



# Positive Youth Development Programs that Promote Adolescent Reproductive Health

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# Acknowledgements

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# History of Positive Youth Development Programs: United States Experience

- Early 1900's Adolescence emerges as a distinct stage of development
- Service programs, YM(W)CA, Scouting, Boys and Girls Clubs, develop, education extended to be more universal
- 1950's Juvenile crime intervention and treatment programs first supported by government
- 1950-1970 Treatment programs for adolescents expand to substance use, conduct disorder, academic failure, teen pregnancy
- Mid 1960's-mid 1970's Prevention programs focused on a single problem begin to be developed, most were ineffective
- Mid 1970's-1980's Prevention programs begin to focus on precursors of a single problem, some successes occur
- Late 1980's-early 1990's Critiques begin of single problem approach to prevention

# Positive Youth Development

## *Critiques of Single Problem Behavior Focus of Early Prevention Programs*

### **Practitioners and Policy Makers**

- Focus on single problems ignores the whole child.
- Focus on the individual and downplays the role of the environment.
- Developmental needs and competencies ignored.
- Problem-free does not mean fully prepared or healthy.
- Separates promotion from prevention.

### **Prevention Scientists**

- Overlapping risk and protective factors predict diverse problems.
- Risk and protective factors located in both individual and environment.
- Developmental needs, processes and tasks often ignored.
- Protective factors often not addressed.

# Positive Youth Development

## *Recommendations for a Broader Conception of Youth Development*

### **Practitioners**

- Focus on whole child
- Focus on developmental needs and challenges.
- Focus on the individual as well as the environment.
- Address cultural competence in program delivery
- Include promotion and prevention.

### **Prevention Scientists**

- Address risk and protective factors for multiple problems
- Address risk and protective factors during critical developmental periods
- Engage multiple socialization units.
- Understand the developmental epidemiology of the target population.
- Include those at greatest risk.

# Positive Youth Development

## *Relevance of these Critiques to the PYD Approach*

- Convergence in critiques and program recommendations.
- First review of the effectiveness of PYD programs Catalano et al., 1998.

# Positive Youth Development Goals

- Promote youth development through enhancing
  - Connectedness (bonding)
  - Competence (social, cognitive, behavioral, emotional, moral)
  - Confidence (self efficacy, self determination, belief in the future, clear & positive identity)
  - Character (prosocial norms, spirituality)

# Providing Opportunities & Experiences that:

- Strengthen supports at home, school, community (e.g., teach parents and teachers better ways to communicate with and reinforce child behavior)
- Build skills (e.g., competency building curriculum, homework help)
- Engage in real and challenging roles (e.g., produce newsletter, community service, visit college campus)

Source: Catalano et al 1998,  
Roth & Brooks-Gunn 2003

# In a Program Atmosphere that is:

- Supportive (e.g., modify school procedures, encourage sense of belonging among youth)
- Empowering (e.g., involve youth in decision-making, put youth in "helper" role )
- Communicates expectations for positive behavior (e.g., explicit agreement on policies and consequences for infractions)
- Provides opportunities for recognition (e.g., ceremonies, articles in local newspapers)
- Stable & relatively long-lasting (at least one school year)

# Inclusion Criteria for Review: Program Characteristics

- Addresses one PYD “goal” in multiple socialization domains (family, school or community), or two or more goals in one socialization domain
- At least 50% of program activities focus on promoting general PYD goals (v. focus on direct sexual health content)
- Program focused on promotion or prevention
- Youth were less than 20 years of age

(Adapted from Catalano et al 1998)

# Inclusion Criteria: Study Methods

The evaluation must have:

- An experimental or quasi-experimental design
- Appropriate statistical methods
- An appropriate unit of analysis
- Assessed the program's impact on at least one reproductive health outcome measured during adolescence (e.g., sexual initiation, use of condom of birth control, pregnancy, STI)

# Methods

- Electronic search of 8 online databases plus review of grey literature (1985-2007)
- Identified studies were summarized using a standard review form
- Each summary prepared independently by two reviewers who then met to reach consensus
- Program summaries were confirmed by original program developers (70%)

# Results

- 30 PYD programs met eligibility criteria
- 15 of 30 programs improved at least one reproductive health outcome:
  - Delayed initiation of sexual intercourse (7)
  - Decreased frequency or recency of sex (3)
  - Increased use of birth control or condoms (6)
  - Decreased number of sexual partners (2)
  - Fewer pregnancies or births (6)
  - Fewer reported STIs (2)
- Most programs sustained impact well beyond the end of intervention
- Many affected other youth outcomes

# Effective Programs

## Preschool and Elementary Age

### PYD Program

### ARH outcomes

### Other outcomes

Abecedarian Project  
(Campbell, Ramey et al., 2002)

Teen birth

Academic achievement, employment, substance use

High/Scope Perry  
Preschool  
(Schweinhart et al., 1992, 2005)

Teen pregnancy

Crime, academic achievement, family relationships, substance use, employment

Seattle Social  
Development Project  
(Hawkins et al., 1999;  
Lonczak, Hawkins et al., 2005)

Ever sex, # of partners, delayed initiation, condom use, STI, pregnancy or birth

Academic achievement, crime/delinquency, violence, mental health

# Effective Programs

## Middle School Age

### PYD Program

### ARH outcomes

### Other outcomes

Aban Aya – SCI  
(Flay et al., 2004)

Recent sex, condom  
use

Violence, provoking  
behavior, school  
delinquency, substance use

Adult Identity Mentoring  
(Clark et al., 2005)

Ever sex

Academic achievement,  
school suspensions

Gatehouse project  
(Patton et al., 2006)

Ever sex

Substance use, antisocial  
behavior

Keepin' it REAL  
(Dilorio et al., 2002; 2006)

Condom use last sex

Staying Connected with  
Your Teen (Haggerty et  
al., 2007)

Ever sex

Substance use, violence

New Beginnings  
(Wolchik, Sandler et al., 2002, 2007)

# of partners

Mental health, substance  
use

Reach for Health (O'Donnell  
et al., 1998, 2002)

Recent sex, ever sex

Violence

# Effective Programs Middle – High School Age

<u>PYD Program</u>	<u>ARH outcomes</u>	<u>Other outcomes</u>
<p>Teen Incentives Program (Bayne Smith, 1994)</p>	<p>Frequency of sex, contraception use</p>	
<p>Adolescent Sibling Pregnancy Prevention (East et al., 2003)</p>	<p>Ever sex, pregnancy, condom use</p>	<p>Substance use, gang activity, school truancy</p>
<p>CAS-Carrera Program (Philliber et al., 2002)</p>	<p>Ever sex, contraception or condom use, teen pregnancy</p>	
<p>Familias Unidas (Prado et al, 2007)</p>	<p>STI, unprotected sex</p>	<p>Substance use</p>
<p>Teen Outreach Program (Allen, Philliber et al., 1997)</p>	<p>Teen pregnancy</p>	<p>Academic achievement</p>

# Characteristics of Youth Served by Effective Programs

- Most programs targeted at-risk youth (e.g., poor, living in disorganized neighborhoods, single-parent households, siblings of parenting teens, school drop outs, children of divorce)
- 14 of 15 programs delivered to mixed gender groups of youth
- 8 of 15 focused on a single racial/ethnic group:
  - African American 5 programs
  - Hispanic 1 program
  - White 2 programs

# Results: PYD Concepts Addressed

# programs	PYD Concepts
Half or more	Bonding, cognitive competence, social competence, emotional competence, belief in the future, self determination
One-third	Behavioral competence, moral competence, self-efficacy, prosocial norms
One-quarter	Clear and positive identity
None	Spirituality

# Results: Opportunities & Experiences

# programs	Opportunities and experiences
14 of 15	Strengthened the family, school or community context
15 of 15	Builds skills of youth
14 of 15	Engage youth in real roles and activities

# Results: Atmosphere

# programs	Program Atmosphere
15 of 15	Supportive
14 of 15	Empowering of youth
12 of 15	Communicates expectations
12 of 15	Provides opportunities for recognition
10 of 15	Stable and long-lasting

# Comparing Program Goals

	Programs that promoted ARH, % (n=15)	Programs that did not promote ARH, % (n=15)	P-value
Bonding	80	67	0.68
Cognitive competence	67	87	0.39
Social competence	100	80	0.22
Behavioral competence	40	27	0.70
Emotional competence	67	33	0.14
Moral competence	33	20	1.0
Self determination	47	27	0.25
Self efficacy	40	7	0.70
Clear & positive identity	27	33	0.33
Belief in the future	47	0	0.71
Spirituality	0	0	--
Prosocial norms	40	60	0.47

# Comparing Opportunities and Experiences

	Programs that promoted ARH, % (n=15)	Programs that did not promote ARH, % (n=15)	P-value
Strengthen the family	73	47	0.26
Strengthen the school	53	7	0.01
Strengthen the community	33	40	1.0
Build skills of youth	100	93	1.0
Engage in real roles & responsibilities	93	73	0.33

# Comparing Program Atmosphere

	Programs that promoted ARH, % (n=15)	Programs that did not promote ARH, % (n=15)	P-value
Supportive	100	67	0.04
Empowering	93	80	0.60
Communicates expectations	80	47	0.13
Provides opportunities for recognition	80	40	0.06
Stable & long-lasting	67	47	0.46

# Conclusions

There is evidence that PYD programs:

- Promote adolescent reproductive health, and many promote other positive outcomes as well
- Have a relatively robust and sustained impact
- Have the potential to succeed among diverse groups of youth

However, more research needed before this list of program goals can be viewed as a "recipe" for success

# Implications

- Support more widespread adoption of PYD programs with evidence of promoting ASRH
- Support applied dissemination/implementation research of these programs
- Support the identification of more PYD programs that promote ARH; evaluate new & existing programs
- Encourage wide measurement of outcomes so that the full impact of PYD programs can be discovered

