

Research Up-To-Date

The Newsletter of the Urban Appalachian Council Research Committee

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The Research Committee was created at the founding of the Urban Appalachian Council thirty years ago and has always informed the council through active research. To be notified of future research committee meetings, which are open to all, please contact msullivan@uacvoice.org or phone 251-0202.

Appalachian Studies Conference 2007

The Appalachian Studies Association's thirtieth annual conference will be held March 23-25, 2007 at Maryville College in Maryville, TN. The conference theme is Piecing the Appalachian Experience: Celebrating an Organization and a Region.

The ASA was formed in 1977 by a group of scholars, teachers, and regional activists who believed that shared community has been and will continue to be important to those writing, researching, and teaching about Appalachia. The Association's mission is to encourage study, advance scholarship, disseminate information, and enhance communication between Appalachian people, their communities, governmental organizations, and institutions.

Film, photography, music, crafts, poetry, dance, posters, workshops, roundtables, and arts displays are always a part of the conference, along with a silent auction and a bookroom featuring some forty exhibitors. A limited number of scholarships are available upon request.

For more information about the Association or about being an exhibitor, applying for a scholarship, or registering for the conference, go to www.AppalachianStudies.org. The association website also has

discussion boards, syllabi for Appalachian studies courses, information about past conferences, related links, and more.

Encyclopedia of Appalachia Published

The *Encyclopedia of Appalachia* was published by the University of Tennessee Press in March, 2006. Its 1,832 pages are divided in to five major divisions: The Landscape, The People, Work and Economy, Cultural Traditions, and Institutions.

UAC research committee members Roberta Campbell (Race, Ethnicity and Identity) and Michael Maloney & Phillip Obermiller (Urban Appalachian Experience) served as section editors for the volume. Many other UAC members and urban Appalachians in southwestern Ohio wrote individual entries.

For more information about this useful reference book please see <http://utpress.org/Appalachia/>.

Social Areas Report Available

The fourth edition of The Social Areas of Cincinnati (Michael Maloney and Christopher Auffrey) has been presented many more times than any before and has received many hits on its website. While the report is not just about urban Appalachians, it focuses extensively on the conditions in education, employment, health status and other areas related to the urban Appalachian population and tracks changes over four decades.

According to the SAR, most Appalachians are not poor and fall in between non-Appalachian whites and non-whites in terms of socioeconomic status. However, inner-city Appalachians do have higher rates of poverty than non-Appalachian whites. The report tracks changes in population of those neighborhoods that have been traditionally viewed as Appalachian. Statistics on education, school dropouts, unemployment and the elderly and children are also included. There is also a summary of policy implications with recommendations.

Maloney and Auffrey have made presentations in city hall, to community councils, the Uptown Coalition, United Way, Christ Church Forum, The Women's City Club and to various social service and arts organizations.

The full report, along with hints about specific areas of interest, can be found at <http://www.socialareasofcincinnati.org>. To arrange a presentation for your group, contact the authors at meamon@aol.com or 513-531-8799.

Special Edition of the Journal of Appalachian Studies analyzes Demographics in Appalachia

A special edition of the Journal of Appalachian Studies that analyzes the 2000 census finds that that single-female-headed households with limited opportunities in poor counties are essentially “locked in” and immobile, thus explaining persistent poverty.

Latino populations in Appalachia are growing and so are African Americans; students receiving high school diplomas are at their greatest rate in Appalachian history and are on a great trajectory although college degrees lag behind the nation; and poverty is associated with home ownership in Appalachia.

The special edition, edited by Phillip J. Obermiller, is free to 2004 members of the Appalachian Studies Association. Others can purchase the edition for \$10 by visiting the Appalachian Studies Website at www.appalachianstudies.org.

Working Paper 19 raises questions about GED Restrictions

Cincinnati Public Schools' decision to keep high school students from sitting for the General Education Diploma may limit future opportunities according to John Mark Summer.

Sixteen- and seventeen-year olds are not allowed to test for the diploma except under extreme circumstances. The rationale behind this change seems logical: discouraging students from dropping out. But since many students drop out because of problems that they face in the schools rather than to avoid education, restricting access to the GED may, in effect, simply close another door.

According to Summers, whether to limit who can take the GED is a sound practice to encourage young people to stay in school or whether it prevents adult learners from returning to their educational pursuits is a complex, arguable issue. Most research suggests that a high school diploma is more valuable than a General Education Diploma. However, it is still better than no credential at all. And education researcher Duncan Chaplin finds that there are ways to increase a GED holder's likelihood of continuing education.

Summer reviews the arguments pro and con for allowing high school students to take the GED, including questions regarding the academic integrity of the diploma as well as whether it increases the potential earnings for its holder in UAC working paper 19. Summer's 2002 article entitled “More Harm than Good? Restricting Teenagers' Access to the GED,” can be found at www.uacvoice.org along with several other working papers dating back to 1974. More recent papers can be read online while

older papers are available in the Frank Foster library at UAC headquarters at 2112 West Ninth Street, Cincinnati.

“We Did Magic”: Michael Maloney on the Origins of the Appalachian Studies Association

Michael Maloney visited the Northern Kentucky University Introduction to Public History Course on Tuesday, October 10th, 2006. Mr. Maloney allowed the class to videotape an interview with him about his experiences as one of the founding members of the Appalachian Studies Association.

The class is currently researching, designing, and writing the commemorative booklet about the 1977 meeting in Berea Kentucky that led to the creation of the organization now known as the Appalachian Studies Association. The booklet will be distributed at the upcoming 2007 ASA conference, March 23-25 in Maryville, Tennessee.

The students were visibly moved and inspired by Mr. Maloney’s stories about coming to Cincinnati and Over –the- Rhine in addition to his account of the meeting of what they have dubbed “The Berea Thirty.” They reported later that having witnessed an Appalachian scholar-activist speak in person, they could now more deeply appreciate and understand what has been written about the passionate commitment of ASA’s members.

Excerpt from the Interview:

Question: “What do you think is the legacy of the Berea Thirty group?”

Answer: “We did magic. The people who were able to take command of the language are creators. By using those words we were giving political, social, and psychological space to thousands of people who had been labeled and called hillbillies.

. . . When we seize words that define our own situation that’s a type of magic . . . I’m talking about people with courage and creativity who instead of just going on in their careers took time to think about people...”



Special Feature: The Health of Appalachians in the Tri-State Area

By Ann McCracken and Stephanie Davis

The 2005 Greater Cincinnati Community Health Status Survey was a sample of 2,454 randomly selected adults, including an over sample of African Americans, residing within a 22-county Greater Cincinnati area. Four hundred sixty-seven (467) participants were first or second generation white Appalachians. First generation Appalachians were born in a county designated as Appalachian. Second generation Appalachians had at least one parent born in a county designated as Appalachian. The survey has been conducted in three-year intervals, but past surveys included only first-generation Appalachians. In order to avoid duplication in survey categories, both Appalachian and non-Appalachian African Americans were grouped as African Americans. The survey has a 2.2% margin of error.

The 2005 Greater Cincinnati Community Health Status Survey (GCCCHSS) provides the self-reported health status, health behaviors, and health opinions of adult residents of the Greater Cincinnati area. Four of the Ohio counties in the Health Foundation's service area (Adams, Brown, Clermont, and Highland) are designated as Appalachian counties. In addition, there are many people of Appalachian descent living throughout the Greater Cincinnati region. In the 2005 survey the age distribution of the first and second generation Appalachian differed. Approximately, one in three first generation Appalachian respondents (31%) were age 65 years or older, compared to one in ten of the second generation Appalachians (12%). The age difference may explain findings such as physical health and health care coverage differences. As noted above, Appalachians in this article refers to white Appalachians only. Appalachian and regional data are from the 2005 GCCCHSS. National data are from the 2005 Behavioral Risk Factor Surveillance System Survey (BRFSS).

Physical Health

Traditionally, Appalachians have been at a greater risk of dying from heart and lung problems and cancer than the national average. The Greater Cincinnati region's Appalachians are no exception. In 2005, nearly half of the region's Appalachians (46%) had been told by their doctor or another health professional that they have high blood pressure, compared to approximately one-third of area residents (32%). Approximately one-fourth of adults nationwide, or 26%, had high blood pressure.

In addition, 40% of Appalachians have been told that they have high cholesterol, compared to 29% in the region and 36% in the nation. Fifteen percent (15%) of Appalachians report heart trouble or angina, compared to 11% in the region.

Smoking is a major risk factor for diseases of the heart and lung. The Healthy People 2010 goal is that 12% or less of adults 18 and over will smoke cigarettes. Healthy People 2010 is the document that sets the U.S. prevention agenda for the next 10 years. Nationally, 21% of people are current smokers, while 30% of people in the region currently smoke, and 31% of Appalachians.

Appalachians had a smoking rate two and a half times the national goal. Second generation Appalachians were more apt to be smokers, with 36% current smokers compared to 26% of first generation Appalachians. Slightly more than 6% of Appalachians and slightly less than 5% of the region had been told that they had chronic lung disease.

Appalachians were also more apt than the nation to have diabetes. Just over 13% of Appalachians in the region reported being told that they have diabetes, which was almost twice as high as the national rate (7%). Ten percent (10%) of the Greater Cincinnati region have been told they have diabetes. Proper nutrition and exercise are essential to managing this chronic illness. Despite the fact that more Appalachians reported engaging in recommended amounts of moderate and vigorous physical activity than the region, nearly 31% of Appalachians were obese. Twenty-seven percent (27%) of the region's population is obese and 24% nationally. The Healthy People 2010 goal is that no more than 15% will be obese. Obesity is defined as a body mass index of 30 or greater.

More than a third of Appalachians in the region (37%) had been told by a health care provider that they had arthritis, compared to 28% of the region. Appalachian respondents (30%) were also being told more often than others in the region (20%) that they had migraine headaches. Cancer rates were nearly the same for both Appalachians and the region, 7% versus 6%.

Mental Health

Health care providers told approximately 21% of the region and 25% of the Appalachians that they have had depression. Interestingly, first-generation and second-generation Appalachians differed in terms of

mental health. More second-generation Appalachians (13%) than first-generation Appalachians (6%) reported experiencing symptoms of psychological distress, such as feelings of nervousness, restlessness, and hopelessness, all or most of the time. Second-generation Appalachians (22%) were also more likely than both first-generation Appalachians (14%) and the regional population (18%) to report that their stress level is “a lot higher than they’d like it to be.”

Oral Health

Oral health was a health challenge among Appalachians. Nearly one in three Appalachians (30%) reported the condition of their mouth and teeth as fair or poor compared to 24% of the regional population. Sixty-six percent (66%) of Appalachians had a usual place that they go for dental care and 63% had visited a dentist or dental clinic for any reason in the past year.

Medical Home, Health Care Coverage, and Health Care Cost

Having a medical home, a site that one consistently goes to seek medical care or advice, is important for both health promotion and the management of chronic diseases. Seventy-seven percent (77%) of Appalachians and 80% of the region had a medical home. Appalachians (14%) were more likely to have used a community-based health center as their medical home than the region (9%). However, Appalachians were no more likely to use the emergency room as a usual place of care than the region. Both were approximately 3%.

Appalachians (87%) were slightly more likely to have health care coverage (health insurance, prepaid plans, or government plans) than the region (83%). Nonetheless, some Appalachians in the region were struggling with the cost of health care. Seventeen percent (17%) of Appalachians reported having to change their way of life significantly to pay medical bills, compared with 14% of the region. Also, 21% of Appalachians reported using up their savings to pay medical bills, and 9% had gone without basic necessities, such as rent or food, to pay medical bills.

Second generation Appalachians were more likely than first generation Appalachians to have difficulty with health care coverage or paying for health care as noted in the following table.

	First Generation	Second Generation	Region
Uninsured in past 12 months	13%	39%	20%

Delayed or not gotten medical care	17%	36%	26%
Not receive a doctors care because they needed money for household necessities	2%	10%	6%
Went without prescriptions because they needed money for household necessities	6%	16%	11%
Current health insurance plan would not pay for something they thought was covered	17%	34%	22%
Problems paying or were unable to pay medical bills in the past 12 months	16%	26%	21%
Changed way of life to pay medical bills	8%	24%	14%
Used up all or most of savings to pay medical bills	12%	28%	17%

Appalachians in the Greater Cincinnati area had social resources that could positively affect sense of health and well-being. They saw their community as being tightly-knit and supportive. Eighty percent (80%) of Appalachians strongly agreed that people in their communities would be willing to help them in emergencies, 73% said that people in their communities knew they could count on each other for help if they had trouble, 72% believed that people in their communities could depend on each other, and 86% said that living in their communities gave them a secure feeling.

Conclusion

In conclusion, white Appalachians in the Greater Cincinnati area had high smoking and obesity rates. They also had a high incidence of hypertension, high cholesterol, and diabetes. These diseases include both heredity and lifestyle components. While Appalachians cannot change heredity, they may be able to alter the course of these diseases through lifestyle changes. First and second generation Appalachians differed in findings on the survey. First generation Appalachians tended to

have more physical health problems but better health care coverage. They also tended to be older. Second generation Appalachians had more mental health problems and greater problems paying for medical care.

More information about the Greater Cincinnati Health Status Survey results is available including chart books for Appalachian and African American results, summaries of results for various health conditions and topics, a regional report and tables with frequencies by demographics such as age, gender, ethnicity, income, education, poverty status, etc. A third chart book on Hispanic health reports on findings from a separate Hispanic survey. These materials are available at The Health Foundation of Greater Cincinnati website www.healthfoundation.org. For person who wish to do additional analyses of the data the online analysis and statistical information system (OASIS) facilitates a more detailed statistical analysis of the data. OASIS can be accessed on the internet at www.oasis.uc.edu.

Research Notes

(From the Research Committee – Chair: Debbie Zorn)

Research Updates

Phillip Obermiller is compiling teaching materials on teaching Appalachian culture in the 3rd-6th grades. Maureen Sullivan has been talking to Rosa Blackwell, superintendent of Cincinnati Public Schools about similar faculty development efforts at the Mayerson Academy.

John Bryant reported on his follow-up with Gear up students at UC. He is also working with the public library on the Library of Congress Veteran History Project which is getting interviews of people who served in the second World War. Interviews can be conducted at any branch of the Cincinnati Public Library.

Rebecca Bailey announced that she would make herself and her students in her Public History Program at Northern Kentucky University available for research assistance. Her class is writing a 30th anniversary commemoration booklet of the Appalachian Studies Association.

Jeff Jacobson is working on the final year of a National Institute for Environmental Health Science grant to develop and implement an environmental genetics curriculum for Latinos, Urban Appalachians and African Americans.

Robert Ludke has resubmitted a proposal to the National Institute of Health to look at cardiovascular health among the Appalachian and African American communities in the City of Cincinnati.

Ludke, Jacobson, and Obermiller are working on a manuscript on using

alternative questions for identifying Appalachians from the 2005 Community Health Status Survey. He noted that a faculty candidate from West Virginia University is working with the University of Kentucky to trying to define "Appalachian-ness". She has done focus groups in a southern West Virginia coal community and is interested in doing some additional focus groups on the subject. Ludke has suggested that she pursue doing focus groups on urban Appalachians and indicated his willingness to partner in doing so in Cincinnati. Ludke also submitted a research proposal to NIH on willingness to use hospice services.

Michael Maloney is working on the fifth edition of the Appalachian textbook and an article for the Northern Kentucky Encyclopedia.

Roberta Campbell and Maureen Sullivan are continuing the gathering of oral histories of grassroots women leaders in the Lower Price Hill neighborhood.

Sherry Marshall is working on her master's degree at the University of Cincinnati and her research project will be a response to her family's "recovery" from the public school system.

The direction of the Research Committee

Maloney and Sullivan outlined the origin of the research committee and led a discussion on future directions. Maloney drew a timeline of the research on urban Appalachians that had been done in the past and noted that there had long been a connection between research and advocacy. He proposed that future research efforts might proceed from focusing on specific concerns (like health, education, employment, etc.) and then asking "what works?", "what needs to be done?", and "what research is needed?"

The committee created a subcommittee to explore conducting forums with activists and researchers around specific concerns. The first meeting of that subcommittee will be November 10.

The next Research Committee meeting will be November 17 at 10 a.m. at the UAC headquarters in Lower Price Hill.

For archived research committee minutes visit www.uacvoice.org.

Additional Links

Center for the Study of Gender and Ethnicity in Appalachia
<http://www.marshall.edu/csega/index.asp>

The University of Kentucky Appalachian Center
<http://www.research.uky.edu/Appalcenter/index.html>



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