

# YOUTH DEVELOPMENT: AN OVERVIEW OF RELATED FACTORS AND INTERVENTIONS



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*Abstract: Research has found that adolescence sets the course for an individual's long-term social, cognitive, emotional, and cultural development. Many factors play a role in positive youth development and building protective factors in adolescence can serve as a buffer against risk factors. This review examines literature on positive youth development, risk and protective factors, and the research behind select interventions.*

## Introduction

Adolescence is an extremely influential time in an individual's life, setting the trajectory for development (including social, cognitive, emotional, and cultural) and behavior across a lifetime.<sup>1</sup> Youth that engage in antisocial behaviors and/or have adverse childhood experiences (ACEs) are at greater risk for future problem behavior and negative physical and mental health outcomes.<sup>2</sup> While many policies and programs target the risk factors and negative experiences in a youth's life, positive youth development focuses on expanding youths' inherent strengths as a way to promote positive behavior while also decreasing risky behaviors.<sup>3</sup> Positive youth development recognizes that preventing problems is not a complete solution; youth also should be properly prepared for encountering life problems by positive asset enhancement.<sup>4</sup> Positive youth development assumes that childhood is a time of relative plasticity, and youths' trajectory is impacted by the relationships between biology, psychology, family, community, culture, and history.<sup>5</sup>

### Youth's Risk and Protective Factors

In the context of youth development, protective factors refer to experiences that decrease the likelihood of negative outcomes and increase the likelihood of positive outcomes.<sup>6</sup> Risk factors, on the other hand, refer to events that decrease the likelihood of positive outcomes and increase the chances of negative outcomes.<sup>7</sup> Risk and protective factors can be intrinsic or extrinsic, typically co-occur in individuals, and are not uniform across all social groups.<sup>8</sup> These factors also expand across domains: family, peer, community, and school.<sup>9</sup> Protective factors can act as a buffer against the impact of risk factors.<sup>10</sup> Positive youth development recognizes that increasing protective factors can be just as impactful as decreasing risk factors as it allows youth to establish healthy coping skills and sustained positive development. *Table 1* highlights some important risk and protective factors found in youth development literature.

**Table 1**  
**Select Risk and Protective Factors for Youth, by Domain**

<b>Domain</b>	<b>Risk Factors</b>	<b>Protective Factors</b>
<b>Family</b>	Inconsistent/harsh punishment	Reliable support and discipline from caregivers
	Lack of parental supervision/monitoring	Adequate socioeconomic resources
	Low levels of family bonding	High levels of family bonding
	High levels of family conflict	Adequate parental supervision
<b>School/Community</b>	Negative relationships with peers and teachers	Positive relationships with peers and teachers
	Involvement with antisocial activities and antisocial peers	Involvement with prosocial activities and prosocial peers

	Poor school performance/engagement	Positive school performance/engagement
<b>Individual</b>	Negative self-image/self-esteem	Ability to self-regulate emotions and cope
	Poor impulse control	Ability to get along with peers and adults
	Poor social and problem-solving skills	High self-esteem/resiliency
	Insecure attachment	Engagement with/connection to school, peers, culture, religion, etc.
	Lack of goals/commitment to conventional roles	Future oriented

Adapted from: U.S. Department of Health and Human Services. (2009). *Risk and protective factors for mental, emotional, and behavioral disorders across the life cycle*. Retrieved from <https://bit.ly/2mFm3ky>.

**Youth Development Interventions**

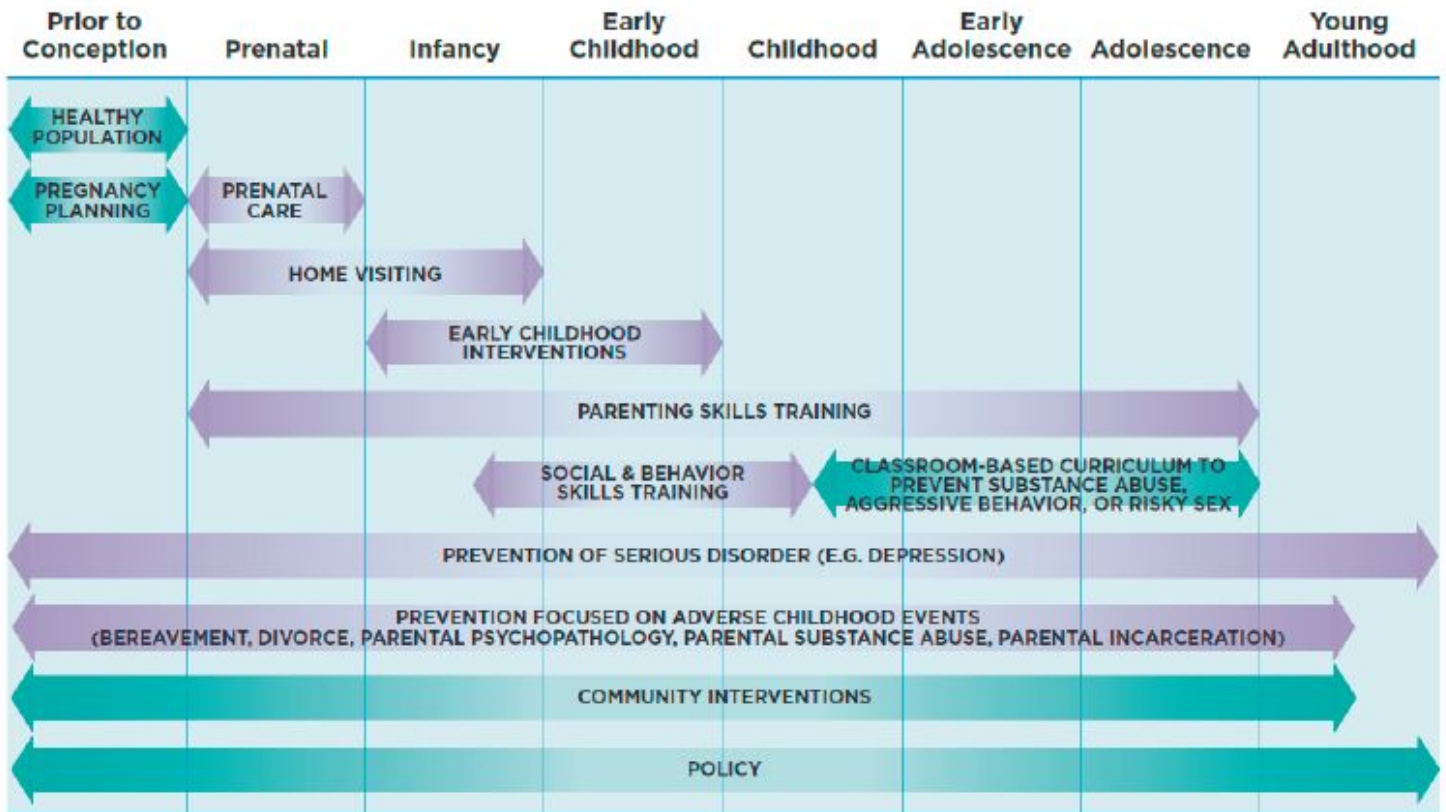
While there is no universally adopted definition, youth development programs typically seek to increase exposure to positive, supportive environments that allow for skill-building experiences.<sup>11</sup> Youth development programming commonly targets the “Five C’s” of positive youth development: competence, confidence, character, connection, and caring.<sup>12</sup> Bernat and Resnick (2006) argue that the components of effective youth development programs are:

- A foundation in relevant theory and incorporation of validated strategies and/or best practices.
- The promotion of protective factors and reduction in risk factors.
- A focus on multiple behaviors and systems.
- A focus on preventing problems and promoting healthy development.
- The appropriate intensity and duration.
- Continuous, rigorous evaluation.<sup>13</sup>

Some youth development interventions are more applicable to and impactful during certain developmental stages.<sup>14</sup> *Figure 1* illustrates relevant intervention themes across the youth developmental stages.

Figure 1

Interventions Across the Life-Course



Source: National Academies of Sciences, Engineering, and Medicine. (2019).

Age cutoffs for these life-course stages vary by source, but are generally as follows:

- *Infancy*, 0-2 years old. This time period contains a large amount of growth and change. During this time period, infants learn to roll over, crawl, walk, and improve on hand-eye coordination.<sup>15</sup>
- *Early childhood*, 3-5 years old. During early childhood, children learn language, gain a sense of independence, and begin preschool.<sup>16</sup> During early childhood, youth learn to spend time away from caregivers and tend to be extremely curious.<sup>17</sup>
- *Childhood*, 6-11 years old. This stage is marked by entrance into elementary school, and the growth of mental, physical, language, and social skills.<sup>18</sup> During this time period, youth tend to form groups and seek out approval from peers.<sup>19</sup>
- *Early Adolescence*, 12-14 years old. The physical changes of puberty typically begin during this time period. Youth tend to seek approval from peers over their parental figures.<sup>20</sup> Cognitively, youth begin to truly understand the concepts of cause and effect and are ready for in-depth, long-term thinking.<sup>21</sup>
- *Adolescence*, 15-17 years old. During this stage, youth continue to experience the physical changes of puberty and develop interest in romantic and sexual relationships.<sup>22</sup>

Brain development continues and many youth strive to become independent from authority figures.<sup>23</sup> During this time period, youth typically start high school.

- *Young adulthood*, 18 years old and up. This stage is highlighted by complete physical development and the final stages of the development of impulse control and gauging risks/rewards.<sup>24</sup> The age that completes young adulthood is debated across many fields. Psychology and brain studies have indicated that the brain is not completely developed until the mid-20s, suggesting that young adulthood extends until close to 30 years old.<sup>25</sup>

Youth development interventions can also target a variety of different developmental aspects: cognitive, social, emotional, moral, or physical. A meta-analysis of randomized control trials (considered the “gold standard” of research studies) of youth development programs found that youth development interventions had significant, albeit small, effect on youths’ academic achievement and psychological adjustment independent of program characteristics and participant age.<sup>26</sup>

### Description of Select Youth Development Programs

A wide variety of evidence-informed and evidence-based youth development programs are available for application in communities. Program ratings are offered by the [Blueprints for Healthy Youth Development](#), a registry of 89 evidence-based interventions that have been found to reduce antisocial behavior and promote healthy development in youth. Blueprints [certifies](#) programs as “promising,” “model,” or “model plus” programs.

- A *promising* intervention is one that meets the minimum standards of effectiveness.
- A *model* intervention meets a higher standard of effectiveness and indicates greater confidence in the program’s ability to change behavior and targeted outcomes.
- A *model plus* intervention meets all standards met by a model intervention plus has been replicated independently from the original program.

Similarly, [CrimeSolutions.gov](#) is a registry of programs/practices and their impact on criminal justice, juvenile justice, and crime victim services outcomes. Crime Solutions [rates](#) interventions as “no effects,” “inconclusive,” “promising,” or “effective.”

- An intervention rated as *no effects* has strong evidence suggesting that there were no effects or had harmful effects when implemented with fidelity.
- An *inconclusive* intervention made it past the initial review but has inconclusive evidence.
- A *promising* intervention has some evidence indicating that they achieve intended outcomes.
- An *effective* intervention has strong evidence to suggest that it achieves the intended outcomes when implemented with fidelity.

The following programs offer varied services and delivery methods (community, school, or home). This list provides a glimpse into the variety of evidence-informed/evidence-based

interventions that exist to target youth development, organized by their ratings from Blueprints for Healthy Youth Development.

### **Promising Programs**

**Big Brothers Big Sisters of America.** This community mentoring program matches adult mentors to at-risk children based on goals and interests of the mentor and child.<sup>27</sup> Big Brothers Big Sisters seeks to foster positive relationships between youth and their mentors. Further, mentors and youth set and work toward personalized goals for the youth.<sup>28</sup> Research on this program indicates youth participating in Big Brothers Big Sisters are less likely to initiate illicit drug and alcohol use, are less likely to skip school and cut class, have improved grades, and improved relationships with parents and peers.<sup>29</sup> In addition to the Blueprints for Healthy Youth Development rating, Crime Solutions rates Big Brothers Big Sisters as effective.

**Child First.** This home-based intervention works with vulnerable children (prenatal through five years) and their families.<sup>30</sup> Child First has two components: a system of care that works to decrease stress and promote positive outcomes and a relationship-based approach that works to heal trauma by enhancing positive parent-child relationships and promoting positive social-emotional/cognitive development.<sup>31</sup> A randomized control trial of Child First showed children receiving the intervention had improved language and externalizing one-year after receiving the intervention. Further, mothers had less parenting stress six months after receiving the intervention and fewer negative mental health symptoms one-year after receiving the intervention.<sup>32</sup>

**Familias Unidas.** This culturally-specific intervention is targeted toward Hispanic youth and immigrant parents and works to improve family functioning and prevent conduct disorders, drug/alcohol use, and risky sexual behaviors in youth.<sup>33</sup> Program delivery consists of family visits and multi-parent groups engaged in participatory exercises. Familias Unidas evaluators found the intervention improves family functioning and communication between children and parents and reduces illicit drug use and conduct problems.<sup>34</sup> In addition to the Blueprints for Healthy Youth Development rating, Crime Solutions rates Familias Unidas as promising.

### **Model Programs**

**ParentCorps.** This program seeks to enhance pre-K programming for children of color in low-income communities through the promotion of effective parenting practices and the prevention of problem behaviors.<sup>35</sup> ParentCorps recognizes families from typically high-risk environments have many strengths. The program contains three main components: professional learning for teachers/leaders/mental health professionals/parent support staff, a parenting program for families of pre-K students, and social emotional classroom learning for pre-K students.<sup>36</sup> ParentCorps evaluators found that, compared to the control group, participant parenting practices improved while children experienced a reduction in behavioral problems.<sup>37</sup> Other studies showed that, at the end of their kindergarten year, youth in the program scored higher on academic achievement tests and teacher-rated academic performance and parent

participants had higher parent/teacher-rated effective parenting practices.<sup>38</sup> Further, youth in the program increased academic performance and reduced internalizing and externalizing problems through 8 years of age.<sup>39</sup>

**GenerationPMTO.** Originally titled Parent Management Training-Oregon Model, this program seeks to teach family management skills to reduce antisocial behavior in children ages 3 to 16.<sup>40</sup> The program aims to teach core parenting practices (skill encouragement, effective discipline, monitoring, problem solving, and positive involvement) along with regulating emotions, giving clear directions, tracking behavior, and promoting school success.<sup>41</sup> Generation PMTO evaluators identified reductions in coercive parenting, improvements in youths' socio-emotional functioning and social skills, and reductions in deviant behavior with program participation.<sup>42</sup>

**Functional Family Therapy (FFT).** FFT is a short-term intervention for youth at risk for institutionalization and their families.<sup>43</sup> This intervention seeks to improve family communications/support while decreasing negative and problem behaviors.<sup>44</sup> FFT targets cognitive, emotional, and behavioral domains in both youth and their families through five distinct phases.<sup>45</sup> FFT evaluators found the program reduced recidivism rates, reduced days of drug/alcohol use, and led to improvements in internalizing/externalizing behaviors.<sup>46</sup> In addition to the Blueprints for Healthy Youth Development rating, Crime Solutions rates FFT as effective.

### **Model Plus Programs**

**LifeSkills Training (LST).** This three-year, classroom-based substance abuse prevention program targets middle school students. LST teaches self-management skills, social skills, and resistance skills specifically targeting drug use.<sup>47</sup> Program evaluators found LST participants had lower rates of cigarette use, binge drinking, and illicit drug use (including methamphetamine, marijuana, opioids, and hallucinogens).<sup>48</sup> Additionally, research suggests LST participation increases life-skills and substance abuse knowledge and reduces future delinquency and fighting.<sup>49</sup> In addition to the Blueprints for Healthy Youth Development rating, Crime Solutions rates LST as effective.

**Multisystemic Therapy (MST).** MST is an intensive family and community-based treatment that targets the causes of antisocial behavior in justice-system involved juveniles.<sup>50</sup> This intervention seeks to give parents the necessary skills and resources to teach their children how to cope with family, peer, school, and neighborhood problems.<sup>51</sup> The targeted age group includes middle- and high school-aged youth— typically juveniles who frequently commit offenses.<sup>52</sup> MST evaluators found that those receiving the intervention have lower rearrest and recidivism rates, increased family cohesion, and heightened youth functioning.<sup>53</sup> In addition to the Blueprints for Healthy Youth Development rating, Crime Solutions rates MST as effective.

### **Conclusion**

Approaches to youth development highlight the relationships between biology, psychology, family, community, and culture in a youth's life. Moreover, those supporting youth development

acknowledge that the quality of a person's childhood is critical to outcomes in adulthood. Interventions intended to set youth on a positive life trajectory must target protective factors in addition to risk factors. Research supports the effectiveness of several promising, model, and model plus programs/interventions in the field of youth development. While researchers should continue to evaluate programming to more precisely determine the impacts of specific program components, policymakers should focus their attention on rigorous, systematically evaluated youth development interventions to ensure youth are connected to programs most likely to guide them toward a better future.

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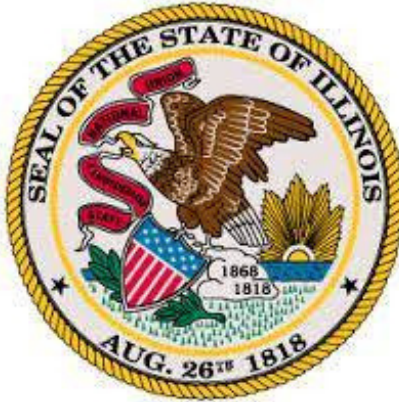
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