated with early sex and mental health problems (accounting for both family and neighborhood SES) (Aneshensel & Sucoff, 1996; Upchurch et al., 1999). Links between urban adolescents' reports of exposure to neighborhood disorder and their increased likelihood of engaging in risky sexual behavior have been reported elsewhere (Chen et al., 1997).

Beyond decreasing exposure to risk behaviors in the context of neighborhood disorder, the MTO program may have reduced experimental adolescent girls' experiences of victimization and harassment which benefited their health and behavior. For instance, in a national household survey of adolescents, the risk of substance abuse and dependence was higher for youths who experienced sexual assault (Kilpatrick et al., XXXX); for adolescent girls, sexual assault also increased their risk of smoking (Acierno et al., 2000). Among a sample of African American adolescents recruited from low-income public housing communities, being a victim of a violent event (not sex-related) was positively associated with engaging in violent and delinquent behavior (Feigeman et al., 2000).

Girls in the MTO experimental group may have felt more efficacious from living under conditions marked by less fear (compared with control girls), which in turn, may have placed them at lower risk for mental health problems and engaging in other negative behaviors. Along these lines, Ross and colleagues (2001) documented how perceptions of neighborhood disorder were associated with adults' feelings of powerlessness (i.e., lack of control over one's life). It is likely that for adolescent girls, exposure to physically and socially threatening circumstances in high-poverty neighborhoods may have negatively impact their self-efficacy or sense of agency. Low self-efficacy is associated with mental health problems, especially for girls (Ehrenberg et al., 1991; McCauley et al., 1999).

This paper uses qualitative data from the Three-City Study of MTO, a large scale, mixed-method study focusing on three of the MTO cities--Boston, Los Angeles, and New York³—to examine whether the substantial improvement in safety gained by moving to lower poverty neighborhoods resulted in reductions in “female fear”. We also explore how potential reductions in this fear may have benefit experimental adolescents’ health and behavior compared to their counterparts who remained in high poverty neighborhoods.

Methods

MTO Interim Evaluation

The MTO Interim Evaluation, conducted in 2002, targeted 4,248 families that were randomly assigned through 1997.⁴ Extensive in-home, structured interviews were conducted with heads of households and up to two randomly selected children per household between the ages of five and 19 years (N = 6,683) (Orr et al., 2003). Measures of adolescents’ mental health and risky behavior were largely drawn from national surveys and were demonstrated to have high reliability and validity with diverse populations. However, the survey included very few questions regarding risky sexual behavior and no questions on rape, harassment, domestic violence, or coerced sex.

At the Interim evaluation, families in the MTO experimental group were still more likely to be living in low poverty areas (whether the original placement areas or other areas), and had lived for longer periods of time in low poverty areas, than families in the control group (Orr et al. 2003). By 2002, about 70 percent of the control group had also moved out of public housing, albeit mostly to other poor urban neighborhoods. At this point, we can confidently assert that MTO is a test of at least two important things for low-income families who used to live in high-poverty public housing projects: (1) the experience and effects of *living* in lower poverty neighborhoods over some period of time; and (2) the experience and effects of *relocating* (moving per se), after initial

³ A team lead by Kathryn Edin and Jeffrey Kling is conducting similar qualitative work in the other two MTO sites, Chicago and Baltimore. [Add citation here](#)

⁴ The Interim Evaluation had a 90 percent response rate. See Orr et al. 2003 for a complete description of the study and methodology.

counseling and search assistance, to low poverty neighborhoods, and then to a range neighborhood types, sometimes several times by a given family, while raising children and handling other life challenges.

Three City Study of MTO

The Three-City Study of Moving to Opportunity was designed to examine key puzzles that emerged in previous MTO research, in particular the survey-based and largely statistical Interim Impacts Evaluation (Orr et al. 2003). These puzzles include the striking differences in mental health and risky behavior outcomes for boys and girls outlined above. We conducted our study in three of the five MTO sites: metropolitan Boston, Los Angeles, and New York. We focus on “how” and “why” questions: To better understand what statistical analyses of close-ended surveys have been unable to explain, we employed mostly qualitative methods. Qualitative approaches are particularly important for understanding why participants in social programs make the choices they do, as well as for understanding significant variation within treatment groups—differences among experimental-group families, for example—and not just across them.

Our family-level data were collected in 2004 and 2005—about six to ten years after families’ initial placement through the MTO program and two years after the Interim Evaluation data collection. First, we selected 123 families, conducting 278 semi-structured, in-depth qualitative interviews with parents, adolescents, and young adults in all three treatment groups, including compliers (those who successfully moved at the outset) and noncompliers (those who did not move within the program) in the experimental and comparison groups (sampling randomly within the stratum of families who had an adolescent child resident in the home at the time of the interview).⁵ Next, we launched “family-focused” ethnographic fieldwork (Burton 1997; Weisner 1996), visiting a subset of 37 families repeatedly over a period of six to eight months. In recruiting this subset, which included only control-group and experimental-group complier families, we over-sampled, within the latter group, families who were still living in low poverty areas, including suburban school districts—considering these to be

⁵ We interviewed 123 adults, 122 adolescents (ages 10-17), and 33 young adults (ages 18-13) in total. We oversampled families in Los Angeles because it was the site with the highest lease-up rate for MTO experimental group families and because there were a large number of families not included in the Interim Impacts Evaluation survey. Overall, we conducted 81 interviews in Boston, 120 in Los Angeles, and 77 in New York.

“locationally successful.”⁶ Statistical tests confirm that our samples closely resemble the much larger population of MTO families surveyed at the interim mark.⁷

The *qualitative interviews*, which were conducted in English, Spanish, and Cambodian, let us explore a variety of issues in depth and cover a wide range of outcomes (from very successful to highly distressed) for all three treatment groups, which is crucial for generating representative results. To enhance validity and extend our data, the *ethnographic fieldwork* added direct observation to what participants report about their attitudes, choices, and outcomes. The ethnographic fieldwork also enabled us to ask key questions informally, as we built relationships with family members over months, while focusing on the core constructs of their lives, such as a daily routines to “get life accomplished” (Burton 1997), important social relations, and the details of connection (or lack of same) to the neighborhood of residence and other neighborhoods, such as those where relatives or close friends live. The ethnographic fieldwork was a blend of “naturalistic” or unstructured interviewing, semi-structured interviewing, and direct observation of family life inside and outside the home.⁸

To analyze the data, in-depth interviews were transcribed and loaded into the QSR-6 (ref?) qualitative database program for coding and analysis. We developed a codebook and a team of trained analysts coded each interview for key themes and issues. Using QSR-6, we then analyzed the data across sites and treatment groups. The ethnographers maintained an extensive database of fieldnotes, which were

⁶ We also drew a special sample of Southeast Asian refugee families at the Los Angeles site, because of the large number of refugee families receiving housing assistance in Los Angeles and other refugee gateway cities and the very limited research base on their special needs. We will focus on this special population in future reports.

⁷ In terms of *demographic* traits, the only statistically significant differences between our samples and the Interim Impacts Evaluation survey population is that we modestly under-sampled Hispanics and over-sampled families on welfare (Temporary Assistance to Needy Families). Our samples also closely resemble the Interim survey population in terms of *social outcomes*, in a variety of dimensions (health and mental health, education, employment, risky behavior). The data are available from the authors.

⁸ A third component of the study, which we do not draw on here, was *neighborhood scans*, focuses on the changing contexts in which MTO families are leading their lives, for example the economic and social changes at the neighborhood, city, and metropolitan levels that are reshaping the “geography of opportunity” over time (Briggs 2005; Galster and Killen 1995). The scans analyze census and administrative data at the neighborhood, city, metropolitan region, and other levels.

eventually loaded onto a central website for analysis [add more here]. Like the interview data, the fieldnotes were coded by a team of analysts, who then prepared memos for each family documenting neighborhood relations and then specific memos on key subjects (e.g., risky behavior).

How Girls Benefit From Safer Neighborhoods

At baseline, the most common reason that participants cited for volunteering for MTO was to get their families away from drugs and gangs (Goering and Feins 2003). Findings from the MTO Interim Evaluation (Orr et al. 2003) clearly show that the majority of experimental group movers believe they have attained that goal. For example, adults in the experimental group felt significantly safer in the neighborhoods at night (85 percent) than those in the control group (55 percent).

Are these TOT figures? Check the Interim report. Likewise, experimental group movers were significantly less likely to report problems with drug trafficking and gangs than those who remained in high poverty neighborhoods.

Erica, an experimental mover from Boston echoed the sentiments of many movers when she said that the “rules are just different” in lower poverty neighborhoods:

"I'm always telling the little ones I don't like kids doing drugs, smoking and drinking. Get into it and that's gonna be your life. Some kids like it, some don't. They respect you. At Dorchester, you go home at 4pm in the evening and somebody is going to try and do something to you." She said, "'Quincy's different than Dorchester. It's a different ball game with people and respect."

Based on prior research, the expectation for MTO was that living in these safer neighborhoods would decrease the incidence of risky behavior for youth and have beneficial effects on movers' mental health. However, as discussed above, findings from the Interim Evaluation (see Table 1) paint a more complex picture. Adult women and girls in the experimental group experienced substantial improvements in mental health, and experimental group girls experienced a reduced risk of delinquency and risky behavior. But adolescent boys in the experimental group actually had worse mental health, were more likely to report engaging in risky

behavior, had no improvement in arrests for violent crime and, actually had higher rates of arrests for property crime than those in the control group (Orr et al. 2003).

Our analysis of evidence from the Three-City study suggests that low poverty environments are protective for girls—but not for boys—in specific ways that may have direct benefits for their mental health and overall well-being. In general, the findings support our hypothesis that a reduction in “the female fear” underlies the positive changes for MTO experimental group girls. Experimental group movers who are living in low poverty communities report less pressure to engage in sexual behavior, less harassment from men and boys, and, as a result, say they are less fearful. These girls—and their mothers—often talk about what has happened to their friends who still live in public housing and how they feel they have avoided that fate. The difference in pressure to engage in sex is especially significant for very young girls, who in high poverty begin experiencing harassment and pressure in early adolescence.

Social Norms and Expectations

Overall, there are clear differences between experimental group movers concerns about pressure on adolescents—especially girls—to become sexually active. Parents and adolescents in lower poverty neighborhoods rarely talk about being at risk or about early sexual activity in their community or school. Generally, they describe feeling confident that they are safe from harassment. For example, Cassandra, is a fifteen year old girl who has lived in low poverty suburban neighborhoods outside of Boston since moving there in 1994. She felt that she was safe from harassment in her neighborhood because it was simply unacceptable:

“Q: And how about the guys, how do the guys treat women around here? A: They know not to touch them.

Likewise, Tracy, another experimental complier from Boston, expressed a similar sense of safety:

“There really isn't a lot of men on the street. I don't really know a lot of people. I don't hang around here. Q: It is pretty suburban? A: Yeah. It is just like any other city.”

And Shamika, a young girl in the experimental group in Los Angeles, could not even imagine that men in her low-poverty community might treat women badly:

I don't really know because like everybody that I know they have husbands and stuff. Their moms and dads are together, so I don't know.

In addition to simply feeling safe, experimental group movers' comments often reflected a sense of having escaped from a worse fate. Many refer to friends they left behind who already have children. Antionette is a young woman in her early 20s whose family initially moved to a low poverty neighborhood in the Bronx. She described she thought would have happened to her if she had stayed in the projects:

...Because a lot of kids in my [old] neighborhood, like the girls, wound up not finishing junior high or just starting high school like one of my best friends. I mean, we were in every single class since we started school together. We even went to the same high school. And then like ninth grade she had a kid and that was it

Leah's relief at having gotten her daughter out of what she saw as a very dangerous situation in public housing in New York was palpable:

Oh them girls at [our former housing project] is wild, so I know they'll be different. Her [my daughter's] best friend is calm. She is not into boys. Those girls at [the project] is into boys at 12 year old...Into boys, having sex, kissing, all that stuff. No, that's why I'm glad I moved out of [the project]....Can't let her grow up in these projects.

An issue of particular concern for many of the mothers and girls was the pressure for early sexual initiation—especially what they viewed as older guys preying on very young girls. Brianna, a mother from the experimental complier group in Los Angeles talked about how hard it would be to raise her daughter if she had stayed in the projects. When asked what her rules for her daughter would be if she still lived in the projects, she brought up her fears about men preying on little girls.

"I have thought about that before, if I was living there still, how would it be. I think the type of person I am, I would have control of it, but I wouldn't be able to trust it because of the guys...That try to hit on younger girls. So I wouldn't trust it...Q:

Do you think that happens more over there than it does here? A: Yeah. It does. I'm not going to lie to you. It does. Q: How does it happen over there or how did you see it happen? A: That's what they're like. They don't like the women my age. They go for the 12-year-old, the 11-year-olds, and give them drugs and that's not good...I have seen a lot of young girls like that....I refuse for my daughter to be like that."

When Brianna was asked if she thought there were those same kinds of pressures for the girls in her [new lower poverty] neighborhood she said that it was different.

"I pay attention and it's different. The girls, they're different around here. I always say that. It's different. It really is. You know, if I would compare them to out here, out here they better... You don't see them walking and hanging out and drinking and something that not a teenager don't supposed to do with a grown man."

In contrast, to the movers, who generally spoke of having rescued their daughters or having escaped themselves from the dangers of distressed public housing, nearly all of the girls—and mothers raising girls—who were living in high poverty neighborhoods talked about their fears. Carla and her teenage children moved back to the projects in New York after living for many years in a lower poverty neighborhood. Carla told the ethnographer about the bad things that had happened to her daughter since moving back—getting involved in risky sexual activity, catching herpes, being exposed to violence. She expressed an urgent need to get her daughter away from the risks of the neighborhood:

"I really want to get out of this neighborhood.: Because Maribel (her daughter) gets involved in things she shouldn't. [referring to the drug dealer ex-boyfriend who gave Maribel Herpes]. And, her best friend was in trouble. I didn't even know what was going on. I was sleeping. Like, I heard these gunshots. I was on pain medication. I would take the pain medication and go straight to sleep. But, there was gunshots. Carla said: I don't know what's going on. So, I look out the window. Well, her friend is 16 and she had a baby with this guy and she is living with him." Carla said that this girl is Maribel's best friend and she lives in the building next door.

The pressure to engage in sex is especially significant for very young girls, who in high poverty, begin receiving attention from men and boys in early adolescence. Patricia, an experimental complier mother from Los Angeles who has had to move back to a high

poverty neighborhood with her 12 year old daughter, was very concerned about the pressures for early sexual initiation:

"When she at home, I make her stay to herself, she have friends that come over from school, but, I don't let her socialize with too many people, because the girls, they fast, they got boyfriends, they having sex, and I don't want my daughter having sex. She only 12 years old, you know! And some girls get jealous because, you know, I don't know, it's just crazy."

Shauna is also aware of the risk. Describing her friend, LeShay Shauna said:

Do you think she is sleeping around with guys?" She said, "She is." I asked, "Are the guys older than her?" She said, "They are too old for her, like 20, and she only 13. She in the 7th grade. She go with boys like 15, 18." I asked her, "Is she the one we saw walking around?" She said, "No. That's another Le Shay." I asked, "Do you think she does other things like drink or smoke, like marijuana, or anything?" She said, "Marijuana. Her momma sell it."

Likewise, Carmela, a 13 year old girl from a control group family in Boston, whose family managed to move to who moved to the suburbs of Boston with a voucher they received several years after the MTO program began, spoke about early sexual activity among her peers in public housing.

"What about being sexually active, are any of your friends having sex?... "yeah". "You're 13, are they your age?" She nodded. "About when do you think they got started?".... "For girls, like 12 and boys like 10... do you know if any of them use protection, do they talk about it, like condoms or pills?" "The boys say they use condoms but the girls, I don't think they take the pills, I don't know". I asked Carmela if any of her friends had gotten pregnant and she said, "yeah one girl. She's fifteen now".

Sexual violence and coerced sex

Beyond the generalized pressure, our analysis makes clear that sexual violence and coerced sex are a reality for girls living in high poverty neighborhoods. Nearly all of the girls—and mothers raising girls—who were still living in high poverty neighborhoods talked about how badly men in their community treat women. Charmaine, an experimental group mover in Los Angeles whose family had moved back to a high poverty neighborhood, said that guys in her neighborhood treated women “terrible.”

They come at them wrong ways. They'll talk about their bootie or they'll just come to them straight, "Do you want to have sex?," or they talking about they use a girl. Yeah, they'll use a girl and they said--they call it "pimp a girl out."....Just get between her legs and just go on like nothing.

While no experimental group girls who were living in low poverty reported assaults, eight interview respondents, all currently living in high poverty, reported being victims of sexual violence or abuse. Four respondents (three adolescents, one young adult) reported abusive relationships and/or coerced sex. Two Los Angeles respondents reported being followed and threatened by men. One New York respondent and one Boston respondent (one adolescent, one young adult) said they were raped when they were eight and had suffered long-term consequences as a result.

Coping Strategies

Adolescent girls respond to the threat of harassment and violence by walking, talking, and dressing in ways that show that they are tough. When they can, they avoid risky places where they know they might face danger, including staying to themselves and staying inside the house. Like Georgiana, they rely on siblings to walk them to and from school and home.

"I just avoid it. Other girls aren't as tough as me. They go along with it and talk back to them and let them flirt," she said. While some girls engage boys, according to Georgiana, she also said that often "girls will walk with their brothers" as well. Georgiana shared that she often walks with her brother to avoid boys. I asked her if she feels safe with him and she said that she does. "He may be short and skinny but he could put up a good fight!" she said proudly.

Mothers adopt a range of strategies to cope with the sexual pressures, from allowing their daughters to have a boyfriend “so they won’t do it behind my back” to closely monitoring their daughter’s friends and activities. Like many other mothers in our study, Patricia, who moved back to an area near the projects with her daughter, is strict with her daughter about where she can go when she leaves the house. When asked where Shauna could go she says:

"Just to my momma house and my house. Only here and my moms....She do go to the candy house [the corner store]. When she do go, somebody always go with her, I don't let her go by herself. I always tell Frederico [her brother] to go with her, cuz boys... they be, at least my son, he a boy, but I ain't gonna say he know, but he know when people ain't supposed to talk to his sister, grown mens, he know."

Antionette is a young adult from an experimental complier family who moved back to a high poverty neighborhood in New York. She talked about her fear and how she carries herself so as not to attract attention

"I got a way. When I walk down the street I look real evil.... I don't even smile like nothing, nothing. And if you did say something to me, it's like....Why you talking to me?something like that...I don't respond to people. I have never responded to anyone. I think one time I responded to somebody and that's because the guy touched me....Because,Somebody could be crazy. You could be crazy, I could be crazy, ... You know, that's disrespectful.... I, I don't think you should touch people to say hi. If you say hi, and I don't say nothing back, that mean I don't want to be bothered. But don't touch me, because it makes me nervous and you don't know what's going to happen after that."

“Fast Girls”

Even though women and girls living in high poverty clearly recognize that men and boys often harass women and pressure them for sex, they also frequently hold the girls themselves responsible for attracting the “wrong kind” of attention. These views seem to be widespread among MTO participants and seem to underlie many mothers comments about watching what their daughters wear, keeping them from hanging around with the “wrong crowd,” and monitoring them very closely. Experimental group who have spent some time in lower poverty neighborhoods, often identify themselves as someone who is “not like that” meaning does not get in trouble, is not “fast” and does not

engage in other types of risky behaviors. As Jacklyn, a girl growing up in Los Angeles, put it:

Q: Tell me about how guys treat girls around here.

A: Treat girls? Well, I'm not sure because I don't be in everybody else business, but how they treat me? They be treating me good. Like I'm like their little sister. Because I guess I put myself in like a different category than girls because some girls, they like act like the whorish type. And it's girls that's younger than me, and they already have sex and they probably got a disease, and they like real fast, try to act older. But I act my own age. I don't be around a lot of people. I stay to myself, and I mean—so I guess they treat girls depending on how they act.

Mental health

The anxiety that many mothers and daughters feel about the risks of harassment, early sexual initiation, coerced sex, and pregnancy pervade their comments. Those who have managed to move to lower poverty neighborhoods are aware of having escaped from a dangerous environment; those who are still living in high poverty are aware of the risks and the constant need to be alert, aware, and protective. Clearly, the reduction in anxiety for those who are no longer living in high poverty is one of the biggest benefits of making an MTO move.

Robin, a mom from LA in the experimental group talked poignantly about the impact of moving from a public housing development in Watts to a suburban neighborhood has had on her children. Robin is struggling with health problems and is relieved that she does not have to worry so much about her daughter's safety and the pressure to become sexually active. The sense of being relieved of a major anxiety comes through clearly in how she talks about the contrast between her children and her friends' children who are still living in the projects.

I'm glad we are out here, far as that part, I'm glad we are living out here, cuz there is more intimidation and everything down there [in Watts]. ..., those boys down there are bad, say all kind of stuff... I'm like 'man look at these kids'. It's a faster pace. My kids are slow, so when my kids go down there now and they look at them, like, 'you guys are different', ... they tell 'em that they are different or whatever, 'you guys changed since you lived out there', they talk about them. That's why I say, it's kind of good that we are living out here. I know me, even if I was living in LA, it'd be hard for me, because the kids that they hang around, or

the environment that they are around, it would be hard , for them as kids too, and then by me, being the way I am, it would be just a mess.

When asked what her daughter's friends from LA were doing now Robin said:

Everything. Having sex, I mean, little girl she was practically raised with before we moved out here, she got raped was pregnant before, she's the same age as Teri, and she was already pregnant before, and I guess her mom took her to get an abortion. She's having sex. Teri's not having sex. And [she has]different guys, even the 13 year old girl, who my 13 year old was raised together[with], they grew up together, she has a boyfriend, 16 years old and she's 13, and her mom lets her"

Faith is a thirteen year old girl from a control group family in Boston. She has noticed that for girls growing up in a high-poverty neighborhood, early sexual activity can be connected to poor mental health. Faith was asked if it was different in [her] neighborhood for boys and for girls.

"Yah, girls have to worry about things their whole life. They get more stressed out, they get more depressed. Sometimes they want to kill themselves." Have ever known anybody who wanted to kill themselves? "There was this girl at school who wanted to kill herself." What happened? Why did she want to kill herself? She got pregnant, and she was really sad about this. That's why am not glowing to mess around. I am not to get pregnant anytime before I am 18, no matter what."

Alishia, a girl from Los Angeles in the control group talked about how she feels about being harassed as she moves around her neighborhood and is confronted by men who she describes as "angry people."

Q: Where do you deal with other angry people?...Usually at school or if I'm walking home from the bus stop...what are they angry about...Just anybody trying to talk to me and then I won't talk to them so they cuss and things....Q: What are they trying to do?....Trying to tell me to come here and can I get your number and things like that...And when I don't, when I say no, they get angry, so

I'm like angry, it's my number and I don't have to give it to you....It makes me feel harassed mostly.....”

Conclusion

- Main findings: real benefits for girls from leaving high poverty neighborhood context:
 - Reduction in fear of pressure for sex, harassment, and risk of assault. Even harassment is very personal, affects girls well-being, perceptions of self. Our evidence suggests that reducing the exposure to this harassment has real benefits for girls' mental health and overall well-being.
 - MTO and other research on neighborhood effects has given little attention to specific risks for that are more likely to affect girls—early sexual activity, teen pregnancy, victimization, coerced sex.
 - In part this lack of attention is due to the fact that these outcomes are difficult to measure with any accuracy, mostly rely on self-report and, particularly in the case of partner or sexual violence are stigmatized, difficult to ask about in a survey. Also, unlike arrest data, there are not easily accessible administrative data sources that would provide information about individual pregnancies, STDs, etc.
 - But may also reflect specific interests, biases of researchers, policy makers who designed the studies, e.g. concern re drugs, gangs
 - Our findings suggest the importance of focusing on these issues to understand more about what factors matter for improving outcomes for women and girls. We know that MTO participants (and HOPE VI) cite safety as their biggest gain—our findings offer insight into what safety means for women and girls beyond the reduction in gang violence.
 - We do not know what the long-term benefits of these changes may be—potentially, delayed child bearing, better parenting, more success in education and employment? Important to follow sample to see what long-term benefits may be.

Table 1

Summary of Studies from the Moving to Opportunity for Fair Housing Demonstration (MTO) Used to Examine Neighborhood Effects on Adolescents' Health and Behavior

Study	Method	Years Post-Move	Sample	Findings	Reference(s)
MTO-Baltimore	Administrative data on juvenile arrest records	2.5 years	336 mostly African American & Latino 11-16-year-olds at randomization	<ul style="list-style-type: none"> E boys less likely to be arrested for violent crime than C boys 	Ludwig, Duncan, & Hirschfield (2001)
MTO-Boston	Interviews with parents	2.2 years	612 mostly African American & Latino 6-15-year-olds	<ul style="list-style-type: none"> E boys fewer behavior problems than C boys 	Katz, Kling, & Liebman (2001)
MTO-New York City	Interviews with children	2.5 years	512 African American & Latino 8-18-year-olds	<ul style="list-style-type: none"> E boys fewer anxious/depressive problems than C boys E boys fewer dependency problems than C boys 	Leventhal & Brooks-Gunn (2003)
MTO 5-site	Interviews with children and parents and administrative criminal justice data	5 years	5,074 mostly African American & Latino 6-to 20-year olds at interview	<p><i>Girls age 12-19:</i></p> <ul style="list-style-type: none"> E less psychological distress past year than C E lower odds of life time General Anxiety Disorder than C <p><i>Girls age 15-19/25:</i></p> <ul style="list-style-type: none"> E less likely ever use marijuana than C E less likely ever smoke than C E less likely to be arrested for violent crime than C 	Orr et al. (2003); Kling, Ludwig, & Katz (2005)

Study	Method	Years Post- Move	Sample	Findings	Reference(s)
				<ul style="list-style-type: none"> ▪ E less likely to be arrested for property crime than C <p><i>Boys age 12-19:</i></p> <ul style="list-style-type: none"> ▪ E more behavior problems than C <p><i>Boys age 15-19/25:</i></p> <ul style="list-style-type: none"> ▪ E more likely ever smoke than C ▪ E more likely to be arrested for property crime than C 	

Note. E = Experimental; C = Control.