What Do Adolescents Need for Healthy Development?

Implications for Youth Policy

Jodie Roth and Jeanne Brooks-Gunn

Summary

National interest in how youth develop in healthy ways and how we can facilitate this process has intensified in recent years. This Social Policy Report summarizes what we know about healthy adolescent development and what this knowledge means for our ability to improve the lives of youth by raising and answering three questions.

1. What do adolescents need to develop successfully? Successful adolescent development includes the promotion of positive as well as prevention of negative actions, feelings, and thoughts. This can be done through the opportunities and supports, or assets, offered in families, schools, and communities.
2. How do the settings in which adolescents live, study, and play enhance (and, in cases, impede) their wellbeing? The research on the often overlapping worlds of the teenager—the family, peer group, school, work, and neighborhood settings—shows the influence of these different settings. The important aspects of the family setting are characterized by TLC

    > TIME,
    > LIMIT setting, Listening, and Laughter
    > CONNECTEDNESS/Caring and Communication.

    The influence of the peer group lies in FRIENDs, offering opportunities for

    > FRIENDSHIP, risks for not
    > RESISTING negative influences, chances for developing shared or new
    > INTERESTS,
    > EXAMPLES of different attitudes and behaviors (and their consequences), the influential power in
    > NUMBERS, and the danger of associating with
    > DEVIANT youth.

    The ABC's of the school world include the importance of a developmentally

    > APPROPRIATE school environment for youth, particularly young adolescents, the influence of the
    > BEHAVIOR of others in the school, and the powerful role of
    > CONNECTION, to the institution of school as well as to teachers and other students.

    The ideal adolescent WORKplace would offer youth the chance to

    > WIDEN their horizons, particularly in terms of future careers, develop
    > ORGANIZATIONAL skills, learn about
    > RESPONSIBILITY, and gain valuable
    > KNOWLEDGE.

    Neighborhoods impact youth behavior and emotions through their

    > Place, Space, and Face.

3. What are the implications of what we know about the worlds of adolescents for the development of youth programs? Beneficial youth programs promote successful adolescent development by creating opportunities and supports influential in youths' worlds. Successful programs mimic successful families and schools by providing TLC and ABC's, encourage the benefits of FRIENDs while helping participants avoid their harm, and structure activities to capture the best of teen WORKplaces. Community-wide efforts to enhance youths' lives rest on the recognition of the important intersection of the Place, Space, and Face of neighborhoods.

    Successful programs view adolescents as resources to be developed. We as a nation cannot hope to promote the healthy development of all our youth without a change in American's negative views towards adolescents.

From the Editor

This issue of *Social Policy Report* marks the first transition in editorship in over a decade. The Society owes a tremendous debt of gratitude to Nancy Thomas for her years of service as editor of the *Report*. Nancy's dedication and commitment were unparalleled in my acquaintance with journal editorship; her efforts will be remembered and cherished for a long time by the Society.

I know that Nancy will be a hard act to follow as editor, but I am quite fortunate to have the assistance of a valued Associate Editor, Dr. Jeanne Brooks-Gunn of Teachers College, Columbia University. Brooke and I are actually working as much as coeditors as editor and associate editor, and we hope to maintain Nancy's high standards, policy relevance, and timely and interesting content. We are planning several innovations to unfold across the next year. We are also fortunate to have a talented and hard-working managing editor in the Ann Arbor office, Katy Clark; neither Brooke nor I could do it without her help.

This first issue, marked by a new look and cover summary, addresses a topic dear to my heart and of direct relevance to the program of the William T. Grant Foundation: What does it take to promote the positive, healthy development of the nation's youth? The youth development field is rapidly moving away from an orientation to fixing problems and is instead asking what do youth need, how do youth differ in the extent to which their needs are meet by naturally occurring resources in the form of family, friends, schools, workplaces and communities, and how can we make up for the shortcomings of these settings in meeting youths' needs. I had hoped to have an issue on this topic so was delighted to learn that Dr. Brooks-Gunn and her colleague Dr. Jodie Roth had a draft of a paper on this topic; in this contribution, they summarize the research base for this new approach to youth policy and programming.

Lonnie R. Sherrod, Ph.D., Editor
Executive Vice President, William T. Grant Foundation

What Do Adolescents Need for Healthy Development? Implications for Youth Policy

Jodie Roth and Jeanne Brooks-Gunn[1]

Adolescent Health as a National Concern

The national initiative *Healthy People 2000* (U.S. Department of Health and Human Services, 1991) spurred a serious discussion as how to help our nation's youth navigate the transition from adolescence to adulthood without engaging in unhealthy and risky behaviors. Throughout the past decade, scholars, policy makers, and practitioners have been asking how youth develop in healthy ways and how this process may be facilitated (e.g., Carnegie Council on Adolescent Development, 1989, 1994, 1996). Indeed, interest in these topics has intensified in recent years, as witnessed by the *Healthy People 2010* initiative (U.S. Department of Health and Human Services, 2000) and the first ever White House Conference on Teenagers held in May, 2000.

This social policy report summarizes research on adolescents to address four questions about helping youth grow into adulthood. First, what are the ingredients for successful adolescent development? In a nutshell, adolescents who are merely problem-free are not fully prepared for their future (Pittman, 1991). Second, what are some of the special challenges of adolescence and how do youth negotiate transitions at this time of life? Third, since adolescents' lives are touched by family, friends, school, work, and community, what do we know about how these spheres influence their development? Fourth, what are the implications of these findings for designing and implementing youth programs that are beneficial and appealing for adolescents? We provide recommendations for altering perceptions of teenagers in communities in the last section, in order to stress promoting the positive, not just preventing the problems (Moore & Halle, 2000).

> *Adolescents who are merely problem-free are not fully prepared for their future (Pittman, 1991).*

What are the Ingredients for Successful Adolescent Development?

Generally speaking, positive (successful) youth development encompasses all our hopes and aspirations for a nation of healthy, happy and competent adolescents on their way to productive and satisfying adulthoods. Scholars at research and policy centers, on national committees, in the government, at foundations, and in youth programs have reached general consensus on what constitutes healthy development. Lerner, Fisher, and Weinberg (2000) summarize the ingredients into the "five C's" (p. 15). These positive attributes encompass: **competence** in academic, social, and vocational areas; **confidence** or a positive self identity; **connection** or healthy relations to community, family and peers; **character** or positive values, integrity, moral commitment; and **caring** and compassion. The focus is on wellbeing, rather than just on problems.

Promoting the positive also is replacing preventing the negative in youth programming. The work of the Search Institute in Minneapolis, Minnesota has propelled this paradigm shift by providing concrete descriptions of the assets necessary for positive development. Benson (1997) describes the 40 internal and external assets believed, based on literature reviews and survey data, to be the universal building blocks of positive development. He defines positive development rather generally, based on the absence of negative outcomes, as the engagement in prosocial behaviors and avoidance of health compromising and future-jeopardizing behaviors (suggesting the importance of including promotion and prevention in our program effort).

The 20 external assets envelop youth with familial and extra-familial networks that provide support, empowerment, boundaries and expectations, and constructive use of time. The 20 internal assets serve to nurture, within individuals, positive commitments, values, and identities, as well as social competencies. The external assets describe the necessary ingredients in youths' environment for positive development. The internal assets illustrate personal qualities which encourage positive development.

Much of this work rests on the findings from research investigating which events cause adolescents to follow different pathways, and what factors can alter the trajectory of both healthy and risky behaviors. That is, do risk and protective factors interact to facilitate or hinder healthy adolescent development (e.g., Werner & Smith, 1992)? Along these lines, the co-occurrence of health-compromising behaviors and risky lifestyles are also studied in terms of barriers to wellbeing (e.g., Jessor, 1993).

Other scholars focus on how different facets of personality, such as creativity, humor, honesty, hope, and tolerance develop and impact adolescents' preparation for adulthood (Moore, Evans, Brooks-Gunn, & Roth, in press). The goal of this type of research is to develop ways to measure our progress as a nation in achieving positive youth outcomes. This effort stands in contrast to our current tracking of undesired outcomes, such as school dropout or teenage pregnancy (Annie E. Casey Foundation, 1999).

The emergence of youth development programs incorporates this shift into practice. Youth development programs go beyond traditional prevention or interven-

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tion programs by stressing skill and competency development rather than focusing on preventing specific problem behaviors. These programs strive to influence an adolescent's developmental path toward positive outcomes. Although no consensus exists as to exactly what constitutes a youth development program, they are best characterized by their approach to youth as resources to be developed rather than as problems to be managed, and their efforts to help youth become healthy, happy, and productive by increasing exposure to external assets, opportunities and supports (Pittman, 1991; Roth, Brooks-Gunn, Murray, & Foster, 1998). This shift does not exclude prevention efforts. Instead, it recognizes that

preventing problem behaviors does not necessarily equip adolescents with the tools for a responsible and productive adulthood (Quinn, 1999).

What are the Challenges of the Adolescent Years?

Adolescence, a time of bodily changes, expanding independence, and growing self-discovery, is sometimes characterized as a series of challenges. Each challenge carries the possibility of risk, opportunity, or both. Scholars of adolescent development refer to these challenges as developmental transitions, or critical junctures along the path that connects children to their transformed physical, mental, and social adult selves (Graber, Brooks-Gunn, & Petersen, 1996; Schulenberg, Maggs, & Hurrelmann, 1997). Each transition requires some change in adolescents' roles, how they make sense of themselves and their world, and how others view them. Despite the multiple physical changes and social challenges facing adolescents, it would be misleading to view adolescence as a time of total upheaval.

Contrary to popular opinion, the vast majority of youth emerge from the second decade of life without lasting problems. Most individuals navigate transitions equipped with the competencies needed to meet new challenges and take on new roles while further developing the skills necessary for these new roles (Graber et al., 1996). However, many do not enter adulthood with all of the competencies they will need. Individual differences in the experience or negotiation of a transition are associated with development prior to the transition, timing of the transition, the individual's experience of the transition, and the context in which the transition occurs (Rutter, 1989). The numerous changes during adolescence appear to be overwhelming only for some adolescents – those with less optimal peer and family relationships, poorer coping skills, and academic difficulties during middle childhood (Feldman & Elliot, 1990; Lerner et al., 1996; Paikoff & Brooks-Gunn, 1991). Thus, circumstances from different environments – the family, peers, school – impact adolescents' preparation for, and success at, navigating the transitions inherent in their development.

What is Known about the Multiple Worlds of Adolescence?

Children and youth live in various overlapping worlds— family, peers, school, workplace, neighborhood, community, region, and country. These worlds shape a youth's development through sustained, consistent, intersecting interactions (or lack of) with the adolescent (Bronfenbrenner & Morris, 1998). We know a lot about the worlds of the family and school, but less about the neighborhood or community. How these worlds support or clash with one another as youth move among them is not very well understood. There is growing interest in how a *particular* type of family, school, or community influences adolescents (development within distinctive ecological niches, such as the inner-city). In addition, there is an expanding literature specifically relating contextual influences to health-related behavior (Jessor, 1998; Millstein, Petersen, & Nightingale, 1993; Schulenberg et al., 1997). This literature describes how individuals and circumstances within the different contexts can serve as either opportunities or barriers to health-related behaviors.

We briefly review what is known about these worlds as places that support and sometimes thwart the wellbeing of youth. Recent attention to the influence of youth programs on development suggests that they too should be viewed as one of the many worlds of adolescents' development (Larson, 2000). Thus, we also show how these findings may be applied to improving youth programs as a context for positive lives. To highlight the most salient characteristics within settings, we attach a (hopefully) memorable phrase for each. For the family, it is TLC; for the peers, it is FRIENDS; for the school setting, it is the ABC's; for the workplace, it is WORK; and for the neighborhood setting, it is Place, Space, and Face.

TLC from the Family

Contrary to popular belief, the importance of the family does not disappear during adolescence. Families provide their children with TLC, which is more than tender loving care. In our scheme, it is TIME, LIMIT SETTING, and CONNECTEDNESS/CARING. The research consistently shows how families influence their adolescents' developmental paths through the provision, or lack, of TLC.

Time

Demographic changes in American families, such as increased maternal employment and single parenthood, has lead to a decrease in the amount of time youth spend with their parents, particularly in the after-school hours (Hofferth & Sandberg, 1998). In addition, increased autonomy, including more unsupervised time alone and with peers, is viewed as developmentally ap-

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propriate in American society. This time fosters independence, provides opportunities for self-sufficiency, and develops a sense of efficacy (Collins, 1990). In one study, the percentage of their waking hours that white adolescents spent with families fell from 33% to 14% between 5th and 12th grades (Larson, Richards, Moneta, Holmbeck, & Duckett, 1996).

The effects for adolescents of spending less time with their family depend on what they are doing during that time. The negative effects of unsupervised time, particularly with peers, has been emphasized by the widely publicized FBI statistics that violent juvenile crime peaks on weekdays between the hours of two and eight o'clock (Sickmund, Snyder, & Poe-Yamagata, 1997). Time away from parents provides increased opportunity for experimentation in other health-compromising behaviors as well. Data from the National Longitudinal Study on Adolescent Health, a study of a nationally-representative (cross-sectional) sample of over 12,000 7th through 12th graders, presented at the White House Conference on Teenagers, used the frequency of family meals as a proxy for time with parents. Youth who did not eat dinner with a parent five or more days a week showed dramatically higher rates of smoking, drinking, marijuana use, getting into fights, and initiation of sexual activity (Council of Economic Advisors, 2000). These trends are behind recent gov-

ernment initiatives to create more constructive activities for youth during the non-school hours.

The implications for youth programs are clear. Programs that offer only limited contact with adolescents cannot expect to alter behavior. In our review of 15 methodologically sound evaluations of community-based programs for at-risk youth, we found that longer-term, more intensive programs that engage youth throughout adolescence appear to be the most effective (Roth et al., 1998). Not surprisingly, spending time with adolescents is necessary to develop a trusting relationship. The importance of such a relationship is discussed below in the section on connection.

Limit Setting

Increased autonomy for adolescents does not necessarily mean less supervision than in the childhood years. Supervision and limit setting remain critical. For example, adolescents with less parental supervision show greater susceptibility to peer influences encouraging health-compromising behaviors. Consistent, firm control and monitoring can be provided from a distance. Monitoring can take the form of telephone calls to youth, or conversations with the parents of the youth's friends. Caring and monitoring together seem to result in the least risk-taking in youth (Galambos & Maggs, 1991). These effects may be, in part, the result of youth feeling more comfortable talking to their parents (Kerr & Stattin, 2000). Thus, monitoring through communication is important, not merely strict control.

The level of supervision or parental monitoring necessary for healthy development may differ as a function of adolescents' peer and neighborhood environments. Early research on parent styles (e.g., Baumrind, 1971) found that an authoritative style, defined as democratic, firm, and loving, was the most beneficial for children and adolescents. But, a higher degree of limit setting may be necessary for youth living in dangerous neighborhoods with low community control (Sampson & Morenoff, 1997) and higher levels of problem-behavior among peers (Mason, Cauce, Gonzales, & Hiraga, 1996).

The on-site supervision and monitoring that youth programs do provide for adolescents is part of their appeal for parents and community leaders. Successful programs not only engage youth in constructive, competency-building activities, but also set clear rules about expected behavior while at the program (Roth et al., 1998). Additionally, staff at effective programs tend to become actively involved in monitoring participants' behavior, even when they are not at the program site. For example, staff may act as liaisons to the adolescents' school in order to observe participants' performance and behavior, and intervene when necessary.

However, too much supervision, or control, may be counterproductive. Research from the Public/Private Ventures initiative on mentoring found that how mentor's approach their role contributed to the longevity of the mentoring relationship. Adolescents in matches lasting a year or longer showed the largest number of improvements. Progressively fewer positive outcomes were found for youth in relationships that ended earlier (Grossman & Rhodes, in press). Mentors who jumped into the relationship by trying to immediately reform their mentees, making unilateral decisions about the type of activities and relationship, were frequently unable to develop mutually satisfying relationships. Approximately 70% of the matches with these types of mentors met only sporadically and ended within 9 months. On the other hand, matches in which mentors did not attempt to change their mentees, but instead focused on building a trusting relationship by letting youth drive the pace and activities, lasted longer and were more successful. These findings dovetail with the notion that monitoring needs to be coupled with communication and respect, rather than linked with control.

Connectedness

The type of family setting most conducive to healthy development changes from childhood to adolescence. For example, feelings of connectedness, or a close parent-child relationship, are important during the childhood period. Some independence, or separation from parents, is a hallmark of adolescent development. Yet, connectedness remains salient; evidence suggests greater maturity for adolescents whose parents combine separation with connectedness, and increased risk-taking when separation is not coupled with connectedness (Galambos & Ehrenberg, 1997). Family connectedness, defined as feeling close, loved, and understood by one or both parents, was associated with more optimal outcomes for each of the five health-related outcomes studied in the Adolescent Health Study (emotional distress,

suicidality, violence, substance use, and sexual behaviors) regardless of race, ethnicity, family structure, or poverty status (Resnick et al., 1997).

Parental connectedness may be more important for some youth than others (for example, younger adolescents and youth with few close friends, Scales & Leffert, 1999). However, the fundamental salience of parental caring appears across all groups of adolescents. Parents' connectedness and involvement with adolescents (aged 14 to 16) may be more associated with better grades and educational expectations than with delinquency and substance use (Herman, Dornbusch, Herron & Herting, 1997). In contrast, delinquency may be more influenced by limit setting.

The youth program literature also identifies caring adults or relationships as critical. In our review, we identified the adolescent-adult relationship as a critical element of success (Roth et al., 1998). Other compilations of "best practices" reach the same conclusion (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 1999; James & Jurich, 1999). Not surprisingly, the qualities of the adult relationship that appear to be consequential are similar to those in effective families: closeness, communication, monitoring, and engagement in youths' lives. Programs that provide a family-like environment, in which adolescents can feel safe and where caring adults support and empower them to develop their competencies, were judged by adolescents to be the most successful (McLaughlin, 2000).

Closeness, communication, monitoring and engagement are consequential qualities of relationships with adults.

Although not the only way, many programs match youth with mentors to provide the opportunity for a one-on-one relationship with a supportive adult. Despite their popularity, research on the effectiveness of programmatically supported mentoring relationships is just becoming available. We found only one rigorous evaluation of a mentoring-only program—Big Brothers/Big Sisters (BB/BS). Participants in BB/BS received slightly higher grades, skipped half as many days of school, cut fewer classes, and felt more competent about doing their schoolwork than did youth in the control group. Although BB/BS did not focus on reducing problems, participants were less likely to start using illegal drugs, initiate drug or alcohol use, or engage in violence after 18 months of participation (Tierney, Grossman, & Resch, 1995).

This evaluation provides evidence for the value of caring relationships between adults and youths created and supported by programs. However, the benefits from mentoring programs do not occur automatically. The critical ingredient appears to be the development of trust between two strangers facilitated by the programs' organizational structure. The mentor's initial approach largely determines if this trust is developed or not (see Sipe, 1996).

Peers as FRIENDs

As children enter and progress through adolescence, they spend increasing amounts of time with peers and place increasing value on these relationships. The peer group includes both friends of varying closeness and others in their age group with which they interact. Our FRIEND schema captures the many positive and negative ways other youth can influence adolescents' development. The peer group offers opportunities for FRIENDSHIP, risks for not RESISTING negative influences, chances for developing shared or new INTERESTS, EXAMPLES of different attitudes and behaviors (and their consequences), the influential power in NUMBERS, and the danger of associating with DEVIANT youth.

Friendship

Peer influences are commonly believed to powerfully shape adolescents' behavior, perhaps even more so than parents (Harris, 1998). Ample research has documented the role of peers in instigating engagement in such health-compromising behaviors as cigarette smoking (Botvin, Epstein, Schinke, & Diaz, 1994), substance use (Coombs, Paulson, & Richardson, 1991), early sexual activity and pregnancy (Bearman & Bruckner, 1999), and violence (Dishion, Andrews, & Crosby, 1995).[2] Friendships also promote moral development, coping strategies, increased self-esteem, and assistance in dealing with stressful situations (Hartup & Stevens, 1999;

Piaget, 1932/1965). Peer relationships allow adolescents to recognize societal norms, practice defining and sharing leadership roles, and initiate and maintain social bonds (Gottman & Parker, 1987). Regardless of the direction, close and best friends have the greatest influence and are also the most important to adolescents (Berndt, 1996).

Peer influence does not operate as a single force in adolescents' worlds (Collins, Maccoby, Steinberg, Hetherington, & Bornstein, 2000). Rather, the susceptibility of adolescents to peer influence is determined by several factors. Adolescents with poorer relationships are more influenced by peers (Hartup & Stevens, 1999). In particular, adolescents are influenced more by friends when they experience neglecting or rejecting parental relationships (Dishion, 1990). Adolescent research also suggests that youth who are alienated from conventional groups (e.g., school and family) often establish strong social bonds with antisocial peer groups in order to establish a sense of belonging (see Fuligni & Eccles, 1993). Finally, adolescents who engage in health-compromising behavior perceive, often inaccurately, that their friends' attitudes and behavior match their own. In a number of studies, adolescents assumed more similarity than actually existed between their friends' and their own attitudes toward sexuality (Alan Guttmacher Institute, 1994), use of cigarette smoking and alcohol (Graham, Marks & Hansen, 1991), and use of illegal drugs (Ianotti & Bush, 1992).

Resistance

Consistent with popular perception, program developers focus on the negative effects of peer pressure. Many successful prevention programs teach youth how to resist peer pressure. For example, the Life Skills Training Program, a classroom-based multimodal cognitive-behavioral approach to alcohol and drug prevention, teaches resistance skills as part of the broader curriculum promoting personal and social competence. Designed for seventh graders, the main emphasis is the development of skills for coping with social influences to smoke, drink, or use drugs (Botvin, Baker, Dusenbury, Tortu, & Botvin, 1990).

Interest

As children move into the adolescent years, friendships become increasingly based on similarity of interests. Youth programs devoted to the pursuit of a particular skill or hobby, such as art or music, provide participants with the opportunity to meet other youth with similar interests and passions. Naturally, not all youth share similar interests. An assortment of activities, either housed within one program or throughout the community, offers participants new opportunities for both friendships and skill development. The goal of this menu of activities would be to foster both the emerging interests and friendships of youth.

In order to avoid falling into the same traps as before, adolescents who are attempting to take a new path may require assistance in establishing a new image among peers (Brown, Dolcini, & Leventhal, 1997). Programs may need to facilitate friendships among youth who would otherwise not interact. This could be done by providing youth with new opportunities not associated with their prior behavior, such as the chance to do volunteer work.

Numbers

Risky behavior often occurs in clusters, as exemplified by the literature on the effects of neighborhoods on children's development. This research indicates the possibility of a contagion effect. For example, Crane (1991) suggests that tipping points might exist. That is, after a certain proportion of the population engages in a specified behavior, the incidence of the behavior accelerates. The number of professionals residing in a neighborhood can also affect youth. If this number is below a certain threshold, a higher proportion of teenage out-of-wedlock childbearing occurs (Brooks-Gunn, Duncan, Klebanov, & Sealand, 1993). Finally, Sampson and Morenoff (1997) note that when large numbers of youth engage in delinquency, it becomes much more difficult for the usual routes of neighborhood control through informal norm setting and monitoring to be efficacious, leading to an increase in youth delinquency.

Deviance

Parents are perhaps most alarmed by their adolescents' choice of friends when those friends display deviant behaviors. There is little discussion in the literature, however, about the role fellow program-going peers take in influencing other program participants' behavior. Deviant friendships within an intervention pro-

gram can lead to an escalation in problem behavior (Dishion, Mcord, & Paulin, 1999). Peer contact during an intervention offers an opportunity for active reinforcement, through laughter, attention, and interest, for deviant behavior, which is likely to increase such behavior. And, high-risk adolescents derive meaning and values from positive reactions to rule-breaking discussion (called deviancy training), which is more likely to occur within friendships among delinquent youth. These findings have implications for the composition of program participants, especially for programs that target high-risk youth They suggest that including only high-risk youth may be counterproductive.

The ABC's of School

Adolescents consistently spend large periods of time in school, so it is not surprising that what occurs in school has an impact. Our review of the world of school highlights the ABC's of school—the importance of a developmentally APPROPRIATE environment for youth, particularly young adolescents; the influence of the BEHAVIOR of others in the school; and the powerful role of CONNECTION, to the institution of school as well as to teachers and other students.

Appropriate Environment

One line of research brings together characteristics of the school environment and the developmental needs of adolescents to explain the decline in academic achievement and increase in social, emotional and behavioral problems that begin to appear during early adolescence. Eccles and her colleagues (1993) document fewer such changes among students in K-8 schools compared to students attending K-6 schools. They ascribe the detrimental changes to the timing of the switch to a new middle or junior high school. At the same time as most adolescents are experiencing the physical, psychological, and social changes of puberty, they must also begin at a new school. This transition requires young adolescents to adjust to the different demands of a new peer group, new teachers, and new class structure.

Further compounding the problem, students' elementary schools are more aligned with their psychological needs then their new middle or junior high school environment (Eccles et al., 1993). Middle and junior high schools are characterized by increased school size,

bureaucratic organization, departmentalization, and decreased individual attention and opportunities for close relationships with teachers compared to elementary schools. In the classroom, middle and junior high school teachers tend to place greater emphasis on teacher control and discipline, provide fewer opportunities for student decision-making, choice and self-management, and employ more competitive standards for grading and judging competence then teachers in elementary school classes. They also feel less effective as teachers, especially for low-ability students. Thus, at a time when young adolescents need careful monitoring by caring adults and challenging, but safe, opportunities to explore different behaviors and identities, schools offer less personal, more restrictive, and more competitive environment.

In *Turning Points*, the Carnegie Council on Adolescent Development (1989) called for curricular and structural changes in middle school education. Findings from the Project on High Performance Learning Communities, a network of almost 100 schools involved in restructuring following the Carnegie Council's recommendations, support the importance, and highlight the difficulties, of middle school reform (see Felner et al., 1997). Both the federal government and many foundations are investing heavily in improving schools for at-risk students in the ways discussed above, as well as building bridges between schools and other aspects of adolescents' lives (e.g., Schools of the 21st Century, Beacon Schools; see Dryfoos, 1998 for detailed discussion of recent efforts at "community schools"). Early evaluation results suggest the benefit of such changes for at-risk youth (Robinson, 1993).

How staff behaves shapes the message that they send to youth about appropriate and acceptable behavior.

Behavior

Faculty, like parents, can serve as role models for health behaviors. For example, Perry, Kelder, and Komro (1993) found lower adolescent smoking rates when faculty smoking in front of students is restricted. This suggests a very simple program, or school policy, that may influence youth behavior.

The behavior of other students sets the tone for the school culture. School safety offers a dramatic, and timely, example of this. When young people feel unsafe or victimized at school due to the behaviors of other students, they are more likely to suffer socially, emotionally, and academically (Scales & Leffert, 1999). How schools deal with both serious violations (possessing alcohol or weapons) as well as minor infractions (using profanity, disturbing the class) impact adolescents' feelings of safety in school (Anderman & Kimweli, 1997).

These findings on the behavior of adults and other students in school apply directly to youth programs. Foremost, how the staff behaves – how they treat participants as well as their health-related actions – shapes the message they send youth about appropriate and acceptable behavior. Feelings of safety are perhaps more salient in programs than in schools since attendance is voluntary. Urban youth particularly place security as the first requirement for a desirable youth program (McLaughlin, 2000). Security applies to the location of the program, transportation to and from the program or related activities, and the expectations for behavior from participants (i.e., no gang colors or weapons).

Connection

As in families, the quality of student-teacher relationships also contributes to healthy adolescent behavior. In their longitudinal study of high-risk children, Werner and Smith (1992) found that disadvantaged youth who "beat the odds" found emotional support outside their own families, often in a favorite teacher who became a role model, friend, and confidant. Among participants in the Adolescent Health Study, youth who reported strong emotional attachments to their teachers were less likely to use drugs and alcohol, attempt suicide, engage in violence, or become sexually active at an early age (Resnick et al., 1997). In fact, positive relationships with teachers exerted a stronger influence on adolescents' health-related behaviors than the school structure variables (classroom size, attendance and drop-out rates, school type, and amount of teacher training). As with parental relationships, the specifics of fostering a supportive teacher-student relationship may vary for different youth. DuBois, Felner, Meares and Krier (1994) found an association between high levels of school support and student outcomes (better grades and lower alcohol use) only for youth with multiple disadvantages, such as living in poverty and experiencing family breakup, not for youth without disadvantages.

> *Programs can enhance healthy development by encouraging a strong commitment and connection to school.*

Adolescents' relationship to school also appears to influence their health-related behavior. Academic achievement and involvement in school-related activities are two ways of measuring adolescents' engagement with school. Research consistently finds that adolescents with poor academic skills and low grades are more likely to engage in health-compromising behaviors (e.g., Dryfoos, 1990). In a 16-year longitudinal study of school adaptation and social development, Cairns and Cairns (1994) found that engagement in extracurricular activities reduced health-compromising behaviors, particularly for students at greatest risk for dropping out. Using national data sets, Zill, Nord and Loomis (1995) found that after controlling for race and poverty status, tenth graders who reported spending no time in school-sponsored activities were 57% more likely to drop out by senior year, 49% more likely to have used drugs, 37% more likely to become teen parent, 35% more likely to have smoked cigarettes, and 27% more likely to have been arrested compared to students spending one to four hours per week in extracurricular activities. However, involvement in activities did not lower the rates of binge drinking, and involvement in varsity sports actually increased such behavior (see

also Eccles & Barber, 1999).

In addition to school reform, the evaluation literature suggests other ways programs can enhance healthy development—by encouraging a strong commitment and connection to school. This typically occurs indirectly through program staff expectations for adolescents' achievement, as well as directly through homework assistance or staff contact with participants' teachers and school personnel (Roth et al., 1998). Additionally, successful programs offer youth the opportunity to develop academic skills through active participation in structured activities that create challenges and provide fulfilling experiences (McLaughlin, 2000).

WORKing in the Workplace

Today, almost all youth work at some point during their high school years. Over 70% of the participants in the Monitoring the Future study reported working for pay, and almost half the males and one third of the females worked more than 20 hours per week (Bachman & Shulenberg, 1993). Despite the public's favorable attitudes towards employment during adolescence, the influence of the workplace on adolescent development remains controversial. The ideal adolescent workplace would offer youth the chance to WIDEN their horizons, particularly in terms of future careers, develop ORGANIZATIONAL skills, learn about RESPONSIBILITY, and gain valuable KNOWLEDGE. As the research summarized below suggests, however, the reality of youth employment presents risks as well as opportunities for adolescent development.

Jobs, like programs, are the most beneficial when they challenge adolescents.

Recent efforts at bridging the school to work transition suggest increasing adolescent involvement in the workplace as a way to teach youth the practical tasks necessary for later success as adult workers and to expose them to a wide range of occupational options. Similarly, most parents approve of their adolescent's employment, believing it offers increasing autonomy and independence, opportunities for responsibility, and practice in time management (Finch, Mortimer & Ryu, 1997). Empirical research shows some positive conse-

quences from adolescent employment, including self-reported punctuality, dependability, and personal responsibility, and for girls' increased self-reliance (Greenberger & Steinberg, 1986), decreased high school dropout for employment of fewer than 20 hours per week (D'Amico, 1984), and increased employment and earnings in the years following high school (Steel, 1991). Ethnographic work with low-income youth finds that the adult monitoring and economic gains from employment can result in increased school engagement and decreased criminal and delinquent behavior (Newman, 1996).

Working during adolescence also carries risks. Health risks include increased exposure to dangerous machinery, noxious fumes or excessive heat and cold, and chronic fatigue from long hours or working at night, which result in injury serious enough to require emergency room treatment for approximately 64,000 youth ages 14 to 17 per year (Finch et al., 1997). Psychological risks include stress from taking on adult responsibilities without adequate support or coping skills, disruptions in social relationships, and distress from the overload caused by school and work activities. Findings from prominent studies describe negative consequences of adolescent employment, such as emotional distress, increased cigarette, alcohol and illicit drug use, and higher rates of school tardiness and misconduct (e.g., Mortimer, Finch, Ryu, Shanahan, & Call, 1996).

The discrepancy in findings about the consequences of adolescent employment stem from the lack of distinction between informal work, such as babysitting or summer jobs, and formal part-time work, as well as the failure to consider the quality of the work environment. Long hours spent working in poor-quality formal jobs during the school year appear to be the most detrimental to adolescent's grades and health, particularly alcohol use and smoking (Finch et al., 1997). Restaurant work, the archetypical teenage job, characterizes a poor quality job—it requires few skills, offers little adult supervision, is unconnected to anticipated future jobs, and done only for money. Alternatively, the same research found many direct benefits of high-quality work experiences, including reduced substance use and better mental

health.

There are parallels between program experiences and the qualities of high-quality work experiences. That is, adolescents who worked in jobs requiring the mastery of new skills and offered opportunities to help others showed more positive outcomes. Jobs, like programs, are the most beneficial when they challenge adolescents. One way programs have sought to involve participants in challenging experiences is through opportunities for community service or volunteer work. When youth volunteer in their community, they have the chance to broaden their knowledge and understanding of others, learn and practice important life skills in a real settings, and make a valuable contribution to their community (Scales & Leffert, 1999).

Neighborhood as Place, Space, and Face

It is difficult to define an adolescents' neighborhood. School districts, census tracts, and town lines can often result in different neighborhood boundaries. Trying to identify one's community is further complicated when social relations are included, particularly with the increased use of technology. We see three ways to define neighborhoods, as Place, Space, and Face (Leventhal, Brooks-Gunn, & Kamerman, 1997).

Communities as Place

Geographical or bureaucratic lines – school districts, town or city boundaries – are the traditional way of defining neighborhoods. Where adolescents physically live influences their developmental risks and opportunities. For example, ease of access to health-compromising substances, such as the availability of cigarette vending machines and guns, or the enforcement of alcohol minimum age laws, varies from community to community.

Communities as Space

Neighborhoods can also be viewed as the collection of buildings and open spaces for living and working. Examples of community space more conducive to successful development include adequate school buildings and access to locations for constructive leisure-time activities, such as parks, libraries, and community centers. Wilson (1987) argues that the loss of neighborhood employment opportunities, due to deindustrialization in the inner-cities, has led to increases in poverty, joblessness, and social isolation. He attributes inner-city residents' undesirable behaviors – out-of wedlock childbearing, crime, welfare dependency, and school dropout – with these changes.

Community as Face

Viewing community as shared relationships and social supports puts a human face on the traditional research approach to neighborhoods. Also referred to as social capital, these relationships can make a difference in the lives of youth. In a study of nearly 350 Chicago neighborhoods, the level of involvement of community residents, termed collective efficacy, significantly reduced both the perceived and actual levels of violence, even in the poorest neighborhoods (Sampson & Morenoff, 1997).

The lack of "face" within a community explains the concentration of adolescent problem behaviors in some communities. For example, the behavior of adults in the community can influence adolescent behavior through the presence of adult role models and monitor-

Healthy communities are places with a shared commitment to children and youth.

ing (collective socialization) or by the concentration of problem behaviors influencing adolescents through peer influences (contagion; Leventhal & Brooks-Gunn, 2000). Still, family characteristics are more prominent than neighborhood characteristics in predicting youth outcomes (Brooks-Gunn, Duncan, & Aber, 1997).

Using the Search Institutes' 40 developmental assets, Benson, Leffert, Scales, and Blyth (1998) define healthy communities as places with a shared commitment to children and youth. They find more positive outcomes for vulnerable youth (defined as those with the fewest developmental assets) from the healthiest communities compared to those from the least healthy communities. These communities offer youth, particularly vulnerable youth, access to a caring school environment and connections to a religious organization and

supportive adults.

A community's social capital, or relationships among people and organizations that facilitate cooperation and mutual support, is at the root of improving adolescents' lives. For example, the model driving the Public/Private Venture's Community Change for Youth Development (CCYD) initiative illustrates how the community dimensions (physical and demographic characteristics, economic opportunity structure, institutional capacities, and social exchange and symbolic processes) directly and indirectly affect adolescent outcomes, including adolescent health (Connell, Aber, & Walker, 1994). The CCYD initiative strives to increase resident and local governance participation in the design and delivery of youth development services. The model follows a systems-reform approach; it attempts to alter the ways community residents and institutions relate to one another. Optimally, such an initiative would seek to improve the "face" of distressed neighborhoods by improving knowledge, understanding, and trust between individuals and groups through communication and a shared vision, common goals, or a plan of action.

This type of reform is extremely difficult at best, as documented by the Annie E. Casey Foundation's report on their New Futures initiative (Nelson, 1996). The Casey Foundation learned the following six lessons from their efforts to restructure how midsize cities plan and deliver services to at-risk youth: more needs to be learned about the nuts and bolts of cross-system change; affecting change requires a long-term investment; such efforts are not for every community; political will must be present from the outset; frequent and substantive communication and flexibility are vital, as is determination in the face of discouragement; and real change often depends on increases in opportunity and social capital.

Is There a War on Teenagers?

Public opinion towards adolescents is not favorable; most Americans look at today's teenagers with misgiving and trepidation. One recent survey showed that almost three-quarters of Americans think young people with poor education, poor job prospects, and problematic values pose a greater danger to the country than any threat from abroad (Princeton Survey Research Associates cited in Farkas & Johnson, 1997). The nega-

tive view of adolescents is not limited to disadvantaged youth. And, it has not changed in the last few years. Public Agenda pollsters again asked adults to describe today's teenagers. Adjectives such as disrespectful, irresponsible, and wild were used by 71% of the general public, and 74% of the parents. Only 15% of the general public, and 12% of parents, used positive descriptors, such as smart, curious, or helpful (Public Agenda, 1999). We offer four remedies for how youth programs can counter these very negative opinions about adolescents.

First, those of us who have studied, worked with, or raised teenagers know that the majority are not rude, irresponsible or wild. We have not done a good job (or even an adequate one) of getting this message to the public. Media campaigns, legislative briefings, connections to journalists, and liaisons with groups such as the National Governors' Association are in order.

Second, the shift to promoting the positive, not just preventing problems, needs to be part of the message to these various constituencies. For example, indicator reports must include positive as well as negative behaviors. Publications like the Annie E. Casey Foundation's *Kids Count* could include data on the percentage of youth who are engaged in volunteer activities, after-school programs, and school clubs. Such a focus would also help communities (or states) estimate how many youth do not have access to these opportunities.

Third, more attention needs to be paid to the intersections among the many worlds of youth. The consistency or inconsistency of the norms and values regarding health-related behaviors among the different settings influence adolescents (Perry et al., 1993). Health-promoting behaviors are reinforced when the family, school, peer group and media carry the same message. For example, school health campaigns of the 1980s increased their effectiveness by instituting home-based family participation programs aimed at increasing ties between the programs and the home environment (Perry et al., 1988). The program evaluation literature also shows that successful programs addressed more of the settings in which adolescents' live (Catalano et al., 1999; Roth et al., 1998). Successful programs often included links to other settings, typically the school, or developed specific initiatives for strengthening relationships with others, either in the family or through men-

tors.

Fourth, we need to take seriously Benson's (1997) comments on the politicization of the African wisdom that "it takes a whole village to raise a child" (p. 103). There is a missed opportunity for constructive dialogue on what kind of village it really takes. The Search Institute, in their Healthy Communities-Healthy Youth initiative, extends the notion of developmental assets to the community to try to address this question (Benson et al., 1998). They outline a vision for what communities must do to raise caring and responsible children and adolescents that includes individuals and

> *We are hopeful that youth can be seen as assets rather than liabilities.*

institutions in all of the contexts affecting youth's lives—from strengthening families, promoting cultural shifts in youth-serving systems such as schools, youth organizations, religious organizations, juvenile justice system, and gaining the involvement of local business and industry to promote the developmental assets for youth. This initiative, as well as other similar community mobilization efforts, such as the CCYD, the Social Development Research Group's Communities That Care, and the Kellogg Foundation's 20-year investment in 3 Michigan communities, rests on the belief that positive youth development can be promoted by all sectors of the community, particularly when they work together to provide a unified message of the value and potential of all youth.

We are hopeful that youth themselves can be seen as assets rather than liabilities to communities and our nation. And we believe that the public will for providing the necessary support for nurturing assets exists, albeit in nascent form. In the Public Agenda (1999) poll, 89% of the general public believed that given enough attention and the right kind of guidance, almost all teenagers can get back on track. Sixty percent of adults said that more programs and activities for adolescents after school, in places like community centers, would be a very effective way to help kids. And, 46% of the adolescents polled agreed.

Notes

[2]Research on peer relationships is plagued by methodological shortcomings. Most research examines the amount of similarity among adolescents and their friends. Similarity, however, cannot be used to determine the influence of friends; adolescents frequently choose friends similar to themselves. Thus, we must be cautious about the influence of peers (Brown, 1990).

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