# **Promoting Well-being Among America's Teens**

## An Executive Summary of Adolescent Development Research Reviews Completed for the John S. and James L. Knight Foundation

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Most adolescents are good citizens who are physically, psychologically and socially healthy. A vast majority are free of major mental, behavioral or addictive disorder (Shaffer, Fisher, Dulcan, et al., 1996), an increasing percentage are volunteering in their communities, and fewer are involved in school violence, become pregnant or smoke (U.S. Department of Health and Human Services, 2001). Despite these facts, adolescence is far from being a placid period. Adolescence is, in fact, a time of change and risk.

One of the most obvious changes during this time is puberty. Boys' and girls' bodies begin to change and adolescents have to adjust to their physical development. This physical change often coincides with entry into new schools with larger social networks. No longer are youth grouped in relatively small classes only with other youth whom they have known since kindergarten. Instead, adolescents enter middle or junior high school and, subsequently, high school, where they are introduced to a wide array of new peers. Not only are peer groups bigger in middle and high school, homework tends to be more intensive, class sizes are bigger, more independence is given to the students, and teachers generally are less accessible than teachers in elementary school. At home, parents undertake the task of striking a balance between monitoring adolescents' behavior and giving them an increasing amount of independence. Less time is spent at home with parents and more time is spent either alone or with friends. Finally, an identity search begins when youth reach early adolescence, through which they strive to create a concrete idea about who they are.

Exposure to risks, such as drugs, cigarettes, alcohol and other risky behaviors, such as sexual intercourse, comes with these life changes. Most importantly for those working with teens is that all of these changes and risks necessitate that youth have the tools to navigate through the inevitable trials and tribulations of adolescence and the subsequent transition into adulthood. Effective initiatives to promote adolescent well-being can ease that transition, and research can suggest strategies for services, programs and policies that affect development.

To tackle the question of what works to promote well-being among America's teens, Child Trends undertook a comprehensive study of the programs and other antecedents that lead to desired outcomes across seven domains of adolescent health and well-being:

- mental health and externalizing disorders,
- emotional well-being,
- educational adjustment and achievement,
- physical health and safety,
- positive reproductive health,

- social competency, and
- positive citizenship.

The psychological, physical and social components of adolescent health and well-being were examined. The resulting reports included findings from more than 1,100 rigorous studies; hundreds of others that did not meet the criteria for inclusion were also reviewed. For this project, we restricted the studies to include those that used either a randomized experimental-control group design (the "gold standard" for making causal conclusions); quasi-experimental design; longitudinal, multivariate design; or, in some cases, cross-sectional design that employed large sample sizes and multiple relevant control variables. This review also resulted in a series of "What Works" tables which detail what "works" and "doesn't work" to affect various adolescent outcomes, provide "mixed reviews" for promoting adolescent development, and offer some "best bet" strategies.

This executive summary synthesizes our findings across the seven reports. We identify ten main points that can provide program-developers and policy-makers with the best practices promoting positive adolescent development in multiple domains. Overall, we found that multicomponent programs that engage youth in thoughtful and enjoyable activities, promote social connections, involve parents, and are long-lasting appear to be the most promising for effecting multiple positive outcomes. Furthermore, implementing programs when youth are younger can be an efficient method of encouraging positive development in adolescence.

#### **Findings Across Reports**

1.) Adolescent behaviors cluster. There is considerable evidence that youth with one positive or negative characteristic have multiple other corresponding characteristics. For instance, adolescents who are depressed often also have an anxiety disorder and participate in deviant activities such as drug and alcohol use (Zaff & Calkins, 2001). Furthermore, youth who drink alcohol, take drugs and smoke cigarettes are more likely also to engage in risky sexual behaviors, have poor sleep patterns and have poor overall physical health (Hatcher & Scarpa, 2001). On the other hand, youth who have one positive characteristic are more likely to have multiple positive characteristics. Thus, youth who engage in positive citizenship behaviors also tend to have positive psychological and academic outcomes and engage in fewer risky behaviors (Zaff & Michelsen, 2002). These youth are also more likely to have good social skills and subsequently friendships with other adolescents who possess similar positive characteristics (Hair, Jager & Garrett, 2002). The implication of this clustering is that programs and policies can potentially achieve multiple outcomes even if the primary focus is on one or two desired outcomes.

2.) Parent-child relationships are key to adolescent development and well-being. Although the causal role of parenting is still being examined, numerous studies indicate that parent-child relationships are strongly associated with adolescent well-being. This suggests that parents need to develop strong relationships with their young children and remain actively and positively involved in the lives of their adolescent children. In addition, programs should be aware of the great influence that parents can have on adolescent development and incorporate their involvement, in some form, into program design.

The content of parent-child relationships falls into four general categories: relationship quality, parental modeling, parental monitoring, and parenting styles. The first, *relationship quality*, was found to be an important factor in all of the reports. Quality refers to the perceived

satisfaction with the relationship on the part of both the adolescent and the parent; for instance, whether the relationship includes participating in enjoyable and/or stimulating activities together. Higher quality relationships are associated with higher academic motivation and achievement, school engagement, better social skills, and lower rates of risky sexual behaviors (Hair, Jager & Garrett, 2002; Manlove, Terry-Humen, Romano Papillo, Franzetta, & Ryan, 2002; Redd, Brooks & McGarvey, 2002). Low quality relationships are associated with, among other troubles, psychological problems, especially conduct disorder (Zaff & Calkins, 2001).

*Parental modeling* is also important for adolescent development. For instance, parents who engage in positive behaviors have youth who engage in positive behaviors, presumably because modeling involves vicarious reinforcement for the adolescent (Bandura, Grusec & Menlove, 1976), which influences the adolescent to engage in those behaviors. Adolescents whose parents are involved in civic activities are more likely, themselves, to be involved in such activities (Zaff & Michelsen, 2002). Also, parents who smoke, drink, take drugs and engage in risky sexual behaviors are more likely to have children who engage in the same behaviors (Hatcher & Scarpa, 2001; Manlove et al., 2002; Zaff & Calkins, 2001).

*Parental monitoring* refers to how much parents know about their children's activities, friends and behaviors. Research suggests that the monitoring needs to be age-appropriate (Cox, in press). For example, a parent would monitor the activities of a five year-old much differently than they would those of a 15 year-old. Monitoring in an age-appropriate manner is associated with lower rates of risky physical and sexual behaviors, as well as lower rates of drug, alcohol and tobacco use (Hatcher & Scarpa, 2001; Manlove et al., 2002; Zaff & Calkins, 2001). Furthermore, adolescents who perceive their parents as monitoring their lives are more likely to do well academically and socially (Hair, Jager & Garrett, 2002; Redd & Brooks, 2002).

Finally, *parenting styles* are important predictors of adolescent well-being. Research findings suggest that supportive, caring, but strict parenting (i.e., authoritative parenting; Baumrind, 1966) is associated with adolescents who are academically motivated and successful as well as psychologically and physically healthy. Parents who are overly strict and do not give their children any independence (i.e., authoritarian parenting) have lower quality relationships with their children and their children are more likely to engage in risky behaviors (Hair, Jager & Garrett, 2002; Manlove et al., 2002). As with parental monitoring, parental support, caring and strictness need to be age-appropriate (Cox, in press). Parenting styles may also differ by cultural background. For instance, black children respond better to authoritarian parenting styles (Brody & Flor, 1998). Additionally, warmth and quality of the relationships between parents and children were found to be one of the strongest predictors of adolescent well-being (Hair, Jager & Garrett, 2002; Zaff & Calkins, 2001).

An important point to note about all of the research on parenting is that there are few data appropriate for disentangling the causal association between parenting and adolescent wellbeing. For instance, while parenting appears to be an important influence on adolescents, it is also likely that adolescent behaviors influence the type and quality of parenting, or, as some have theorized (e.g., Patterson, 1995), that parenting is the result of a back-and-forth relationship between the parent and the adolescent. In addition, other, unmeasured factors (neighborhood influences, for example) might be affecting the adolescent and/or the parent. More rigorous longitudinal and experimental studies, where possible, are needed before definitive causal conclusions can be made.

3.) <u>Peer influences are important and can be positive</u>. Parents are not the only social connection that adolescents have. Peers are important, as well. Anecdotal observations have

propagated the notion that peers only have a negative influence. In fact, though, adolescents can have positive influences on each other, either by modeling behaviors or putting pressure on each other to behave in certain ways or to have certain attitudes and goals. Thus, "hanging-out" with the so-called "bad" kids can promote or sustain deviant behaviors, while hanging-out with "good" kids can promote or sustain positive behaviors. However, the direction of this association is again not as obvious as it is often thought. For instance, "bad" kids seem likely to seek out other "bad" kids while "good" kids seem more likely to seek out other "good" kids. In addition, peer acceptance is probably more likely for teens whose attitudes and behaviors correspond to those of the group. At the very least, data suggest that peer relationships perpetuate adolescents' behaviors.

Despite a complex set of causal patterns and factors, researchers have found correlations across multiple domains of adolescent well-being. Youth whose friends smoke, drink alcohol, take drugs and engage in other deviant behaviors and those who engage in sexual intercourse are more likely to engage in similar behaviors. On the positive side, youth whose friends have high educational aspirations, achieve academically, and engage in other positive and healthy behaviors behave in a similar fashion (Hair, Jager & Garrett, 2002; Hatcher & Scarpa, 2001; Manlove et al., 2002; Redd, Brooks & McGarvey, 2002; Zaff & Calkins, 2001).

4.) Siblings, teachers and other adults/mentors provide additional support. Aside from parents and peers, adolescents have other important social connections in their lives, such as with siblings, teachers and other adults or mentors, as well as with extended family. Siblings can act as models for positive behaviors, such as adequate physical activity, and negative behaviors, such as drug use (Hatcher & Scarpa, 2001; Zaff & Calkins, 2001). Sibling relationships are also a good training ground for conflict resolution and negotiation skills that are necessary in other parts of youths' lives (Hair, Jager & Garrett, 2002). Regarding mentors, evaluations of mentoring programs have found that close, long-term mentoring relationships are associated with multiple outcomes of adolescent well-being, such as reduced rates of drug and alcohol use and increased rates of high school graduation, volunteering and having tolerance for others (Jekielek, Moore & Hair, 2001). In addition, these programs can teach social skills that can be used in a variety of settings. Like mentors, fictive family relationships (e.g., adults who act as aunts or uncles, but who are not related to the adolescent by blood or by marriage) and teachers can further serve as role models, teach social skills and provide support that may not be available in the home (Hair, Jager & Garrett, 2002). There is a need for more research on these various relationships, however, since most of the findings are based on cross-sectional designs and/or small sample sizes.

5.) <u>Take a holistic approach.</u> Focusing only on social connections would mean missing several, more distal factors that are associated with the well-being of America's teens. Therefore, it is important that program providers and policy makers are also aware of these factors and take a more holistic approach to youth development. More specifically, across the seven reports, we found that factors such as schools, communities, socioeconomic status, the media and public policies all have implications for adolescent development. For example, research finds the price of cigarettes influences teen smoking, with higher prices being associated with lower rates of teenage smoking (Chaloupka & Pacula, 1999). Also, moving children and adolescents out of high-poverty areas into low-poverty areas has been found to be associated with their psychological well-being (Del Conte & Kling, 2001). Several programs that target nonsexual outcomes, like high-quality early childhood and preschool programs and service-learning programs, are associated with reduced sexual activity and risk of pregnancy (Manlove et

al., 2002). The atmosphere of schools, such as whether schools place an emphasis on achievement, the level of per-student expenditure and the overall attitude of the teachers are associated with various components of academic achievement and skills (Redd & Brooks, 2001). Living in a low socioeconomic status neighborhood (as well as living in a low SES family) has been implicated as a predictor of higher teenage pregnancy, lower academic achievement and higher levels of unintentional injuries (Hatcher & Scarpa; Manlove et al., 2002; Redd, Brooks & McGarvey, 2002).

6.) Engage youth. Acquiring information is important, but information-only approaches do not generally change behavior, whether the program targets smoking, drugs, drunk driving or teenage pregnancy (Centers for Disease Control and Prevention, 1994; Kirby, 2001; McKnight & McPherson, 1986; Ringwalt et al., 1994). Studies have repeatedly shown that didactic programs that lecture kids are ineffective. One reason for these failures might be that these programs do not engage and invest youth as part of the strategy. Indeed, programs that build relationships, engage youth and provide well-implemented and structured activities promote positive youth development, such as lower teenage pregnancy rates, lower rates of drug, alcohol and tobacco use and higher rates of positive citizenship behaviors and academic achievement (Hair, Jager & Garrett, 2002; Hatcher & Scarpa, 2001; Manlove et al., 2002; Redd, Brooks & McGarvey, 2002; Zaff & Calkins, 2001; Zaff & Michelsen, 2002). This relationship has been demonstrated in multiple experimental evaluations.

The value of engaging youth makes theoretical and empirical sense. Based on nonexperimental work, Larson (2000), for instance, has studied what makes an activity stimulating. He has found that activities that are enjoyable and necessitate concentration are the most engaging. Unfortunately, this research shows that adolescents do not find schoolwork intrinsically motivating or interesting (Larson, 2000). The most engaging activities, in turn, tend to be extracurricular activities such as sports and arts. Furthermore, researchers have found that engaging programs can teach important social and life skills through activities that are either specific (e.g., peer pressure resistance skills), or not specific (e.g., sports) to a particular program's goals (Brice Heath, 1998). Also, engaging activities give adolescents something positive to do and less time to do something negative. Most of these programs take place after school, during the high-risk hours of 3 pm - 8 pm when there is a higher likelihood of violence and drug use, and they provide adolescents with a safe and supportive environment – either through on-site activities with staff or off-site activities with mentors (National Research Council and Institute of Medicine, 2000).

7.) <u>Target desired outcomes.</u> Successful programs tend to include a component that specifically targets the particular desired outcomes(s) of the program. For instance, if a program meant to increase academic achievement contains all of the previously described promising practices, but does not include a component on increasing academic skills, such as tutoring, then program staff should not expect the program to have the desired effect; nor should staff expect effects as pronounced as those found in a program directly addressing the outcome (Redd, Brooks & McGarvey, 2002). This is also the case for promoting positive reproductive health, physical and mental health, positive citizenship, and social competence (Hair, Jager & Garrett, 2002; Hatcher & Scarpa, 2001; Manlove et al., 2002; Zaff & Calkins, 2001; Zaff & Michelsen, 2002).

8.) <u>Start young and sustain the effort.</u> Although adolescence as a stage of development is not too late in which to implement programs and policies, starting earlier in a child's life can have long and sustained impacts throughout adolescence and into adulthood. Considering that

psychological, behavioral and academic problems that begin in childhood often continue into adolescence and adulthood, this strategy makes theoretical sense (Redd, Brooks & McGarvey, 2002; Zaff & Calkins, 2001). Therefore, sustaining positive effects should result in fewer problems in adolescence and should also result in a smoother transition into adulthood. Intensive programs like Perry Preschool and the Abecedarian can serve as models for early childhood programs.<sup>1</sup> These programs have been associated not only with educational outcomes, but with reduced pregnancy and childbearing years later. It should be noted that even strong pre-school programs are more likely to have sustained effects if services continue. For additional information on early childhood programs, the reader is directed to the early childhood school readiness report that Child Trends produced for the Knight Foundation (Halle, Zaff, Calkins & Margie, 2000).

9.) Implementation is critical. Programs will not be successful unless they are well implemented. The best ideas are unlikely to be effective if, among other things, there is not proper training of high-quality committed staff, if there is not a well-developed infrastructure, and/or if there is not buy-in from parents and youth. Furthermore, if program staff and evaluators do not know how well their program was implemented, or what components were or were not implemented adequately, then they will not be able to say why their program design has been effective. For example, if a psychotherapist conducts cognitive-behavioral therapy (shown to work for decreasing depression and anxiety among adolescents), but does not stick to the treatment, then an evaluator would not know whether the specific treatment was effective or whether it was something that the therapist spontaneously included. Or, if specific aspects of the program are not included in implementation (for instance, no case management, no staff training, or not enough staff), researchers studying the program would not know if the program itself failed or if the program failed because of lack of full implementation. Subsequently, program providers will not know what components of a program to keep or what components to improve. Moreover, Domitrovich and Greenberg (2000) found that mental health intervention programs have bigger effects on high-fidelity program participants (i.e., adolescents who stick stringently to the program protocol) than low-fidelity participants. Further research is needed to assess whether this finding reflects self-selection among motivated participants or true program effects. Overall, then, unless an evaluation explicitly discusses the success of the program or policy implementation, readers should be cautious in drawing precise conclusions about evaluation results that indicate effectiveness (or ineffectiveness).

Unfortunately, relatively little experimental evaluation research exists on the implementation of programs. Nonetheless, researchers have learned a good deal from practitioners, qualitative evaluations and correlational research. Among other strategies, successful implementation efforts tend to include adolescents in the development of the program. This gives youth a sense of empowerment as well as ensuring that the program will have the activities that youth want (e.g., Garvey, McIntyre-Craig & Myers, 2000; Katula, 2000; Morgan & Streb, 2000). Involving parents in the process is another way for obtaining parental buy-in. And providing appropriate structure, training staff, sustaining long-term and frequent contact with the adolescents are additional ways to strengthen programs.

10.) <u>Think positive.</u> There has been a historical tendency to look at adolescents as potential problems and therefore programs are often developed to prevent those problems from occurring. However, promoting skills and assets, instead of preventing deficits - in other words,

<sup>&</sup>lt;sup>1</sup> To obtain more information on these programs, please see <u>www.highscope.org</u> for Perry Preschool, and www.fpg.unc.edu/~abc for Abecedarian.

taking a positive approach – seems more likely to result in youth realizing their potential and subsequently avoiding the effects of negative influences (Scales & Leffert, 1999; Moore & Halle, 1999; Pittman & Cahill, 1991). Such youth development approaches have been found in several experimental studies to reduce teen sex or parenthood, especially for girls (Allen, Philliber, Herrling, & Kuperminc, 1997; Kirby, 2001; Philliber, Kaye, & Herrling, 2001). Unfortunately, there is a dearth of research on positive development. We know little about positive mental health, positive citizenship and emotional well-being, among other outcomes with a positive connotation (Bridges, Margie & Zaff, 2001; Zaff & Calkins, 2001; Zaff & Michelsen, 2002). In fact, even the measurement of positive characteristics is still in a nascent stage. A growing number of practitioners, policy makers and researchers recognize the importance of positive development, and the size and quality of the research literature needs to catch up.

### Next Steps for Research

Although approximately 1,100 empirical studies that employed rigorous research standards were examined across the seven literature reviews, there is still much to be learned in the field of adolescent development. The following are recommendations, in addition to the programmatic recommendations already discussed, for next steps for the research community:

- <u>Conduct more multivariate, longitudinal research</u>. More high-quality, rigorous research (e.g., long-term longitudinal studies that control for confounding socioeconomic and individual factors) is needed to give researchers and practitioners more conclusive information on the factors that promote adolescent well-being. It is important to note that certain aspects of adolescents' lives and their environment have been more extensively researched than others. That does not mean that the less researched components, such as fictive family relationships, are less important or less effective at promoting adolescent well-being. Instead, the deficits point to a need for further study to uncover the particular characteristics that are important. Moreover, studies need to examine the joint and interactive effects of influences in different domains of adolescent well-being
- Evaluate program interventions with experimental studies. Experimental studies represent the "gold standard" for determining causality, and more such studies are needed. However, even most existing experimental evaluations end after a relatively short period of time ranging usually from one month to two years. Considering that the goal of youth programs and policies is to support youth through the growth and exploration of adolescence and the transition into adulthood, it is important not only to know whether programs work in the short-term, but, it is important to know whether impacts are sustained over time. A multitude of program approaches are potentially effective, but the programs have not been adequately evaluated.
- Examine the whole adolescent (including the whole ecosystem--- family, school, <u>community, media, etc.).</u> In order to have a better understanding about how each layer of the environment uniquely affects adolescents, researchers need to incorporate these factors into their study designs. This even includes genetic factors, since preliminary evidence from the field of behavioral genetics suggests that genetic factors interact with environmental influences and dispose youth to behave in certain ways (McGue, Elkins, & Iacono, 2000; O'Connor, McGuire, Reiss, Hetherington, & Plomin, 1998).

• <u>Increase the research base on cultural influences on adolescent development.</u> The culture in which an adolescent is raised, whether it revolves around a family's ethnic or national heritage, may socialize the adolescent to value different social norms than his or her peers who are from other cultures or other regions of the country. Unfortunately, examining cultural differences, such as sub-group differences in program impacts, has been part of few research agendas. This is true for basic and applied research. Understanding individual cultural differences can enhance the quality and service of programs.

# In Summary

Adolescents are growing up in a complex world, and have the potential to have positive attitudes and engage in positive behaviors. Moreover, they are whole persons, not simply students in one context, athletes in another, delinquents in another, and sons and daughters in yet another context. Although this seems intuitive to many, there has been a history of policies and programs looking at children and youth as an amalgam of discrete parts. The national and state data systems, for example, are split among agencies that focus on health, education or welfare. The same parsing of youth is also seen in many public policies and youth programs. For instance, education reform is headquartered in the Department of Education. However, parents, peers, communities, and other components of society, as well as schools, affect academic achievement. Therefore, it is important for program and policy developers to recognize that taking a "whole child" approach could be more effective than putting all of their energy into one component of adolescents' lives. Moreover, addressing and enhancing positive influences appears to warrant more attention, given evidence that information-only, didactic, and deficitreduction approaches have only small and scattered effects on behavior. Finally, program developers and policy makers have a more complicated task than bringing together the various components of adolescents' lives (which is no easy task in itself). They must also develop activities that engage adolescents and that are age-appropriate, as well as create a social and physical infrastructure that can sustain the initiatives. These reviews provide a stepping stone for researchers, practitioners and policy makers to begin thinking about ways to enhance adolescent development.

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