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, 4H, Boys and Girls Clubs develop; secondary 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, pregnancy
- Mid 1960’s-mid 1970’s Prevention programs focused on a single problem begin to be developed; most ineffective
- Mid 1970’s-1980’s Prevention programs 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 (PYD)

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

<table>
<thead>
<tr>
<th>Practitioners and Policy Makers</th>
<th>Prevention Scientists</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus on single problems ignores the whole child.</td>
<td>Overlapping risk and protective factors predict diverse problems.</td>
</tr>
<tr>
<td>Focus on the individual and downplays the role of the environment.</td>
<td>Risk and protective factors located in both individual and environment.</td>
</tr>
<tr>
<td>Developmental needs and competencies ignored.</td>
<td>Developmental needs, processes and tasks often ignored.</td>
</tr>
<tr>
<td>Problem-free does not mean fully prepared or healthy.</td>
<td>Protective factors often not addressed.</td>
</tr>
<tr>
<td>Separates promotion from prevention.</td>
<td></td>
</tr>
</tbody>
</table>
**Recommendations for a Broader Conception of Youth Development**

**Practitioners/Policy Makers**
- 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 salient during critical developmental periods
- Engage multiple socialization units.
- Understand the developmental epidemiology of the target population.
- Include those at greatest risk.
Convergence in critiques and recommendations led US. Department of Health and Human Services to commission the first review of youth development program efficacy (Catalano et al., 1998)

Gavin, Catalano, David-Ferdon, Gloppen, Markham, 2010. A review of positive youth development programs that promote adolescent sexual and reproductive health. Journal of Adolescent Health, 46 (3 Suppl. 1)*

*Sponsored by Centers for Disease Control and Prevention
Positive Youth Development Concepts

- Reviewed literature that described the youth development approach
- Identified concepts being discussed to define this developing field
- Augmented through subsequent national and international reviews eg., Annenberg-Sunnylands Task Force on PYD (Seligman, Berkowitz, Catalano et al., 2005)
Positive Youth Development

**Concepts**

- Social, emotional, behavioral, cognitive and moral competence
- Self-efficacy
- Positive emotions
- Opportunities for positive social involvement
- Recognition for positive behavior
- Bonding
- Positive norms
- Clear and positive identity
- Self-determination
- Belief in the future
- Spirituality
- Resiliency
- Life satisfaction

Catalano et al., 1998; 2002; Seligman, Berkowitz, Catalano et al., 2005; Shek et al., 2007; Catalano, Hawkins & Toumbourou, 2008, 2014
PYD Program Review
Inclusion Criteria

- Promotive approach directed at youth aged 0-20
- Address positive youth development constructs
- Comprehensive (multiple concepts or socialization contexts targeted)
- Strong evaluation
- Demonstrate *behavioral* outcomes on either (or both) positive or problem behavior
Review Methods

- Electronic search of 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%)
Review Results

1998-25 of 77 PYD Program for children 6-20 that met the PYD inclusion criteria had evidence of effectiveness (Catalano et al., 1998)

2010-15 of 30 PYD Programs for children 0-20 that met the inclusion criteria and evidence of impact (Gavin, Catalano et al., 2010)
Inclusion Criteria for this Presentation

- Found to be effective in the two reviews (38 total programs)
- Impact on Substance Use and/or Antisocial Behavior (20 efficacious programs from the two reviews)
## Effective Programs Pre-School

<table>
<thead>
<tr>
<th>PYD Program</th>
<th>Substance Use, Delinquency outcomes</th>
<th>Other outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abecedarian Project</td>
<td>Substance use</td>
<td>Academic achievement, employment, teen birth</td>
</tr>
<tr>
<td>(Campbell, Ramey et al., 2002)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>High/Scope Perry Preschool</td>
<td>Crime, substance use</td>
<td>Academic achievement, family relationships, teen pregnancy, employment</td>
</tr>
<tr>
<td>(Schweinhart et al., 1992, 2005)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Effective Programs

#### Elementary School Age

<table>
<thead>
<tr>
<th>PYD Program</th>
<th>Substance Use, Delinquency outcomes</th>
<th>Other outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seattle Social Development Project</td>
<td>Crime/delinquency, heavy alcohol use, violence</td>
<td>Academic achievement, High school graduation, ever sex, # of partners, delayed initiation, STI, pregnancy or birth, mental health diagnoses</td>
</tr>
<tr>
<td>(Hawkins et al., 1999; Lonczak, Hawkins et al., 2005; 2008)</td>
<td></td>
<td>Healthy diet</td>
</tr>
<tr>
<td>Know Your Body (Walter, Vaughan and Wynder, 1989)</td>
<td>Smoking initiation</td>
<td>Internalizing behaviors</td>
</tr>
<tr>
<td>Promoting Alternative Thinking Strategies (PATHS) (Greenberg, 1996; Greenberg &amp; Kusche, 1997)</td>
<td>Externalizing behaviors, conduct problems</td>
<td></td>
</tr>
</tbody>
</table>
Seattle Social Development Project

An Example PYD Program

Focused on family and school environments

Addressed PYD concepts and risk factors

With long term effects on adolescent and young adult development and prevention of multiple problems
Seattle Social Development Project (SSDP): Example of PYD Long Term Effects

Investigators:
J. David Hawkins
Richard Catalano
Rick Kosterman
Karl Hill
Robert Abbott

Funded by:
National Institute on Drug Abuse, Office of Juvenile Justice and Delinquency Prevention, Robert Wood Johnson Foundation, National Institute on Alcoholism and Alcohol Abuse, National Institute on Mental Health, Burlington Northern Foundation, Seattle Public Schools
SSDP Sample: Gender, Ethnicity & SES

Poverty: Eligible for free/reduced lunch (5th, 6th or 7th grades)
SSDP-Design

- Quasi-experimental study with three conditions reported here
  
  Full treatment (grades 1-6) = 149  
  Late treatment (grades 5-6) = 243  
  Control = 206
Positive Youth Development Concepts

- Social, emotional, behavioral, cognitive and moral competence
- Self-efficacy
- Positive emotions
- Clear and positive identity
- Opportunities for positive social involvement
- Recognition for positive behavior
- Bonding
- Positive norms
- Self-determination
- Belief in the future
- Spirituality
- Resiliency
- Life satisfaction

x = addressed by SSDP intervention
★ = predicts joining a gang
### Risk Factors

<table>
<thead>
<tr>
<th>Family</th>
<th>School</th>
<th>Individual/Peer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td><strong>X</strong></td>
</tr>
<tr>
<td><strong>X</strong></td>
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<td><strong>X</strong></td>
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<td></td>
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<td><strong>X</strong></td>
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<td><strong>X</strong></td>
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<td></td>
<td><strong>X</strong></td>
<td><strong>X</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>X</strong></td>
</tr>
<tr>
<td>Family History of the Problem Behavior</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Family Management Problems</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Family Conflict</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Favorable Parental Attitudes and Involvement in the Problem Behavior</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>School</td>
<td></td>
<td><strong>X</strong></td>
</tr>
<tr>
<td></td>
<td><strong>X</strong></td>
<td><em><strong>X</strong></em></td>
</tr>
<tr>
<td></td>
<td><strong>X</strong></td>
<td><strong>X</strong></td>
</tr>
<tr>
<td>Academic Failure Beginning in Late Elementary School</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Lack of Commitment to School</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Individual/Peer</td>
<td></td>
<td><strong>X</strong></td>
</tr>
<tr>
<td><strong>X</strong></td>
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<td><strong>X</strong></td>
</tr>
<tr>
<td><strong>X</strong></td>
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<td><strong>X</strong></td>
</tr>
<tr>
<td><strong>X</strong></td>
<td></td>
<td><strong>X</strong></td>
</tr>
<tr>
<td>Early and Persistent Antisocial Behavior</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Alienation and Rebelliousness</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Friends Who Engage in the Problem Behavior</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Favorable Attitudes Toward the Problem Behavior</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Early Initiation of the Problem Behavior</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

**X** = addressed by SSDP

*=predicts joining a gang*
Intervention Components

- **Component One:** *Teacher Training in Classroom Instruction and Management*
- **Component Two:** *Parent Training in Behavior Management and Academic Support*
- **Component Three:** *Child Social, Emotional and Cognitive Skill Development*
SSDP Changed Risk, Protection and Outcomes

By age 18 Youths in the Full Intervention had
- less heavy alcohol use
- less initiation of alcohol
- less initiation of delinquency
- better family management
- better family communication
- better family involvement
- higher attachment to family
- higher school rewards
- higher school bonding

By age 27, significant effects were found on educational and occupational outcomes, mental health and risky sexual activity:
- above median on SES attainment index
- fewer mental health disorders and symptoms
- fewer lifetime sexually transmitted diseases
- less co-occurrence diagnosis of substance abuse and mental health disorder

At the end of the 2nd grade
- boys less aggressive
- girls less self-destructive

By the start of 5th grade, those in the full intervention had
- less initiation of alcohol
- less initiation of delinquency
- better family management
- better family communication
- better family involvement
- higher attachment to family
- higher school rewards
- higher school bonding

By age 18, broad significant effects were found on positive adult functioning:
- more high school graduates
- more attending college
- more employed
- better emotional and mental health
- fewer with a criminal record
- less drug selling
- less co-morbid diagnosis of substance abuse and mental health disorder

By age 21, significant effects were found on educational and occupational outcomes, mental health and risky sexual activity:
- more attending college
- more employed
- better emotional and mental health
- fewer with a criminal record
- less drug selling
- less co-morbid diagnosis of substance abuse and mental health disorder

SSDP: Age 24 and 27 Proportion Who Met Diagnostic Criteria for Generalized Anxiety, Social Phobia, Major Depression, or Post Traumatic Stress Disorder

Prevalence

Age 24

27% 21% 18%*

Age 27

26% 22% 15%*

*p < .05

Hawkins et al., 2008
SSDP Reduced Disparities in Sexually Transmitted Infections

Sig. Tx X Ethnicity Interaction on STI onset, p < 0.0401

Hill et al., 2013
An independent cost-benefit analysis estimated that projected benefits resulting from the SSDP intervention would produce a net positive return per participant.
<table>
<thead>
<tr>
<th>PYD Program</th>
<th>Substance Use, Delinquency outcomes</th>
<th>Other outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aban Aya – SCI (Flay et al., 2004)</td>
<td>Violence, school delinquency, substance use</td>
<td>Recent sex, condom use</td>
</tr>
<tr>
<td>Gatehouse Project (Patton et al., 2006)</td>
<td>Substance use, antisocial behavior</td>
<td>Ever sex</td>
</tr>
<tr>
<td>Reach for Health (O’Donnell et al., 1998, 2002)</td>
<td>Violence</td>
<td>Recent sex, ever sex</td>
</tr>
<tr>
<td>PYD Program</td>
<td>Substance Use, Delinquency outcomes</td>
<td>Other outcomes</td>
</tr>
<tr>
<td>----------------------------------------------------------------</td>
<td>------------------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>Big Brothers/Big Sisters (Tierney, Grossman &amp; Resch, 1995)</td>
<td>Drug use, hitting, skipped class</td>
<td>Academic competence in subpopulations</td>
</tr>
<tr>
<td>Bicultural Competence Skills (Schinke, Botvin et al, 1988)</td>
<td>Alcohol, marijuana, inhalants</td>
<td>Self control</td>
</tr>
<tr>
<td>The Social Competence Program for Young Adolescents (Weissberg &amp; Caplan, 1998; and Caplan et al., 1992)</td>
<td>Minor delinquency</td>
<td>Positive behavior</td>
</tr>
<tr>
<td>The Midewestern Prevention Project – Project STAR – Kansas (MPP) (Pentz et al., 1994; Pentz et al., 1989; Pentz, et al., 1990)</td>
<td>Smoking, marijuana, and alcohol use</td>
<td></td>
</tr>
</tbody>
</table>
## Effective Programs Middle School Age

### PYD Program

<table>
<thead>
<tr>
<th>PYD Program</th>
<th>Substance Use, Delinquency outcomes</th>
<th>Other outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staying Connected with Your Teen (Haggerty et al., 2007)</td>
<td>Substance use, violence</td>
<td>Ever sex</td>
</tr>
<tr>
<td>New Beginnings (Wolchik, Sandler et al., 2002, 2007)</td>
<td>Substance use</td>
<td>Mental health, # of sex partners</td>
</tr>
<tr>
<td><strong>PYD Program</strong></td>
<td><strong>Substance Use, Delinquency outcomes</strong></td>
<td><strong>Other outcomes</strong></td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
<td>----------------------------------------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>Adolescent Sibling Pregnancy Prevention</td>
<td>Substance use</td>
<td>Ever sex, pregnancy, condom use, school truancy</td>
</tr>
<tr>
<td>(East et al., 2003)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Woodrock Youth Development Project</td>
<td>Substance use</td>
<td></td>
</tr>
<tr>
<td>(LoSciuto et al., 1997)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project Northland</td>
<td>Alcohol use</td>
<td></td>
</tr>
<tr>
<td>(Perry et al., 1996)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Familias Unidas</td>
<td>Substance use</td>
<td>STI, unprotected sex</td>
</tr>
<tr>
<td>(Prado et al, 2007)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Characteristics of Youth Served by Effective Programs

Most programs:

- targeted youth exposed to multiple risk factors
- were delivered to mixed gender groups of youth
- Were delivered to a mixed race/ethnic groups
  - a third delivered to a single race/ethnic group including African American, Latino, Native American and White
### Results: PYD Concepts Addressed in Efficacious Programs

<table>
<thead>
<tr>
<th># programs</th>
<th>PYD Concepts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Half or more</td>
<td>Bonding, opportunities, recognition, cognitive competence, social competence, emotional competence, belief in the future, self determination</td>
</tr>
<tr>
<td>One-third-half</td>
<td>Behavioral competence, moral competence, self-efficacy, prosocial norms</td>
</tr>
<tr>
<td>One-quarter</td>
<td>Clear and positive identity</td>
</tr>
</tbody>
</table>
Conclusions

There is evidence that PYD programs:

- Prevent substance use and delinquency, many prevent other problems and promote positive outcomes
- Have robust and sustained impact
- Demonstrate effects among diverse groups of youth
Recommendations for Research

- Establish the predictive validity of PYD constructs for positive/negative outcomes
- Theory of youth development should organize youth development concepts
- PYD program evaluations should examine impact on multiple positive and negative outcomes
Richard F. Catalano, Ph.D
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Director, Social Development Research Group
School of Social Work
University of Washington
www.sdrg.org

Mange Tak!