Programs for Youth and Young Adults: Glossary of Terms

This document provides definitions for terms used in the youth and young adult development field that are defined on the Child Trends' website of the same name. These terms are often misunderstood by practitioners, policymakers, and funders. A shared understanding of these terms will benefit practitioners who work with young people, grant writers who need to explain the value of their work, and program managers seeking to develop new youth programming or train staff.

This comprehensive, easy-to-navigate resource provides accurate, science-based definitions of terms for use by program providers, policymakers, and funders. Kristin Anderson Moore led this project. Hannah Lantos managed the project and Renee Ryberg and Alexandra DeMand provided invaluable support at each stage—searching for terms, drafting definitions, conducting interviews, and reviewing for clarity and accuracy. We thank the Annie E. Casey Foundation for their generous funding of the work, as well as Jake Rapash at Eleven11 Group (e11) and Stephen Russ at Child Trends for their website design and internal support.

Each term is categorized according to the conceptual model presented on the webpage: **Contexts** describe the circumstances that can lead to the need for an **intervention**, which can in turn result in better **outcomes**. We also provide examples of how contexts, interventions, and outcomes may be connected to each other in a program setting. Finally, we also define terms used in program evaluations.

Context: The economic and social circumstances in which young people grow up.

Intervention: Approaches used in programs to support youth and young adults.

Outcome: The result(s) of an intervention for youth and young adults across five essential developmental domains.

Examples: The examples provided are intended to help practitioners think about how different interventions help young people respond to the contexts in which they live to improve both their short- and long-term outcomes.

Evaluation terms: Evaluation terms are increasingly relevant to the work of practitioners as they implement data collection and program evaluation efforts.

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Developmental Contexts

Youth

Adverse childhood experiences (ACEs)

<u>Adverse childhood experiences (ACEs)</u> are a subset of childhood challenges and difficulties, and refer specifically to the term <u>used</u> by researchers Vincent Felitti, Robert Anda, and their colleagues in their <u>1995–1997 study</u>.

In the ACEs study, researchers asked adults about childhood adversities in seven categories: physical, sexual, and emotional abuse; having a mother who was treated violently; living with someone who was mentally ill; living with someone who abused alcohol or drugs; and incarceration of a member of the household. Researchers found that the more ACEs that adults reported experiencing in their childhoods, the worse their physical and mental health outcomes as adults (e.g., heart disease, substance misuse, depression).

The term ACEs has since been adopted to describe other lists of adversities. The <u>ACEs study funded by the Centers for Disease Control and Prevention</u>, for example, includes parental divorce or separation and emotional and physical neglect; other studies have added experiences of social disadvantage (e.g., economic hardship, homelessness, community violence, discrimination, historical trauma). Various lists of ACEs have been developed, and some programs use these as checklists to screen for ACEs (see info on the checklist that California will be using here). There is overlap in the experiences included in these lists, but the overlap is imperfect. Additionally, ACEs measures assess children's experiences, but not how they react to them (trauma symptoms) or how they have adjusted, so an ACE score should not be taken as an indicator that a child is doing poorly or will have poor outcomes. Program leaders need to think carefully about which experiences are most important for their specific programs and the purpose of screening participants.

Resources

- Substance Abuse and Mental Health Services Administration (SAMHSA): Helping Children and Youth Who Have Trauma Experience
- Center on the Developing Child at Harvard: ACEs and Toxic Stress, Frequently Asked Questions
- Child Health Data: Adverse Childhood Experiences (ACEs) Basics, Frequently Asked Questions
- <u>Data Resource Center for Child & Adolescent Health: The National Survey for Children's Health</u> (NSCH)
- <u>Data Resource Center for Child & Adolescent Health: NSCH Questionnaire Measure for ACEs</u> (Question I13, Page 16)

At-risk

At-risk describes a concept that reflects a chance or a probability. In the youth development context, it describes youth who are in circumstances that increase their risk of failing to succeed or thrive at various points in life. Specifically, it does not imply certainty of the outcome happening, but simply that there is an increased probability of a negative outcome.

At-risk is used to describe the likelihood of a particular outcome, but it is also frequently used more generally. For example, while youth may be described as "at risk of dropping out" or "at risk of disconnection," references simply to "at-risk youth" fail to specify what the youth are at risk for, or of. Used in this way, without precision, the term can be seen to stigmatize certain groups. For example, youth of color



are sometimes described as broadly "at-risk," suggesting that their skin color is the risk, rather than their contexts, experiences, or behaviors.

Any group can be considered "at-risk" for certain outcomes. Researchers have proposed the term "at-promise" as a strengths-based alternative.

Terms sometimes used synonymously with at-risk include high-risk, vulnerable, and underprivileged.

Resources

- Ferris State University: Moving from At Risk to At Promise, A Paradigm Shift for Community Colleges Addressing Underprepared Students
- Child Trends: Defining the Term "At Risk"

Brain development

Brain development is how functional and structural aspects of the brain change to influence how we think, learn, respond emotionally, and behave.

Brain development begins before birth and continues into early adulthood. While brain development in early childhood has long been well-understood, significant cognitive and social-emotional development also occurs from age 10 into the mid- to late-20s. However, due to <u>uneven development of emotion regulation systems in the brain during this period</u>, youth have increased sensitivity to rewards and suppressed fear responses, which contribute to impulsive behavior and poor decision making. Risk-taking behavior peaks around age 19 but continues into the mid-20s as the <u>prefrontal cortex</u>—the executive functioning system of the brain—continues to develop. **Self-regulation** and **executive functioning** skills also rely on the prefrontal cortex. These developments also increase capacity for learning, exploration, and habit formation that can be important as young people navigate new experiences such as starting a new job, moving out of their parents' home, or going to college.

Brain development is also influenced by an individual's physical and social contexts in ways that can be protective or adverse. Negative effects have been found from exposure to <u>lead, maltreatment</u>, <u>poverty</u>, <u>family instability</u>, and <u>stress</u>.

For example, research has found that poverty <u>is associated with atypical structural brain development</u>, but some of poverty's effect on development was mediated by caregiving support and stressful life events.

<u>Another study</u> found that positive maternal behavior was associated with changes in the brain that support cognitive and emotional functioning.

Resources

- The Annie E. Casey Foundation: Adolescent Brain Development Resources for Youth in Foster Care
- Act for Youth: Domains of Development Toolkit
- Office of Adolescent Health (OAH): Topics in Adolescent Development
- Office of Adolescent Health (OAH): Adolescent Development E-Learning Module

Developmental assets

"Developmental assets are the <u>positive supports and strengths</u> that young people need to succeed." The <u>Search Institute</u> first identified the 40 essential developmental assets that are now identified as necessary for healthy growth during childhood and adolescence. Twenty of the assets are the relationships and opportunities (or external assets) young people need in their family, school, and community contexts. The other half are internally focused and identify "the social-emotional strengths, values, and commitments that are nurtured within young people."



• Search Institute: The Developmental Assets Framework

Disconnected youth (opportunity youth)

Disconnected youth, also referred to as opportunity youth, are young people ages 16 to 24 who are <u>not in school and not working</u>.

Disconnection from schooling, work, and other institutions during these years can hinder youth in developing knowledge, skills, and self-sufficiency. A variety of factors are associated with youth disconnection, including poverty, family structure, and parental unemployment and education. These youth may be at higher risk for academic difficulties, mental health problems, and/or substance abuse problems; and are more likely to be involved in violence and to be teen parents.

<u>Disparities in disconnection</u> mean that Native American, Black, and Latino youth are more likely to be disconnected compared to their White and Asian counterparts. Additionally, there are disparities by geography such that higher rates of disconnection are found in rural areas and the southern United states; rates also vary by the economic status of the community. The <u>majority of disconnected youth are ages 20 to 24</u>.

Resources

- Measure of America of the Social Science Research Council: Youth Disconnection Overview
- Measure of America of the Social Science Research Council: Youth Disconnection Tool
- Youth.gov: <u>Reconnecting Youth</u>

Gender identity

Gender identity is one's concept of oneself as male, female, both male and female, or neither. Gender identity relates to how individuals present themselves to others and what pronouns they prefer to use to identify themselves (i.e., she/he/they).

Importantly, someone's gender identity may be the same or different from the sex they were assigned at birth. "The 'T' in LGBTQ stands for transgender or gender non-conforming, and is an umbrella term for people whose gender identity or gender expression does not conform to that typically associated with the sex to which they were assigned at birth. Some who do not identify as either male or female prefer the term 'genderqueer." A person's sexual orientation is not the same thing as their gender identity, but both may reflect expression of differing gender norms. Additionally, the two concepts have developed in similar social and political contexts.

Resources

- Gay, Lesbian, and Straight Education Network (GLSEN): National network of educators, students, and local GLSEN Chapters website
- Pew Research Center: Personal Milestones in the Coming Out Experience Data Visualizations
- Child Trends: <u>Improving Measurement of Sexual Orientation and Gender Identity Among Middle</u> <u>and High School Students</u>

Post-traumatic stress disorder (PTSD)

"<u>Post-traumatic stress disorder (PTSD)</u> is a disorder that develops in some people who have experienced a shocking, scary, or dangerous event."

People may have a range of upsetting reactions after experiencing **trauma**; however, most people recover without the need for ongoing care. Recent research finds that about 5 percent of adolescents have PTSD,



with rates higher among females than among males. "People with PTSD have <u>intense</u>, <u>disturbing thoughts</u> and <u>feelings</u> related to their experience that last long after the traumatic event has ended. They may relive the event through flashbacks or nightmares; they may feel sadness, fear or anger; and they may feel detached or estranged from other people. People with PTSD may avoid situations or people that remind them of the traumatic event, and they may have strong negative reactions to something as ordinary as a loud noise or an accidental touch."

PTSD is also sometimes referred to as shell shock particularly when related to war.

Resources

- U.S. Department of Veterans Affairs: PTSD in Children and Teens
- American Academy of Child and Adolescent Psychiatry: Posttraumatic Stress Disorder (PTSD)
 Overview

Religiosity/spirituality

Religiosity and spirituality are <u>separate</u>, <u>albeit related</u>, <u>constructs</u>. Religiosity is the strength of belief in religion, as well as adherence to religious practices. Spirituality is "<u>seeking or experiencing</u> awareness or awakening to a universal unity."

Religiosity and spirituality can be **protective factors** <u>against numerous negative outcomes</u> in adolescence and the transition to adulthood.

Resources

- Carolina Population Center: Religiosity of Young Adults: The National Longitudinal Study of Adolescent to Adult Health
- National Study of Youth & Religion: Religion and Spirituality on the Path Through Adolescence
- Teaching Tolerance: Resources on Religion

Risk, protective, and promotive factors: youth level

Risk factors are experiences or <u>characteristics</u> associated with an <u>increased risk of a negative outcome</u>. Protective factors are <u>characteristics</u> or experiences that <u>reduce</u> the probability of a negative outcome. Promotive factors are <u>characteristics</u> or experiences that increase the likelihood of a positive outcome.

Promotive factors frequently overlap with protective factors but are more distinctly positive: Promotive factors are associated with positive outcomes, such as graduating from high school, and are not simply protective against negative outcomes like dropping out of high school. <u>Identifying risk factors is often one way to identify promising opportunities for intervention.</u>

Over time, the term "risk factor" has come to replace the term "risky kid" because defining a child as risky can categorize them in simplistic or unfair ways. Rather, the context in which the child grows up is now described as increasing their risk for certain outcomes. As recognition that children themselves are not risky (although they may engage in risky behaviors or live in risky environments) has grown, so has recognition of the need to describe protective factors. Discussing protective and promotive factors in conversations about risk factors makes **positive youth development** approaches easier to support because these factors emphasize the strengths or **assets** a child already has and can build from. Unsupportive social structures and a lack of **racial equity** can affect all of these factors (increasing risk factors and reducing protective or promotive factors).

At the youth level, risk factors might include having a **special health care need** or an individualized education plan (IEP) for special education services. A protective factor might be an individual child's self-confidence or other soft skills, and a promotive factor might be a child's good relationship with a mentor who supports their schooling.



Resources

- Child Trends: Building Protective and Promotive Factors in Afterschool Programs
- Pediatrics: Risk and Promotive Factors in Families, Schools, and Communities Research
- National Research Council and Institute of Medicine: Developmental Perspective on the Study of Mental Health Promotion
- Youth.gov: Risk and Protective Factors for Mental, Emotional, and Behavioral Disorders in Adolescence
- National Mentoring Resource Center: Risk and Protective Factors Toolkit
- <u>Substance Abuse and Mental Health Services Administration (SAMHSA): Risk and Protective Factors for Substance Use Disorder</u>
- The Annie E. Casey Foundation: <u>The Risk and Protective Factors Evidence-Based Programs for Young People Should Measure</u>
- Child Trends: Defining the Term "At Risk"
- National Center for Children in Poverty: Young Child Risk Calculator (needs Adobe Flash enabled)
- National Research Council and Institute of Medicine: Developmental Perspective on Risk and Protective Factors

Secondary stress

Secondary stress is "the emotional duress that results when an individual hears about the firsthand trauma experiences of another."

For example, an individual living in the neighborhood where a violent murder took place may feel stress as a result, even if they did not know the person killed. This type of stress may be called secondary traumatic stress, secondhand stress, vicarious trauma, or indirect trauma, and is often found among staff who work with or help individuals who have experienced trauma, such as child welfare workers, social workers, and teachers.

Resources

- National Child Traumatic Stress Network: Understanding Who is At Risk, Introduction to Secondary Traumatic Stress
- National Child Traumatic Stress Network: Secondary Traumatic Stress: A Fact Sheet for Child-Serving Professionals
- Harvard Graduate School of Education: Helping Teachers Manage the Weight Of Trauma
 National Center for Safe and Supportive Schools: <u>Trauma-Sensitive Schools Training Package</u>

 Handout: Secondary Traumatic Stress and Self-Care

Sex

Sex (biological sex) is the designation as male or female assigned at birth based on genitals and/or chromosomes and recorded on a birth certificate.

An individual's sex assigned at birth may or may not align with their **gender identity**. For example, a transgender individual's gender identity is, by definition, different from their assigned sex. Similarly, an intersex individual (one who biologically does not meet the typical definition of male or female) may have been assigned either male or female at birth. [See also **sexism** for more information about discrimination based on a person's sex.]

- Child Trends: Research Shows the Risk of Misgendering Transgender Youth
- Child Trends: Understanding Transgender Youth



Sexual orientation

Sexual orientation is "an often-enduring pattern of emotional, romantic and/or sexual attractions of men to women or women to men (heterosexual), of women to women or men to men [lesbian or gay respectively], or of men or women to both sexes (bisexual)."

Sexual orientation is comprised of sexual identity, sexual attraction, and sexual behavior. Sexual identity is what one calls oneself or how one identifies oneself (for example, identifying as gay or straight), while sexual attraction is whom one is attracted to; sexual behavior is dependent on the individuals with whom one actually engages in sexual activity.

The short phrase "LGBTQ" is often used to describe sexual orientation, although only the first three letters refer to sexual orientation (lesbian, gay, and bisexual). The fourth letter, "T," refers to transgender—which is a **gender identity**—and the fifth, "Q," can refer to either "queer"—a more all-encompassing term—or "questioning." "Some people who have same-sex attractions or relationships <u>may identify as 'queer,'</u> or, for a range of personal, social or political reasons, may choose not to self-identify with these or any labels." Sexual orientation can also refer to a lack of interest in any consistent partner such as in the cases of pan/omnisexual, asexual, and aromantic people. Additionally, while many resources still use the term "homosexual," its history of medicalization and misuse has made many young people feel uncomfortable with the term, and its lack of use among LGBTQ youth suggests that other, more precise terms should be used when possible.

Resources

- Advocates for Youth: <u>I Think I Might Be Bisexual + Pansexual</u>: <u>Answers for Young People with</u>
 Questions About Sexual Orientation (available in English and Spanish)
- Pew Research Center: Personal Milestones in the Coming Out Experience Data Visualizations
- Child Trends: Improving Measurement of Sexual Orientation and Gender Identity Among Middle and High School Students
- Columbia Journalism Review: <u>How the Word 'Queer' Was Adopted by the LGBTQ Community</u>

Sleep deprivation

Sleep deprivation is the state of getting less than the recommended amount of sleep for rest and rejuvenation. For teenagers, the <u>recommended amount of sleep</u> is 8 to 10 hours per night, while experts encourage young adults (ages 18 to 25) to get 7 to 9 hours per night.

Youth often do not get the recommended amount of sleep each night. This can be related to many factors, including a parent who works late or holds multiple jobs, a loud living situation, health issues, hormonal changes, mental health, homework that must be done late, sports practices that go late, or screen time. Particularly for teenagers, hormonal changes can lead to changes in sleep patterns that may conflict with school and activity schedules. Counterintuitively, youth who stay up late to study may perform more poorly due to sleep deprivation. Short-term sleep deficits can cause poor academic performance, and youth with chronic sleep deprivation are more likely to experience developmental/cognitive delays. Teenagers who drive while sleep-deprived are more likely to get into motor vehicle accidents.

- Child Trends: Back-to-School Special: The Importance of Adolescent Sleep
- American Psychological Association: <u>Young and Sleep Deprived</u>
- Harvard Graduate School of Education: <u>A Sleep-Deprived Nation: The Importance of Sleep in Education</u>, and a Call to Action
- Centers for Disease Control and Prevention (CDC): <u>Do Your Children Get Enough Sleep?</u>
- Centers for Disease Control and Prevention (CDC): How Much Sleep Do Students Need?
- Centers for Disease Control and Prevention (CDC): <u>Sleep in Middle and High School Students</u>



Special health care needs

Special health care needs are those that are above and beyond the health care needs of most adolescents, such as school physicals, treatment for an occasional cold, or preventive care.

Many adolescents and young adults "have or are at an increased risk for chronic physical, developmental, behavioral, or emotional conditions and ... also require health and related services of a type or amount beyond that required generally," making them adolescents with special health care needs. Chronic diseases and illnesses affect 10 to 30 percent of adolescents, and this statistic may be increasing over time. Young people with special health care needs may miss more school and subsequently underperform in school and the workplace. Young people need to be able to manage their health as they transition into adulthood so they can support themselves and participate in typical adult activities.

Resources

- Child Trends: Adolescent Health Highlight: Chronic Conditions
- World Health Organization (WHO): <u>The Adolescent with a Chronic Condition, Incidence and Prevalence</u>
- Health Affairs: <u>The Rise In Chronic Conditions Among Infants, Children, And Youth Can Be Met</u>
 With Continued Health System Innovations

Stress

Stress is the body's response to the complicated experiences and demands that arise from different sources—both physical (that is, health or injuries) and emotional (such as relationships, finances, etc.).

Any type of demand can be a stressor, from school, to work, to family. Individuals react to stressors differently and can have positive, tolerable, or toxic responses to stress. A positive stress response, characterized by short-term elevations in heart rate and hormone levels, is normal and healthy. *Tolerable stress* responses are longer-term reactions to more serious events. Healthy relationships can buffer youth from prolonged stress responses, which can have negative health consequences. For example, dealing with a nonviolent death may result in sadness and mourning but not elicit a toxic stress response if a youth is well-supported. **Toxic stress** is defined below.

Resources

- National Institutes of Mental Health (NIHM): 5 Things You Should Know About Stress
- TED-Ed: How Stress Affects Your Brain

Toxic stress

A "toxic stress response can occur when a child, teen, or young adult experiences strong, frequent, and/or prolonged adversity—such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship—without adequate support. This kind of prolonged activation of the stress response systems can disrupt the development of brain architecture and other organ systems and increase the risk for stress-related disease and cognitive impairment, well into the adult years."

Toxic stress is different from **ACEs** or **trauma** because it specifically involves the process during which the child's health and body systems are worn down by stress. "Childhood adversities, including ACEs, can overactivate the child's stress response system, <u>wearing down the body and brain</u> over time. This overactivation is referred to as toxic stress and is the primary way in which adversity damages a child's development and well-being. The extent to which a child's stress response to adversity becomes toxic and leads to <u>serious</u> health and mental health problems in adulthood also depends on the child's biological makeup (e.g., genetic



vulnerabilities, prior experiences that have damaged the stress response system or limited healthy gene expression) and the characteristics of the adverse events or conditions (e.g., intensity, duration, whether a caregiver caused the child harm)."

Resources

- Center on the Developing Child at Harvard: Guide to Toxic Stress
- Center on the Developing Child at Harvard: ACEs and Toxic Stress, Frequently Asked Questions
- <u>Center on the Developing Child at Harvard: InBrief: The Impact of Early Adversity on Children's Development</u>

Trauma

Trauma is a person's condition of psychological distress following a traumatic event. "A <u>traumatic event</u> is a frightening, dangerous, or violent event that poses a threat to an [individual's] life or bodily integrity. Witnessing a traumatic event that threatens life or physical security of a loved one can also be traumatic."

Traumatic events may include <u>natural disasters</u>, <u>car accidents</u>, <u>and crime</u>. Sometimes adverse childhood experiences (**ACEs**) can also be traumatic events. Experiencing trauma can affect one's feelings of safety or security, which can lead to <u>post-traumatic stress disorder</u> (PTSD) or <u>toxic stress</u> if an individual is not properly supported throughout the experience. Not everyone will experience the same distress or psychological symptoms following a traumatic event. One person may have coping mechanisms for certain experiences and not others. Therefore, it is important to not assume someone is experiencing trauma but rather to examine them or monitor their well-being if trauma is likely.

Resources

- National Child Traumatic Stress Network: About Child Trauma
- Harvard Graduate School of Education: Responding to Racial Trauma

Triggers

A trigger is anything that reminds an individual of a past trauma.

Triggers can set off symptoms of **PTSD**. Triggers vary from person to person and are frequently linked to the original trauma. They can be internal, such as a feeling or emotion; or external, such as a noise. For example, witnessing a car accident could be a trigger for someone who has experienced a deadly car crash. For others, being yelled at could be a trigger following experiences of abuse or violence.

A trigger may also be called a trauma trigger or psychological trigger.

Resources

- Very Well Mind: <u>What Does it Mean to be Triggered? Types of Triggering Events and Coping Strategies</u>
- Keck School of Medicine USC: Trigger Identification and Intervention

Family

Child welfare system

The child welfare system "is a group of services designed to <u>promote the well-being</u> of children by ensuring safety, achieving permanency, and strengthening families to care for their children successfully."



The child welfare system conducts investigations into reports of neglect or abuse; aids families in protecting and caring for their children; arranges alternative living arrangements for children, including kin care and foster care; and arranges adoption and reunification processes. Involvement in the child welfare system can occur for several reasons, but primarily because of suspected (or found) abuse and neglect when no other family members are available to care for the child. Young adults ages 18 to 21 who are under the care of the child welfare system at the age when they lose eligibility for services are at elevated risks of poor outcomes as they transition into adulthood, including unemployment and homelessness.

Resources

- Child Welfare Information Gateway: How the Child Welfare System Works
- Child Trends: Fact Sheet: Older Youth Need Support Transitioning from Foster Care to Adulthood
- The Annie E. Casey Foundation: Fostering Youth Transitions
- Child Trends: DataBank Indicator, Key Facts About Foster Care

Family stability

Family stability is the degree to which a young person's family structure is predictable and consistent over time.

The most common example of family stability is a young person living with two stably married parents. Alternative family structures can also be stable—for example, a young person who consistently lives with a single parent also experiences family stability. On the other hand, family instability is characterized by frequent and often unpredictable changes, such as a parent with multiple cohabiting partners over the course of a child's life. Family stability is important for young people, as it serves as a source of consistency and predictability and is found to be related to more positive academic and emotional outcomes; on the other hand, family instability is associated with poorer outcomes.

Resources

- Child Trends: Family Instability and Children's Social Development
- Urban Institute: <u>Research Synthesis on The Negative Effects of Instability on Child Development</u>
 Administration for Children and Families (ACF): <u>Enhancing Family Stability: A Guide for Assessing</u>
 Housing Status and Coordinating with Local Homelessness Programs for TANF Agencies

Food insecurity

Food insecurity is the condition of <u>limited or unstable access to food</u>, such that a person has reduced quality, variability, or desirability of diet.

Severe food insecurity refers to a level of instability that requires a person to reduce their food consumption. Youth who experience food instability are often forced to prioritize survival (food acquisition) over other things, potentially sacrificing school/learning time, balanced nutrition, and other important resources. Short-term hunger can decrease concentration and affect school performance in youth, and consistent food insecurity can lead to developmental and brain/cognitive delays.

- Child Trends: Key Facts on Food Insecurity
- Child Trends: Food Insecurity During Infancy: Implications for Attachment and Mental Proficiency in Toddlerhood
- United States Department of Agriculture (USDA): Statistics and Graphics On Food Insecurity
- Office of Disease Prevention and Health Promotion (ODPHP): <u>Healthy People 2020 and Food</u> Insecurity



Historical trauma

Historical trauma "is <u>cumulative emotional and psychological wounding</u> over the lifespan and across generations, emanating from massive group trauma." It represents the cumulative emotional and psychological toll that results from massive group trauma, whether or not it has been personally experienced.

Massive group trauma, such as the Holocaust or violent treatment of American Indian/Alaskan Native populations, can impact collective groups of people; its effects can be so great that they are passed on to future generations. The term was originally developed to describe the experiences of children of Holocaust survivors and is most frequently applied today to indigenous peoples and the events related to colonization—for example, pandemics, forced relocation and boarding school attendance, and outlawing of cultural practices. Some American Indian/Alaskan Native people challenge the concept of historical trauma and have opted to focus on historical resilience to emphasize the strengths of their communities.

Historical trauma may also be called intergenerational trauma, transgenerational trauma, and collective trauma.

Resources

- University of Minnesota Extension: Historical Trauma and Cultural Healing
- Administration for Children and Families (ACF): What is Historical Trauma?

Housing instability

Housing instability includes "a number of challenges, such as having trouble paying rent, overcrowding, moving frequently, staying with relatives, or spending the bulk of household income on housing."

Lack of access to a stable housing situation can detrimentally affect children and youth in myriad ways, including academically, socially, and emotionally. It also can have serious consequences for children's and youth's mental and physical health. Some children and families experiencing homelessness live in places not meant for human habitation (cars, bus stations, abandoned buildings, etc.), or they may live in shelters or (most commonly) by "doubling up" with other families. Children and youth may also experience housing instability due to contact with the justice or child welfare system.

Resources

- Child Trends: Family Interventions for Youth Experiencing or at Risk of Homelessness
- Child Trends: Children and Youth Experiencing Homelessness
- National Conference of State Legislatures (NCSL): Overview of Youth Homelessness
- Administration for Children and Families (ACF): Addressing Family Homelessness
- U.S. Interagency Council on Homelessness: Addressing Housing Instability for Children in the Child Welfare System

Poverty

Poverty is the condition of living without enough income to cover basic needs.

The federal government sets an income threshold for family poverty based on how many people live in a family, their ages, and their total income. This threshold was originally calculated in the 1960s as "the cost of a minimum food diet multiplied by three to account for other family expenses," and has since been adjusted for inflation. In 2017, the poverty threshold for a family of four with two related children under age 18 was \$25,094. Families falling below this threshold are considered to live in poverty. Families falling below 200



percent of this threshold are defined as low-income. Living in poverty is associated with many poor outcomes, including poor physical and mental health and lower academic achievement.

There are also other poverty measures. For example, the supplemental poverty measure is an alternative to the official poverty threshold with much more recent origins.

Resources

- Child Trends: DataBank Indicator on Children In Poverty
- Child Trends: DataBank Indicator on Children in Working Poor Families
- The Annie E. Casey Foundation: Data Snapshot: Children Living in High-Poverty Communities

Risk, protective, and promotive factors: family level

Risk factors are experiences or characteristics associated with an increased risk of a negative outcome. Protective factors are characteristics or experiences that reduce the probability of a negative outcome. Promotive factors are <u>characteristics</u> or experiences that increase the likelihood of a positive outcome.

Promotive factors frequently overlap with protective factors but are more distinctly positive: Promotive factors are associated with positive outcomes, such as graduating from high school, and are not simply protective against negative outcomes like dropping out of high school. Identifying risk factors is often one way to identify promising opportunities for intervention.

Over time, the term "risk factor" has come to replace the term "risky kid" because defining a child as risky can categorize them in simplistic or unfair ways. Rather, the context in which the child grows up is now described as increasing their risk for certain outcomes. As recognition that children themselves are not risky (although they may engage in risky behaviors or live in risky environments) has grown, so has recognition of the need to describe protective factors. Discussing protective and promotive factors in conversations about risk factors makes positive youth development approaches easier to support because these factors emphasize the strengths or assets a child already has and can build from.

Unsupportive social structures and a lack of racial equity can affect all of these factors (increasing risk factors and reducing protective or promotive factors).

At the family level, risk factors might include family instability or parental incarceration. A protective factor might be a parent who knows a child's friends by name, and a promotive factor might be a parent who is able and willing to go to parent-teacher conferences at school to meet with a teacher.

- Child Trends: Building Protective and Promotive Factors in Afterschool Programs
- Pediatrics: Risk and Promotive Factors in Families, Schools, and Communities ResearchNational
- Research Council and Institute of Medicine: Developmental Perspective on the Study of Mental **Health Promotion**
- Youth.gov: Risk and Protective Factors for Mental, Emotional, and Behavioral Disorders in Adolescence
- National Mentoring Resource Center: Risk and Protective Factors Toolkit
- Substance Abuse and Mental Health Services Administration (SAMHSA): Risk and Protective Factors for Substance Use Disorder
- The Annie E. Casey Foundation: The Risk and Protective Factors Evidence-Based Programs for Young People Should Measure
- Child Trends: Defining the Term "At Risk"
- National Center for Children in Poverty: Young Child Risk Calculator (needs Adobe Flash enabled)
- National Research Council and Institute of Medicine: A Developmental Perspective on the Risk and **Protective Factors**



Social capital

Social capital is the nonfinancial resources associated with one's social network, relationships, or other social structures.

These resources include one's trusted social connections and their associated knowledge. Social capital is very helpful in job searches, as many positions are filled through social networks. For example, a wellconnected parent could hear about an internship opportunity through a former coworker. The parent could then leverage their connection to get their child an interview.

Resources

- The Annie E. Casey Foundation: Building Quality Networks for Young People in Foster Care
- ACT for Youth Center of Excellence: Social Capital and The Well-Being of Youth

Socioeconomic status

Socioeconomic status is "the social standing or class of an individual or group." It can be thought of as the social, educational, and economic resources that an individual or family can access.

Socioeconomic status, commonly referred to as SES, is frequently measured by education, income (poverty status), or occupation—or a combination of the three. Socioeconomic status is an important background factor that is strongly associated with the opportunities available to children. For young adults, their own socioeconomic status can also be viewed as an outcome (in addition to income).

Resources

- American Psychological Association: Children, Youth, Families, and Socioeconomic Status
- **Teaching Tolerance: Resources on Class**

School

Bullying

"Bullying is unwanted, aggressive behavior ... that involves a real or perceived power imbalance. The behavior is repeated ... or has the potential to be repeated, over time."

Bullying can be physical (e.g., tripping someone), verbal (e.g., teasing), or social (e.g., spreading rumors) and can take place in-person or online (known as cyberbullying). Bullying negatively affects both those who are bullied and those who bully others and can lead to lasting problems in self-esteem, among other consequences.

- National Center on Safe Supportive Learning Environments (NCSSLE): Bullying/Cyberbulling
- Stopbullying.gov: Stop Bullying on the Spot
- American Academy of Child & Adolescent Psychiatry: Facts for Families, Bullying
- Child Trends: DataBank Indicator on Trends in Bullying



Risk, protective, and promotive factors: school level

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At the school level, a risk factor might include school violence. A protective factor might be a school counselor who supports students who have been bullied, and a promotive factor might be a school counselor who proactively teaches social and emotional learning lessons to students throughout the school.

Resources

- <u>Child Trends: Building Protective and Promotive Factors in Afterschool Programs</u>
- Pediatrics: Risk and Promotive Factors in Families, Schools, and Communities Research
- National Research Council and Institute of Medicine: Developmental Perspective on the Study of Mental Health Promotion
- Youth.gov: Risk and Protective Factors for Mental, Emotional, and Behavioral Disorders in Adolescence
- National Mentoring Resource Center: Risk and Protective Factors Toolkit
- Substance Abuse and Mental Health Services Administration (SAMHSA): Risk and Protective Factors for Substance Use Disorder
- The Annie E. Casey Foundation: The Risk and Protective Factors Evidence-Based Programs for Young People Should Measure
- Child Trends: Defining the Term "At Risk"
- National Center for Children in Poverty: Young Child Risk Calculator (needs Adobe Flash enabled)
- National Research Council and Institute of Medicine: Developmental Perspective on Risk and **Protective Factors**

School climate

"School climate is a broad [multidimensional] concept that involves many aspects of the student's educational experience. A positive school climate is the product of a school's attention to fostering safety; promoting a supportive academic, disciplinary, and physical environment; and encouraging and maintaining respectful, trusting, and caring relationships throughout the school community no matter the setting—from Pre-K/Elementary School to higher education."

While typically applied in K-12 settings, the concept of school climate can be applied in higher education, training programs, and after-school settings.



Resources

- National Center on Safe and Supportive Learning Environments (NCSSLE): Safe Supportive **Learning Website**
- Youth.gov: School Climate Webpage
- Child Trends: DataBank Indicator Key Facts About Safety at School

Neighborhood

Built environment

"The built environment includes all of the physical parts of where [people] live and work (e.g., homes, buildings, streets, open spaces, and infrastructure)."

The physical or emotional safety (or lack thereof) of the built environment can affect a person's health and well-being. From materials in the house (such as lead paint) to outside factors (such as access to green spaces), the built environment can have lasting effects and often contributes to (or exacerbates) health, academic, and social problems in youth.

Resources

- Child Trends: Video, Protecting Kids from Lead Exposure
- Child Trends: The United States Can and Should Eliminate Childhood Lead Exposure
- Child Trends: Children are Still Being Exposed to Lead—Policymakers Can Change That
- Child Trends: Redlining Has Left Many Communities of Color Exposed to Lead
- Centers for Disease Control and Prevention (CDC): Children's Health and the Build Environment
- National Center on Safe and Supportive Learning Environments (NCSSLE): Physical Environment

Community connectedness

Community connectedness (community cohesion) is "the strength and quality of ties between members of a community."

Community connectedness can be described as an external asset, or a protective factor.

Resources

- Prevent Violence NC: Resources on Community Connectedness
- Centers for Disease Control and Prevention (CDC): Adolescent Connectedness Resource Page
- Centers for Disease Control and Prevention (CDC): Connectedness to Prevent Suicidal Behavior

Food desert

Food deserts are communities or regions where access to fresh fruit, vegetables, and other healthful whole foods is limited and income is low.

Food desert is a broad term that captures multiple ways in which the federal government attempts to measure low-access food areas. These are defined by either the number or percent of people in a census tract who have limited food access. Specifically, the United States Department of Agriculture (USDA) calculates—using four different measures—the number of people who reside a certain distance from a supermarket, supercenter, or large grocery store. Three measures are based on distance alone and account for geography (rural versus urban). A fourth measure also accounts for the number of people who lack



vehicle access to get to a store. The USDA provides maps of the United States that categorize different areas using these four measures so that people can determine whether they live in a food desert.

While food deserts lack grocery stores, farmers' markets, and healthy food providers, they frequently have convenience stores that provide processed foods high in sugar and fat that are known contributors to our nation's obesity epidemic. Food from such sources is often more costly by volume than in stores where bulk ingredients can be purchased.

Resources

- American Nutritional Association: U.S. Department of Agriculture's (USDA) Food Desert Initiative
- **Economic Research Service: Definitions, Food Deserts**

Juvenile justice system

The juvenile justice system is the governmental system that responds to legal misbehavior by juveniles.

The juvenile justice system is separate from the criminal justice system, which responds to legal misbehavior by adults. (Misbehavior by family members that affects children, especially when not criminal, is generally handled by the child welfare system and family courts; in some states, the juvenile court is part of family court.) Delinquent behaviors are acts committed by juveniles that would be crimes if committed by adults. Juveniles are also prohibited from other behaviors solely by virtue of their age—such as skipping school or drinking alcohol—which are known as status offenses. The age at which a youth becomes an adult for justice system purposes is largely a matter of state law, but is typically at age 18.

The juvenile justice system is responsible for handling youth from the time they are suspected of a delinquent act until their post-sentencing supervision has ended. The system includes police, prosecutors, judges, social workers, and probation officers.

Current systems that serve juveniles throughout the United States are often not designed to meet the unique needs of adolescents and young adults. More than 45,000 youth were incarcerated in residential facilities in 2016. However, the involvement of juvenile offenders in the juvenile justice system is often ineffective at reducing recidivism and can hinder adolescent and young adult cognitive and social development and transitions to self-sufficiency in adulthood.

Resources

- Child Trends: <u>DataBank Indicator on Juvenile Detention</u>
- Child Trends: How Brain Science is Changing Juvenile Justice Sentencing
- Child Trends: <u>Bridging The Research-to-Practice Gap in Juvenile Justice</u>
- Youth.gov: Juvenile Justice System Involvement
- Urban Institute: Strategies For Reducing Youth Involvement in the Juvenile Justice System

Neighborhood safety

Neighborhood safety is a variously defined measure that includes many different aspects of physical spaces that make youth feel safe and secure, including access to high-quality sidewalks, parks, and community centers.

The presence of crime and gangs, and exposure to violence and drug activity, contribute to a perceived lack of safety. Perceived neighborhood safety is found to differ based on community racial and ethnic makeup and is tied to socioeconomic status or poverty.

Resources

Child Trends: DataBank Indicator, Key Facts about Neighborhood Safety



Centers for Disease Control and Prevention (CDC): Disparities in Adolescents' Residence in Neighborhoods Supportive of Physical Activity

Risk, protective, and promotive factors: neighborhood level

Risk factors are experiences or <u>characteristics</u> associated with an <u>increased risk of a negative outcome</u>. Protective factors are <u>characteristics</u> or experiences that <u>reduce</u> the probability of a negative outcome. Promotive factors are <u>characteristics</u> or experiences that increase the likelihood of a positive outcome.

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At the neighborhood level, a risk factor might include **neighborhood violence**. A protective factor might be a neighborhood community center that provides afterschool programming for youth and young adults, and a promotive factor might be a neighborhood committee that actively seeks out youth and young adult perspectives on community issues or concerns.

- Child Trends: Building Protective and Promotive Factors in Afterschool Programs
- Pediatrics: Risk and Promotive Factors in Families, Schools, and Communities Research
- National Research Council and Institute of Medicine: Developmental Perspective on the Study of Mental Health Promotion
- Youth.gov: Risk and Protective Factors for Mental, Emotional, and Behavioral Disorders in Adolescence
- National Mentoring Resource Center: Risk and Protective Factors Toolkit
- Substance Abuse and Mental Health Services Administration (SAMHSA): Risk and Protective Factors for Substance Use Disorder
- The Annie E. Casey Foundation: The Risk and Protective Factors Evidence-Based Programs for Young People Should Measure
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- National Research Council and Institute of Medicine: Developmental Perspective on Risk and **Protective Factors**



Cultural Context and Bias

Ableism

Ableism is bias against individuals with disabilities—both physical disabilities and those that are cognitive, or not visible.

Ableism is based on a belief system that views persons with disabilities as being "less worthy of respect and consideration, less able to contribute and participate, or of less inherent value than others." At the individual level, ableism may be implicit or explicit. Ableism is also "embedded in institutions, systems or the broader culture of a society in the way that the world has been designed for able-bodied people. It can limit the opportunities of persons with disabilities and reduce their inclusion in the life of their communities." For example, a young person who uses crutches faces ableism when they cannot access part of a tour on a field trip because there is not an elevator.

Resources

TEDx: The Discrimination You've Never Heard Of, Video

Ageism

Ageism is prejudice or discrimination based on a person's age.

Ageism is often used to describe a particular prejudice against older people who may experience discrimination because of the perception that they are unable to use the latest technology or may require others to speak loudly and slowly to them. Workers ages 40 and older are protected by the Equal Employment Opportunity Commission's (EEOC) regulations on discrimination in the workplace; however, young people are not protected by these regulations and can also experience ageism. For example, some employers may not value youth voice or experience, not believe that a young person has enough experience to do a job well, or manage youth in a condescending way.

Resources

- The Equal Employment Opportunity Commission's (EEOC): Youth Resources Page
- Society for Human Resource Management (SHRM): Hiring in the Age of Ageism

Bias

Bias is prejudice against certain groups; it can also refer to preferential biases, especially toward one's own

Biases can take many forms, including implicit and explicit biases, and can be directed at any person or any group. Common examples of bias include the "-isms"—ableism, ageism, racism, sexism, and heteronormativity—in addition to biases based on religion.

Research in brain science finds that biases are often learned from a very young age from parents, family members, other adults, and the larger culture. Preferences that are modeled and often reinforced over time can lead to "hidden" biases that people may be unaware of in others or themselves. Youth may be negatively impacted by bias if they are part of a group that experiences frequent bias. For example, a math teacher may give female students unfairly low grades because they have a bias against girls. Biases may also exist in the way systems interact with members of different groups, as in institutional racism. These institutional biases may result from the way systems are organized, beyond any biases that each of the individual actors in the system may have.



Resources

- UCLA's Office of Equity, Diversity and Inclusion: Confronting Bias
- Health Care Education and Training: Addressing Implicit Bias to Better Serve Youth

Explicit bias

Explicit bias is a person's conscious preferences, attitudes, thoughts, values, or beliefs—generally against certain groups.

People can have explicit biases against groups of people by race, gender, sexual orientation, income, age, and more. Biases can be expressed across three components: emotions, beliefs, and behaviors. For example, one may have an emotional response (dislike) to certain groups of people. One may also have beliefs about groups (e.g., that certain groups of people are more violent than others). Whether inaccurate or accurate at the group level, beliefs may lead to unequal and unfair behavior toward individuals. Group-based beliefs can also lead to behaviors that reinforce those very beliefs. For example, a teacher's belief that first-generation immigrants are worse at academics may lead to less teacher attention, leading to worse performance from the student. Finally, one may engage in biased behavior—for example, treating LGBTQ youth differently than straight youth. All three of these (emotions, beliefs, and behaviors) can be based on conscious biases.

Explicit biases are problematic when they have differentially negative impacts on different people. An explicit bias against gay or lesbian individuals might mean that a person uses slurs to refer to individuals from these groups. Alternatively, a teacher with an explicit racial bias may provide fewer opportunities to a student of color.

Resources

- Perception Institute: Explicit Bias
- Community Relations Services: Resource Guide on Understanding Bias

Implicit bias

Implicit bias is a person's unconscious preferences, attitudes, thoughts, values, or beliefs—generally against certain persons, groups, or things.

For example, a teacher may unconsciously believe that a male student has better math skills than a female student simply because he is a boy. This may imply a systematic implicit bias by sex and may lead this teacher to offer more support to boys. At times, this bias can be self-fulfilling if the additional support results in boys doing better and confirms the implicit bias. In fact, research finds that implicit biases influence behaviors more than explicit biases.

Implicit biases are frequently measured by implicit association tests. These tests measure the "strength of the association between concepts (e.g., black people, gay people) and evaluations (e.g., good, bad) or stereotypes (e.g., athletic, clumsy). The main idea is that making a response is easier when closely related items share the same response key." Essentially, the test would pick up an implicit bias by race if a person was faster at linking "White = good" and "Black = bad" than vice versa. Tests have been developed to determine implicit biases around social norms but also around anxiety, exercise, alcohol, and more. A link to the Harvard implicit bias project is provided in the resources.

- UCLA's Office of Equity, Diversity and Inclusion: <u>The Real-World Consequences of Implicit Bias.</u>
- UCLA's Office of Equity, Diversity and Inclusion: <u>Implicit Association Tests</u>, <u>Video</u>
- University of Minnesota Extension: Implicit Bias in Youth Work
- Project Implicit at Harvard: Collection of Implicit Association Tests



Heterosexism

Heterosexism is bias against lesbian, gay, bisexual, transgender, or queer (LGBTQ) people (see sexual orientation).

Heteronormativity, or the belief system that assumes "that the overwhelming majority of sexual relationships in society are [or should be] heterosexual," drives heterosexism and homophobia and is the dominant moral code of conduct in the United States and in most other societies. This moral code implies that other arrangements are immoral or aberrational. In a heteronormative society, the burden of explaining oneself is placed on the person whose sexual orientation varies from the societally expected behavior—for example, on a woman who needs to add a box to refer to her wife instead of her husband on health insurance forms, or a young person who is assumed to be attracted to the opposite sex until they come out to family and friends.

Resources

- NBC News: The Problem with Heteronormativity, Video
- Teaching Tolerance: Why Heteronormativity is Harmful
- TEDx: What Children Learn From the Things They Aren't Told, Video

Homophobia

Homophobia is the fear of, hatred or discomfort with, or mistrust of people who are lesbian, gay, or bisexual.

Relatedly, biphobia is discomfort with—or fear, hatred, or mistrust of—people who are bisexual. Transphobia is discomfort with—or fear, hatred, or mistrust of—people who are transgender, genderqueer, or do not follow traditional gender norms. While these terms are related, they are not the same as homophobia: Both gay and straight people can be homophobic, biphobic, or transphobic. Homophobia can include negative attitudes and beliefs, bias against gay people, heterosexism, or aversion. This hatred is often not based on personal, negative experiences; in fact, personal interactions with people who are gay, lesbian, bisexual, or transgender have been found to reduce homophobia among health care providers.

Resources

- Teaching Tolerance: Exposing Hidden Homophobia
- National Institutes of Health (NIH): Heterosexism & Homophobia

Racial equity

Racial equity is both an outcome and a process. As an outcome, racial equity is a condition that will be achieved when racial identities do not predict how youth fare in life and when race is unrelated to the advantages and disadvantages that societies confer, or to socioeconomic and other outcomes. For youth, a state of racial equity would mean that students of all races would have not only an equal chance of attending a high-quality school but also an equal chance of being successful across all dimensions in that school.

Racial equity is also a process that requires a recognition of the structures and systems that create or perpetuate inequities. The racial equity perspective moves beyond individual discrimination to include addressing the root causes of inequities, including policies, practices, and attitudes that reinforce or fail to eliminate inequities. The process also meaningfully involves groups who are most impacted by inequity.



Resources

- Child Trends: A Guide to Incorporating a Racial and Ethnic Equity Perspective Throughout the Research Process
- Racial Equity Tools: Tools, research, and other resources on racial equity

Racism

Racism is bias against people because of their race—a bias that is reinforced by power and resources. The Annie E. Casey Foundation's Race Equity and Inclusion Action Guide defines racism as "a complex system of racial hierarchies and inequities." While internalized and interpersonal racism occur at the individual level, institutional and structural racism occur at the societal level. The guide referenced above defines these four terms as follows:

Internalized racism describes the private racial beliefs held by and within individuals. The way we absorb social messages about race and adopt them as personal beliefs, biases and prejudices are all within the realm of internalized racism. For people of color, internalized oppression can involve believing in negative messages about oneself or one's racial group. For white people, internalized privilege can involve feeling a sense of superiority and entitlement, or holding negative beliefs about people of color.

Interpersonal racism is how our private beliefs about race become public when we interact with others. When we act upon our prejudices or unconscious bias — whether intentionally, visibly, verbally or not — we engage in interpersonal racism. Interpersonal racism also can be willful and overt, taking the form of bigotry, hate speech or racial violence.

Institutional racism is racial inequity within institutions and systems of power, such as places of employment, government agencies and social services. It can take the form of unfair policies and practices, discriminatory treatment and inequitable opportunities and outcomes. A school system that concentrates people of color in the most overcrowded and under-resourced schools with the least qualified teachers compared to the educational opportunities of white students is an example of institutional racism.

Structural racism (or structural racialization) is the racial bias across institutions and society. It describes the cumulative and compounding effects of an array of factors that systematically privilege white people and disadvantage people of color. Since the word "racism" often is understood as a conscious belief, "racialization" may be a better way to describe a process that does not require intentionality. Race equity expert john a. powell writes: "'Racialization' connotes a process rather than a static event. It underscores the fluid and dynamic nature of race ... 'Structural racialization' is a set of processes that may generate disparities or depress life outcomes without any racist actors."

- Child Trends: DataBank indicator on Racial/Ethnic Distribution of Child Population
- The Annie E. Casey Foundation: <u>Understanding the Basics of Dismantling Racism in Child-Serving</u> Systems
- The Annie E. Casey Foundation: Race Equity and Inclusion Action Guide
- Child Trends: A Guide to Incorporating a Racial and Ethnic Equity Perspective Throughout the Research Process



Risk, protective, and promotive factors: cultural context

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At the cultural context level, a risk factor might include experiences of racism. A protective factor might be attending a school that tracks whether there are disparities in disciplinary actions by race or gender, and a promotive factor might be a community center that brings diverse youth together on teams and in classes.

Resources

- Child Trends: Building Protective and Promotive Factors in Afterschool Programs
- Pediatrics: Risk and Promotive Factors in Families, Schools, and Communities Research
- National Research Council and Institute of Medicine: Developmental Perspective on the Study of Mental Health Promotion
- Youth.gov: Risk and Protective Factors for Mental, Emotional, and Behavioral Disorders in Adolescence
- National Mentoring Resource Center: Risk and Protective Factors Toolkit
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- National Center for Children in Poverty: Young Child Risk Calculator (needs Adobe Flash enabled)
- National Research Council and Institute of Medicine: Developmental Perspective on Risk and **Protective Factors**

Sexism

Sexism is bias against people because of their sex or gender. Sexism is typically exhibited against women and girls and occurs at individual and structural levels.

For example, at the individual level, a teacher may be more likely to call on boys than girls in math class because of an expectation that boys are better in math. At the structural level, many employers ask about salary histories in interviews, which could limit some women's ability to receive equitable pay because of their histories of lower salaries than men. A 2016 state law in Massachusetts limits an employer's ability to ask about salary history in a job interview, which is meant to discourage employers from relying on past salary histories.



- Teaching Tolerance: <u>Articles, Learning Plans, Webinars, and Other Resources on Gender and Sexual</u> <u>Identity</u>
- American Civil Liberties Union (ACLU): Sex Discrimination: Scenarios and Rights



Interventions for Adolescents and Young Adults

Active listening

Active listening is a communication approach that involves a listener fully concentrating, understanding, responding to, and remembering what a speaker says.

In active listening, the listener concentrates on what is being said, as well as the feelings or emotions being communicated by the speaker. Both the content being shared, and the feelings being communicated provide information on the substance of the speaker's communication. Listeners can confirm what they are hearing by using statements like, "It sounds to me like you're feeling ... Is that true?" or, "Am I right that you're saying ...?"

Staff in programs that serve youth and young adults can and should use active listening techniques when interacting with youth. Youth should be able to communicate openly with staff and know that they are being heard. Active listening is one way to promote positive youth development in a program. Empathetic listening is another term used to describe this communication style, with a strong focus on the emotions and feelings being communicated.

Resources

- Gordon Training International: Active Listening
- Center for Creative Leadership: Use Active Listening to Coach Others
- Boston University: Active Listening, Tips
- United States Institute for Peace: What is Active Listening?

Apprenticeships

Apprenticeships are a training system wherein youth can work for an employer while they learn about a particular industry or occupation.

Apprenticeships represent one way for youth to embark on a trajectory toward a higher-quality job. These experiences are often paid, and the apprentice typically receives an industry-issued credential and/or academic credits during the program timeline. Youth apprenticeships are more common in healthcare, construction, and information technology.

Resources

- U.S. Department of Labor, Aprenticeship.gov: Your One-Stop Source for All Things Apprenticeship
- New America: What is Youth Apprenticeship? Definition and Guiding Principles for High-Quality
- Center for Apprenticeship & Work-Based Learning: Partnership to Advance Youth Apprenticeship

Arts education

Arts education is a process to equip youth with the skills to produce art and to consume and interpret it.

It occurs in both <u>structured classroom</u> settings and in settings where youth can explore artistic expression more broadly, such as programs that provide extracurricular opportunities to engage in visual art,



performance, design, dance, spoken work, or music. These can be opportunities for youth to learn about the past or use artistic means to express their own experiences, opinions, or creative interpretations of the world.

Arts education or extracurricular arts expression programs can be a useful therapeutic tool for individual and group settings. Arts education has been found to reduce stress levels in children in high-stress environments, as well as improve academic and social outcomes such as school attendance and grades. Arts instruction also reportedly improves overall school climate and is an opportunity for youth to celebrate their own cultures and learn about others'. Arts education funding cuts have disproportionately affected African American and Hispanic children, limiting their access to art expression as a potential intervention.

Resources

- Child Trends and Ivanhoe Broadcast News: The Arts as Therapy, Video
- Child Trends: <u>It Matters Performing Arts</u>
- American Psychological Association: Express Yourself! Psychologists Are Bringing Creative Arts Therapies into the Mainstream
- National Endowment for the Arts: New Look at the NEA's Survey of Public Participation in the Arts

Brain science-informed interventions

Brain science-informed interventions translate scientific evidence from neuroscience, experimental psychology, and neuropsychiatry to practices that can be used in an applied program or service delivery setting to improve participants' outcomes.

There is evidence that some approaches, such as mindfulness (article) or cognitive behavioral therapy (article), actually change participants' brain activity or structure in ways that suggest that long-term benefits of interventions may be occurring. Other programs and approaches may have similar impact, but neuroscience-based outcomes have not yet been evaluated. Programs that serve youth and young adults will ideally recognize that adolescents are less proficient in abstract thinking and have increased sensitivity to rewards and insensitivity to risk (which may contribute to sensation seeking in all youth and impulsive behavior in some youth), and that their decision-making ability is reduced in novel or emotionally charged situations. There are multiple interventions that programs can use to help youth and young adults develop their ability to reason, consider probabilities, envision multiple behavior alternatives, anticipate and manage emotions, and provide an opportunity to practice these skills.

Trauma-informed care is an example of such an intervention that relates to the impact of trauma on brain development. Trauma-informed care integrates knowledge of trauma into policies, procedures, and practices, but specific interventions may require specialized strategies or treatments to facilitate healing and appropriate development. For example, neglect has different effects on brain development than maltreatment, so knowledge of the intervention population could inform inputs that are necessary to scaffold learning and brain development. Children who experience deprivation may benefit from an environment focused on enrichment, while the biological systems of children who have experienced maltreatment may be more reactive. Creating a safe and welcoming space is key. Some children may experience both of types of adverse experiences.

- Annie E. Casey Foundation: Adolescent Brain Development Resources
- ACT for Youth: Toolkit: Domains of Development
- Office of Adolescent Health (OAH): Positive Youth Development Resources
- Journal of Adolescent Health: Leveraging Neuroscience to Inform Adolescent Health: The Need for an Innovative Transdisciplinary Developmental Science of Adolescence



Career and technical education programs

Career and technical education (CTE) programs are training opportunities where students learn about and prepare for their future careers.

These programs provide youth with the academic and work-related knowledge and skills to be successful in postsecondary education, training, and employment. CTE programs are often adapted to meet the training and employment needs of their region. CTE is federally funded by the Perkins Act, which was reauthorized in 2018.

Resources

- U.S. Department of Education: <u>Career and Technical Education</u>
- National Center for Education Statistics (NCES): Career and Technical Education, Fast Facts
- Youth.gov: Career Exploration and Skill Development

Coaching

Coaching involves working with youth one-on-one to encourage a proactive approach to setting and reaching goals and addressing challenges.

Coaching can address multiple topics, including general life coaching and more specific career coaching. Often, coaches help youth and young adults identify their strengths and challenges to build on the former and target extra support for the latter. Coaching is similar to mentoring, although coaching often takes place in a more formal setting and is focused on achieving an end goal that the young person sets for themselves. Coaching techniques can also be used to support staff members.

Other common phrases for coaching are life coaching or career coaching.

Resources

- Annie E. Casey Foundation: Pilot Project Embraces Executive-Skills Coaching for Young People
- Annie E. Casey Foundation: A Closer Look: The Generation Work Partnership in Indianapolis
- Center for Applied Behavioral Science at MDRC: The Future of Executive-Skills Coaching and Behavioral Science in Programs that Serve Teens and Young Adults
- The Excel Center: Academics: It's Never Too Late to Earn Your High School Diploma
- Crittenton Women's Union: Coaching for Economic Mobility

Cognitive behavioral therapy

Cognitive behavioral therapy (CBT) is a therapeutic approach focused on changing the patterns of thoughts, beliefs, and attitudes to ultimately change behavior and emotion.

The <u>CBT approach</u> focuses on helping people learn better ways of coping that can lead to an improvement in their life. This treatment approach has been used to address a wide range of problems, including depression, anxiety, alcohol and drug use, and eating disorders, and has been used with both adolescents and young adults. CBT is typically done in one-on-one sessions with a trained therapist or counselor.

Trauma-Focused or Trauma-Informed CBT are adaptions that focus on individuals who may be experiencing symptoms of post-traumatic stress disorder (PTSD), with the aim of decreasing their PTSD symptoms so they can have less life disruption from those symptoms.



Archives of Disease in Childhood: Cognitive behavior therapy in children and adolescents

- Annual Review of Clinical Psychology: Developmental Demands of Cognitive Behavioral Therapy for Depression in Children and Adolescents: Cognitive, Social, and Emotional Processes
- Mayo Clinic: Overview of Cognitive Behavioral Therapy

Developmental relationships

Developmental relationships are close connections with caring adults.

By expressing care, challenging youth to grow, providing necessary emotional and logistical support, sharing power, and expanding what youth think is possible, adults who engage in developmental relationships support young people to cultivate the ability to shape their own lives and learn to engage with and contribute to the world around them. Youth programs are one place where youth can build these strong and supportive relationships with program staff. Programs that consider developmental relationships central to their programming may consider themselves to be **relationship-based**.

Resources

- Search Institute: The Developmental Relationships Framework
- American Journal of Orthopsychiatry: <u>Developmental Relationships as the Active Ingredient: A</u> Unifying Working Hypothesis of "What Works" Across Intervention Settings

Didactic lectures

Didactic lectures, also called direct instruction, are a teacher-led learning approach in which students are passive learners, receiving knowledge directly from teachers during lectures.

There is limited evidence that didactic lectures support behavior change, but the technique is arguably successful for increasing knowledge.

See experiential learning to learn more about a different learning approach that is centered on learning by doing.

Resources

State Library of North Carolina: Definition of Didactic Instruction

• American Physiological Society: <u>Don't Dump the Didactic Lecture</u>; Fix It

Entitlements

Entitlements are "Federal program[s] or provision[s] of law that requires payments to any person or unit of government that meets the eligibility criteria established by law. Entitlements constitute a binding obligation on the part of the Federal Government, and eligible recipients have legal recourse if the obligation is not fulfilled."

Youth may benefit from entitlement programs, including the Supplemental Nutrition Assistance Program (SNAP), Medicaid, and housing assistance. Youth programs can best support youth and young adults when all of their basic needs are met, so it may be valuable to help students attain entitlements and other government-provided benefits for which they qualify.

Resources

United States Senate: <u>Definition of Entitlements</u>

U.S. Department of Health & Human Services (HHS): Programs that Use the Poverty Guidelines as a Part of **Eligibility Determination**



USA.gov: Government Benefits

Experiential learning

Experiential learning involves learning through doing.

Experiential learning contrasts with didactic lectures and includes a four-step process in which youth 1) have an experience, 2) reflect on that experience, 3) learn from the experience, and 4) plan to use what they learned in future lessons or challenges. Some examples of experiential learning include internships, apprenticeships, and project-based learning.

Resources

- SimplyPsychology: Kolb's Learning Styles and Experiential Learning Cycle
- Association for Experiential Education: What is Experiential Education?
- Association of American Colleges & Universities: The Power of Experiential Learning
- University of California, Division of Agriculture and Natural Resources: Experiential Learning **Homepage**
- University of California, Division of Agriculture and Natural Resources: Experiential Learning
- University of California, Division of Agriculture and Natural Resources: <u>Experiential Learning</u> **Training Modules**
- American Journal of Education: <u>Experiential Learning Programs for Youth</u>

Family-centered coaching

Family-centered coaching is a form of coaching that accounts for the needs and perspectives of the whole family. Families are treated holistically, with support from providers to best meet the complex needs of family members. To support diverse families' unique needs, programs must be culturally responsive, genderand age-appropriate, flexible to support varying and complex family needs, and coordinated across multiple systems. Programs like two-generation models center on family needs as well.

Family-centered coaching may require that coaches work with families using trauma-informed care approaches.

Resources

- The Aspen Institute: Family-Centered Coaching
- The Prosperity Agenda: Meeting Families Where They
- W.K. Kellogg Foundation: Family-Centered Coaching: A Toolkit to Transform Practice and **Empower Families**
- Center on Budget and Policy Priorities: Building Better Programs

Fear-based

<u>Fear-based</u> programming is that which focuses on scaring youth into not engaging in misbehavior.

For example, Scared Straight programs have required adolescents to visit prisons to experience life behind bars, although in rigorous evaluations this has been found to be counterproductive and lead to more delinquent behavior. In addition, fear-based programming sometimes exaggerates harmful effects, omits key information, contains medical inaccuracies, and may be grounded in misleading moral imperatives. Fearbased programming has been used quite extensively in health-based interventions (e.g., risky driving, drugs, sex education), as well as in mainstream media, and is often aimed at adolescents and young adults.



Fear-based programming is also known as shame-based programming.

Resources

The University of Texas, Health Science Center at Houston: The Effectiveness of Fear-Based Appeals for **Public Health Programs**

• Society for Research in Child Development: <u>Commentary: Positive Youth Development Goes</u> Mainstream

Goal-setting

Goal-setting programs focus on helping youth set reasonable and achievable goals.

These programs generally focus on youths' own aspirations and support youth to consciously make decisions about the future. The goals should be reachable, draw on the strengths of the individual, inform a plan of action, and consider any barriers or obstacles that may prevent the goals from being met. Goalsetting can be used to effect long-term behavior change.

Different tools may be used to implement goal-setting initiatives. For example, SMART goals (Specific, Measurable, Achievable, Realistic, Time Based) and STAR goals are two ways to structure goal-setting. Goalsetting can look very structured in some instances and other times be broader and more flexible.

Resources

- University of Kansas: Community Toolbox: Youth Goal-Setting
- The YMCA: How Setting Goals Helps Teens Succeed
- Child Trends: El Camino: A Goal-Setting Teen Pregnancy Prevention Program

Healthy foods

Healthy foods are those that provide adequate nutrition to keep a person in good health, support healthy growth and development for children and adolescents, and minimize the likelihood of obesity, diabetes, and other health conditions associated with a poor diet.

Healthy foods may vary for different people, but they should generally meet nutritional guidelines from the federal government, healthcare organizations (like the AAP), or dieticians —i.e., include enough fruits and vegetables, proteins, vitamins, and other nutrients.

Proper nutrition is essential for healthy growth and brain development. Interventions designed to improve adolescents' eating habits and combat obesity and malnutrition take many forms, including the provision of vitamins, behavioral-based interventions designed to increase intake of healthy foods or decrease intake of unhealthy foods, and technology-based interventions or campaigns designed to increase knowledge of nutrition. Nutrition interventions are frequently paired with physical activity interventions, which may increase their effectiveness.

- U.S. National Library of Medicine: Nutritional Interventions for Adolescents Using Information and Communication Technologies (ICTs): A Systematic Review
- U.S. National Library of Medicine: <u>Interventions to Improve Adolescent Nutrition: A Systematic</u> **Review and Meta-Analysis**
- U.S. Department of Health & Human Services (HHS): How to Eat Healthy: Eight Healthy Eating Goals



Incentives

Incentives are rewards that encourage an individual to participate in a program or to study, learn, or achieve a goal. They may cover costs such as transportation or provide food, but they are often monetary

Incentives can be used to promote engagement in a program or encourage certain behaviors. They can motivate youth to participate in activities that they might not have been interested in initially. For example, young people may not be interested in an after-school internship, but a small incentive may encourage them to participate and engage. However, unless the program experience leads to the development of intrinsic motivation to continue participating, participation may end when incentives are terminated.

Monetary incentives may play an important role in increasing participation in programs. For example, providing a stipend for participation may help youth train for a job without needing to work during training, which could in turn motivate some youth to participate in the trainings.

Resources

- Child Trends: <u>Using Incentives to Increase Participation in Out-of-School Time Programs</u>
- University of California, Division of Agriculture and Natural Resources: Incentives and Recognition, California 4-H Youth Development Program

Individualized approaches

An individualized approach in a program is one that does not assume that all participants start from the same point; such programs avoid taking a "cookie-cutter" approach.

Rather, programs that use individualized approaches work to understand youths' developmental and cultural stages, and tailor their resources and supports to individual youth.

Practitioners frequently refer to these practices as "meeting participants where they are."

Resources

- Urban Institute: Rethinking Sex Ed: Meet Youth Where They Are
- Child Trends: El Camino: A Goal-setting Teen Pregnancy Prevention Program
- Child Trends: The PILOT Assessment: A Guide to Integrating Positive Youth Development into **Workforce Training**

Job shadowing

Job shadowing is a work-based opportunity where youth follow a professional for one or more days to learn about an occupation or industry. Job shadowing experiences are usually educational and provide opportunities for youth to perform small tasks or meet with people in the workplace to learn about career opportunities.

Job shadowing is sometimes called work shadowing.

- Minnesota State Career and Technical Education: Recommendations for Job Shadowing
- The Universities at Shady Grove: Job Shadowing



Life skills training

<u>Life skills training programs</u> aim to increase positive behaviors and competencies in youth and young adults around psychosocial, emotional, cognitive, behavioral, and resilience skills.

Some programs also teach youth how to prevent and avoid risks. Skills that can be developed include communication, assertiveness, boundary setting, self-awareness, decision making, problem solving, and critical and creative thinking. Trainings are aimed at helping youth have better educational, employment, and life outcomes.

Resources

- Youth.gov: TAG in Action: Successful Strategies
- Administration for Children & Families (ACF): Support Services for Youth in Transition: Life Skills
- Center on the Developing Child at Harvard: Building the Core Skills Youth Need for Life: A Guide for Education and Social Service Practitioners

Mentoring

Mentoring is the practice of matching a youth (mentee) with a responsible, caring mentor (usually an adult) who can develop an emotional bond with the mentee, share their greater experience, and provide support, guidance, and opportunities to help youth succeed in life and meet their goals.

Mentoring has been growing in popularity in recent decades as both a prevention and intervention strategy. Mentoring relationships can be formal or informal, located within the community or in schools, and have substantial variation; however, effective mentors must seek to create caring, empathic, consistent, and longlasting relationships, often with some combination of role modeling, teaching, and advising. Mentoring programs consider themselves to be relationship-based.

Resources

- Child Trends: What Works for Mentoring Programs: Lessons from Experimental Evaluations of Programs and Interventions
- The National Mentoring Partnership: Home Webpage
- Harvard Business Review: What The Best Mentors Do
- American Psychological Association: <u>Introduction to Mentoring</u>: A <u>Guide to Mentors and Mentees</u>

Mindfulness

Mindfulness practices aim to establish a nonjudgmental moment-by-moment awareness of a person's thoughts, feelings, bodily sensations, and surrounding environments. This can be accomplished through meditative techniques, breathing exercises, or mindful movement.

These practices can rewire the areas of the brain responsible for emotion regulation and perspective taking. Youth programs can integrate mindfulness practices to help youth cope with a variety of experiences, including stress and trauma.

- Foundation for a Mindful Society: What is Mindfulness?
- Mayo Clinic: Mindful Exercises
- Mindfulness in Schools Project: Mindfulness. What is It?
- Mindfulness: Mindfulness Interventions with Youth: A Meta-Analysis



Motivational interviewing

Motivational interviewing is a method "that helps people resolve ambivalent feelings and insecurities to find the internal motivation they need to change their behavior. It is a practical, empathetic, and short-term process that takes into consideration how difficult it is to make life changes."

Motivational interviewing was developed in the counseling field to address resistance to change among alcohol abusers but is now used much more broadly to identify behaviors that clients want to change. It is a client-centered technique in which the counselor elicits motivation from within the client rather than forcing it upon them. Motivational interviewing is one way that programs can "meet people where they are" because it seeks to have them define what issues they would like to focus on. It promotes change by helping the client identify what would motivate them to want to change. Conversations focus on specific problems or challenges where the listener is empathic and skillful in helping the speaker define their own goals.

Motivational interviewing techniques can be used in youth programs to support youth voice.

Resources

- Substance Abuse and Mental Health Services Administration (SAMHSA): Spotlight on PATH Practices and Programs: Motivational Interviewing
- Case Western Reserve University, Center for Evidence-Based Practices: Motivational Interviewing
- Substance Abuse and Mental Health Services Administration (SAMHSA): Motivational Interviewing as a Counseling Style

Peer-to-peer learning

Peer-to-peer learning happens when youth learn from each other. In some cases, this means that youth codevelop lessons with an adult and teach to the entire class; it may also mean that youth work one-on-one with each other. This process requires youth to organize their content and plan how to teach it to a peer. Research has found that this approach is mutually beneficial for both the "student-teacher" and the "student." Peer-to-peer learning is also sometimes called "student teaching," although it should be understood as different from when a teacher trainee teaches.

Peer-to-peer learning is an example of experiential learning and is a very different model than didactic **teaching** methods that rely on teachers using lectures.

Resources

- Harvard Graduate School of Education: <u>Students as Teachers</u>
- George Lucas Educational Center: When Students Do the Teaching
- National Education Association: Research Spotlight on Peer Tutoring

Physical activity

Physical activity is inclusive of any movements that people do on a daily basis. Physical activity can include intentional exercise but may also include activity that happens as a part of one's life, for example, while one walks to work—or even at work or school.

Levels of physical activity tend to decrease in adolescence, so practitioners have developed interventions to increase levels of physical activity for this age group. In addition to the physical health benefits of physical activity (especially when paired with healthy eating), exercise also releases endorphins which help regulate mood. Mindfulness practices can also be integrated into physical activities, such as yoga, to combine both the emotional and physical benefits of movement and calming practices.



Resources

- National Academies of Sciences, Engineering, and Medicine: Educating the Student Body: Taking Physical Activity and Physical Education to School
- U.S. Department of Agriculture (USDA): What is Physical Activity
- World Health Organization (WHO): Physical Activity Key Facts

Positive youth development

"Positive youth development is an intentional, pro-social approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances youths' strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths."

Resources

- U.S. Department of Health & Human Services (HHS): Positive Youth Development
- Child Trends: Why Positive Youth Development Works
- Youth for Youth: The 5C's of Positive Youth Development

Project-based learning

Project-based learning opportunities arise when students and program participants work for an extended period on a project to respond to an engaging and complex problem.

Working as part of a small group, youth gain knowledge and skills through project-based learning. Such exercises make learning relevant to youth by addressing practical issues in a realistic way and establishing connections to life outside of the classroom.

Project-based learning is an example of experiential learning.

Resources

- National Education Association: Research Spotlight on Project-Based Learning
- Buck Institute for Education PBL Works: What is Project Based Learning?

Relationship-based programs

Relationship-based programs aim to build strong ties between youth and the adults who work with them. Adults work with youth to develop a strong, consistent, and youth-based relationship that is at the heart of all interactions in the program. This term is related to **developmental relationships** and **mentoring**.

- Social Work: An Introduction to Contemporary Practice: Book Review: Relationship-Based Practice - Some Fundamental Principles
- Advocates for Youth: Building Effective Youth-Adult Partnerships
- Journal of Community Psychology: Intergenerational Relationships and Partnerships in Community Programs: Purpose, Practice, and Directions for Research
- Annie E. Casey Foundation: Authentic Youth Engagement: Youth-Adult Partnerships
- Annie E. Casey Foundation: Achieving Authentic Youth Engagement: Core Values & Guiding **Principles**



Restorative practices

"Restorative practices is a social science that studies how to build social capital and achieve social discipline through participatory learning and decision making."

"In schools, restorative practices have been adopted to offer a means to respond to conflict and build relationships in an inclusive, nonpunitive way. The practices range from informal actions, such as using 'l' (affective) statements to express personal feelings to build community, to formal practices, such as responding to a student's disruptive actions in a 'responsive circle.'"

The International Institute for Restorative Practices (IIRP) defines restorative justice as a subset of restorative practices. "Restorative justice is reactive, consisting of formal or informal responses to crime and other wrongdoing after it occurs. The IIRP's definition of restorative practices also includes the use of informal and formal processes that precede wrongdoing, those that proactively build relationships and a sense of community to prevent conflict and wrongdoing."

Restorative practices support social emotional learning by providing opportunities for youth and young adults to "recognize and manage their emotions, appreciate perspectives of others, and to establish positive goals."

Resources

- RAND Corporation: Restorative Practices Help Reduce Student Suspensions
- International Institute for Restorative Practices: Defining Restorative

Role modeling

A <u>role model</u> is a person who serves as an example to others.

For many children and youth, their most important role models are their parents and caregivers. Children can also look up to a variety of role models to shape how they behave in school, form relationships, or make difficult decisions. As youth get older, they may look for role models outside of their homes, including other relatives, teachers, coaches, religious leaders, and peers. Youth may try to copy the behavior and appearance of celebrities, or of characters from books, TV, movies, or video games.

Resources

- Jim Casey Youth Engagement Initiative: Engaging Today's Youth
- The Oregon Community Foundation: Positive Adult Role Models: A Learning Brief
- Journal of Youth and Adolescence: Negative Adult Influences and the Protective Effects of Role Models: A Study with Urban Adolescents

Safe spaces

Safe spaces are places wherein people can be sure that their physical and emotional safety are advocated and protected.

A safe space may entail a work environment that ensures that work processes are done in a physically safe manner but might also mean a space wherein it is acceptable to ask for help or flexible time schedules. This term can be used interchangeably with other concepts that are commonly used in the field. Safe spaces include, but go beyond, physical safety to include psychological safety and a positive climate. Psychological safety is broadly defined as the shared belief that people are free to show and express themselves without fear of negative reactions. Safe space is a positive youth development principle and is associated with approaches used in trauma-informed care.



A safe space can be described as a positive climate wherein everyone feels safe, valued, and respected. When youth feel like they belong, they are more engaged and motivated. Safe spaces may increase belonging but also reduce both stress levels and actual threats to safety. This provides an environment for learning, developing new skills, observing positive role models, and engaging in supportive relationships.

Youth programs can intentionally create safe spaces for youth by, for example, setting agreed-upon program rules and expectations that define what is allowed at the program and what will happen if rules are broken.

Resources

- USAID, YouthPower: Safe Public Spaces for Youth
- Western Australian Centre for Health Promotion Research: Creating a Safe Space
- WestEd: Creating Trauma-Informed Learning Environments

Screenings

Screenings are relatively brief assessments that programs often use to identify possible health or mental health issues, as well as educational struggles.

In the psychological realm, screenings may be conducted to assess mental health status, suicide risk, substance use, adverse childhood experiences (ACEs), and more. In educational settings, screenings can be used to identify learning disorders. When screening results suggest that an issue may be present (known as a positive result, even for an undesirable outcome), this is generally followed by more extensive diagnostic testing and assessment.

Especially in the medical context, the goal of screenings is generally to efficiently rule problems out; however, such a process may catch people who are "false positives." A positive screen should therefore not be equated with a positive diagnosis and must be followed with more extensive testing and assessment. Screenings can be used early in youth program participation to help target and individualize services. Although not common practice, screenings could also be used to assess youth strengths. Assessing strengths is one way to create a culture more focused on positive youth development and assets.

Program leaders should make sure to consider what happens when a participant screens positive and why they want the information when planning a screening process. First, when planning to conduct a screening, it is essential that next steps are available when a positive result is found and that program leaders think about supports in advance. For example, if a program participant is screened for suicidality and found to be suicidal, it is unethical to not provide them with support or resources. Second, programs should think about whether the information they want to collect is necessary to know and consider what they will do with it. For example, many programs are interested in collecting ACEs data, but nothing in their program would change with participants' ACES information; furthermore, participants may experience trauma in discussing their past experiences. In these situations, developing a trauma-informed program that supports all participants in healthy ways may provide more effective support with less risk of re-traumatization.

Resources

- Youth.gov: Substance Abuse Prevention: Screening & Assessment
- Substance Abuse and Mental Health Services Administration (SAMHSA): Screening Tools

Service learning (community service)

Service learning activities—similar to community service—create opportunities for youth to engage meaningfully with their community with the goal of serving others.



In contrast to some community service opportunities, which focus primarily on the service component, service learning makes learning and reflection an explicit objective of the work. Service learning emphasizes the importance of progressive learning throughout the project by engaging in pre- and post-reflection—not unlike experiential learning approaches. Service learning projects may include such activities as peer-topeer tutoring systems, packing food bags for the homeless, or community clean-ups; they can also include a period of group debrief or self-reflection (sometimes guided) to help the service learner think more critically about their role.

Resources

- Vanderbilt University Center for Teaching: What is Service Learning or Community Engagement?
- University of Washington Center for Teaching and Learning: What is Service Learning?
- Johns Hopkins University: What is Service Learning?

Sex education

Sex education aims to prevent teen pregnancy and the spread of sexually transmitted infections (STIs), as well as improve adolescent relationships and, in some cases, improve knowledge of safe sex practices.

Sex education can take many forms, including sexual risk avoidance education (also known as abstinenceonly education) and comprehensive sex education. Sexual risk avoidance education focuses on not having sex until marriage, while comprehensive sex education covers a wide range of topics that may include contraceptives, consent, and sexuality.

Resources

- Pediatrics: <u>Sexuality Education for Children and Adolescents</u>
- Office of Adolescent Health (OAH): <u>Teen Pregnancy Prevention Program (TPP)</u>
- U.S. Department of Health & Human Services (HHS): Teen Pregnancy Prevention Evidence Review
- Child Trends: What Works for Adolescent Sexual and Reproductive Health: Lessons from **Experimental Evaluations of Programs and Interventions**

Social-emotional learning programs

"Social and emotional learning (SEL) is the process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions."

SEL programs are one type of life skills program. SEL practices can be built into many different types of interventions, but tend to be integrated into relationship-based, positive youth development programs that may incorporate mindfulness and youth engagement. Schools have increasingly included SEL programming in response to research findings that emotional intelligence is a strong predictor of job outcomes.

- Collaborative for Academic, Social, and Emotional Learning (CASEL): Effective Social and Emotional <u>Learning Programs for Middle and High School Students</u>
- SCE and Weikart Center for Youth Program Quality: What Can Your Organization Do to Support Social and Emotional Learning?
- Annie E. Casey Foundation: Supporting Social-Emotional Learning With Evidence-Based Programs
- Psychology Today: Emotional Intelligence Test



Social skills

Social skills are the skills individuals use to communicate and get along with other people. These are important both personally and professionally and are related to relationship building and maintenance. Positive relationships and effective interactions at work both require strong social skills such as communication, listening, or conflict resolution.

Many training programs aim to improve the competencies youth need to form and sustain positive interactions and relationships. Various activities are used in social skill development, including modeling, role-play, group work, and more. Some social skills training programs are targeted at youth generally, while others are targeted at specific groups of youth, including youth with autism spectrum disorder.

Resources

- Child Trends: What Works for Promoting and Enhancing Positive Social Skills: Lessons from **Experimental Evaluations of Programs and Interventions**
- Psychology Today: What Are Social Skills?

Strengths-based

Strengths-based strategies identify and draw upon the strengths of youth, families, and communities.

In contrast with deficit approaches, which emphasize problems and pathologies, strengths-based approaches emphasize each youth's unique set of strengths and engage that youth or young adult as a partner in developing and implementing the service plan to address challenges.

Resources

- Positive Psychology: What is a Strength-Based Approach? (Incl. Activities and Examples)
- Search Institute: The Developmental Assets Framework

Subsidized work

Subsidized work consists of employment wherein wages are supplemented in full or part by a government or other funder.

Subsidizing work is often intended to allow subsidized workers to build an employment history, which will then support employment without subsidies. Subsidized work can boost employment for youth by making it feasible or desirable for employers to hire and train youth. It also incentivizes the hiring of young people specifically who need opportunities for career growth and exploration. By decreasing the cost to employers, some of this needed time for learning and exploration is less costly to the employer.

Resources

International Labor Organization: What Works in Youth Employment

Substance abuse prevention programs

Substance abuse prevention programs focus on preventing youth from developing addictions across a variety of settings.

Evidence-based programs that may be successful in prevention often include the following key principles: Suggest a process for a community-wide review of drug abuse in all forms (e.g., underage use of legal and illegal drugs, misuse of legal substances like medical prescriptions or over-the-counter drugs); assess the appropriateness or availability of the type of drug abuse programs found in the local community; strengthen



promotive factors and reduce risk factors; and address risks specific to youth characteristics, including age, gender, and race or ethnicity. Effective programs can be two-generational, school-based, or located in community settings.

Resources

- Youth.gov: <u>Substance Abuse Prevention</u>
- National Institute on Drug Abuse (NIDA): Preventing Drug Use Among Children and Adolescents (In Brief)

Trauma-informed care

Trauma-Informed Care (TIC) is a service delivery approach that "understands and considers the pervasive nature of trauma and promotes environments of healing and recovery rather than practices and services that may inadvertently re-traumatize."

TIC aims to responsive to the impacts of trauma and "emphasizes physical, psychological, and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment." To do this, trauma-informed care integrates "knowledge about trauma into policies, procedures, and practices; and seeks to actively resist re-traumatization." With training, a traumainformed approach can be implemented in any type of service setting or organization; the approach is distinct from trauma-specific interventions or treatments that are designed specifically to address the consequences of trauma and facilitate healing.

Resources

- Annie E. Casey Foundation: Trauma-Informed Practice with Young People in Foster Care
- Case Western Reserve University, Center for Evidence-Based Practices: Trauma-Informed Care
- Child Trends: How to Implement Trauma-informed Care to Build Resilience to Childhood Trauma
- The National Center on Family Homelessness: Trauma-Informed Organizational Toolkit for **Homeless Services**
- American Institutes for Research (AIR): Trauma-Informed Care and Trauma-Specific Services: A Comprehensive Approach to Trauma Intervention
- Annie E. Casey Foundation: <u>Trauma Informed Practice with Young People in Foster Care</u>
- Child Welfare: Trauma Adapted Family Connections: Reducing Developmental and Complex Trauma Symptomatology to Prevent Child Abuse and Neglect
- Annie E. Casey Foundation: Trauma Informed Community Building Evaluation Infographic
- American Institutes for Research (AIR): <u>Trauma-Informed Organizational Capacity Scale</u> (<u>TIC Scale</u>)
- Annie E. Casey Foundation: Trauma Informed Community Building Evaluation

Two-generation approaches

Two-generation approaches focus on creating opportunities for—and addressing the needs of—both children and their parents, guardians, and/or family.

These approaches often support linkages between high-quality educational services for children and workforce development for their parents. They may also include programmatic efforts to help parents gain the skills, knowledge, and resources to support their child's development. Two-generation programs may also help families access economic and social supports needed for stability and healthy child development. Sometimes this approach is expanded to three generations.

Resources

• The Aspen Institute: What is 2Gen?



• Urban Institute: Two-Generation Approach

Wage supplements

Wage supplements are given to employees in addition to their regular wages.

Supplemental wages include bonuses, commission pay, overtime pay, payments for accumulated sick leave, severance pay, awards, prizes, back pay, retroactive pay increases, and payments for nondeductible moving expenses.

Resources

- International Labor Organization: What Works in Wage Subsidies for Youth: A Review of Issues, Theory, Policies, and Evidence
- Ray Marshall Center for the Study of Human Resources: Wage Insurance and Wage Supplements: A **Review of the Literature**
- Youth.gov: <u>Supporting Summer Youth Employment Programs</u>

Youth-driven

Youth-driven programming is based on three concepts: that youth can speak up, that their voices and opinions are heard, and that their ideas or suggestions are acted upon. It is often used to develop more engaging, personalized, and effective programs or to develop leadership skills.

This approach depends on skilled staff who can identify when to let youth guide themselves and when more adult support and/or guidance is needed. While this balance is challenging, youth-driven programming presents an important opportunity for many adolescents and young adults to enhance their learning, growth, independence, and decision making skills. When youth and young adults are listened to, it demonstrates care and gives them a safe place to share who they are, feel connected, develop interests, and take risks. Youth learn better when they are included in decision making.

Resources

- Journal of Community Psychology: A Comparison of Youth-Driven and Adult-Driven Youth Programs: Balancing Inputs from Youth and Adults
- Weikart Center for Youth Program Quality: Youth-Driven Spaces

Youth engagement

Youth engagement is the process of including young people as active participants in learning and program activities, including by letting them plan their own experiences and lives.

When youth are engaged, they are more likely to attend programs regularly and build competencies; they can also develop leadership skills, form social bonds, and improve their self-esteem. Supportive adults (potentially as mentors) are key to supporting youth to truly have a say in planning their own future. Strategies that can be used to promote engagement include opportunities for youth to voice their preferences and opinions, activities wherein youth control outcomes like goal setting, or peer-to-peer learning activities.

- Annie E. Casey Foundation: Authentic Youth Engagement
- U.S. Agency for International Development (USAID) YouthPower: Youth Engagement Measurement Guide
- Youth.gov: <u>Eight Successful Youth Engagement Approaches</u>



- ACT for Youth: Preparing for Youth Engagement: Youth Voice, Youth-Adult Partnership, Youth **Organizing**
- Society for Human Resource Management: How to Improve the Engagement and Retention of Young Hourly Workers

Youth voice

"Youth voice refers to the ideas, opinions, attitudes, knowledge, and actions of young people."

Program staff should listen to youth when providing feedback or opinions. Engaging youth voice is considered an essential element of effective organizational development among community- and youthserving organizations. Giving participants a mechanism to provide feedback and input on the program in a way that can lead to program change allows youth voices to shape a program in important ways. This, in turn, allows youth to feel more ownership and respect, and may improve overall engagement with the program.

- Collaborative for Academic, Social, and Emotional Learning (CASEL): Youth Voice: An Educational Movement that Advances Social and Emotional Learning
- Education Northwest: Four Principles for Meaningfully Incorporating Youth Voice into Programs and Services
- American Youth Policy Forum: Bringing Youth Voice to the Table
- University of Massachusetts Medical School: Youth Voice
- Annie E. Casey Foundation: Realizing the Power of Youth and Young Adult Voice Through Youth Leadership Boards



Outcomes for Adolescents and Young Adults

Cognitive Outcomes

Abstract thinking

Abstract thinking is the ability to manipulate ideas that are not related to one's present environment. It is a cognitive process that "[involves] higher-order, or complex thoughts."

While young children begin to develop basic abstract thinking (such as object permanence) as infants, development of abstract thinking continues into adolescence and early adulthood. Examples of abstract thinking for teenagers include thinking about scenarios or possible outcomes, generating new ideas or questions of one's own, understanding different ideas, facts, or opinions and responding to them conceptually, and being aware of thought processes (metacognition).

An example of an abstract thinking task for a youth could involve planning for a trip to a rainforest climate that the youth has never experienced before. The youth might think about medications, immunizations, documents, reservations, and clothing needed for the trip.

Abstract thinking is sometimes called abstract reasoning.

Resources

- University of Michigan Children's Hospital: How Adolescent Thinking Develops
- University of Rochester Medical Center: Cognitive Development in the Teen Years

Brain development

Brain development is an ongoing process that begins before birth and continues into the third decade of life.

Brain development involves changes in both the size and structures of the brain. In early childhood, the brain grows rapidly, forming more than 1 million new neural connections every second. In an ongoing process from soon after birth through adolescence, unnecessary connections are pruned, leaving the most important or most frequently used connections and allowing brain operations to be more efficient. In addition, the process of myelination, in which brain circuits are insulated to improve the efficiency of signals sent across neurons, occurs from before birth through young adulthood. While the brain stops growing in size by age 10, it continues to develop new capabilities for many years and remains malleable into early adulthood. In adolescence, the prefrontal cortex, which is associated with advanced thinking skills, matures and becomes more connected to other regions of the brain, including the limbic system (which regulates emotions). As a result, adolescents are able to think about more complex scenarios and concepts than their younger counterparts. For example, adolescents refine their abstract thinking skills and become capable of metacognition, or the ability to reflect on their own thoughts. Adolescents and young adults also develop executive functioning skills, which act as the brain's "air traffic control system."

Resources

Harvard University Center on the Developing Child: Brain Architecture



- Harvard University Center on the Developing Child: The Brain Circuits Underlying Motivation: An **Interactive Graphic**
- Annie E. Casey Foundation: The Adolescent Brain: New Research and Its Implications for Young

Executive function skills

Executive function skills are "the mental processes that enable us to plan, focus attention, remember instructions, and juggle multiple tasks successfully."

Executive function skills encompass skills related to brain function like inhibitory control, working memory, and cognitive flexibility and enable many skills that are crucial for youth and young adults, including emotional control, metacognition, time management, organization, planning, and prioritizing. For example, a young person can demonstrate executive function skills by planning and prioritizing homework assignments based on when they are due and ignoring texts from friends while completing their work.

Executive function skills are sometimes referred to as executive skills.

Resources

- Harvard Graduate School of Education: Defining the Skills for Success
- Harvard University Center on the Developing Child: Executive Function Activities for Adolescents
- Harvard University Center on the Developing Child: Executive Function & Self-Regulation
- Harvard University Center on the Developing Child: Executive Function: Skills for Life and Learning (Spanish version)

Metacognition

Metacognition is the process of reflecting on the act of thinking or problem-solving.

Engaging in metacognition allows youth to reflect on themselves and their learning. For example, young people can demonstrate metacognition by retracing the steps they followed to solve a math problem and identifying where they went wrong.

Metacognition is sometimes called "thinking about thinking."

Resources

- Vanderbilt University Center for Teaching: <u>Metacognition: Thinking About One's Thinking</u>
- Child Mind Institute: Metacognition: How Thinking About Thinking Can Help Kids
- LINCS: Metacognition Processes

Physical Health Outcomes

Diabetes

Diabetes is a disease that impairs the body's ability to process sugars. The disease occurs when the pancreas does not make enough insulin to effectively process sugars in the blood. This can result in rapid spikes or drops in the level of sugar in a person's blood, which can cause damage to the body, including the heart, kidneys, and vision. When there is not enough insulin or cells stop responding to insulin, the symptoms of diabetes become apparent.



Two types of diabetes may affect youth. Type 1 diabetes is not preventable and is most often diagnosed in children, teens, and young adults. Although Type 2 diabetes is preventable, the rates of children and youth who develop this form of the disease have increased in recent years. Young people with either type of diabetes must carefully manage what they eat and regularly test their blood sugar levels Good management of diabetes is essential because it can prevent or delay related health complications.

Resources

• Centers for Disease Control and Prevention (CDC): <u>Diabetes & Youth</u>

Obesity

Obesity is a body mass index (BMI) at or above the 95th percentile for children and teens of the same age and sex. This measure differs from the one used for adults, and may be referred to as BMI-for-age. BMI is calculated by dividing a person's weight in kilograms by the square of height in meters. For example, a 10-year-old boy of average height (56 inches) who weighs 102 pounds has a BMI of 22.9 kg/m². A BMI of this amount places the boy in the 95th percentile for BMI, and he is considered to be obese.

Obesity is related to **behavior** and **genetics**; however, a person's **environment** and **community** also influence excess weight through factors such as access to healthy and affordable food options, opportunities for safe activity, and others.

Resources

• Centers for Disease Control and Prevention (CDC): Overweight & Obesity

Physical health

Physical health refers to overall physical well-being, which includes a person's illness status, chronic disease, nutrition, activity, and sleep. Mental health can affect physical health; therefore it is essential to determine whether mental health issues are drivers of poor physical health (e.g., the impact of depression on sleep).

The transition to adulthood is a critical period for health. While adolescents and young adults tend to be healthier than older adults, their health cannot be taken for granted. During this transition, youth tend to have high levels of engagement in risky behaviors and are less likely to follow healthy habits learned at home, including eating breakfast, and getting adequate sleep and regular physical activity. Resulting physical health issues may include **obesity** and **diabetes**. Mental health issues, which tend to emerge during this time period, can also affect physical health, nutrition, exercise, and more.

Resources

- Centers for Disease Control and Prevention (CDC): Adolescents and Young Adults
- Office of Adolescent Health (OAH): Adolescent Physical Health and Nutrition Fact Sheets

Psychological/Emotional Outcomes

Agency

Agency is the ability to make choices that affect one's life. "The feeling of control over [one's] actions and their consequences" is an important component of being able to act on one's choices. For example, a young person can demonstrate agency by seeking out and enrolling in a skills training program aligned with their



goal to become an airplane mechanic; however, a young person may struggle if they do not feel that they take actions to achieve goals.

The construct of agency has been critiqued as being an amalgamation of many disparate skills that are difficult to measure, but is often compared to self-efficacy. There are also challenges associated with developing agency for youth who have experienced trauma or who lack opportunities.

Resources

- Teacher Union Reform Network of Art & NEA Locals & Partners: Excellence with Equity: Inspiring Agency, Video
- Scientific World Journal: Self-Determination as a Psychological and Positive Youth Development Construct

Anger management

Anger management is the ability to "reduce both [one's] emotional feelings and the physiological arousal that anger causes."

Anger management includes healthy behaviors like "recognizing signs that [one is] becoming angry, and taking actions to calm down and deal with the situation in a productive way."

Resources

- Substance Abuse and Mental Health Services Administration (SAMHSA): Anger Management for Substance Abuse and Mental Health Clients: A Cognitive-Behavioral Therapy Manual
- Mayo Clinic: Anger Management: 10 Tips to Tame Your Temper
- American Psychological Association: Controlling Anger Before it Controls You

Emotional intelligence

Emotional intelligence is the "ability to monitor one's own and others' feelings and emotions, to discriminate among them and to use this information to guide one's thinking and actions."

For example, a young person can exhibit emotional intelligence by responding appropriately when a friend says they are having a rough day. The appropriate response will be situational but may include asking the friend about their day, suggesting things to do that could be more fun, or just sitting with their friend to provide some quiet support. Emotional intelligence helps a young person identify an appropriate response and then engage in it.

Resources

- Yale Center for Emotional Intelligence: Emotional Regulation During Childhood: Developmental, Interpersonal, and Individual Considerations
- Michigan State University: Cultivating Emotional Intelligence Can Help Your Teen Succeed

Empathy

Empathy is the ability to understand and feel what someone else is feeling.

Empathy is part of emotional intelligence and involves both a cognitive component (understanding what someone else is feeling) and an affective component (experiencing the same feelings as another person). For example, a young person can demonstrate empathy with a friend who receives a college acceptance letter by feeling excited and celebrating with the friend. Conversely, they can demonstrate empathy with a friend who receives a college rejection letter by consoling or just sitting with the friend.



Resources

- University of Wisconsin-Madison: <u>5 Tips for Empathy-Building in Youth</u>
- Tedx: Sparking Empathy in Youth
- **EVERFI: Empathy Activities for Kids**

Grit

Grit is a "passion and perseverance for long-term goals." It has two components: "consistency of interest and perseverance of effort." This first element distinguishes grit from perseverance.

A young person can demonstrate grit, for example, by aspiring to become a musician, practicing their instrument diligently, and eventually performing professionally.

The concept of grit has been criticized for its failure to consider social constraints and its focus on the individual and the need to "pull [oneself] up by [the] bootstraps." The concept has also been criticized for emphasizing "pro-active" practices and qualities while failing to recognize "reactionary" ones that young people demonstrate to survive difficult situations (such as trauma or chronic homelessness and hunger).

Resources

- Angela Duckworth: Grit Question & Answer
- Tedx: Grit: The Power of Passion and Perseverance
- The New Yorker: The Limits of "Grit"

Locus of control

Locus of control refers to one's beliefs about who or what controls the events in one's life.

A person with an internal locus of control tends to believe that they are in control of what happens to them. A person with an external locus of control tends to believe that other factors matter more than their own actions and decisions.

Resources

- Journal of Online Learning Research: Learning to Learn Online: Using Locus of Control to Help Students Become Successful Online
- Psychology Today: Locus of Control
- Tedx: Can You Change Your Perception in Four Minutes?

Mental health

"Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood."

Adolescence is a critical period for mental health as these years represent the peak time for mental health disorders to emerge. In adolescence, females tend to report higher increases of internalizing symptoms (such as depression and anxiety) than males.

- Youth.gov: Mental Health
- Office of Adolescent Health (OAH): Adolescent Mental Health Fact Sheets
- Child Trends: Young Adult Depression



Child Trends: Mental Health Disorders

Mindsets

Mindsets are "beliefs and attitudes about oneself, the external world, and the interaction between the two. They are the default lenses that individuals use to process everyday experiences. Mindsets reflect a person's conscious and unconscious biases, natural tendencies, and past experiences. Though mindsets are malleable, they tend to persist until disrupted and replaced with a different belief or attitude."

The concept of mindsets is often discussed in terms of having a growth mindset versus a fixed mindset. Youth who adopt a fixed mindset believe that their potential to succeed at a task is predetermined by talent or genetics, and that working hard will not help them improve on the task. Youth with a growth mindset, on the other hand, believe that they can improve on a task through effort and hard work. Having a growth mindset is linked to a host of positive outcomes.

Resources

- ACT for Youth: Mindset and Motivation in Adolescence
- America's Promise Alliance: What is Mindset and What Does it Mean for Youth Resilience?

Motivation

Motivation is one's reason for doing something.

There are different types of motivation that youth may demonstrate. For example, doing an activity for a reward or other benefit illustrates extrinsic motivation, whereas doing an activity simply for its own sake without an external reason illustrates intrinsic motivation. "Motivation is the 'why' of behavior, and mastery motivation involves the urge or psychological 'push' to solve problems, meet challenges, and master ourselves and our world."

Resources

- Harvard Graduate School of Education: All About Motivation: Autonomy, Responsibility, and Other <u>Insights into What Drives Students to Want to Work Hard — And to Like It</u>
- Harvard University Center on the Developing Child: <u>5 Facts About Motivation That Are Often</u> Misunderstood
- ACT for Youth: Mindset and Motivation in Adolescence

Positive self-concept

Positive self-concept refers to favorable feelings about oneself. "A positive self-concept includes selfconfidence, self-efficacy, self-awareness and beliefs, as well as self-esteem and a sense of well-being and pride."

- Child Trends: Assessing What Kids Think About Themselves: A Guide to Adolescent Self-Concept for Out-of-School Time Program Practitioners
- Child Trends: Key "Soft Skills" that Foster Youth Workforce Success: Toward a Consensus Across
- Rutgers Cooperative Extension: <u>Developing a Positive Self-Concept</u>



Resilience

Resilience is the developmental process through which an individual or group is successful or adapts effectively in the face of serious hardship.

Resilience is not simply an ability or trait that an individual may or may not possess; instead, resilience refers to the quality of being able to navigate through hardships at different points.

The balance between **protective factors** on one hand and **risk factors** on the other can shape how a person responds to challenges in different situations. Resilience occurs when this balance tips toward healthy developmental outcomes. For example, a young person with a learning disability could demonstrate resilience by seeking out additional supports to allow them to take advanced courses.

Resources

- Child Trends: What Can Schools Do to Build Resilience in Their Students?
- Harvard Graduate School of Education: A Short Primer on Resilience
- Harvard University Center on the Developing Child: Key Concepts, Resilience
- Harvard University Center on the Developing Child: InBrief: The Science of Resilience
- Harvard University Center on the Developing Child: Supportive Relationships and Active Skill-**Building Strengthen the Foundations of Resilience**
- Annie E. Casey Foundation: Promoting Development of Resilience Among Young People in Foster Care

Risk-taking

Risk-taking is any action or decision that puts a young person at physical, social, or emotional risk.

Adolescence and emerging adulthood are times of risk-taking as young people become more independent and take on more responsibility. Risk-taking is often positive, leading to personal and physical development and/or new skills; some examples include trying out for a sports team, taking a higher-level course, going on a date with a new romantic interest, or starting and leading a new organization. While these types of risks may have undesired results for a young person—getting injured on the soccer field, failing a difficult class, discovering they do not like the other person, or losing future opportunities if the new organization failstaking such risks is an important part of maturation. However, due to their lack of life experience and because their brains are still developing, youth can be prone to sensation-seeking behavior and can struggle with impulse control, leading them to negative risk-taking as well. These risks include negative behaviors such as substance use, reckless driving, acting on dares from peers, and unprotected sex. Research finds that adolescents are especially likely to take risks when emotionally excited or in the presence of peers. Understanding the healthy risks that adolescents and young adults take every day is an important part of supporting their growth into healthy adults.

Resources

- Child Trends: Brain Training For Risk-Taking Teens (available in Spanish and English)
- Annie E. Casey Foundation: The Adolescent Brain: New Research and its Implications for Young People Transitioning from Foster Care
- Developmental Psychobiology: Adolescent Risk-Taking, Impulsivity, and Brain Development: **Implications for Prevention**

Self-efficacy

Self-efficacy is one's belief in one's ability to succeed at a certain task or situation. For example, a young person with high mathematics self-efficacy will go into a math test feeling confident that they will do well.



Self-efficacy is also sometimes called self-agency.

Resources

- Harvard Graduate School of Education: Building a Culture of Self-Efficacy
- National Association of School Psychologists: Self-Efficacy: Helping Children Believe They Can Succeed

Self-esteem

Self-esteem is a person's valuation of their own worth and their emotional response to that valuation. Selfesteem may be specific to a particular accomplishment, rather than a general self-regard.

The general construct of self-esteem has been critiqued because it is a broad, subjective self-evaluation. Also, it is not clear that higher levels of self-esteem represent positive development. Nevertheless, research and practice continue to focus on the role of self-esteem in youth development.

Resources

- TeensHealth from Nemours: For Teens: How Can I Improve My Self-Esteem?
- Academic Pediatrics: Characteristics Associated with Low Self-Esteem among U.S. Adolescents
- PsychologyToday: What is self-esteem?

Self-regulation

Self-regulation is the ability to control one's own behavior, thoughts, and emotions in order to "enable goaldirected actions."

For example, a youth can demonstrate self-regulation by completing required homework before going out with friends on a week night. Anger management is another example of self-regulation. Self-regulation is closely related to executive function skills and is also sometimes called self-control.

Resources

- Office of Planning, Research, and Evaluation (OPRE): <u>Promoting Self-Regulation in Adolescents and</u> Young Adults: A Practice Brief
- Office of Planning, Research, and Evaluation (OPRE): Self-Regulation Snap Shot #5: A Focus on High-School Aged Youth
- Committee for Children: Self-Regulation Skills: Why They Are Fundamental

Soft skills

Soft skills "refer to a <u>broad set of skills</u>, competencies, behaviors, attitudes, and personal qualities that enable people to effectively navigate their environment, work well with others, perform well, and achieve their goals. These skills are broadly applicable and complement other skills such as technical, vocational, and academic skills."

Soft skills can be both interpersonal, such as social skills and empathy, or intrapersonal, such as grit.

Soft skills may also be referred to as noncognitive skills, social emotional competencies, power skills, 21st century skills, and character development skills.

- Child Trends: Key "Soft Skills" That Foster Youth Workforce Success: Toward a Consensus Across
- Youth.gov: <u>Soft Skills to Pay the Bills</u>



Exploring the Intersection of Science Education and 21st Century Skills: A Workshop Summary: Adolescents Developing Capacity for 21st Century Skills

Self-Sufficiency Outcomes

Career readiness

Career readiness is the condition of having the appropriate education, technical training, and soft skills to obtain and succeed in a job.

Education requirements could include a high school degree or equivalent, job training, or a post-secondary education, depending on the position. Required technical skills also vary from position to position, and could include basic computer skills, advanced computer programming skills, the ability to drive, nursing skills, or a knowledge of engineering to name a few. In terms of soft skills, communication skills are especially desirable to employers. A career-ready person is also able to "effectively navigate pathways that connect education and employment."

Other terms for career readiness include workforce readiness, workplace readiness, and job readiness.

Resources

- Child Trends: A Developmental Perspective on College & Workplace Readiness
- You for Youth: College and Career Readiness
- Department of Labor, CareerOneStop: Get My Future

College readiness

College readiness is a multifaceted construct that encompasses the "knowledge, skills, attitudes, and behaviors necessary to access college and overcome obstacles on the road to post-secondary success."

This definition is applicable to readiness for both two-year and four-year colleges. The three dimensions of college readiness are academic preparedness, academic tenacity, and college knowledge.

"Academic preparedness refers to key academic content knowledge and cognitive strategies needed to succeed in doing college-level work. Examples of indicators of academic preparedness are GPA and availability of Advanced Placement or International Baccalaureate courses.

Academic tenacity refers to the underlying beliefs and attitudes that drive student achievement; attendance and disciplinary infractions are often used as proxies for academic tenacity. Other indicators include student self-discipline and the extent to which teachers press students for effort and rigor.

College knowledge is the information base and contextual skills that enable students to successfully access and navigate college. Examples of college knowledge indicators are students' knowledge of the financial requirements for college and high schools' promotion of a college-going culture."

- Child Trends: A Developmental Perspective on College & Workplace Readiness
- You for Youth: College and Career Readiness



Financial literacy

Financial literacy is the ability to effectively understand and use personal finance-related information for financial well-being throughout the life course.

For example, a young person could demonstrate financial literacy by depositing a paycheck into a bank account and budgeting for how to both pay bills and save for the future.

Resources

- Council for Economic Education: <u>Professional Development</u>, <u>Financial Literacy Lesson Plans</u> (Grades 6 - 12)
- You for Youth: Financial Literacy for All
- Youth.gov: Facts About Youth Financial Knowledge & Capability

Fringe benefits

Fringe benefits are non-monetary forms of compensation frequently provided to full-time workers.

These benefits can include health insurance, tuition reimbursement, employee assistance programs, longterm and short-term disability leave, parental leave, vacation and sick leave, bereavement leave, and retirement savings matching.

Resources

• Child Trends: Pathways to High-Quality Jobs for Young Adults

Income

Income is monetary compensation, typically associated with a job or investments.

Income is one aspect of job quality. A higher income is linked to a range of positive outcomes in adulthood, including health and even happiness (though once a comfortable level of income is obtained, the link with happiness diminishes).

Resources

- Brookings Metropolitan Policy Program: Youth Summer Jobs Programs: Aligning Ends and Means
- United States Census Bureau: Income and Poverty in the United States: 2018

Life skills

Life skills are the practical skills that youth and adults need to navigate everyday life independently.

Life skills include the ability to drive or navigate public transportation, to do grocery shopping and cook, as well as computer skills and financial literacy. Soft skills are also an important component of life skills.

Resources

ACT for Youth: <u>Building Healthy Life Skills</u>

Success sequence

The success sequence is an order of accomplishments in the transition to adulthood that some scholars find is associated with increased financial well-being. In order, the three accomplishments are 1) graduating from



high school (or getting a GED), 2) working full-time or having a partner who does, and 3) getting married before having children.

Youth who follow this sequence tend to have more positive economic outcomes in adulthood. However, this concept has been heavily critiqued even by scholars in the same institutions as the primary supporters. First, it operates on an assumption that this sequence is equally available to all youth and ignores the structural constraints that may prevent youth from obtaining it. For example, it is much harder to graduate from high school when attending a failing school. Additionally, the benefits of following the success sequence are not evenly available to all youth. White youth who follow the sequence are more likely to obtain middle-class status, for example, than are black youth who also follow the success sequence.

Resources

- Institute for Research on Poverty: Brad Wilcox On The "Success Sequence" For Millennials, Podcast
- Johns Hopkins Institute for Education Policy: Should Schools Promote the Success Sequence? Why or Why Not?
- Cato Unbound, A Journal of Debate: The Success Sequence—and What it Leaves Out
- Cato Unbound, A Journal of Debate: Response to "The Success Sequence—and What it Leaves Out"

Social Outcomes

Assertiveness

Assertiveness is a communication style that falls between passiveness and aggression.

When someone is assertive, they stand up for their point of view while remaining respectful of others. For example, a young person can demonstrate assertiveness when they tell a school counselor that they are not interested in applying to any four-year colleges but prefer to apply to trade schools.

Resources

- TeensHealth from Nemours: What is Assertiveness?
- U.S. Department of Veteran Affairs and Center for Integrated Healthcare: <u>Assertive</u> Communication
- Resource Center for Adolescent Pregnancy Preventions: <u>Assertiveness as a Strategy for Increasing</u> **Self Esteem**

Autonomy

Autonomy is the ability to think, feel, and act for oneself.

There are three types of autonomy: cognitive autonomy, or thinking for oneself; emotional autonomy, or feeling for oneself; and behavioral autonomy, or acting for oneself. On the whole, autonomy for adolescents refers to "the degree to which adolescents experience a sense of volition and choice as opposed to feelings of pressure and coercion."

Cognitive autonomy can be demonstrated by forming one's opinions and values, and by setting independent goals. Young people can demonstrate emotional autonomy by feeling proud of their goals and establishing relationships independent from their families. Behavioral autonomy can be demonstrated by following through on one's goals and moving freely in the world.

Autonomy is also sometimes referred to as self-governance, independence, or self-reliance.



- University of Nebraska-Lincoln Extension, Institute of Agriculture and Natural Resources: **Development of Autonomy in Adolescence**
- RaisingChildren: Independence in Teenagers: How to Support it
- Procedia Social and Behavioral Sciences: Adolescent Autonomy in Parent-Child Relations
- TEDGlobal: The Mysterious Workings of the Adolescent Brain

Civic engagement

<u>Civic engagement</u> is "working to make a difference in the civic life of one's community and developing the combination of knowledge, skills, values and motivation to make that difference. It means promoting the quality of life in a community, through both political and non-political processes."

Civic engagement activities can be paid or unpaid, and may include voting, political campaigning, environmental activity, community service, volunteering, service learning, and giving back to one's community through time or monetary commitments. Young people can demonstrate civic engagement in formal ways such as volunteering at an animal shelter once per week, or via less formal ways such as contributing to a community coat drive.

Community engagement is another term that is sometimes used synonymously with civic engagement.

Resources

- Child Trends: Youth Voting
- Child Trends: What Motivates Civic Involvement in Teens? (available in Spanish and English)
- Child Trends: Fact Sheet: What Works for Civic Engagement, Lessons from Experimental **Evaluations of Programs and Interventions**

Communication skills

Communication skills are the ways in which people share information with others.

Communication skills are among the most sought-after skills by employers. Specific communication skills include:

Verbal skills: public speaking, appropriate language use, adjusting tone to the situation Nonverbal skills: body language, facial expressions, posture, pictures, symbols Writing skills: email, texting, blog writing, long-form writing Listening skills: being able to listen without interrupting, hearing what someone says

Resources

- Department of Labor: Mastering Soft Skills for Workplace Success, Communication
- ACT for Youth: Relationship Skills
- Child Trends: <u>5 Soft Skills that Help Youth Succeed at Work</u>

Externalizing behaviors

Externalizing behaviors are "disruptive, harmful, or problem behaviors that are directed to persons and/or things. Examples include aggressive behaviors such as getting into fights and bullying; hyperactive and impulsive behaviors; and delinquent behaviors such as physical assault, theft, and vandalism."

When externalizing behaviors are chronic or ongoing, they are sometimes referred to as an externalizing disorder or conduct problems.



Resources

- Child Trends: What Works for Acting-Out (Externalizing) Behavior: Lessons from Experimental **Evaluations of Social Interventions**
- Journal of Child and Adolescent Psychiatric Nursing: Childhood Externalizing Behavior: Theory and **Implications**

Identity (sexual, gender, ethnic/racial, etc.)

Identity is a sense of oneself, one's values, and how one relates to others.

Identity development is a key task of adolescence and early adulthood. During adolescence, youth are tasked with developing domain-specific identities, including ethnic/racial identity, gender identity, and sexual orientation. These identities can change over time, but other identities that are developed during adolescence might be more about a person's interests as they come to identify, for example, as a dancer or a scientist. Youth and young adults are expected to learn to integrate these identities into a complete sense of who they are as individuals in a way that can act as a framework to guide them throughout their lives.

Resources

- University of California, Santa Barbara: Sexual Orientation and Gender Identify
- Current Directions in Psychological Science: Ethnic/Racial Identity—A Double-Edged Sword? Associations With Discrimination and Psychological Outcomes
- ACT for Youth: <u>Toolkit: Identify Development</u>

Relationships

Relationships (or specifically, positive developmental relationships) are fundamental to child and youth development. Through interactions with others, individuals reflect on and make meaning out of developmental experiences.

At the beginning of the life course, children's most important relationships are with their parents and caregivers. As children enter school, relationships with teachers and other adults (such as camp counselors, coaches, or religious leaders) become increasingly important. Parents and other adults remain important through adolescence but, during this time period, peers become increasingly important. Peers help youth explore who they are as individuals and solidify their identity. During adolescence, youth may start to form romantic relationships, and in adulthood they develop their own adult relationships with family, friends, and coworkers.

Resources

- ACT for Youth: Helping Youth Build Relationship Skills
- Search Institute: Relationships Matter: The 5 Elements of Developmental Relationships, Video
- Search Institute: Developmental Relationships: Helping Young People Be and Become Their Best
- Department of Education: Relationships First: Creating Connections that Help Young People Thrive

Sexual consent

<u>Sexual consent</u> is "an agreement to participate in a sexual activity."

Consent is an ongoing process throughout a sexual encounter and <u>assertive communication</u> is one strategy to ensure consensual sexual encounters. This includes setting boundaries that one feels comfortable with and respecting those of one's partner.



Resources

- Virginia Sexual and Domestic Violence Action Alliance: Teach Consent
- Planned Parenthood: What is Sexual Consent?
- University of Michigan Sexual Assault Prevention and Awareness Center: What is Consent?

Social skills

Social skills are socially acceptable learned behaviors that enable a person to interact with others in ways that elicit positive responses and assist in avoiding negative responses.

Social skills encompass a broad range of verbal and nonverbal skills, including eye contact, body language, speaking, and listening.

Youth with social skills are often described as having social competence.

Resources

- Child Trends: Helping Teens Develop Healthy Social Skills and Relationships: What the Research Shows about Navigating Adolescence
- National Association of School Psychologists: Social Skills: Promoting Positive Behavior, Academic Success, and School Safety

Values

<u>Values</u> are "enduring, often culturally defined, beliefs about what is good or bad and what is important in life.

Values include both the moral code of conduct one uses in daily activities (e.g. being kind, being truthful) and long-term 'outcomes' of importance (e.g., getting an education, having a family, contributing to the community) that may not necessarily have a right or wrong valence. Values develop through a process of exploration and experimentation, where young people make sense of their experiences and refine what they believe in. Values are a key developmental task during middle adolescence and young adulthood."

- Department of Education: Values and Helping Your Child Through Early Adolescence
- Office of Adolescent Health (OAH): Talking with Teens About Positive Values



Evaluation Terms

Continuous quality improvement

"Continuous quality improvement (CQI) is the systematic process of identifying, describing, and analyzing strengths and problems and then testing, implementing, learning from, and revising solutions. More simply, one can describe CQI as an ongoing cycle of collecting data and using it to make decisions to gradually improve program processes."

Continuous quality improvement (CQI) is similar to performance management and consists of both systems (for example, data collection and reporting systems) and norms (for example, a clearly conveyed belief that reporting mistakes is important for improvement).

Resources

- Office of Juvenile Justice and Delinquency Prevention (OJJDP): What is Continuous Quality
- Substance Abuse and Mental Health Services Administration (SAMHSA): Continuous Quality **Improvement: Principles and Practices**

Data-driven

Data-driven approaches are interventions or programs that build on data collected for research, evaluation, or continuous quality improvement. They support the delivery of effective programs by using data to inform program design, determine when programs are not working, and clarify what adjustments might be needed.

Data-driven approaches require five actions: 1) assessing the needs and resources in the community, 2) identifying the need to be targeted, 3) creating a plan, 4) delivering the program while monitoring its quality, and 5) evaluating the program. These actions do not necessarily happen in a linear fashion and may inform one another.

Another term for data-driven is evidence-based.

Resources

Child Trends: A Video Series on Building Evidence for Effective Programs

Dosage

<u>Dosage</u> is the amount of an intervention a participant actually receives.

As with medications, providing the necessary dosage of an intervention is critical to obtain expected results. Dosage of an intervention can be measured in terms of its intensity (amount of time youth attend a program within a time period, in hours/days/weeks), duration (time from start to finish), and breadth (variety of activities youth participate in within or across programs). Specifically, if a youth is enrolled in a program but rarely attends, negative or null results might be expected, and increasing attendance might be a next step to improve results. However, if a youth attends often but there is no improvement in outcomes, different action steps would be needed.

Resources

Western Journal of Nursing Research: How Much, How Often, How Long? Addressing Dosage in **Intervention Studies**



- Centers for Disease Control and Prevention (CDC): Focus the Evaluation Design
- BMC Public Health: Examining Reach, Dose, and Fidelity of the "Girls On The Move" After-School Physical Activity Club: A Process Evaluation

Evaluation

Evaluations are used to assess whether a program has achieved its goals. Specifically, evaluations can answer basic questions about a program's effectiveness, and evaluation data can be used to improve program services.

Evaluations may be used for several purposes: Implementation evaluations and process evaluations assess how a program is carried out and how it functions; these evaluations tend to focus on qualitative components. Outcome evaluations and impact evaluations assess a program's effects; they are primarily quantitative, and they can employ random assignment methods or quasi-experimental designs.

Resources

- Child Trends: A Video Series on Building Evidence for Effective Programs
- Child Trends: Quasi-Experimental Evaluations
- Child Trends: Why Conduct a Program Evaluation? Five Reasons Why Evaluation Can Help an Outof-School Time Program
- W.K. Kellogg Foundation: The Step-by-Step Guide to Evaluation

Evidence-based

Evidence-based programs and practices are specific techniques and intervention models that rigorous evaluations have found to have positive effects on outcomes.

Increasingly, funding sources encourage programs to use evidence-based programs or practices, or to continue to build the evidence base by conducting rigorous evaluation.

Resources

- Child Trends: A Video Series on Building Evidence for Effective Programs
- Family and Youth Services Bureau: What is Evidence-Based Practice?
- Substance Abuse and Mental Health Services Administration (SAMHSA): Evidence-Based Practices Resource Center
- What Works Clearinghouse: Find What Works Based on the Evidence

Fidelity

Fidelity is the degree to which a program is implemented as originally intended. There are five dimensions of <u>fidelity</u>: adherence, exposure, quality of delivery, participant responsiveness, and program differentiation.

When implementing evidence-based programs, it can be important to identify where a program has adjusted an existing model, and where it is has been implemented as originally intended. Changes may result in different outcomes if they involve a key component of the model's influential mechanism. When programs are implemented in a new context, there is often a tension between fidelity and adaptation of programs to context.

For example, the effectiveness of a teen pregnancy prevention program meant to be implemented in hourlong sessions after each school day may be influenced if instead it is implemented in weekly five-hour sessions on Saturdays. The participants may get tired or lose focus in a longer session, or the program's daily homework assignments may require adapting so they can be completed in one long session.



Resources

- Education Development Center, Inc.: <u>Assessing Program Fidelity and Adaptations</u>
- Children's Bureau: Evaluation Brief: Measuring Implementation Fidelity
- National Center on Response to Intervention: <u>Using Fidelity to Enhance Program Implementation</u> Within an RTI Framework

Impact evaluation

Impact evaluations are used to understand the degree to which a program meets its ultimate goal to improve intended outcomes. These evaluations are designed to measure cause-and-effect relationships by randomizing program recipients to specific groups.

Random assignment, when done correctly, ensures that the groups in the impact evaluation are the same across a variety of measures and reduces the likelihood of bias in a study. It also ensures comparability on both measured characteristics and characteristics that are difficult to measure, such as motivation. See random assignment evaluation for a specific example of randomization and its importance in a study.

Typically, impact evaluations occur after programs are stable, or have been subject to process evaluations. Impact evaluations are the most rigorous type of program evaluation and may not be appropriate and/or feasible for all interventions or programs. Findings from impact evaluations are often used to determine whether desired outcomes of an intervention have been achieved in order to make decisions about scaling up programs.

Impact evaluations are also often called randomized controlled trial (RCT) studies or random assignment evaluations.

Resources

- Child Trends: Performance Management and Evaluation: What's the Difference?
- Organization for Economic Co-operation and Development: Outline of Principles of Impact **Evaluation**

Logic model

A <u>logic model</u> is a visual representation of how a program is intended to work.

Frequently organized in the form of a diagram or flowchart, a logic model describes the activities of a program and how they work to achieve desired outcomes. Logic models are based on theories of change, but provide more detail. Together, these two tools create a road map to build and improve a program.

- Child Trends: A Video Series on Building Evidence for Effective Programs
- Child Trends: Logic Models in Out-of-School Time Programs: What Are They and Why Are They **Important?**
- W.K. Kellogg Foundation: Logic Model Development Guide
- Center for Community Health and Development at the University of Kansas: Community Tool Box: Developing a Logic Model or Theory of Change



Outcome evaluation

Outcome evaluation, or effectiveness evaluation, determines whether a program is affecting the target population, as defined by the program's logic model. Outcome evaluations can be either experimental or quasi-experimental.

An outcome evaluation requires the program's implementation to be consistent across staff or sites. If such consistency is lacking, the evaluation results can be null (no effect) or inconclusive in the sense that the effects of different structures and practices across sites and staff are hard to interpret. Therefore, experts in the field recommend against conducting such evaluations too early in a program's development, before the program has a clear and consistent service delivery model and the capacity to collect high-quality data.

Resources

- Child Trends: Outcome Evaluation: A Guide for Out-of-School Time Practitioners
- Centers for Disease Control and Prevention (CDC): What are the Most Common Types of

Performance management

Performance management is an ongoing process of collecting and analyzing information to monitor program performance with the intention of improving programming.

Successful performance management consists of three parts: 1) collecting high-quality data on a regular basis from a variety of people involved in the program (e.g., participants, frontline staff, managers, parents), 2) sharing the data in a format that is accessible and understandable to key decision makers, and 3) using the data to identify key areas for improvement and then make those changes. Once these steps are completed, the cycle begins again in order to assess the process and how the changes affect it. Many programs design ongoing performance management systems for continuous quality improvement (CQI). Performance management is different from evaluation because it is done internally and designed to be used continuously.

Resources

- Child Trends: Performance Management and Evaluation: What's the Difference?
- Child Trends: Let's Talk About Performance Management
- Child Trends: A Video Series on Building Evidence for Effective Programs

Process/implementation evaluation

Process evaluation, or implementation evaluation, aims to understand whether program activities and processes have been implemented as intended.

This type of evaluation can occur throughout the life of programs and is informed by a logic model and theory of change. Important aspects to consider during a process evaluation include what the program has achieved, who was involved, where the program was implemented (and under what conditions), and what supported or hindered implementation of key activities.

A program evaluation can provide valuable information for determining how to improve program processes and activities. It also can be very useful if rigorous outcome evaluations find null (or negative) results because it can identify issues, such as low dosage, lack of fidelity to the model, or logistical challenges with implementation, that can account for poor outcomes.

Resources

Child Trends: Process Evaluations: A Guide for Out-of-School Time Practitioners



 Centers for Disease Control and Prevention (CDC): What Are the Most Common Types of Evaluation?

Qualitative data

Qualitative data describe people, events, or types of things and use words or narratives.

Often qualitative data are collected via interviews, focus groups, observational notes, or other similar structured written material. Questions that are better answered with qualitative data include: "Why did Scott miss class 10 times this year?" or "How did the different groups of children behave in the activities we offered today?"

Resources

- University of Minnesota: Qualitative or Quantitative Data?
- Khan Academy: Data Representations
- Macalester College Research Guides: Quantitative versus Qualitative Data

Quantitative data

Quantitative data are concerned with counts or any information that can recorded numerically.

Often quantitative data are collected via surveys, but they also can be collected through observation, attendance records, health or administrative records, and so on. "How many times did Scott miss class this year?" or "How many students participated in each of three activities that were offered today?" are questions that can best be answered with quantitative data.

Resources

- University of Minnesota: Qualitative or Quantitative Data?
- OECD Glossary of Statistical Terms: Quantitative Data
- National Geographic: Quantitative Data
- Khan Academy: Data Representations

Quasi-experimental evaluation

Quasi-experimental evaluations compare "the outcomes of two groups, such as children or youth—the treatment group and a comparison group—who were not randomly assigned to their respective groups."

In general, studies are considered quasi-experiments only if the groups being compared are believed to be very similar. "A quasi-experimental study might compare outcomes for individuals receiving program activities with outcomes for a similar group of individuals not receiving program activities. This type of study also might compare outcomes for one group of individuals before and after the group's involvement in a program (known as 'pre-test/post-test design'). Quasi-experimental studies can inform discussions of cause and effect, but cannot definitively establish this link." Only experimental evaluations can establish a causal link between a program and an outcome.

- Child Trends: Quasi-Experimental Evaluations
- UNICEF: Quasi-Experimental Design and Methods



Random assignment evaluation

In a random assignment study, participants are randomly assigned to the treatment group or the control group.

Participants in the treatment group participate in the program or activities being evaluated, while participants in the control group do not. Outcomes of participants in the two groups are then compared. Only random assignment studies can establish a causal link between a program and an outcome.

For example, when schools participating in a study to estimate the impact of a new math curriculum are randomly assigned to use the curriculum of interest (treatment group) or continue with the one they have been using (control group), this mitigates the potential for factors other than the curriculum—such as whether the participating schools are located in higher- or lower-resourced communities—to affect students' math scores on the measure used to compare the two groups' outcomes. If the random assignment shows that schools in the two groups are similar then resources will not explain any differences observed at the end of the study.

A random assignment study is also called an experimental evaluation or randomized controlled trial.

Resources

- Child Trends: Quasi-Experimental Evaluations
- Child Trends: Random Assignment Evaluation Studies: A Guide for Out-of-School Time Program **Practitioners**
- U.S. Department of Education: Random Assignment in Program Evaluation and Intervention Research: Questions and Answers

Theory of change

A theory of change is a brief description of the short- and long-term changes desired for youth in a program, and how the program will achieve these goals.

A theory of change should answer three questions: 1) What do we want to change or have as the main outcome of the program? 2) What are we doing to achieve this change or outcome? 3) What are the changes we expect to see along the way?

A **logic model** is an extension of a theory of change.

- Child Trends: A Video Series on Building Evidence for Effective Programs
- Annie E. Casey Foundation: Theory of Change: A Practical Tool for Action, Results, and Learning



Examples

Example 1

Racial bias → Developmental relationships → Metacognition

Racism undermines well-being, but having a developmental relationship that is supportive and caring can build metacognition skills that help young people process their thoughts and experiences.

Racism can lead to negative physical, cognitive, social, and emotional outcomes for individuals who experience it. For example, a person who is the target of a racist remark or action may immediately experience an increased heart rate, and have difficulty processing information quickly or effectively. Adolescents and young adults, whose brains are still developing the capacity to regulate emotions, may react particularly quickly and emotionally to experiences of racism.

Developmental relationships—relationships with an adult who expresses care, challenges youth to grow, provides support, shares power, and expands their possibilities—can help a young person improve their emotion regulation skills. By helping youth to feel cared for, process their experiences and feelings, and feel supported to learn new responses or coping mechanisms, developmental relationships can help youth understand and improve how they respond to complex, emotional experiences.

Specifically, by developing metacognition skills, young people can learn to regulate their emotional responses to experiences. Metacognition is the ability to think about one's thoughts and experiences. Following an experience of racial bias, youth who can reflect on their own emotional reactions can make conscious choices about how to respond. This reflective process helps a young person slow down their thinking so that they can decide, consciously, how they want to respond rather than responding reactively.

Example 2

Post-Traumatic Stress Disorder (PTSD) → Trauma-Informed Care (TIC) → Self-regulation

Young people who are suffering from PTSD following severe trauma can be supported in programs by staff who adopt a trauma-informed care (TIC) approach, which can contribute to better adjustment, including self-regulation.

Post-traumatic stress disorder (PTSD) is a negative response to serious trauma. Traumatic experiences can affect people's brains—for example, by increasing production of stress hormones and producing quicker emotional responses to stressful stimuli. MRIs even show that different parts of the brain respond to stress among those who have experienced trauma—even long after the traumatic event—relative to people who have not experienced trauma.

A trauma-informed care (TIC) approach across all of a program's policies, procedures, and practices can create a safe and predictable environment for participants who have experienced trauma. For example, when organizations adopt a trauma systems approach, staff are taught to recognize the interpersonal and environmental triggers that can cause a person to engage in "fight, flight, or freeze" modes. Each staff member can then be supported to remove or minimize those triggers in their interactions with a young person. When a young person feels safe, they are better able to control their own behaviors, emotions, and responses, and to practice self-regulation skills.



Example 3

Neighborhood violence → Positive Youth Development (PYD) → Executive functioning

Some of the harmful effects of neighborhood violence can be reduced when youth spend time in programs that adopt positive youth development practices; in turn, these practices can enhance brain development, including executive functioning skills.

Experiences of neighborhood violence are often associated with poorer mental health outcomes, lower scores on academic tests, and/or an elevated risk that youth will engage in violence themselves. Positive youth development (PYD) approaches cannot take away youth's experiences of violence and are not a substitute for appropriate mental health care, when needed. However, PYD approaches—which focus on creating safe and developmentally appropriate spaces and relationships—can help youth and young adults who have experienced violence feel safe and supported. When these approaches are successful, they allow youth to move from lower-level thinking processes (such as staying safe) to focusing on higher-level thinking processes. These higher-level cognitive processes use the more advanced parts of the brain (like the prefrontal cortex) to engage in executive functioning skills (like time management, conflict resolution etc.). Executive functioning skills are important for success in school and the workplace, but also in familial, friend, and family relationships.

Example 4

Toxic stress \rightarrow Mindfulness \rightarrow Mental health

The negative effects of long-term stress can be reduced by mindfulness practices, which can in turn improve mental health.

Toxic stress occurs when the body's stress mechanisms have been elevated so regularly that a young person's body is not able to calm down, but remains constantly ready for a fight-or-flight reaction. This can result in behavioral or emotional responses to experiences that are unhelpful or more stressful and can lead to both immediate and future mental and physical health issues. Mindfulness practices aim to establish a nonjudgmental, moment-by-moment awareness of a person's thoughts, feelings, bodily sensations, and surrounding environments through use of the five senses. Meditative techniques, journaling, breathing exercises, or mindful movement can create new pathways in the areas of the brain responsible for stress, and have been found to lower cortisol (a stress hormone) levels in the blood. This allows a young person to more successfully calm down or engage in healthy coping mechanisms.

Youth-serving programs can integrate mindfulness practices to help youth cope with a variety of experiences, including stress and trauma, which can improve their mental health. While these practices are not a substitute for appropriate medical care when needed, they can be used in conjunction with medical treatment or for young people without diagnosable mental health conditions. These practices can also improve youth's emotional, psychological, and social well-being by regularly finding ways to help their body relax or recognize and respond to triggers.

Example 5

Poverty → Wage subsidies → Self-sufficiency

A lack of income can be mitigated by wage subsidies that enhance self-sufficiency.

Poverty means living without enough income to cover basic needs. Many families living in poverty struggle to provide family members with the education, opportunities, or social networks necessary to find stable, well-paying jobs. One way to make education or training feasible for young people coming from families that are unable to support these goals is to subsidize their wages at work. Subsidizing employer-provided wages



decreases the costs for employers of hiring youth. These wage subsidies can be in full or in part, and can be funded by the government or another funder.

Subsidizing work can boost employment and training rates for youth by providing them with resources during their training or early employment. This can lead to higher levels of self-sufficiency in both the short and long term, as youth can better financially support themselves during training and can find higher-paying jobs when they finish. Subsidies may help some young people be employed during their training (when employment would not have been feasible otherwise), which provides them with a job history when their training is complete.

Example 6

Juvenile justice (JJ) System involvement \rightarrow Restorative practices \rightarrow Aggression

When youth involved in the justice system participate in conflict resolution processes based in restorative practices, this could help them manage their emotions, set goals, and reduce conflict, thereby reducing aggressive behaviors.

The juvenile justice system is responsible for handling youth from the time they are suspected of a delinquent act until their supervision has ended. It includes police, prosecutors, judges, social workers, and probation officers. Current justice systems are often not designed to meet the unique needs of adolescents and young adults: They fail to incorporate an understanding that adolescents' developmental stage requires unique services to support and respond to behaviors driven by their ongoing brain and emotional development. The incarceration of juvenile offenders is often ineffective at reducing recidivism and can hinder adolescents' and young adults' cognitive and social development and transition to self-sufficiency. Restorative practices, when implemented appropriately, could support social-emotional learning by providing opportunities for youth and young adults to develop positive goals, learn to manage their emotions, address conflict, build healthy relationships, and reduce aggression.

Example 7

Family dysfunction → Family-centered coaching → Social skills

Negative family experiences can be addressed via family-centered coaching, which leads to better social skills for youth.

Family dysfunction such as violence and hostile interactions can have lasting effects on the development and well-being of youth and young adults. These negative interactions can increase stress, promote the acceptability of violence, and make some youth feel that they have no supportive adults in their lives. Family-centered interventions such as family-centered coaching can help families address and change their dysfunctional interactions by proactively engaging all family members in a therapeutic process that can build their social and relationship skills.

Example 8

Stress → Diet and exercise → Brain development

Stress can be lowered by combining physical activity with a good diet, which could enhance brain development.

Stress has negative implications for physical health as well as psychological and social well-being. Research indicates that both diet and exercise are important to reducing stress. Interventions that help participants eat healthy diets—in combination with encouraging an exercise routine or engagement in sports over time can improve young people's health.



Recent research also points to the impact of regular exercise on the brain: Those who exercise more have earlier and faster brain development. Specifically, youth who are more physically fit have more white matter in their brains. White matter comprises the communication channels of the brain and is shown to be related to quicker and more advanced thinking skills. Some interventions exist at the individual level – such as educational interventions that teach people about healthy diets—but need to exist at the structural level, as well (such as helping people in food deserts access healthy, affordable food or working as a community to create safe, comfortable spaces to exercise). As one example, youth sports leagues focus on both physically and emotionally safe environments.

Example 9

Bullying → Social-emotional learning (SEL) skills → Agency

Bullying harms both those who are bullied and those who bully. Social and emotional learning (SEL) interventions can build agency in both the recipient of the bullying and the person bullying and give them more recourse for how to respond.

Whether bullying is verbal, physical, or electronic, harmful treatment of others can cause substantial emotional distress to those who are bullied. Often, the person who is bullying is struggling as well: Bullying is often, though not always, an externalizing behavior stemming from a person's own distress. Sometimes this distress requires significant treatment like mental health care but other times, teaching skills such as empathy and emotion management can help a person who bullies better understand how hurtful their behavior is.

Programs that intentionally develop the social and emotional learning (SEL) skills of youth can help both the person who bullies and the person who is bullied. For example, CASEL highlights five key components of SEL—self-awareness, self-management, social awareness, relationship skills, and responsible decision making. Such interventions can help individuals who bully and those who are bullied develop the skills they need to recognize and manage their emotional responses—to either bullying or the triggers that cause them to bully—and have more agency over their behaviors and responses.

Example 10

Low educational engagement \rightarrow Goal-setting curriculum \rightarrow College/career readiness

For students who are not engaged in schoolwork, a curriculum focused on identifying life goals with real-life application can help them achieve success in school and life. Such a curriculum could, among other things, foster better knowledge of what youth need to do to be college-ready.

Being engaged in schoolwork is an essential element of school success. A goal-setting curriculum (like the pregnancy prevention El Camino initiative that Child Trends developed) can help students set personal goals and identify how their school attendance, educational effort, homework completion, and positive connections to supportive teachers can help them be more prepared for college and work. By also supporting young people to avoid unplanned pregnancies, curricula like El Camino can help them achieve their college and career goals more easily.

Example 11

Low social capital \rightarrow Mentoring \rightarrow Assertiveness

If a lack of social capital can be addressed by providing a mentor, varied competencies may be enhanced, including a young person's ability to be more assertive about their own needs.



Some adolescents have less social capital than others, meaning they lack the nonfinancial resources that others have gained from trusted and supportive social networks. Through mentoring, a young person can expand their social capital by developing a relationship with a nonfamilial adult. Mentoring can support the development of assertiveness skills when the mentor becomes a role model and supports a young person in setting goals, seeking assistance, and asserting their rights and needs.

Example 12

Foster care → Motivational interviewing → Autonomy

Youth aging out of foster care can benefit from a program that identifies what motivates them as an individual and supports the competencies needed for autonomy and success in life.

Youth who age out of foster care often experience problems with housing, finances, and other resources, all of which undermine their efforts to become self-sufficient and successful. These youth can benefit from a supportive program that provides stability, resources, and social-emotional supports.

One such support, motivational interviewing, is a client-centered technique in which a counselor seeks to find the young person's own motivation rather than forcing an external motivator upon them. Motivational interviewing involves "meeting people where they are" because the counselor expresses acceptance of and respect for the client, explores their feelings without judgment, and promotes change by motivating the client to want to improve their own circumstances and outcomes. Conversations focus on specific problems or challenges, and the counselor is empathic and skillful in helping the young person define their own goals. This approach can build critical life skills in youth aging out of foster care, including self-reliance and autonomy.

Example 13

Historical trauma → Experiential learning → Civic engagement

Historical trauma can impact a community's sense of itself and its agency to effect change. Opportunities to learn experientially about history in a hands-on way can empower people to more actively engage in their present community through civic engagement.

Collective trauma in a larger group of people can have significant effects that are passed on to future generations, both genetically and in the narratives by which a community defines itself. Historical trauma (also called intergenerational trauma, transgenerational trauma, or collective trauma) is the cumulative emotional and psychological toll that results from group trauma, regardless of whether it has been personally experienced.

Growing up with these kinds of community narratives can be difficult; however, opportunities for experiential learning about the past (through re-enactment or visiting sites) and learning about present-day policies and inequities in a hands-on way can benefit young people. Gaining a better understanding of the circumstances around a community's past experiences (as well as the experiences of other groups) can help young people process trauma. It can also empower young people to be more civically engaged, as a way of processing their trauma, moving forward from it, or working to address inequities that may still affect themselves and others.



Example 14

Sexism → Service learning (community service) → Emotional intelligence

Discriminating against others because of their sex or gender identity can be hurtful to the targets of that discrimination. Engaging in service learning opportunities can help young people develop their emotional intelligence skills by helping them become more aware of the feelings of those around them.

Sexism is discrimination against another person on the basis of their sex (male vs. female) or gender identity. Examples of sexism include telling a girl or young woman that she should not try to become a mathematician or that girls are inherently bad at doing mechanical repairs around the house; a boy might be told not to cry "like a girl" or discouraged from pursuing a job perceived as feminine (such as nursing).

Opportunities for service learning—community service with an active, reflective component—provide youth with chances to meet and work with people whose life experiences differ from their own and who may view gender norms or roles differently. For example, a girl who engages in service learning with Habitat for Humanity on a team led by a woman may learn that women can, in fact, do mechanical repairs around the house. Similarly, a young man who volunteers in an emergency animal shelter may learn from male veterinarians and other male volunteers that identifying and sharing one's emotions with others can be helpful, and even an indicator of strength. Through interactions like these, youth can expand their understanding of other people's goals and strengths and improve their emotional intelligence.

Example 15

School climate → Two-generation approaches → Resilience

A child who goes to a school with a negative school climate can be supported through two-generation approaches that engage the parent to support their child to develop strength and resiliency.

Positive school climate refers to the experiences and relationships that make a young person feel safe, supported, and welcome in their school. In contrast, bullying by other students, violence in the school, or teachers who do not discipline in fair or consistent ways can create a negative school climate that feels unwelcoming or unsafe. Such an environment is not conducive to learning.

Two-generation approaches attempt to support both children and their parents in the same intervention. When parents better understand the environment and experiences of their child in school, they can help the child think about ways to address adverse situations, determine which adults are available for support, and (when few changes can be made) how to find resources in other settings. These skills—problem-solving, leaning on others for support, finding other coping mechanisms and safe environments, or knowing when to switch schools—are examples of resiliency in a young person.

Example 16

Adverse Childhood Experiences (ACEs) → Safe spaces → Physical health

Adverse Childhood Experiences (or ACEs) can be associated with feeling unsafe or unstable. Youth who have safe spaces (such as afterschool programs, churches, or homes) and strong relationships with safe, reliable adults can be physically healthier than their peers who do not.

Adverse Childhood Experiences (ACEs) are negative and potentially traumatic experiences that happen to children. They can include experiences of abuse, homelessness, or violence, or the occurrence of a natural disaster. Many children experience at least ACE; as the number of experiences increases, repercussions can become very negative. Safe spaces and safe relationships in those spaces can help young people respond to these often stressful, scary, or physically harmful experiences. A child's knowledge that they are safe at



home, at school, at church, with their sports team, or at a family member's house can mitigate the effects of negative experiences and result in better physical health.

