



Adolescent Development

May 2016

HOW CAN WE HELP YOUTH STAY ON TRACK AND DELAY PARENTHOOD?

Adolescent development extends beyond the physiological changes that occur in adolescence. It also encompasses cognitive, emotional, social, sexual, identity formation, and spiritual change and growth. Providing youth with the right developmental skills and competencies can help them overcome the challenges they encounter during the adolescent period.

Vulnerable youth face the highest risks and are in particular need of assistance during this transitional period to adulthood. The term *vulnerable youth* is used to describe youth who, due to varying life circumstances, may be more at-risk and experience additional challenges during their transition from adolescence to adulthood. Vulnerable youth include youth in foster care, runaway and homeless youth, LGBTQ youth, pregnant and parenting teens, children of incarcerated parents, justice-involved youth, and youth with intellectual and learning disabilities.

Providing youth with positive development training can help give them the tools they need. A common approach to positive development training is framed around the “5 C’s”: competence, confidence, character, connection, and caring/compassion.¹ By incorporating the 5 C’s, adolescents are allowed to develop core assets through experience, learning, and practice of skills that will delay pregnancy and lead to healthy adolescent development.

WHAT WE KNOW

- Pregnancy and birth are significant contributors to high school dropout rates among girls. Only about half of teen mothers receive a high school diploma by 22 years of age.²
- Teens who have low expectations and aspirations for their futures, or feel that they lack control over their lives, are more likely to experience a pregnancy.^{3,4}
- Youth with a natural mentoring relationship were more likely to report favorable outcomes in the areas of education/work, problem behavior, psychological well-being, and physical health, including regular use of contraception.⁵
- Successful adolescent development can be viewed from a more positive perspective as a product of preparation and capacity building, rather than simply the absence or management of problems.^{6,7}

- The adolescent brain continues to develop into mid-twenties. Young adults may also benefit from continued support and mentoring. *The Teen Years Explained: A Guide to Healthy Adolescent Development* is an informative resource that can assist in making the connections to adolescent development and adolescent pregnancy prevention efforts. Teens involved in foster care or the juvenile justice system are at increased risk for pregnancy, dropping out of school, and unemployment. These risks heighten as teens age out of foster care systems.⁸

TIPS FOR INTEGRATING ADOLESCENT DEVELOPMENT CONTENT INTO YOUR PROGRAM

- **Provide opportunities for community involvement to all program participants.**
 - Assist youth in identifying volunteer opportunities that allow them to develop their skills and competencies while making positive contributions to their community.
 - Encourage youth to serve as youth leaders and peer mentors in the community to engage and support youth in the future.
- **Increase buy-in from program participants by making their voice matter.**
 - Provide youth satisfaction surveys to all program participants and ensure that their suggestions are implemented.
 - Share data with youth to engage them as stakeholders of the program.
 - Promote meaningful youth-adult partnerships throughout programs, places, and policies.

SPECIFIC RESOURCES AND EXAMPLES

Evidence-based or Evidence-informed Interventions

- **Life Skills Training** is an evidence-based, school-based alcohol and drug use prevention curriculum. It can be implemented for youth in 7th to 9th grade. It builds upon self-esteem and fosters key skills to resist peer pressure and media influences.
- **Positive Youth Development Collaboration** is an 18-session curricula for middle and high school-aged youth, focusing on substance use attitudes and behaviors. The curricula focuses on effective decision-making; tobacco, alcohol, and other drug use; and goals for healthy living.
- **Smart Girls Life Skills Training** is an 8-class curricula for middle school-aged girls. The curricula focuses on positive decision-making; prevention of pregnancy, HIV, other STIs, and risky sexual behaviors.
- **Informed Parents and Children Together** is an evidence-based, home-based curricula for low-income youth. It can be implemented for youth aged 12–16 years and consists of a video, workbook, and discussion focused on substance use prevention, parent-child communication, and sexual health.

For more information about these programs, please see:

<http://www.childtrends.org/what-works/list-of-programs/>

http://www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy/db/

Online Resources

- http://www.actforyouth.net/youth_development/: ACT for Youth Center of Excellence’s information and toolkit on adolescent development.
- http://www.hhs.gov/ash/oah/resources-and-publications/publications/positive_youth_development.html: Office of Adolescent Health’s resources and tools on adolescent development.

- <https://thenationalcampaign.org/resource/help-me-succeed> National Campaign’s resource on engaging foster care and juvenile justice communities.
- McNeely, C. A., & Blanchard, J. (2009) *The teen years explained: A guide to healthy adolescent development*. Baltimore, MD: Johns Hopkins University Center for Adolescent Health. <http://www.jhsph.edu/research/centers-and-institutes/center-for-adolescent-health/ includes/ pre-redesign/Interactive%20Guide.pdf>

REFERENCES AND RESOURCES

1. Pittman, K., Irby, M., Tolman, J., N. Yohalem, N., & Ferber, T. (2003). Preventing problems, promoting development, encouraging engagement. Forum for Youth Investment.
2. Centers for Disease Control and Prevention. (2016). *Reproductive health: Teen pregnancy*. Retrieved from: <http://www.cdc.gov/teenpregnancy/about/index.htm>
3. Harden, A., Brunton, G., Fletcher, A., & Oakley, A. (2009). Teenage pregnancy and social disadvantage: Systematic review integrating controlled trials and qualitative studies. *BMJ*, 339(b4254), 1–11.
4. Advocates for Youth. (2008). *Unintended pregnancy among young people in the United States*. Retrieved from: <http://advocatesforyouth.org/publications/publications-a-z/1909-unintended-pregnancy-among-young-people-in-the-united-states>
5. DuBois, D. L., & Silverthorn, N. (2005). Natural mentoring relationships and adolescent health: Evidence from a national study. *American Journal of Public Health*, 95(3), 518–524.
6. Cheon, J. W. (2008) Best practice in community-based prevention for youth substance reduction: Towards strengths-based positive development policy. *Journal of Community Psychology*, 36(6), 761–779.
7. Roth, J., & Brooks-Gunn, J. (2003) Youth development programs: Risk, prevention, and policy. *Journal of Adolescent Health*, 32(3), 170–182.
8. The National Campaign to Prevent Teen and Unplanned Pregnancy (N.D.). *Preventing Teen Pregnancy Through Outreach and Engagement: Tips for Working with Foster Care and Juvenile Justice*, Washington, DC: Author. Retrieved from: <https://thenationalcampaign.org/resource/tips-working-foster-care-and-juvenile-justice-0>

This tip sheet was developed by the RTI Training and Technical Assistance Team, a subcontractor to RTI International under contract #HHSP233200951WC Task 25 with the U.S. Department of Health and Human Services, Administration on Children, Youth and Families, Family and Youth Services Bureau.