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Urban Neighborhoods and the Generation of Opportunity: An Assessment of Impact

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It has been more than a century and a half since the Industrial Revolution began. This period frames the emergence and maturation of the modern American city and its social structure. In the industrial age, the city has served as an engine of opportunity for generations of young people. This engine was fueled and sustained by a robust economy, population growth, and mobility. The engine is associated with the birth of the working class and the middle class (Kerr et al., 1994, Bell, 1994, Thernstrom, 1964, Warner, 1969).

Opportunities to enter into the working class and then the middle class have been extended to the formerly poor and their offspring, to sons and daughters of former slaves, and to waves of immigrants. While the engine has not performed perfectly or extended opportunities on an equal basis, it has been powerful even for those who received less than their "fair share" of industrial opportunity.

At present and for the last two decades, the engine has not worked well for those as the bottom of the income distribution (Karsarda, 1989, 1990). While the incidence of poverty has not increased greatly in recent years, the depth, persistence and concentration of poverty have increased. Not only are the current poor not advancing, the poverty of the adults becomes a present and future liability for children who are not being prepared for the world they will enter.

The Crisis We Face

It is not useful to repeat in this paper the well known statistics documenting an urban crisis facing neighborhoods and their inhabitants. A simple listing of some key conclusions from research will suffice to set the context (Jargowsky, 1997, Elder et al, 1995, Blakely, 1994, Hernandez, 1997).

- While the incidence of poverty has not changed dramatically in recent years, the concentration of poverty has increased.
- While the overall incidence of poverty has not increased dramatically, the percentage of all children who will spend time in poverty is a growing concern and has serious implications not addressed in public policy.
- There is a broad consensus that the status of black males is at a crisis level. Social indicators for this group are consistently more serious than for other race and gender groups.
- The depth of poverty in low-income families has increased as measured by the percent of the total that have very low income.
- Poverty increasingly is not associated with limited attachment in the labor force. Many poor people work.
- While many poor people do work, those who have little to offer the labor force and bring with them multiple problems and risks from the point of view of employers are growing in number and are becoming harder to reach.
- While "underclass" is a pejorative term, the persistence of poverty and very low income are associated with being outside the mainstream economy, where one's prospects are not influenced by the larger economy. Economic growth and regional prosperity do not help very low-income households.
- Teenage isolation from the labor market continues to be serious as more than half of such young people who are in the labor force or who seek summer jobs are unable to find employment.

While the conclusions cited here are depressing, it is important to point out that there continues to be evidence of resilience (Masten, 1994, Egeland et al., 1993, Werner and Smith, 1992). The minority middle class, for the most part, comes from the upward mobility of formerly low-income young people who, despite what they faced in their neighborhood, managed to get a solid preparation for college and the motivation to pursue possibilities others in their community saw as futile or risky.

Accepting this "engine" metaphor requires the reader to accept that while national economic forces and policies are important, critical local resources also matter, and that the city is the principal locus of the transactions that matter for young people and their families. Being in a city helps, but being in the right neighborhood increases the chance to gain the benefits we will describe as associated with neighborhoods. As we shall point out, being in the right neighborhood is important but not sufficient.

There are several ways cities have played the role of opportunity producers. In this paper we explore from the perspective of city planning and public policy what the dynamics of this opportunity generation have been. Our main goal here is to discuss some historical "technology" by which opportunities have been generated by cities and neighborhoods. We compare the past dynamics with current reality and conclude that the old dynamics do not work nearly as well as they once did.

We can start this discussion by looking at the ways cities shape opportunity for their inhabitants. There are popular images of what constitutes a "good" neighborhood and a "bad neighborhood" for children and families. Some of these are summarized in the figure below. More formal work in this area, that is both conceptual and policy-related, is just beginning (Coulton, 1996). While these images are simplistic, they are powerful in shaping both public

policy and private actions. These images are not incorrect and do contain elements of truth. They drive the presentation of the city in the public's mind and thereby help to shape politics. Our immediate goal is not to document or challenge these impressions. I propose instead to describe the urban development process, which is one means by which opportunity for individuals and families is generated and allocated in cities. There are in fact six subprocesses

Figure 1

Conventional Images: The "Good" and "Bad" Neighborhood

In the "good" neighborhood, ...	In the "bad" neighborhood, ...
• the basic needs of the people are met	• many families do not have their basic needs met
• young people are supported and protected	• young people are often neglected and abused
• adults work and find meaning in their jobs	• many adults do not work and mainstream work is unstable and unrewarding -- "work is for chumps" (suckers)
• young people are motivated to learn and this motivation becomes part of "peer pressure"	• there is a lack of support for, or even hostility to, young people with an achievement motivation
• young people have venues for taking safe risks and participating in community life	• the energy and curiosity of young people are not channeled and may be used to experiment in harmful or risky ways
• education is valued and viewed as a dependable lever for mobility	• schools are not effective and education is not always valued highly; returns for education are not viewed as high or dependable
• the neighborhood is a supportive venue for both family and social interaction	• housing and physical environment are sometimes frightening and insecure, often isolated and inadequate
• social relations extend the power and influence of the family and engage the neighborhood as the "village" that raises the child	• social relations outside the family are unreliable and even dangerous; parents have to protect kids from their neighbors
• residents are committed to working together to preserve the neighborhood and increase its value to them	• residents want to get out of the neighborhood
• residents get respect from political leaders	• politicians may assume residents do not vote; residents do not vote because they feel their vote will not matter
• services and institutions are locally supported and extend and supplement what families provide	• services and institutions, typically supported by outside forces, attempt to offer resources for survival, basic services, and enrichment

at work. While we ultimately expect these subprocesses to add up to produce opportunity for individuals and families, it is important to note that these processes are in fact quite separate. Each city, for a particular point in time, can be judged differently on where it stands in each of these subprocesses.* Changes in one of these dimensions may not be accompanied by progress in another. Some cities are exemplary in their achievements in several areas, but have serious shortcomings in other areas. These differences may vary even for different parts of the same city and within a generation.

This urban development process has its limitations in providing ready assurance that the economic and social progress of an era will in fact become a benefit to urban residents. The process also falls short in assuring equal opportunity. Blacks and whites encounter the city differently depending on the city, the neighborhood in which they live, and other factors (such as class or age).

Let us look at each of the subprocesses in terms of what role it plays in generating and shaping opportunities. Throughout the paper, we will go back and forth between the city and neighborhoods. Neighborhoods are important because they are "packages" that one gets in living in the city. The "neighborhood package" contains housing status, school quality, services type and quality, social status, and a set of social features and other resources that determine what children get to shape their early years. The subprocesses are discussed below.

1. Cities create, facilitate, and shape land markets. Land uses in the city are a result of public and private decisions, mediated through various laws and regulations, and the market. Housing goes to certain areas, commerce to others, and mixed use is in others. Once the broad pattern has been established, the land development process, public policy, and the market account for how space is reallocated from one user or use to another, and how large areas of the city are able to compete for the new job opportunities, new residential settings, and the fiscal benefits that are derived from the value that the land sorting has produced.

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* As used here, "city" refers to the central city and its neighborhoods. Where appropriate, we contrast the city with the suburbs.

The critical question is whether this process systematically works against the interests of some and for the interests of others with respect to the generation of opportunity. In recent years, there has been a variety of ways in which the structure of opportunity has been fundamentally shaped by this process. For example, as some middle-class households and single people have discovered the value of cities, been priced out of choice suburbs, or as institutions such as universities and hospitals have expanded, low-income residents have been displaced to make way for higher-income groups or institutions who outbid them for the land. As the poor have fewer resources, this process has resulted in an increased concentration of the poor (Karsarda, 1997).

2. *The city is the locus of regional economic resources that create opportunity.* For much of American urban history, and to a significant but smaller degree today, the city has been the center of economic opportunity. Suburbs are of recent origin and rural areas have long since faded in their importance in this regard. Many original urban neighborhoods emerged within walking distance of the factories at which residents worked. Early transportation systems aided in moving residents around the city to new communities that emerged to accommodate growth and to frame the class ecology of cities. Rich people lived on hills and other choice sites, while the poor lived in areas that were less attractive. Industries recruited from overseas, or in America's hinterland, to bring workers to their cities.

Early social-welfare activities helped new migrants and immigrants adjust to the American city and to the industrial order. As new demand emerged for workers, mechanisms to recruit, socialize, and train fresh prospects for the work force were developed. Going to the city was synonymous with moving to opportunity. The young men (and women) who did not go West did just fine in the city.

Economic opportunities were by no means equal, but they were substantially available. The opportunity to work, to see workplaces in one's community, and to see the culture of work respected in the neighborhood was reinforced in cities. Adults modeled work, and the neighborhood was a setting in which work was an important measure of worth.

As industrial processes requiring a new factory layout emerged in the 1950s and 1960s, and as many workers moved to the suburbs to take advantage of new housing opportunities, the

city began to lose its role as the center of their regional economy. The development of highway systems hastened this outward movement away from the city.

This suburbanization broke the long-established connection between the central city and opportunity. Cities not only started to fail to create new jobs, but started to lose them to the suburbs. A generation of young people is growing up never having seen a marketplace for jobs or other evidence that their home setting generates opportunity. They do not encounter industrial opportunity.

The metropolitan region, rather than having the city as its center of job growth, proceeded to develop multiple nodes of job growth. Suburbanites came to outnumber those residing in central cities. The state politics that had supported (or tolerated) the central city and a working-class framing of opportunity (i.e., pro-union, minimum wage, aggressive regulation, etc). became more conservative and suburban.

Through economic development policy, luck, and various strategies, most American regions have managed to identify and advance their competitive edge or identify a niche. They see regional opportunity structure as increasingly suburban. A growing number of suburban jobs go begging because they do not have enough workers. Other jobs that used to be in Northern cities are now in the South or Midwest. Gaps between North and South narrow while the gap between city and suburb widens.

3. The city is an arbiter of competing interests. There are many competing interests within cities and within their neighborhoods (Yates, 1977). This is true whether the venue is the economic sector or the residential sector. Each of these interests is a stakeholder. What each wants is, at some level, legitimate and selfish. With such claims, framing a public interest is difficult. Planners manage a "field of forces" rather than guide a rational advancement of the public interest.

Some interests are backed by resources that force others to deal with them; others are more powerless. The various stakeholders have different types of power: financial, political, moral, etc. Interests have different relationships with each other; alliances and "strange bedfellows" abound. Some are organized and able to exert influence, while others, especially low-

income families and youth, are not organized. Some individuals belong to several stakeholder groups. Some have interests grounded in particular areas of the city while others have ones of nonspace dimensions. The list below outlines some of the competing interests that operate within cities:

- Low-income families
- Working-class families
- Elderly persons and other special households
- Single adults and nonfamily households
- Various minority groups
- Youth and students
- Commuters
- Visitors and tourists
- Local consumers
- Neighborhood merchants and property owners
- Regional consumers
- Local institutions (i.e., hospitals, universities, etc).
- Commercial investors
- Residential investors and property owners
- The homeless
- "Community leaders"
- The "expected to invest" and the "expected to reside"
- The taxpayer

Over time, cities have developed mechanisms for dealing with the conflicts among these groups, though no solution is permanent. Some of the conflicts have to do with the allocation of public resources. Others have to do with the ways that public resources are used in response to the competing demands. A few are fundamental value conflicts that have to be settled. There are a number of mechanisms that cities have developed to resolve these conflicts. Some are handled with regulation or reallocation; others are settled by taxation or moral suasion. Still others are settled by establishing rights and preferences.

An important question to ask in the context of the goals of this workshop is how the interests of children and families can be framed in a more politically powerful way (Board on Children, Youth and Families, 1996). In cities, the emerging stakeholders -- investors, non-family households and region-serving interests -- are gaining while attention to poor children is not.

4. Cities provide the physical infrastructure that frames and extends human settlement. Cities play an important role in shaping the physical environment and in the application of technology to that environment. Cities build road systems, transit systems, install water and other utilities in ways that shape the physical city and, as a result, shape the social opportunities (Perry, 1995). The nature of the infrastructure shapes the ability of residents to move about the city and take advantage of the local array of opportunities and services. More than distance, the availability of infrastructure determines whether young people are isolated, whether there are public facilities and whether the common wealth is available to make up for a lack of family resources.

The maintenance of public buildings -- schools, libraries, public hospitals -- is important because they are located at the neighborhood level and provide public resources for those who cannot avail themselves of private options. Their presence defines the ability of neighborhoods to provide venues for the activities described in this paper as critical if the city is to be helpful to the social development of its young.

One of the major issues today facing the implementation of welfare reform and its success in promoting self-sufficiency is the provision of empowering services. A major obstacle in the creation of day-care services is the lack of appropriate and affordable space in which to offer child care. Neighborhoods where the physical infrastructure is in place will find it easier to focus resources and attention on programming and outreach. For a neighborhood to be in possession of the physical assets that it can use is empowering. To not have the facilities to achieve social goals helps to define a neighborhood that does not support the development of opportunity.

5. Cities incorporate new groups into their communities. A city's population can grow in two ways. First, growth can occur from a natural increase when births exceed deaths. Second, a local population can also increase when there is net immigration from other parts of the world and a net flow of migrants to the city from other places. Immigration has been a major source of recent

growth as well as of growth in other periods (Smith and Edmonston, 1997). At other times, cities grew because people moved to cities from rural areas or other regions.

Most central cities have not had net population growth in recent decades, but there have been major inflows of people nevertheless -- blacks from the South until the early 1970s, Puerto Ricans and Mexican Americans, Asians, and Central Americans more recently. Nearly all of these groups settled in cities and faced challenges in becoming part of their new communities. Young blacks who moved to big cities in the 1940s found industrial jobs that, even taking into account their unequal opportunity, were better than what they had left in the South. Opportunities for these workers would in fact expand. They became industrial workers in numbers to create a solid working class and in the next generation a growing middle class. Good jobs that helped the sons of post-war black migrants had disappeared by the time their grandchildren and great grandchildren reached adult years in the 1980s and 1990s (W.J. Wilson, 1997).

6. *Cities support the social fabric.* This final subprocess is the hardest to frame. Social fabric is important as a resource because neither the market nor government has sufficient will or capacity to initiate and implement social change . Even though we cannot define or offer rigorous proof, in the literature and in practice there are some indicators. Various studies have documented the importance of social fabric (Sampson, 1996, Suttles, 1968, 1972, Tempkin amd Rohe, 1997, Sullivan 1989). A neighborhood has social fabric when:

- there are shared values among members of the community on such matters as child rearing and the value of education, individual responsibility, mutual obligation, "family values," etc.;
- informal and voluntary associations enjoy broad participation;
- children are considered a community resource and their development is at the heart of how communities set priorities and assess themselves;
- informal institutions emerge to address community problems;

- community institutions and standards are understood and respected by community members and outsiders;
- there is a dense network of associations and obligation that cuts across generations and other types of segmentation (race, class, etc).
- community members celebrate successes that members experience and see the success of residents as a community asset and source of pride;
- loss, failure and suffering in the community stimulate support, renewal, and recommitment; and when
- community institutions nurture and support the development of leaders and frame and enforce accountability of leaders and members

Of course, having all these features is a high, and perhaps, impossible standard. Few places can boast of having all of these features all of time. The extreme and perfect case of fabric is probably the small village. The real world urban neighborhood that comes closest is probably the ethnic working-class neighborhood. Some immigrant and minority communities are able to have some other features as well, though they are more likely to be subcommunities rather than the larger concentrations. The point here is that social fabric and social capital are generated by a community and are then supported by that community.

Urban history is full of examples of the power of this history. Historical accounts of nineteenth-century immigrant communities tell of how they transplanted their "community" from Europe and used it as a transitional culture. Settlement houses were surrogate institutions for rural peasants needing to adapt to an industrial city. In more recent times, Gerald Suttles and Elijah Anderson have documented the informal social structure in urban neighborhoods.

Class need not be a key dimension, though the poorest and richest communities are more likely candidates for having absent or thin fabric. There are several implications for planners and policy analysts. The presence of fabric creates a strong foundation for collaborating with neighborhoods and using the strength of the community to boost the prospects that urban programs will be effective. Outreach and organizing are easier.

The absence of social fabric severely complicates planning. It is harder to obtain citizen input or to identify (or trust) "leaders." There are no institutions to build on or engage. Outreach to a fearful, cynical, or unorganized community is harder. When programs are mounted, participants are not supported by their families or neighbors; attrition is a problem, especially

with youth and young families. The absence of community partners means that outside agencies have to rely on surrogates to implement their programs. When the social fabric is frayed or missing, surrogate institutions initiated by public policy may substitute for its absence. Surrogate institutions take the place of absent social fabrics. "Big Brother" programs, Boys and Girls Clubs, etc. introduce males into female-dominated settings to provide the "father role." "Grandfamily" programs engage older women to help young mothers learn about their responsibilities and even support grandmothers in taking responsibility for children -- their own grandchildren or someone else's. Recreation programs are more than fun and games, and after-school programs provide a "home" (complete with milk, cookies, and homework coaching) for the 3-6 p.m. time slot. These surrogate organizations may be effective in delivering services, but are not necessarily effective in community-building.

There is a variety of ways that in which operate to shape and reinforce the social fabric. Two illustrations make the issue concrete. Police practices and styles of policing are influenced by the police interpretations of community standards and expectations. These interpretations shape how attentive the police are to domestic abuse, for example, and whether they are aggressive in enforcing the law when the issue is youth involvement in minor nuisances or violations. As Wilson found, they may be strict and formal or they may be more willing to set "outside bounds" and be tolerant of misbehavior within bounds (Wilson, J. Q., 1978).

The choice between these two approaches to policy depends on community voice, expectations and culture. The process explains the different ways the police may operate and are viewed in the same city. Some neighborhoods are able to be clearer in giving the signal to the police and have the clout to get support, while other neighborhoods are not. Policing in this second case is externally framed.

One may not consider social fabric to be an unmixed positive feature. It is largely positive, except that we should understand that the solidarity and fabric can also be organized in a negative way (Lukas, 1985, Suttles, 1968). Urban youth gangs, for example, may possess considerable social capital and perform important functions for gang members, families, and their (narrowly defined) community. The negative and criminal aspects are well known. It should also

be noted that the positive features -- from affiliation and "brotherhood" to "jobs" and protection -- are respected by some members of the neighborhood, even as they lament the control that the gangs might have over the area and the fear they produce. The organization of some neighborhoods to fight school desegregation or oppose "fair housing" are other illustrations of how social fabric can be negative.

When a community is clear about what it wants and is willing and able to act and array its resources to achieve a defined goal, it will, to some degree, get what it wants. When a community is clear about its standards in education, for example, its children will, more likely than not, behave and perform within an acceptable range. Teachers will have a strong incentive to cooperate and will feel supported. Other outsiders will respect the community's standards and may even be actively accommodating.

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Understanding these subprocesses goes a long way towards explaining how each city comes to have a unique history. Each generation adds to each process to make the city the dynamic organism it is. As each process evolves in a city, neighborhoods suffer or benefit differently and as a result, have different implications for generation of opportunity.

The Social Development Process

While this paper explores the connection of neighborhood change and social development outcomes for youth and families, we do not propose to undertake the same kind of analysis of the developmental processes children experience. Our contribution will focus on neighborhood features.

We do want to acknowledge some connection to the human development literature, however. Even though there are studies that document an association between good neighborhoods and the high incidence of positive outcomes for youth, this research is really a snapshot and discloses little about the process by which the outcomes are

generated. The various studies conclude that poor neighborhoods are more often than not associated with a higher incidence of negative outcomes. Yet we know that neighborhoods change over time and young people go through a variety of developmental stages. Such commonsensical conclusions do not help us understand the independent neighborhood influence in the context of experiences individual family members may be going through, the changes we know children have at different ages, and the influences of other realms such as school, nonneighborhood peer groups, and popular culture. In addition, a family will experience a variety of neighborhood dynamics as it moves from place to place. (The poor, especially renters, make frequent moves). Neighborhood effects notwithstanding, we also know that some total institutions, the military, for example, can generate dramatic transformations in young people from difficult backgrounds in a relatively short time frame (Moskos and Butler 1996). Neighborhoods are important, but so are other contributors to youth outcomes.

These methodological problems, as well as limitations in the types of data available, will for the time being constrain definitive research on the connection between social development and residential environments. My expected contribution here is to shed some light on the processes associated with neighborhood change and the ways these processes might influence the generation of opportunities for youth and families.

This exploration is especially relevant for young people in the latency and teen years, when children begin to have an experience with the neighborhood that is independent of their parents and when they as individuals might be expected to draw on neighborhood resources as part of their personal development.

Discussions at an earlier NRC workshop suggest consideration of the following as a way towards understanding the relationships between neighborhood resources and outcomes for family and children (Turner and Ellen, 1997, Furstenburg, 1994, Board on Children, Youth and Families, 1996, Brooks-Gunn et al., 1993). Neighborhoods are associated with economic resources and opportunities. Neighborhoods have an adult population who have certain characteristics that might be associated with their ability to parent and to provide resources. Neighborhoods have features that might give different levels of support to family life and social fabric. Neighborhoods have institutions, such as schools, churches, and recreational opportunities that represent resources for children. Finally, neighborhoods have lots of young people who form peer groups that sometimes become primary groups. Under some circumstances, these groups are very positive and reinforce the best of the community values, while in other cases the groups are powerful oppositional forces to mainstream adult values (Turner and Ellen, 1997, Commission on Behavioral and Social Sciences and Education, 1993).

For low-income and especially very low-income neighborhoods, the characteristics of the population (i.e., limited education, unemployment, etc). are concentrated, and the effects -- positive or negative -- are likewise concentrated. The literature is compelling in pointing to the negative effects of this social isolation of young people who have little to gain from their parents that will help them gain access to the economic mainstream. Poor neighborhoods do not benefit from the documented leavening effect of a mixed-income population, high-achieving students in local schools, or successful entrepreneurs and professionals as neighbors.

Connell has identified three development tasks for young people ages 12 to 19 (Connell et al., 1995). He suggests that they must learn to be productive, to connect, and to navigate. By productive, he means that young people must learn to understand the connection between effort and reward. This starts with grades and teacher evaluations in school and proceeds to wages and and promotions. Through understanding and valuing these rewards and through exposure to age-appropriate opportunities, young people make the transition to the world of work.

In terms of connection, the first bond young people make will be to their families, then to their extended families, then to their peers. We expect them to develop more confidence in their social relations with neighbors, and then with strangers. We expect them to engage adults and to gain confidence in these relationships. Finally, we expect young people to learn to navigate their environment, to deal with formal and informal organizational settings and to manipulate the environment. Neighborhoods differ to the extent in which they provide opportunities for young people to learn to be productive, to connect, and to navigate.

It is also important to note that young people connect with a variety of realms. The neighborhood is only one realm, and they may live in several areas over the course of their childhood. Teenagers hang out neighborhoods other than the ones in which they live. They also go to school or use institutions outside of their neighborhood. They also draw perspectives from popular culture. To the extent that teens get very different messages from these realms, the question is: What role should neighborhoods play?

Our discussion of neighborhood fabric underscores the potential power of the primary relationships that exist in the neighborhood. These relationships are often

stronger than the influence of the other realms. When the neighborhood norms support and promote empowerment, the desire would be to reduce or neutralize the influence of other realms that are not empowering of youth. When the neighborhood is the problem, then the goal might be to elevate the influence of other more supportive realms.

Old Tools of Mobility

Ours is not the first generation to be worried or to feel that the engine of opportunity is stalled or in need of a tune-up. In discussing the examples of how similar problems were addressed in the past, we are not making a judgment that these mechanisms were always appropriate or effective or that they are desirable at present. What we want to do is illustrate how particular institutions (some very neighborhood-based and others less so) worked to channel opportunities to families and young people. The challenge now is to come up with our twenty-first-century versions of these.

1. The Settlement House. One of the mechanisms for early social welfare was the settlement house. The settlement house provided social services to migrants and immigrants. (A similar tradition gave rise to the National Urban League, which provided services to help blacks who moved into cities from Southern rural areas).

These institutions varied in the services they offered, ranging from domestic habits and parenting to skills training, literacy, and civic education (Philpott, 1991, Landers, 1998, Strickland, 1966). For many, the unit of interest was the family, and occasionally youth. Some offered English as a Second Language. Others focused on particular ethnic groups. Their agendas were to "Americanize" the immigrants and to help migrants adopt appropriate urban behavior and work habits and to abandon their peasant ways. At least in the context of the times, this was a setting for somewhat comprehensive intervention to make sure that newcomers were integrated into the industrial city. It was in the corporate and public interest that this happened since these workers fueled the industrial expansion.

The settlement house survives today, albeit with different names and a revised mission as, for example, a multiservice center (Armistead and Wexler, 1997). But the

question we now have to ask is whether there are lessons from nineteenth-century institutions that might provide lessons today. How can we frame intensive interventions that will educate, motivate, and transform parents? How do we prepare young people for the putative opportunities in a post-industrial world? Some lessons are emerging and new insights as well. We now believe that community empowerment and participation are important features of community initiatives. We want to transform individuals and communities. We are slowly coming to recognize that comprehensive interventions, grounded in a solid notion about how a set of interventions will empower families, can change their SES status. We do not yet have the technology to connect at-risk youth to ladders of mobility. We do not yet have a set of reliable tools to transform poor people or connect them to transformative experiences.

2. Education as the Great Equalizer. Education is an obvious ladder to the occupational mainstream (Katz, 1995). It is presently not effective for many inner-city youth because the quality is poor and its leverage for getting a good job is weak (Teachman et al., 1997). There has long been a debate about what the goals of urban education shall be. The question is whether the main goal should be: (a) to nurture literary and intellectual development of young people, (b) to provide minimal skills and literacy for industrial work, (c) to train people for technical jobs of an industrial age, or d) some combination of (a) through (c).

Over the years, the answer probably includes elements of all three. Different schools (or tracks) played different roles. For most of our urban history, the typical urban school prepared students to be workers in the industrial order (i.e., laborers, operatives). Local versions of Boston Latin School or Bronx High School of Science were clearly intended to identify and prepare the "best and brightest" young people for intellectual development and admission to the finest colleges and universities. There were other schools in the same system that emphasized technical or vocational skills. The schools succeeded in preparing leaders and workers for the industrial order.

As the industrial era matured, suburbanization picked up and suburbs became home for a majority of urban Americans. New jobs grew faster in suburbs. The urban school roles became less clear and the debates did not center on mission. Business as usual would not help young people today as urban schools had in the past when the educational requirements were lower. It may or may not be the case that schools on average are worse today compared to decades ago. It may simply be the case that they are failing to perform in the enhanced way that the new jobs require and that we now expect.

A few cities and nearly all states supported public universities or systems. These institutions also had a mixed mission. They provided post-secondary education and trained professionals for industrial roles (i.e., engineering, computers, management). In a few cases, the systems were openly aggressive. New York City, for example, had a set of colleges that were first-rate, free, and open. They played a key role in the upward mobility of the children of immigrants. For young people lucky enough to live in New York in the 1940s (or California in the 1970s or 1980s), money was not a big issue. Affordable and accessible education was available, and young people had realistic prospects.

What observers and analysts alike bemoan today is the absence of a school voice in empowering urban youth. Schools are typically absent or weak partners in neighborhood development activities. They are absent at the local (neighborhood) level, and public higher education at premier institutions is making less effort to create a new middle class. Exceptional schools such as Boston Latin School still exist, but they are small and limited (and often passive) agents for lifting the poor. Entrance tests make them essentially free premier schools for children of the middle class who remain in the city. A voice, a theory of empowerment, and reconfigured or new institutions are required to make a difference (Murnane and Levy, 1996).

3. Beyond the "Code of the Street." A number of books have documented the initiation of young men into urban life. In this process young men learn ways of

surviving, expectations of manhood in their particular community, and the cultural mores critical to "making it" (MacKay, 1965, Sullivan 1989, Anderson, 1990). This happens outside the home in, for example, clubs, churches, social settings, as well as informal "street life." Young people are guided by peers and "old heads" and model some of the behavior they observe.

It was always expected in this scenario that there would be some young who do quite well. They would take these lessons, combine them with a solid education, an opportunity (and perhaps "luck") and go on to be great leaders. (Colin Powell's "American Journey" -- from Brooklyn to CUNY and on to the United States Army — is one illustration of this point). There are many stories about leaders who have made such journeys.

For the less famous and more typical cases, the expectation was that most would survive because they would, on balance, take the positive lessons from the community and "the street." We know, of course, that many young people took negative lessons and modeled behavior that was not positive. This informal learning is important because building relationships outside the family, learning to navigate the local environment, and making the system respond, are important elements in growing up.

In recent years, the concern has been that whatever urban communities provided informally on the street in past generations that allowed one generation to be at least marginally better off than the last generation is not occurring reliably today in low-income areas. There is also the concern that the "code of the street" today is more destructive and less helpful, and that many young people find that as they spend more time with peers they become more alienated from their culture. The working class and the middle class, if they are still around (and increasingly they are not), are not looked up to as

positive models or resources. They may even be resented. This development is troublesome because institutions cannot possibly create enough "off-street" programs to replace the informal education that occurred "on the street." We expect a lot of "surrogate" programs in this regard. Besides the difficulty in designing good programs and the fact that they can serve only a small number of people, they typically lack depth, duration, and authencity (American Youth Policy Forum, 1997). All of these features are critical to young people to make the program credible.

4. Labor Unions. Labor unions have been another source for generating opportunities for young people. While unions varied in the ways they operated, industrial unions acted as powerful mediating institutions by recruiting and preparing workers for industry (Bell, 1960, Form, 1990). The unions negotiated with companies on a variety of matters. They would often shape the industry and affect a substantial fraction of the local work force. Trade unions took the responsibility -- through job development, political action, apprenticeship programs, and supplementary education -- to help young people connect to the work force.

Union outreach was sometimes centered in neighborhoods or ethnic areas. In some cases, they represented a "community-based" outreach and provided a mechanism for older men to connect with younger men. While unions often did racially exclusive outreach, they did illustrate important roles -- from job training and modeling, to solidarity and advocacy.

The rules and culture of labor unions gave structure to young people. In some cases, joining the union represented the first real job for young people. Unions provided affiliation, discipline, and a work identity. The union also provided varying degrees of security and mobility. Unions (in the form of "union halls") were community organizations that functioned as

part of the "glue" of communities in which they were located. They provided political education, had a small "safety net" for members, and sometimes performed community service.

Economic restructuring, the declining fortunes of unions as players in a post-industrial and suburban society, and the more urgent interest on the part of unions to preserve the status of older workers rather than new ones, mean that they no longer play the roles described here. The "good" entry level industrial jobs now are more scarce and when they do exist, are typically non-union and suburban. They are also less accessible to young inner-city workers, especially males (Moss and Tilly, 1991).

While the role unions played in the past to assist young people does not exist as a major feature of urban neighborhoods today, we know the role is still possible and potentially effective. A current example is the Hotel Workers Union in Boston. Many of the members of this union are members of minority groups or recent migrants. Most of the members live in the city. They are service workers who normally would command little more than minimum wage and limited benefits.

The Union has been aggressive in reaching out to recruit members and in addressing the broader welfare of members as well as work conditions and benefits. The Union sponsors or facilitates ESL and GED classes, skills training, social and legal services, and housing advocacy. In its negotiations, the Union pushed to get hotels to support nonprofit housing development and other housing assistance. The Union does civic and political education and has been active on behalf of worker interests.

This union is an exception to the general trend that low-income urban service workers are not organized and have little leverage to use the union as a tool to improve the status of its members outside the narrow confines of job security, wages, and benefits. The increasingly common case today is that young people in poor communities do not have the leverage and assistance that unions used to represent.

5. Ethnic Enterprises. Ethnic enterprises are small businesses owned and operated by ethnic business people. In the past, these businesses and the districts in which they were concentrated provided a mechanism by which some members of ethnic groups could have economic independence, a sense of empowerment, and a personal stake in the neighborhood (Light, 1972).

The business people also represented a kind of modeling of these features to the young people who lived in the area. The businesses provided job opportunities and virtual apprenticeships for young people that would be useful later when they went to the mainstream labor market. Ethnic business give a familiar face to the world of work.

It is not the case that ethnic enterprise has disappeared. In fact, it is still present and important. Cities are experiencing a rush of new enterprises from Hispanic and Asian immigrants. The current problem is that there is a mismatch between the ethnicity of the new neighborhood business people and the young people who might otherwise benefit from the ethnic business environment (Lee, 1997). The conflict and even hostility some blacks feel towards Korean business people in Los Angeles or Hispanic business people in other cities are well known. In such cases, the presence of ethnic enterprise is not positive for the generation of opportunity for incumbent youth in the area, though the benefits to ethnic immigrants (and their children) may still be considerable.

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Each of the five features above has been powerful in the past but is not powerful at present. Two points stand out in our present assessment. The first is that the benefits of empowering young people in the past were often significant, and they were largely informal and indirect. The interventions existed for reasons that were connected to the emerging industrial environment or were organic to the emerging urban society. They were not public policies or foundation-framed interventions. The structure of social-opportunity generation conformed to the functional requirement to create industrial workers and communities in which they would live.

The second point is that the old features no longer exist, or if they do, they do not work well for the empowerment of urban young people. Some of these features are now even locally framed as part of the problem rather than as part of the solution. Unions, for example, are often not open or are not aggressive in reaching out to the minority youth. "The street" is dominated by elements that are often not positive. Local agencies are often driven by a set of contracts that do not add up to a comprehensive strategy either to help multiproblem households or to promote social change.

In the sections above we outlined a series of subprocesses within the larger urban development process to outline how the evolution of cities and their communities shaped individual and group outcomes. We suggested that, for the last century and a half, the city has served as an engine of opportunity. We have illustrated in describing these various subprocesses how the engine now seems to have stalled. The current opportunity-starved urban environment not only affects parents and how well they are able to provide for their children and model empowering behavior, it also affects the ability of the community, independently, to support the preparation of young people.

We now find ourselves asking a simple question: How do neighborhoods affect the structure of opportunity for young people and their families in this new post-industrial America, where the engine of opportunity does not seem to operate and where the mobility opportunity is not so obvious?

We will not attempt to address this question or others we might ask. Our narrow task is to understand the connection between neighborhood resources and individual outcomes. This is a difficult task for several reasons. First, while our focus is on neighborhoods, not all dynamics operate on the neighborhood level. There are school districts, wards, social service catchment areas, and other geographic units. We also know that adults, as well as young people, live in a variety of nonplace realms. Young people, for example, may go to a school that is in a different neighborhood, draw their meaning from a popular culture which is national, or identify with the values of a particular racial or ethnic group within a neighborhood.

A close reading of urban history suggests that we need not worry too much about sorting out these details. Rather it is more important that we learn about all of the realms so that we can draw experience from each of them and use the lessons to create complementary initiatives in schools, neighborhoods, social policy, and other areas. We make policy and develop programs that separately target places, people, institutions, and systems. The more we learn about each of these areas, how they work, and the relationships among them, the better able we will be to have policies and interventions among these areas that complement each other.

Neighborhood Impacts

In this section, we will explore the features of neighborhoods that are most critical for understanding the roles communities play in shaping outcomes for young people and families. The focus will be on explaining and illustrating the nature of the influence neighborhood features have on the generation of opportunity for youth and families. We identify indicators and measures, but we do not want to overemphasize these indicators. It is not hard to imagine the influence various factors might have, but they represent just one influence, among many. Neighborhoods will vary on these dimensions and will change due to both external forces and internal dynamics. Small changes in indicators (positive or negative) can have exaggerated effects or produce anticipatory reactions). On the positive side, a reduction in crime can stimulate community organizing that harnesses energy that greatly exceeds the small change in victimization. On the negative side, a single violent episode can lessen the effect of a long organizing and outreach campaign.

Socioeconomic Status

The poverty of inner-city communities is a source of great concern for many reasons that need not be repeated here. Low income and a lack of personal features that can be used to obtain income (i.e., education, wealth, etc). combine to influence greatly what residents and parents are able to do for young people. The figure below lists some examples of features and indicators that are self-explanatory.

The housing market is a good illustration of the transactions are that are most associated with an area's status. The way the housing market works produces powerful influences regarding what parents can provide and what a community offers. The market separates the poor and minority household from better-off households and from empowering resources (Massey and Denton, 1993). Where there is not the income for homeowners or investors to maintain the housing stock, disinvestment takes hold. The most serious outcome of this disinvestment is abandonment, where owners of housing simply walk away and refuse to provide services. Short of abandonment, over the years the disinvestment takes place, the indicators, such as the ones listed here pointing to the end result, send a powerful message discouraging individuals and others who might want to invest or add services.

To make matters worse, retail and commercial services shrink, and public investment is directed to other locations. The services that remain or are added are those that help people leave or cope. The success of programs to help people means they move out of the neighborhood, leaving those who do not have the wherewithal to leave. This concentrates poverty and makes the community even more depressed. Those who remain are even more "at-risk."

When the housing is located in an area where it will be attractive to nonpoor families (especially middle-income families), the housing may "filter up" and become too expensive and unaffordable for the poor. The net result of this dynamic is that the amount of housing available to the poor shrinks, and the poor become more concentrated

in areas they can afford. When this process occurs in the extreme, it means that some households

Figure 2

Illustrative Indicators and Measures of Neighborhood Impact on Youth and Family Opportunities: **Socioeconomic Status (for illustration only)**

Indicators	**Measures**	**Potential Data Sources**
Positive Indicators 1. rising attachment to the labor force 2. increasing income mix 3. increase in two-parent families 4. decline in youth and adult unemployment 5. increase in the fraction of workers holding "good jobs" 6. fraction of students who graduate from high school 7. fraction of students who go to college 8. increase in fraction of adults who attain high school or GED 9. decline in the fraction of the poverty population	• age-specific rates of labor market participation • age-specific unemployment rate • age-specific information on education, jobs and income • % household by type • household income by decile compared to city and region	• U.S. Census data • local and community surveys • agency case statistics • public health, school, and other local official data • interviews with clients • expert and informant interviews
Negative Indicators 1. increase in poverty, especially deep poverty 2. increase in infant mortality 3. increase in the isolation of the poor 4. increase in the fraction of female-headed households 5. increase in the incidence of teen pregnancy 6. increased influence of drugs	• infant mortality rate • within-neighborhood index of segregation • % household by type • % births born to women by age and marital status • poverty rate	• U.S. Census data • agency case statistics • public health, school, and other local official data • interviews with clients • expert and informant interviews

which are at the very bottom of the scale are unable to find any housing and then become part of the homeless family population. Homeless families, more than other equally poor families, have exaggerated versions of service, status and economic deprivation.

In recent years, we have seen a growing incidence of working-class families moving out of inner-city poor neighborhoods when their resources (or subsidies) make it possible. This occurs whether or not disinvestment occurs. They are pushed out by crime and fear, and they are pulled out by the promise of better schools and services in another community. As older suburbs have opened up, for example, many families who would have been part of the inner-city working class (and a source of community leadership, role modeling, etc). are now part of the suburban working class. While the move may be good for these working class migrants, in the sense of getting them closer to jobs and having access to better educational opportunities, their migration becomes part of a self-reinforcing process where the inner-city housing market becomes less viable, services become more stressed, and the concentration of despair becomes deeper.

Racial and Ethnic Mix

Racial segregation is an additional source of deprivation in urban communities (Massey and Denton, 1993, Farley, 1987). Racial dynamics shape family outcomes in a variety of ways. The various positive and negative indicators are illustrated in the figure below. The deprivation comes from both the stigma and the consequences of racial discrimination and isolation. The incidence of certain socioeconomic and demographic patterns is higher in the minority population than in the majority of their counterparts,

Figure 3

Illustrative Indicators and Measures of Neighborhood Impact on Youth and Family Opportunities: **Race and Ethnic Relations (for illustration only)**

Indicators	Measures	Potential Data Sources
Positive Indicators 1. decreased concentration of minority and ethnic groups in the neighborhood 2. decreased concentration of immigrants 3. evidence of racial and ethnic isolation in child-serving settings such as education and teen jobs. 4. disparate treatment of racial and ethnic groups 5. local leadership reflects the racial and ethnic composition	• evidence of integration in school and other youth settings • within-neighborhood and area index of segregation by race and ethnicity • index of segregation by income • match between race and ethnic profile and local civic leadership • evidence of equality in market transactions (i.e.,youth employment, housing, etc).	• U.S. Census and INS data • local survey and audit data • agency and organizational information • informants and expert interviews
Negative Indicators 1. increased racial isolation of youth or adults 2. emergence of gangs or similar groups 3. increased isolation of immigrants 4. discriminatory treatment of immigrants, racial and ethnic groups 5. evidence in separate service and institutional affiliation and use 6. evidence of "hate crimes" and other signs of conflict	• evidence of integration in school and other youth settings • within-neighborhood and area index of segregation by race and ethnicity • match between population race and ethnic profile and use of services and institutions • evidence of equality in market transactions (i.e.,youth employment, housing, etc).	• U.S. Census and INS data • local survey data • agency and organizational information • informants and expert interviews

even at similar incomes. For example, unemployment may be high for those with limited education or experience, but may be even higher for members of minority groups even when one takes into account differing levels of education and job experience. Racial interference creates an imperfect market and other negative consequences for both nonwhites and whites.

Minority neighborhoods operate and are often treated as a separate housing market and isolated from the benefits of urban revitalization. This means that minorities are forced to buy or rent in certain areas, and, because of racial stigma, others are discouraged from investing or blocked by "redlining." The declining quality associated with disinvestment means that it is more difficult to attract new buyers or good tenants. Commercial and retail outlets are less willing to move to a neighborhood where incomes and population are falling. The neighborhood, as a result, is deprived of both service and employment opportunities. Minority youth mature witnessing failure and withdrawal of opportunities. What they see with their own eyes does not match the rhetoric of urban revitalization or economic growth.

Minority areas are victims in other ways that directly affect economic empowerment of young people and their parents.

- Historic, if not present, patterns of unequal investment in schools reinforce the effects of racial isolation. The already serious challenge of economic restructuring is even more serious since the gap between what employers want and what youth are taught widens.
- Minority communities have fewer of the contracts from public and private sources that support the development of job-producing enterprises in their neighborhoods. Not only are the communities not getting neighborhood commercial services, they are not getting the public contracts that are used to generate jobs for city residents.

- Bias and fear limit the cultural and commercial intercourse that is an important element of what makes a vibrant community.
- Racially segregated markets discourage majority households who might want to move in. Given gentrification, any efforts to promote income and racial integration raises the fear of displacement.

Much is being made of a new and expanding black middle class. Its growth and significance should not be underestimated. This development, in addition to being an indicator of progress, highlights a serious side effect of economic progress (Gramlich and Laren, 1991). The gap between the minority poor and their middle-class brothers and sisters has never been wider. Where black neighborhoods of the past were class-integrated, they are increasingly quite class-segregated. This provides for black youth an extra dimension to their isolation and concentrates the effects of negative neighborhood features.

History

Notwithstanding the demographic and socioeconomic features discussed above, the history of an area and the history of the people who come to reside in an area have a significant effect on the neighborhood, infrastructure, politics, and ability of institutions to provide opportunities for families and children. Some of the indicators of this historical influence are illustrated in the table below.

With respect to the history of the area, there is sometimes a history that shapes neighborhood role and status in the region. There are sometimes area features that enable or impede the generation of opportunity. The neighborhood could have been a landing area for immigrants, and the remnants of institutions serving this population might be available to newcomers. Sometimes neighborhoods have a set of amenities, scale, or a sense of place that make it possible for a neighborhood to work as a good physical

environment. Location on a hill is usually positive, but location in an area that frequently floods creates a marginal status and discourages investment.

Figure 4

Illustrative Indicator and Measures of Neighborhood Impact on Youth and Family Opportunities: **History of the Area and the People (for illustration only)**

Indicators	**Measures**	**Potential Data Sources**
Positive Indicators Area 1. competitive physical advantages are used for residents, including young people 2. historical sources of opportunity and connection to the region are used People 1. cultural sources of strength are used 2. cultural and infrastructure features used together 3. complementary cross-generation dynamics 4. resident participation to advance community goals	• evidence that competitive advantages have been identified, adapted, and used for the current youth and adult population • evidence that cultural institutions play their empowerment role for the current youth and family population • evidence that a cross section of the resident population participates in the neighborhood	• historical features used over time and the present from histories and documents • census data • public documents • oral histories • interviews with informants • resident surveys
Negative Indicators Area 1. competitive advantage is lost and unused 2. persistent negative media discourage others and lower residents self-esteem People 1. cultural clashes and conflicts dominate community life and service delivery 2. exploitation of selected groups 3. evidence that residents refuse to engage to address problems	• status of historical competitive advantages • evidence of the role cultural institutions play or do not play in the empowerment of current youth and family populations • evidence that a cross section of the resident population participates in the neighborhood • participation in community activities and youth activity by ethnic and other groupings	• historical features used over time and the present from histories and documents • census data • public documents • oral histories • media portrayals • interviews with informants • resident surveys

Sometimes neighborhoods have a historical role in the cities' or even the region's economy, such as a concentration of jobs in region-serving institutions. (A university or a

medical area is an example). Finally, neighborhoods have a history in terms of how they are perceived by others in the region. This not only affects neighborhood residents' perceptions of themselves but also affects the willingness of others to act, invest, and support the area. These historical features, when they are positive, serve as a resource or "historical capital" that can be drawn on. The presence of a medical area, for example, offers the prospect of nearby jobs, if training and access can be arranged. A nearby university can be summoned to play a positive role. Partnerships are possible. There are also cases where history is a "threat." An area of distinctive architecture in a good location may be sought by the gentry. The poor, in this case, may be outbid and forced to move from the area. During the 1970s and 1980s as many urban neighborhoods renewed, some families were uprooted several times to make way for the middle class.

We should also note that the history of the people in a neighborhood also matters. This history is important, when the population is new to the area, but it also may be true if there are some special features to the population. An example is immigrants or migrants who not only have a history in this location but also have a cultural history that they bring from a different place. This may help them cope, or set up conflict or dissonance. The local circumstances, together with the culture and values residents bring from a different place, operate on their behavior, on their use of resources, on relations with neighbors, and on their ability to have a different outcome than what might be predicted based on characteristics of the neighborhood or their own personal characteristics. The popular literature is full of examples of neighborhoods of immigrants having very high goals regarding education or owning small businesses. While the SES might predict a high incidence of poverty or that poverty will persist, we sometimes see mobility and educational achievement by the young.

The history of the population is also important for what it might predict about the interaction among different groups in the neighborhood. Some groups live in isolation from their neighbors. They are inclined to work among themselves and perhaps use the

area as a launching pad. Others are more prone to integrate and be part of local initiatives to improve the neighborhood.

Finally, the history of the population may be defined by their commitment to the neighborhood. In some cases, residents may be committed to using the community as a launching pad. When these residents obtain the sufficient resources they use their wealth or savings to leave the neighborhood. Others may see the area as a place to stay and become active in the community's life.

Physical Status

The condition of the housing and physical environment has a significant role in the ways a neighborhood impacts individuals. Some of the indicators are illustrated in the figure below. The density and scale of the urban environment frames interaction. Design contributes to safety and residents' perception of their ability to have surveillance and social control (Lynch, 1984, Appleyard, 1981, Newman, 1980). Readability, openness, and a sense of control influence parents' willingness to allow children to explore. An attractive physical environment induces commitment which helps to create the "sense of community." the extent to which planning can bring out attractive features, induce private investment, or install artificial positive features (i.e., turning vacant lots into playgrounds or other open space), to the environment can support a more empowering community.

It is also important to note that the contrast between the physical environment in one's neighborhood and the features in other neighborhoods highlights and reinforces social status. Those who live in rundown areas know that others live better than they. They see physical investment in other areas and deterioration in their own. The media reinforces this constantly. Residents come to conclusions about their places in the community's pecking order.

Finally, the physical features of a place can facilitate or paralyze policy interventions that might help improve quality of life for families. The example of physical facilities for day care was mentioned earlier in this paper. The presence of obsolete housing stock (that is unlikely ever to be repaired) or "brownfields" is a more

daunting obstacle. Besides being an "attractive nuisance" to children, drug dealers, or car choppers, the large and ugly features cancel positive physical features or other efforts to build a neighborhood.

Figure 5
Illustrative Indicator and Measures of Neighborhood Impact on
Youth and Family Opportunities: **Housing and Physical Status**
(for illustration only)

Indicators	**Measures**	**Potential Data Sources**
Positive Indicators 1. increase in homeownership 2. increase in investment in existing housing 3. enhancement of physical amenities and maintenance 4. supportive design and "defensible space" to promote sociability and a sense of security	• income and race-specific incidence of homeownership for the neighborhood and the area • resident satisfaction with the neighborhood as a "place to raise a family" • availability and density of retail and consumer services • "defensibility" of the neighborhood	• census data • local government data • resident surveys
Negative Indicators 1. increase in disinvestment in housing 2. increased vacancy 3. a reduction in relative prices and rents 4. increase in code violations and similar indicators 5. visible indicators of public and private neglect	• incidence of code violations and similar indicators for the area compared to the city • change in the index of prices and rents • incidence of long-term vacancy and abandonment • incidence of visible public and private neglect (i.e., broken playground equipment, overgrown lots, abandoned cars, graffiti on public property, etc).	• local public data • "windshield surveys" • resident surveys • local real estate and permit data

Infrastructure

Infrastructure includes the public facilities, and sometimes private or quasi-public ones, that allow the community to operate and that help individuals and families to use the community (Perry, 1995). Infrastructure is both built features and technology. Typical examples include streets and transit systems, schools and parks, as well as communications technology such as telephone and cable. Examples of infrastructure measures are included in the figure below.

Infrastructure is often taken for granted. As in many cities, the basic differences between neighborhoods are not principally their infrastructures, though, as the table might suggest, differences in infrastructure do matter. There are cases where the significance is quite profound. For example, when a city puts in a transit system, the system can be empowering or isolating for young people in poor areas. An important question for policy in this example is not only how to make the transit system empowering but also how to leverage the resources to do other things that better transportation allows, such as how to connect workers to jobs or increase investment in housing.

The significance of infrastructure is also influenced by the fact that those who are well off can in some cases purchase private infrastructure that will allow them to excuse

Figure 6
Illustrative Indicator and Measures of Neighborhood Impact on
Youth and Family Opportunities: **Infrastructure**
(for illustration only)

Indicators	Measures	Potential Data Sources
Positive Indicators 1. increased investment in infrastructure 2. enhanced availability of transportation and other services to access job and educational opportunities for youth and families 3. development of private infrastructure (i.e., open space and recreation facilities, etc). to support youth and family life 4. public and private linkage to make development in one area serve residents in another area (i.e., new buildings that include day-care space, or job commitments, for residents, etc).	• evaluation of the quality of infrastructure • evaluation of services for youth and adult (i.e., bus and train frequency, coverage and cost) • incidence of infrastructure investments to serve children and families	• review of state and local capital investment budgets • infrastructure elements in local development protocols • resident surveys • analysis of permits and regulations
Negative Indicators 1. declining maintenance of public infrastructure and facilities 2. withdrawal of staff and other support for services 3. local public preference for downtown and region-serving projects over neighborhood projects. 4. lack of connection, or declining connection, to jobs for teens and adults	• resident perceptions about the quality of the infrastructure • resident perceptions about the quality of services • incidence of benefit of services and facilities by who is served and where service is located	• reviews of state and local maintenance and operating budgets • comparison with industry standards for quality and service • utilization data and surveys • resident surveys • analysis of permits and regulations

themselves from shortcomings or lack of investment in the public infrastructure. The absence of a public transit system, for example, means that only those who can afford automobiles can go where the new jobs are or where recreation is. Car owners may vote against investment in mass-transit infrastructure.

Infrastructure investments in poor neighborhoods are, and continue to be, less than in other areas of the city, and in some cases are seriously deficient. Capital budgets have been stressed as cities face growing infrastructure demands for service to a needy population. Cities often use their limited capital resources to invest in public/private initiatives to boost the downtown or other areas where the goal is to build a tax base or create jobs.

Sometimes private development is used to substitute for public investment in infrastructure as investors in large-scale projects are sometimes given concessions if they are willing to make contributions to the infrastructure associated with their projects such as the paving of streets, planting of trees, or installation of new water mains. In this way, cities are able to obtain enhancement in key areas, and make marginal improvements in their infrastructure without making their own investment. The mechanisms do not benefit neighborhoods that continue to have no new investment or even maintenance of their existing facilities.

For poor families, the public infrastructure is a critical way of leveling the playing field. When they live in dense multifamily housing, public open space, mass transit, public swimming pools, etc. become the only recreation space available. Neighborhoods with facilities can use them to combine with social engineering. Neighborhoods without these assets have deficit when they are trying to help young people.

Institutions and Services

Just as the physical infrastructure is important, institutions and services for individuals and families comprise social infrastructure. Services offered by agencies and organizations are the programmatic complement to the physical resources the cities

provide. For poor areas these services are critical. Indicators of their impact are illustrated in the figure below. Services are not optional and are sometimes important for family survival. The key dimensions include their availability as well as their adequacy. The services that are included in this list range from day care and family assistance, to training, education, and health. There are other matters that are important as well. Coordination and case management, so that needy families and individuals have a full set of resources available to them, are important for the most efficient leverage of services for family and individual benefit.

Yet we know there continues to be lack of coordination among the services, shortcomings in the outreach, as well as variation in the quality of the services that are available in poor communities. The poor often have few choices in the services that are available to them. And the services, while they may be available at the neighborhood level, are often designed elsewhere in state and federal policy circles or in the board rooms of foundations and private charities.

Figure 7

Illustrative Indicators and Measures of Neighborhood Impact on Youth and Family Opportunities: **Institutions and Services (for illustration only)**

Indicators	Measures	Potential Data Sources
Positive Indicators 1. evidence that youth programs and family services are effective 2. evidence of interagency cooperation to enhance program effectiveness and efficiency 3. evidence of outreach and community organizing to reach targeted individuals 4. evidence of cultural, ethnic and linguistic sensitivity 5. resident participation in local institutions 6. evidence of connection to city and regionwide resources 7. active roles for parents, volunteers and peer-to-peer help	• resident knowledge, support and use of services • number of programs with joint sponsorship and referral • staff match with demographic profile • measures of service effectiveness (i.e., % of children receiving prenatal care, academic performance of those in-after school program, etc). • match of program-client caseload to target-population profile • number of volunteers • % funds from nongovernment	• interviews • agency data • local grantmaker data • local surveys • public documents • local census-type data
Negative Indicators 1. evidence of poor quality or ineffective services 2. predominance of "surrogate services" (that not imbedded in the neighborhood) 3. predominance of fragmented services that do not address the "whole client" 4. evidence of competition rather than cooperation among service providers 5. segregation and isolation of low-income groups or minority groups from others 6. evidence of unresolved conflict between interests of different generations	• measures of service effectiveness (i.e., % of children receiving prenatal care, academic performance of those in after-school program, etc). • match between caseload, mission, and neighborhood profile • services provided outside neighborhood or organization not embedded in neighborhood service network	• agency documents • public documents • local census-type data • interviews

We should also note that the commercial and retail services available in a neighborhood are important. These services are private. They include, for example, grocery stores, banks, and bookstores, as well as opticians, and hardware and clothing stores. For most of these, the market forces in the last thirty years have changed substantially. More and more of these retail and commercial outlets exist in larger units and are part of large corporations whose location is driven by an attempt to maximize the exposure of their larger units to the consumer whose income is growing and in areas where population is growing. Inner-city neighborhoods come up short on both of these requirements. There has been a recent emergence of activity driven in part by federal law requiring community reinvestment and in part by still unclear private market dynamics. But there has not been a change sufficient to conclude that there is a turnaround. As a result, neighborhoods continue to suffer inadequate services and exploitation by those who take advantage of their meager resources and their isolation from the mainstream.

Politics

One of the roles of urban politics is to balance competing interests in communities. The political system has to allocate public resources and use regulation to shape private market outcomes.

Figure 8
Illustrative Indicators and Measures of Neighborhood Impact on Youth and Family Opportunities: **Politics**
(for illustration only)

Indicators	**Measures**	**Potential Data Sources**
Positive Indicators 1. increasing resident-voter registration and voting 2. local residents take on leadership roles and offices 3. residents participate in community and civic organizations, especially activities to support youth and families 4. evidence that coalitions and alliances are developed and sustained over time 5. evidence of effective lobbying for influence in city hall 6. ability to gain resources from external sources	• % registered to vote • % who vote • % of board membership who are clients, local residents • % nonprofit budget from foundations	• local government data • local organization data
Negative Indicators 1. predominance of "race politics" 2. evidence of a declining share of community-building resources (i.e., housing development and job training), and an increase in maintenance resources (i.e., rodent control and boarding up of vacant buildings, etc). 3. decline in participation in, and support for local political organizations 4. decline in voting and PTA	• % of public funds used for development, service vs. "maintenance" • % of residents who vote in local elections • change in level of attendance and participation in local activities supportive of youth and parents	• CDBG allocations • interviews with experts and informants • local voting records

Neighborhoods vary in the influence they have in local politics and, as a result, the allocations they receive from local resources vary. Some neighborhoods are more powerful and better organized than others. While some residential areas have a disproportionate share of power (due to higher voter turnout), this is a matter of political organization and of leverage. The fact that poor people vote at a lower rate, and because their higher dependency ratio gives them fewer potential voters as a share of the total populations, they have a diminished, though not insignificant, ability to influence electoral politics. The fact that central cities now have a decreasing share of the state's population means that the potential benefits of political influence in cities is shrinking while the power of suburbs (and suburban interests in cities) is increasing.

Inner-city Intervention: Areas of Practice

I want to use this section to outline some of the ways planning and other policy professions use our understanding of neighborhoods and their residents to design and implement interventions. I should note that there is a debate between those who argue that interventions should be directed towards empowering people ("people policies") and those who favor efforts to improve communities ("place policies"). This is not a settled debate, and there are good arguments and plenty of examples on both sides. I do not propose to choose. Indeed, I take the view that we should not choose. For all of the reasons familiar to analysts and activists alike, there is a need to have interventions that address the developmental, human capital, and other needs of young people and their families. At the same time, there are features that define how communities work as physical, social and economic places, and as a set of institutions that requires place-oriented interventions. Ideally, each works best when the other is available. A job-training program is less likely to succeed if environmental stresses are overwhelming, or if transit service to the area is poor. "Mean streets" compete all to well with educational programs for the attention of young people. Complementary policies mean that the community better supports individuals, and individual empowerment helps community-

building efforts. While some residents will move out of a low-income community as soon as they have a chance, by developing the community, we give them a choice, and we increase the ability of neighborhoods to be a positive resource for families who move in their place.

We need not be speculative or hypothetical about the kinds of activities we are referring to. Several present initiatives disclose our current understanding of the neighborhood dynamics and state of practice (American Youth Policy Forum, 1997, Austin, 1996). In most of these areas, we do not need a lot of rigorous analysis to know whether or not policies and approaches are effective and how their impacts are distributed. Some of these are discussed below.

1. Community Development. We have created more than 2000 community development corporations (CDCs). These were created in low-income urban communities to serve as development vehicles to enable residents to participate in the physical and economic development of their communities (Vidal, 1992). Most of these CDCs have been involved in housing development, and their activities over the last decade are responsible for more than 125,000 housing units. They also aim to improve the physical environment and promote economic development, including job-training and enterprise development.

In recent times, they have come under increasing pressure to do even more to promote economic empowerment, via job training and related programs, and to participate in comprehensive initiatives for youth. The evidence that they can make a difference for youth is not strong. Some programs are successful, but when extensive supportive services are required to reach and support young people, not something CDCs typically do, the success is small. The track record is more promising for adults whose need for such services is modest. Such evaluations as have been done provide mixed evidence of the effectiveness of CDCs, aside from housing, where there are clear, albeit typically modest, achievements. This area is presently a major area for foundation investment and federal community-development programs. Much of the potential success depends on

the capacity of these organizations and on whether the resources available to them will match the challenges they frame.

2. Welfare Reform. By the end of 1998, welfare reform will be substantially in place. The changes will bring to an end the entitlement to financial assistance. Welfare recipients will be expected to work, and those who decline or fail to find work will have their benefits greatly reduced and eventually eliminated (McKay and Lopez, 1997, Blank, 1996).

Welfare has in the past served as a floor below which no family could fall. To the extent that welfare is not replaced by work, this means that the concentration of deprivation will be more serious because the families who are in what are now crisis neighborhoods will find themselves and their communities even worse off. The pressure on residents in these communities who can move out of the area will be greater, and the concentration of desperately poor families will increase. The combination of these means the neighborhoods will have fewer of the human capital resources that they need to make the community a helpful venue for raising children and empowering families. It also means that extra funding now flowing into self-sufficiency initiatives may be needed as rescue resources for those who are having a hard time.

3. Devolution. Devolution is a process that describes the greater discretion the federal government provides for state and local government to use federal resources. This devolution of control and responsibility to the local level is also accompanied (or will be accompanied) by decreasing resources. There are some benefits to this process in the sense that state and local governments can be more creative in framing their programs to address the needs of low-income residents. They can be sensitive to the characteristics of the population, the local economy, and they can better leverage resources that are available at the local level.

While local jurisdictions are free to be creative, they are also free to incorporate local biases and political preferences that work against the poor. The political economy of welfare means that the program design will be done by increasingly conservative state

governments that have a noncentral-city, mainly suburban population as their main constituency.

4. Privatization and Contracting. As devolution occurs, state and local governments will increasingly contract services to private companies and agencies. While there will be some opportunities, and perhaps significant opportunities, for community-based nonprofits to be involved in these efforts, taking into account the extent to which private agencies, interests and standards dominate, there will be other features such as efficiency and cost containment that will frame local programming. Interest in community measures for change or balancing community versus individual goals will be outweighed by tightly drawn contracts for specific services. With categorical initiatives (i.e., job training, etc)., it will be harder for local agencies to address larger issues outside the narrowly defined system of service contracts. The contracts for a jobs program may fund day-care slots, but not address the fractured or inadequate child-care system or the absence of affordable facilities. The programs will recruit people to fill slots in programs, but will not organize communities. When such situations occur, the programs will not achieve their goals. Trainees will drop out because they do not have accessible day care, or the lack of outreach will mean some segment of the target population gets left behind or is not properly supported. Community-based agencies will, in this scenario, become vehicles for services, not instruments of community or social development.

5. Foundation Efforts at System Reform. Several of the major foundations have in recent years initiated efforts at local system reform. Whether the system is the job system, the training system, or the social service system, or combinations, foundations are exploring ways of promoting local partnerships, improving efficiency, developing great neighborhood organizational capacity, and strengthening networks at the local level. While many of these efforts do identify target areas, they are often systems-based and not strictly area-based.

Most of these efforts are early in their lives, and evaluation projects have not yet yielded results. The theory of this practice, however, is that by improving the system(s),

we increase the chance that institutions will have more beneficial effects for individuals, families, and their communities than might exist without comprehensive system change. But, as we have noted elsewhere, system change is difficult and the present efforts are not our first. The historical evidence is mostly about failed efforts or efforts with mixed results. Those mounting the current efforts are aware of this and are taking steps to learn lessons from the past. Of interest here is the persistent pattern that the school system is often the more difficult system to change or to engage. This will need to change if children are to benefit.

6. Mobility Programs. The local governments and the federal government are sponsoring a number of initiatives aimed at encouraging and supporting low- and moderate-income residents in moving from poor inner-city communities to better-off areas in suburbs or other parts of the city. Research on similar initiatives in the past and preliminary work on current programs provide a mixed set of conclusions (Briggs, 1997, Rosenbaum, 1995). The evidence is that low- and moderate-income adults who moved to suburbs in these programs do have more stable employment, though not significantly higher wages. The adults were generally positive about the areas they moved to but maintained relationships and ties in their former communities to make up for what suburbs did not offer.

The children did better in school and made use of the services and facilities in the suburbs, though there were important age-related differences in use and benefit. They do not appear to do better in terms of teen employment. For adult and youth, the benefits of moving to a "good" neighborhood are positive, but race, class, and ecology do still matter. We are left with the conclusion that mobility can be only a partial solution for those who move. The number of mobile working and middle-class families will increase and the families will benefit. The number of low-income people who can move will be limited.

7. Economic Restructuring. Elsewhere in this paper, we have referred to economic restructuring in the past tense as though the process has been completed. In

fact, economic restructuring is a continuing process characterized by a growing reliance on education, the migration of jobs to other regions or countries, greater reliance on high-tech manufacturing, replacement of certain human functions with technology, and major shifts in work processes, among other changes.

Nearly all of these features work against the interests of urban neighborhoods and their residents. They do not increase opportunity; they decrease it. This happens even when restructuring helps a region, such as in the present lifts older cities are getting from new high-tech manufacturing. Urban neighborhoods are increasingly isolated from areas where jobs are growing. There is a growing mismatch between the education required for today's jobs and what is offered in urban schools. The distances are both physical and social. Employers are more willing to articulate that available urban workers do not match their needs. They are willing to acknowledge biases and preferences. The only good news in this economic restructuring is that investment in education may well pay bigger dividends than has been true in the past.

Conclusion

We end this paper with no clear answers to the question of what the neighborhood impacts are that influence youth and family outcomes. We have made some suggestions but we are also aware that some domains other than the neighborhood play important roles in generating opportunity. The bottom line is that we should continue to improve our understanding of neighborhood effects, but understand that these are only some of the effects and that our policies and interventions will be improved when we figure out how to incorporate the lessons from the various realms and apply the knowledge to the design and implementation of many types of urban interventions. This is not a simple task in any of the policy steps -- problems framing, program design, implementation, or evaluation. It is a necessary and urgent task, nevertheless.

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Prevention Science and Positive Youth Development: Competitive or Cooperative Frameworks?

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Prevention Science and Positive Youth Development: Competitive or Cooperative Frameworks?

With the twentieth century "discovery" of childhood and adolescence as special periods in which children should be given support to learn and develop, American society has increasingly assumed a sense of responsibility for the care of young people. From the 1950s, increases in juvenile crime and post-industrialization concerns about troubled youth led to the beginning of major federal funding initiatives to address these issues. These societal trends intensified in the 1960s, as national rates of poverty, divorce, out-of-wedlock births, family mobility, and single parenthood grew significantly higher.

Changes in socialization forces that have historically nurtured the development of children – especially in the family – necessitate reconceptualization of school and community practices to support the family in its mission to raise successful children. (Weissberg & Greenberg, 1997, pp. 5).

Initially, interventions to support families and children were responses to existing crises, focused on such outcomes as containing and reducing juvenile crime or transforming poor character into better moral character. Settlement houses were one proposed solution for troubled youth where they could learn "character development." As the nation watched youth problems become more severe and society increasingly felt the impact, intervention and treatment for a wide range of specific problems or disorders were developed. The last three decades have seen a proliferation of both services and policy designed to target and reduce the problem behaviors of troubled youth. From large agencies such as children's protective services, to individual and group treatment for mental health problems, substance abuse, conduct disorders, delinquent behavior, academic failure and teenage pregnancy, the development, health, behavior and well-being of children has been analyzed and assessed, and a variety of conclusions have been drawn

as to which interventions are and are not effective with youth. The effectiveness of these treatment approaches has been intensively examined in a variety of research studies (cf. Agee, 1979; Clarke & Cornish, 1978; Cooper, Altman, Brown & Czechowicz, 1983; De Leon & Ziengenfuss, 1986; Friedman & Beschner, 1985; Gold & Mann, 1984). From these findings, prevention-focused approaches began to emerge over the past two decades, designed to support families, schools and communities *before* the emergence of problem behaviors in children. Increasingly, investigators and service providers in the youth prevention and promotion field have sought to address the *circumstances* of children's lives thought to be responsible for producing problem behaviors. Often growing from earlier treatment efforts, most prevention programs focused on the prevention of a single problem behavior.

Preventive interventions have gone through their own evolution in the past 20 years. Many early prevention programs were not based on theory or research on child development or the factors influencing it. Prevention strategies evolved in a number of directions as more programs were evaluated. Often results of outcome studies showed they had little positive impact on problem behaviors such as drug use, pregnancy, sexually transmitted disease, dropping out of school, or engaging in violent or delinquent behavior (cf. Ennett, Tobler, Ringwalt & Flewelling, 1994; Kirby, Harvey, Claussenius & Novar, 1989; Malvin, Moskowitz, Schaeffer & Schaps, 1984; Snow, Gilchrist & Schinke, 1985; Thomas, Mitchell, Devlin, Goldsmith, Singer & Watters, 1992). A key development in the field occurred as investigators and service providers began to incorporate the evaluative information and apply it to interrupting the *processes* that lead to problem behaviors. Longitudinal studies provided the ability to identify *predictors* of problem behaviors in youth. Then increasingly, a second generation of prevention efforts emerged that focused on proximal (the more closely related) predictors of the development of

specific problem behaviors. Examples of these proximal predictors are peer influences to engage in problem behaviors such as drug use or early sexual activity, and norms favorable to engaging in such behaviors (cf. Ellickson & Bell, 1990; Flay et al., 1988; Morrison, et al., 1994; Pentz et al., 1989). Often, these prevention efforts were guided by theories about how people make decisions, such as the Theory of Reasoned Action (Ajzen & Fishbein, 1980; Fishbein & Ajzen, 1975) or the Health Belief Model (Fishbein, Bandura et al., 1991; Janz & Becker, 1984; Rosenstock, Strecher & Becker, 1988). The focus was on changing the *antecedents* (factors occurring before other events in a sequence) to youth behavior which had been found to predict problem behavior itself (Kirby, 1997).

In the 1980s, concerns began to be raised about prevention efforts that focused only on a single problem behavior. Predominant prevention models were criticized for ignoring the co-occurrence of problem behaviors within a single child; for ignoring the common predictors of multiple problem behaviors; for failing to incorporate environmental predictors and individual-environmental interactions in seeking to change behavior; for focusing only on problem prevention rather than the promotion of healthy development; and for ignoring factors that promote positive youth development. These concerns, increasingly expressed by both prevention practitioners and prevention scientists, helped expand prevention programs to include considerations of successful youth development, including its antecedents and proximal predictors. Consensus began building that a successful transition to adulthood requires far more than avoiding drugs, violence or precocious sexual activity: the promotion of children's social and emotional development is important in preventing the problem behaviors themselves (Botvin, 1995; W.T. Grant Consortium on the Promotion of Social Competency, 1992).

In the 1990s, practitioners, policy makers, and prevention scientists in social work, sociology, psychology, criminology, education, public health, pediatrics, and other medical specialties increasingly adopted a broader focus for studying youth development. Key literature began to emerge that identified the limitations in existing approaches and articulated the desire to focus on the whole child (e.g., Pittman, 1993). There is a growing base of research on the developmental etiology of problem and positive behaviors (Kellam & Rebok, 1992; Hawkins, Catalano & Miller, 1992; Newcomb, Maddahian & Bentler, 1986), and reports of rigorous randomized and non-randomized controlled trials of prevention and promotion programs (e.g., Greenberg & Kusche, 1996; Weissberg, Kaplan & Bose, 1997; Hahn, Leavitt & Aaron, 1994). Two currents of work in the 1990s have further defined the emerging field: positive youth development and prevention science. Prevention science research has suggested that preventive interventions should seek to reduce risk factors and enhance protective factors. Others have proposed that preventive interventions focused on enhancing positive youth development, enhancing protective factors and promoting resilience will produce positive outcomes. However, both paradigms have underlying similarities in their critique of prevention approaches in the 1980's and come to similar recommendations for development of prevention and promotion programs. It is useful to understand both.

The Re-Emergence of Positive Youth Development

Practitioner Perspectives

In this decade, a number of organizations have identified and articulated the benefits of a positive youth development approach, including the Carnegie Council on Adolescent Development (1995), the Department of Health and Human Services (1996), the Annie E. Casey Foundation (1995, 1997), the Robert Wood Johnson Foundation (1997), the Consortium on the

School Based Promotion of Social Competence (1994), and the Office of Juvenile Justice and Delinquency Prevention (1995). Some have viewed this as a paradigm shift (after Kuhn, 1962, 1970, 1996):

> Talking about promoting youth development versus preventing youth problems is more than a semantic shift. It is a shift that can bring with it some fundamental changes in the way program and policy are developed, implemented and evaluated. It is precisely because most of the strategies used to prevent substance abuse and other problems are, in fact, strategies that promote development – social skills, communication skills, self-awareness, family and community commitment – that this shift is needed. (Pittman, O'Brien & Kimball, 1993: 1).

Arguments have been made for an integrated positive youth development focus over a focus on preventing a single problem behavior when working with youth. These are reviewed below.

Concern About Preventing Problems Rather than Promoting Development

The argument that "problem-free is not fully prepared" (Pittman, 1991), is fundamental to the positive youth development approach:

> Many social movements, both those productive and dangerous, have built agendas around an enemy, whether individual, organizational, or conceptual...Obviously, adopting this approach for promoting positive social change, such as an overall reduction in drunk driving, can be effective. Yet when applied to certain social-justice movements, such as improving services to young people, the concept falters. In such efforts, focusing on an enemy, such as academic failure or teen pregnancy, detracts from the ability to view young people in a holistic fashion as individuals with problems, strengths, hopes and dreams. (Reconnecting Youth and Community, DHHS, 1996, pp. 3).

The Person-in-Environment Perspective

A person-in-environment perspective (Bronfenbrenner, 1979) suggests that the socializing influences of primary caregivers, school officials, classmates, and neighborhood residents are important to child development as are norms and values of the cultural groups and

communities to which children belong. Advocates for positive youth development approaches urge attention to the interaction of the environment and the individual. Attention to cultural factors in different ethnic communities is often emphasized (Parker, Sussman, Crippens, Scholl & Elder, 1996).

Developmental Models of How Children Grow, Learn and Change

Developmental requisites and competencies are a mainstay of positive youth development approaches. Developmental theories that identify important developmental tasks of infancy, childhood and adolescence provide the foundations for these approaches.

Attachment theory describes how essential it is for an infant to develop a secure bond with caregivers, and how this bond then serves as a secure base for separation and exploration. This bonding lays the foundation for emotional self regulation, skill building and development of social, emotional, cognitive, behavioral, and moral competence (Ainsworth, 1978, 1971; Bowlby, 1982, 1980, 1979, 1973; Mahler, 1975).

Erikson's identity development theory (e.g., 1968) emphasizes the dynamic, progressive organization of the child's drives, abilities, beliefs, and individual history leading to the development of the internal self-structure. The cohesive development of this structure ideally produces a stable, secure sense of identity in the child. These identity self structures progress and grow as the child grows, with the stability of later stage identity development depending largely on the stability of identity that the child achieved in earlier stages. Adaptive coping around identity in adolescence is based on the child's developing a sense of herself in the earlier, preadolescent stage as competent, effective, and capable of mastering tasks—what Erikson described as a sense of "industry." The successful outcome of the industry period is a child

whose specific skills and patterns around learning and play are now securely linked to an internal self-structure of competence.

Unsuccessful completion of these developmental challenges, including secure attachment and a sense of industry in childhood and preadolescence is most likely to leave the teenager without a sense of emotional regulation, competence and interpersonal effectiveness, rendering the child potentially more vulnerable to negative peer influences. Successfully completing these developmental tasks leads to a generally balanced view of his or her strengths and weaknesses and supports which lends a degree of comfort to trying on new identities during adolescence. Failure to establish secure attachment and disruption of secure identity development produces a child unable to make choices based on internal values and standards. In short, the unsuccessful completion of these developmental tasks is a primary source of behavioral problems. From this perspective, positive youth development holds the key to both health promotion and prevention of problems.

Evolution of Practitioner and Policy Perspectives on the Positive Youth Development Approach

Conclusions from practitioners and advocates in the field, as well as from the policy community, have led to the call for greater focus on positive outcomes for youth, on developmentally based strategies, and on the role of families and communities. In order to be effective, youth interventions must attend to "the whole child."

Positive youth development approaches:

a. Promote development to foster positive youth outcomes;

b. Focus "non-categorically" on the whole child;

c. Focus on achievements specific to developmental tasks and stages; and

d. Focus on interactions with family, school, neighborhood, societal and cultural contexts.

Prevention Science Perspectives

Over the past decade, some prevention researchers have progressively moved toward a "comprehensive" approach for working with youth (e.g., Catalano & Hawkins, 1996; Dryfoos, 1996, 1994, 1990; Hawkins, Catalano & Miller, 1992; Kirby, 1997; Kirby & Coyle, 1994; Moore et al., 1995; Perry, Kelder & Komro, in press; Roth et al., 1997; The National Academy of Sciences National Research Council, 1996, 1993; Weissberg & Greenberg, 1997). Like youth development advocates, prevention scientists have in recent years expressed dissatisfaction with a single-problem approach to prevention. As Weissberg and Greenberg noted, "Young people who are neither drug abusers, teen parents, in jail, nor drop-outs may be considered 'problem free' and yet may still lack skills, attitudes and knowledge to be good family members, productive workers, and contributing members of the community." (Weissberg & Greenberg, 1997: 1-2). Prevention scientists have identified the limitations of preventive interventions that narrowly focus on preventing a specific problem behavior.

Risk and Protective Factors across Multiple Domains

One concern is that the results of etiological research have not been adequately incorporated into the design of preventive interventions (Hawkins, Catalano & Miller, 1992; Institute of Medicine, 1994). Over the last 30 years, researchers have identified longitudinal predictors that increase (often called risk factors) or decrease (often called protective factors) the likelihood of problem behaviors (see Coie, et al., 1993; Dryfoos, 1990; Hawkins, Catalano & Miller, 1992) in neighborhoods, families, schools, and peer groups as well as within the

individual (Brewer, Hawkins, Catalano & Neckerman, 1995; Farrington, 1996; Loeber, 1990). Empirically supported community risk factors include the legal and normative expectations for behavior, as well as characteristics of the community and neighborhood environment, such as high levels of community disorganization and poverty (Sampson, Raudenbush & Earls, 1997). In the school setting, academic failure and low commitment to school have been found to predict a variety of adolescent problems (Maguin & Loeber, 1996). A family history of crime or substance abuse, poor family management practices and high levels of family conflict have been found to be predictors of problem behavior (Yoshikawa, 1994). Individual factors, including constitutional factors resulting from head injuries or exposure to toxins in utero or in early childhood, sensation seeking, poor impulse control, early aggressive behavior, and early initiation of substance use, have also been identified as risk factors for problem development in adolescence (Hawkins, Catalano & Miller, 1992; Werner & Smith, 1992; Rutter, 1987).

Many of the studies that have documented a relationship between risk exposure and problem behaviors also have found evidence of protective factors that decrease the likelihood of problem behaviors among those at risk (Bradley et al., 1994; Rutter, 1985; Smith, Lizotte, Thornberry & Krohn, 1995). These findings have prompted studies focused on "resilience" that sought to understand why some children exposed to multiple risk factors manage to avoid negative outcomes (Garmezy, 1985; Werner, 1994). It has been hypothesized that protective factors might contribute to resilience either by exerting positive effects in direct opposition to the negative effects of risk factors (additive models), or by buffering individuals against the negative impact of risk factors (interactive models) (Kirby & Fraser, 1997; Rutter, 1990). Empirically supported protective factors include individual characteristics such as positive social orientation, high intelligence, social and emotional competencies, resilient temperament, and gender (Masten,

Best & Garmezy, 1990; Werner, 1989; Anthony, 1987). Protective factors have also been found to be characteristics of socializing institutions of family, school and peer group and the community environment. These characteristics are warm affective relationships and investments in prosocial lines of action (Garmezy, 1985; Brook et al., 1990), healthy beliefs and clear standards for behavior (Catalano, Kosterman, Hawkins, et al., 1996; Peterson, Hawkins, Abbott & Catalano, 1994; Johnston, O'Malley & Bachman, 1994), prosocial opportunities for involvement (National Academy of Sciences National Research Council, 1996; Darling & Steinberg, 1993), cognitive, social and emotional competencies (Anthony, 1987; Rutter, 1985; Weissberg & Greenberg, 1997) and reinforcement for prosocial involvement (Akers et al., 1979). Exposure to numerous risk factors has been found to increase the likelihood of a child's problem behaviors, while exposure to numerous protective factors has been found to decrease the likelihood of problem behaviors (Hawkins, Catalano & Miller, 1992; IOM, 1994; Newcomb et al., 1987; Pollard, Catalano, Hawkins & Arthur, under review; Rutter, 1987; Sameroff & Seifer, 1990; Jessor, Turbin & Costa, in press; Jessor, Van Den Bos, Vanderryn, Costa & Turbin, 1995).

Prevention Science Critique of Early Prevention Programs

Despite this broad knowledge base on risk and protective factors, most prevention programs have limited their focus to individual level risk or protective factors, and generally addressed only one or two risk factors. Tolan and Guerra, in their review of violence prevention programs, found that: "...most interventions tend to focus on changing one promising risk factor, and most emphasize changing only individual (and not social or environmental) characteristics" (1994: 10). In reviewing pregnancy prevention programs, Kirby drew similar conclusions:

> Perhaps most important, not merely one or two, but a multitude of antecedents are related to [these issues] – including characteristics of the adolescents themselves, their peers and sexual partners, their families, and their communities and states. No single one of these antecedents is highly related to behavior; rather each of many antecedents is weakly or moderately related to behavior... If pregnancy prevention programs are to be very effective, they cannot focus upon any single factor; rather, they must address multiple factors. (Kirby, 1997, pp. 12-14).

Research has also shown that problem behaviors are correlated with one another (Elliott, Huizinga & Menard, 1989; Jessor & Jessor, 1977; Zabin, Hardy, Smith & Hirsch, 1986), and tend to cluster within the same individuals and to reinforce each other (Benson, 1990; 1993; Dryfoos, 1990; Jessor, Donovan & Costa, 1991). Many risk and protective factors are now known to be common predictors of multiple adolescent problems including substance abuse, delinquency and violence, teenage pregnancy and school dropout (Coie, et al., 1993; Dryfoos, 1990; Hawkins, Jenson, Catalano & Lishner, 1988; Howell, Krisberg, Hawkins & Wilson, 1995; IOM, 1994). For example, extreme economic deprivation, family conflict, and academic failure are shared risk factors for substance abuse, delinquency and violence, teenage pregnancy, and school dropout (Dryfoos, 1990; Farrington, 1992; Hawkins, Catalano & Miller, 1992; Howell et al., 1995; Loeber, Stouthamer-Loeber & Van Kammen, 1991; Slavin, 1991). Because several different problem behaviors can be predicted with the same risk and protective factors, this investigative strategy suggests a "holistic" or "non-categorical" approach to preventing the development of multiple health and behavior problems.

A Developmental Perspective is Supported

Research has shown that different risk and protective factors are most important for predicting problem behaviors depending on the child's stage of development (Bell, 1986). For example, while aggressive behavior from the earliest elementary grades appears to be a stable

predictor of teenage drug abuse, poor achievement stabilizes as a predictor of drug abuse only in later elementary grades (Kellam & Brown, 1982). Because developmental theory and research has been inconsistently incorporated into prevention programming, prevention scientists have begun to emphasize the importance of its inclusion. Information on developmentally and environmentally appropriate task demands (Kellam & Rebok, 1992) as well as developmental processes (Catalano & Hawkins, 1996) must be incorporated to ensure that prevention interventions are appropriate to the child's developmental stage and environment.

There is a growing emphasis on the integration of developmental theory with models from public health, epidemiology, social work, sociology and developmental psychopathology in conceptualizing, designing and implementing preventive interventions (Cichetti & Cohen, 1995; Cichetti, 1984; Kellam & Rebok, 1992; Lorion, 1990; Sameroff, 1991; Sroufe & Rutter, 1984). As concepts in development have broadened to include ecological analysis (Belsky, 1993; Bronfenbrenner, 1979, 1995; Garbarino, 1992) and multivariate examination of causation and risk (IOM, 1994; Rutter, 1987), developmental theory has become more able to provide a powerful framework for organizing and building the field (Weissberg & Greenberg, 1997).

Prevention science has recognized as equally important the role of different social environments or settings in shaping a child's behavior and other youth outcomes.

> In seeking to explain these variations in adolescent development, researchers have traditionally focused on personal characteristics, family relationships, and peer friendships. Such lines of inquiry suggest that these factors interact across multiple dimensions to influence youth outcomes. More recently, research scholars have noted that social settings represent a whole new area that has largely been ignored in traditional scholarship. The recent emphasis on social settings in youth development research has stimulated new lines of research inquiry and research methods designed to explore how individual, family and peer relationships and outcomes are influenced by factors such as physical environment, economic opportunity structures, and ethnic and social networks, especially in urban areas characterized by concentrated poverty...Although this field of study is relatively young and lacks well-established theories and comprehensive data sets,

> research on social setting factors and adolescent development has significant implications for the design and evaluation of programs that serve youth. (National Academy of Sciences National Research Council, 1996, pp. 3-4).

Evolution of Prevention Science

Conclusions from this research have led prevention scientists to call for a broader focus in prevention studies. Longitudinal studies of youth problem behaviors over the last 30 years have identified important risk and protective factors. It is now widely accepted among prevention scientists that problem behaviors—whether pregnancy, substance abuse, dropout, violence, or delinquency—share many common antecedents. The number of risk and protective factors to which a youth is exposed strongly affects that youth's likely outcomes (Pollard et al., under review; Jessor et al., in press). Research also points to the importance of considering developmental and environmental task demands and processes in prevention program design.

Prevention science suggests a broader focus in prevention:

a. Address both risk and protective factors for multiple problems.

b. Address both risk and protective factors across all social domains in which a child operates.

c. Address both risk and protective factors at developmentally appropriate periods and include an awareness of differences in normative developmental challenges and tasks to ensure that programs are culturally appropriate to the target population.

d. Intervene early, at the specific period the risk or protective factor is most relevant.

The Convergence of Approaches

Youth development practitioners, the policy community, and prevention scientists have developed complementary recommendations for promoting better outcomes for youth. They call for expanding prevention programs beyond a single problem behavior focus, and they consider effects on the "whole youth." Prevention science is able to provide empirical support for this position through substantial evidence that common risk and protective factors affect many of children's problem behaviors. Thus, addressing these antecedents is likely to reduce multiple problems making some categorical approaches inefficient. Both prevention scientists and youth development advocates call for interventions affecting several social domains. The evidence that risk and protective factors are found in the family, peer, school, and community environments provides empirical support for this approach. Both groups also call for approaches that recognize the importance of social and environmental effects on the developmental tasks confronted by youth and adolescents. This convergence in thinking has been recognized in forums of researchers, practitioners and government representatives on youth development and neighborhood influences.

> This emphasis on the whole person has led to a sustained appreciation of how physical and social settings influence adolescent development, as well as of the ways in which risk and protective factors within these settings foster or inhibit constructive adult-youth interactions. (National Research Council, 1996; pp. 7).

Cooperation or Competition: Do We Need a Paradigm Shift?

Recently, some authors have advocated for a paradigm shift in the youth development and prevention field to focus exclusively on building assets, the protective factors associated with resiliency, rather than trying to reduce risk (e.g., Benard, 1993; Benson, 1997). These scholars assert that targeting risk factors emphasizes the deficits of young people. They suggest that

focusing on building children's strengths will produce more positive outcomes than interventions focusing on reducing risk factors. In contrast, others have argued that a focus solely on the resilience of young people emphasizes individual characteristics and ignores important social and contextual risk factors that should also be a focus for youth development and prevention policies and interventions (Tolan, 1996).

The effect of ignoring risk and focusing solely on enhancing protection or assets on positive youth development and the development of adolescent problem behaviors is unknown. Given the strong relationship between exposure to increasing numbers of risk factors and involvement in multiple problem behaviors, the likely impact of interventions focused exclusively on building resilience depends on whether protective factors can fully mitigate the negative effects of exposure to multiple risk factors during development.

Understanding the relative strength of aggregated risk and protective influences considered simultaneously in relation to the likelihood of adverse outcomes has important implications for prevention policy and practice. If focusing exclusively on strengths, assets or protective factors can eliminate the effects of high levels of exposure to multiple risks, than attention to risk is not required in youth development and prevention policy and planning. If this is not the case, then those concerned with promoting positive youth development and preventing adolescent behavior problems should maintain focus both on reducing risk factors and on increasing protective factors.

Data from a survey instrument measuring a comprehensive set of risk and protective factors and diverse behavior outcomes including school achievement, substance use, violence, and delinquency provides some evidence on these issues (Pollard, Catalano, Hawkins & Arthur, under review; Pollard, Arthur & Hawkins, under review). The survey was developed through

item selection from existing scales, cognitive pretesting and piloting in the state of Oregon (Pollard et al., under review). It was further developed, validated, and administered to statewide probability samples of adolescents in Kansas, Maine, Oregon, South Carolina, and Washington in grades 6 through 12 in 1994 and 1995. Over 80,000 students were surveyed. These survey data provide a unique opportunity to investigate the prevalence of a broad range of adolescent behavioral outcomes in a large sample of adolescents exposed to widely varying levels of both risk and protection. These studies examined the relationship between aggregate levels of risk and protection and adolescent problem behaviors of substance use, delinquency and violence and the positive youth development construct of academic success (a high GPA).

The study drew several conclusions. First, epidemiologically there are not large numbers of adolescents who are exposed to high levels of risk who have high levels of protection. In the face of high-risk exposure, it may be particularly challenging for young people to develop high levels of assets or protection. Conversely, it is noteworthy that few of those who have been exposed to low levels of risk have failed to develop high levels of protection, resilience, or assets. Second, increasing levels of risk exposure were consistently associated with greater prevalence of all the problem behaviors assessed here. Moreover, this relationship was not linear. Large increases in the prevalence of problem behaviors were associated with the highest levels of risk exposure. Third, while increased protection was associated with lower prevalence of problem behaviors at every level of risk exposure, this effect was greater at the higher levels of risk exposure. The results consistently indicated an interactive relationship between overall levels of risk and protection. For each of the problem behavior outcomes, the reduction in prevalence associated with higher levels of protection was greatest at the higher risk levels. These findings support a buffering hypothesis (e.g., Rutter, 1979; Landerman, George, Campbell & Blazer,

1989) of the relationship between aggregate risk, aggregate protection, and these behavioral outcomes: that protective factors moderate the negative effects of exposure to risk. Fourth, high levels of protection did not eliminate problem behaviors among those exposed to high levels of risk. Fifth, generally, variation in levels of risk exposure appeared more strongly related to problem behavior outcomes than did variation in levels of protection. Sixth, the pattern of relationships between risk and protective levels and the positive behavior outcome of high grade point average generally were consistent with the patterns seen for the problem behaviors. At higher levels of overall risk exposure, the prevalence of respondents with high GPA's declined as hypothesized. The expected decreases in the prevalence of high GPA's among those with low protection were observed as risk exposure increased to high levels.

These findings suggest that focusing on strengthening assets or protective factors alone might not be as effective in promoting positive youth development and reducing problem behaviors as focussing on both risk reduction and protective factor enhancement. Building assets or protection among those exposed to high levels of risk might reduce the prevalence of positive youth development and problem behaviors, but not as much as a strategy that was effective in reducing both risk exposure and enhancing protection in these subgroups. These findings suggest that prevention and positive youth development policies and programs should focus on both the reduction of risk and the promotion of protective influences.

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Health Futures of Youth II: Pathways to Adolescent Health

Early Intervention

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Introduction

The wisdom of Early Intervention is one of the most strongly held beliefs in health care. It just makes "good sense" that the earlier we are able to interfere with a disease process the better and cheaper will be the outcome. If we can treat a gonococcal infection at the point of first symptomatic (or even pre-symptomatic) cervicitis with one injection then we believe that we avoid the very expensive and more sequalae laden Salpingitis. In a similar fashion, if we could detect the causal antecedent of a complex behavioral problem like juvenile delinquency and if we had the means to modify that antecedent then we could avoid much anxiety and pain for individuals, their families and our society.

However, although the intention to intervene early is generally believed to be a good one, too often we don't know when to do it, on whom to do it, and how to do it. Furthermore, if we consider the effectiveness of the interventions that have been used widely over the last twenty years we would have to conclude that although we have had

some modest gains with issues such as teenage pregnancy we have not been successful with most early intervention efforts.

What Is Early Intervention?

Categorically Early Intervention fits within the rubric of Prevention. The conventional definition classifies Prevention into three subgroups:

- **Primary Prevention**
  1. Prevention of the occurrence of a disease or injury.[1]
  2. Measures designed to promote general optimum health by the specific protection of persons against disease agents or the establishment of barriers against agents in the environment.[2]

- **Secondary Prevention**
  1. Early detection and intervention to reverse, halt, or at least retard the progress of a condition.[3]
  2. Early diagnosis and prompt treatment to prevent sequela and limit disability.[4]

- **Tertiary Prevention**
  1. The minimization of the effects of a condition.[5]
  2. Rehabilitation[6]

In conventional terms Health Promotion is Primary Prevention and Early Prevention is Secondary Intervention. Where a specific intervention fits within this definition depends on what it is that one wants to prevent. For example, an education program (e.g. job training) for teenage mothers is an early intervention if what one wants to prevent is welfare dependency. However, if what one wanted to initially prevent was teenage pregnancy then the same program would be considered rehabilitation - a Tertiary Prevention.

The conventional classification of Prevention is based on the assumption that there is an understanding of the linkage of the mechanisms that cause a disease with the occurrence of a disease.[7] However as more is learned about etiology, it clear that the

causal mechanisms associated with even the most simple pathological events are a complex interplay of biological, social, environmental, and intra-personal risk and protective factors that resist simple explanatory linkages. In 1983 the limitations of the conventional definition lead Gordon to propose an alternative classification of Prevention that was based on the empirical relationships found in practically oriented disease prevention and health promotion programs: [8]

- **Universal Prevention** - Interventions targeted to the general public or a whole population group that has not been identified on the basis of universal risk.
- **Selective Prevention** - Interventions targeted to individuals or a subgroup of the population whose risk of developing a disorder is higher than average.
- **Indicated Prevention** - Interventions targeted to high-risk individuals who are identified as having early detectable signs or symptoms.

Using Gordon's terminology, Early Intervention is an Indicated Prevention.

I have chosen to combine the definitions of Secondary Prevention and Indicated Prevention to produce the working definition that I shall use in this paper:

> Interventions targeted to high risk individuals who are identified as having early detectable signs or symptoms with the intention to achieve early intervention to reverse, halt, or at least retard the progress of a condition[9] or to achieve the early diagnosis and prompt treatment to prevent sequalae and limit disability.[10]

This definition early intervention requires three operational elements:

1. Morbidities that have identifiable and detectable causal antecedents.
2. Reliable tools which can effectively detect the antecedents in all populations of adolescents.
3. Interventions that have the power to reliably halt the progression of these identifiable antecedents toward an undesirable goal.

Morbidities with Identifiable Antecedents

There are significant differences in the current "state of the art" between the early intervention of morbidities that have antecedents and endpoints that are primarily biological and morbidities which have antecedents and endpoints that are primarily behavioral and psychosocial. These differences, which are largely a function of our knowledge and expertise in each of these areas, have caused different levels of early intervention success. For example, it is a relatively simple matter to detect and intervene early with STD's in an at-risk population in a community adolescent clinic if the at-risk population is defined as those sexually active adolescents who visit the clinic for routine medical care. However it is very difficult to intervene early with that same population if the early intervention outcome is the prevention of juvenile delinquency.

Morbidities can be classified into three categories that are defined by the biological and psychosocial aspects of their primary etiologies and outcomes:

Category I. Morbidities that are biological and have predominately biological causal antecedents. Testicular cancer an example of this category.

Category II. Morbidities that are psychosocial and have predominately behavioral causal antecedents. School failure, school dropout and delinquency are examples in this category.

Category III. Morbidities that have significant biological and psychosocial outcomes and in which there are significant biological and behavioral antecedents. Substance /use/abuse and teenage pregnancy are examples in this category.

The causal antecedents of the Category I biological morbidities are increasingly better understood and consequently potentially lend themselves to early interventions. However these benefits have not always been realized because the early interventions require behavioral actions such as self-testicular examination or health system alterations such as wider access to routine physical examination.

Furthermore the universal wisdom of biologically targeted early intervention has been questioned. In a 1996 study Weinberg et al investigated the effectiveness of an early intervention designed to prevent the readmission of veterans to an inpatient health facility. The methodology included more frequent ambulatory medical visits with screening and early attention to identified problems. Surprisingly the patients in the control group who did not receive the intervention had better outcomes i.e. fewer re-admissions and better reported health status.[11]

The theories and models that are discussed below have resulted in an improved understanding of the causal antecedents of the Category II behavioral morbidities. It is now appreciated for example that during adolescence problem behaviors do not occur in isolation but that they tend to cluster and increase in severity with time, especially when these behaviors are initiated at an early age.[12] Investigations such as the ADD Health Study have further clarified the common causal sources of these clusters.[13] Furthermore it is now fully appreciated that childhood behaviors such as conduct disorders predict alcohol and drug use and antisocial personality, as well as externalizing disorders and some internalizing disorders in adults.[14]

Category III morbidities, combination biological and behavioral morbidities, have antecedents which are a complex interaction of the biological and behavioral factors. For example alcohol addiction has both behavioral and biological components, which leads teens to drink heavily and to develop a continuing need for alcohol. Ultimately most of the morbidities that concern us in adolescent care fall into these complex interplay's.

Although the details of all of the causal links are not understood, a well recognized set of preventable health related morbidities are currently the common targets of early

intervention. Perhaps the most comprehensive and well-documented listing of these is found in the adolescent specific objectives for Healthy People 2000 National Health Objectives. These targets were based on preventable morbidities that are understood well enough to be associated with recognized prevention and early intervention strategies. In 1996 the Department of Adolescent Health of the American Medical Association published ***Healthy Youth 2000: A Mid-Decade Review***[15] which reviewed the nations progress toward the achievement of the adolescent specific objective. These 35 objectives were divided into 10 categories which represent the domains of most current early intervention efforts:

1. Physical Activity and Fitness
2. Nutrition
3. Tobacco
4. Alcohol and Other Drugs
5. Family Planning
6. Mental Health and Mental Disorders
7. Violent and Abusive Behavior
8. Unintentional Injuries
9. Sexually Transmitted Diseases
10. Clinical Preventive Services

Detection Tools

In adolescent care the detection of the existence of causal antecedents primarily depends upon data collected through some sort of universally or selectively applied screening mechanism (survey instrument, medical and psychosocial histories, physical examination, laboratory test, etc.). Detection occurs when the causal antecedents or predictors are found in the collected data.

An impressive array of predictors of Category II Morbidities (behavioral and psychosocial) has been amassed in the last twenty years:

I. Predictive factors for delinquency[16]

A. Child-Centered factors
- Genetic Vulnerability
- Gender
- Perinatal Risk (prematurity, low birth weight, anoxia, medical stress)
- Temperament
- Cognitive Abilities and School Achievement

B. Family-Centered Factors
- Parenting
- Attachment
- Child Maltreatment
- Marital Conflict

C. Contextual Factors
- Family and Community Socioeconomic Status
- Community Crime and Violence

II. Predictive factors for major depression[17]
- Gender
- Health problems
- Family factors
- Unpopularity
- Low Self Esteem
- Anxiety
- Stressful Life Events
- Academic Failure
- Socio-Economic Status

III. Predictive factors of suicidal attempts and ideation[18]
- Family factors
- Health problems
- Early behavioral and Emotional Problems
- Early Onset of mental Disorders
- Earlier Suicidal Ideation
- Prior Suicide Attempts

However the predictive accuracy of these historical finding has several inherent flaws. Although newer techniques such as computer assisted interviews may provide more

accurate data, most clinical information collected from adolescents is still confounded by the inherent errors and biases of face to face interviews or pen and pencil surveys. Even when the data is accurate the interpretation of the data may be affected by the cultural experiences of the clinician or analyst in such a way as to render the conclusions invalid. For example, the finding of a black teen within a single parent household in a depressed inner city community and a white teen from a single parent household in an affluent community is usually interpreted to be predictive of two different outcomes although the predictive factor, single parent household, is identical. In this case the affluence of the community setting for the white teen is considered to mitigate the adverse effect of the single parent household. However no effort is made to determine that the community environment for the black teen is indeed adverse or neutral.

In the case of the biological morbidities the detection instruments are usually components of a comprehensive physical examination. To the extent that the teen has access to the physical examination the detection is fairly good and becoming better. Guidance such as the AMA's Guidelines for Adolescent Preventive Services[19] and recommendations of the Society for Adolescent Medicine and the Adolescent Section of the American Academy of Pediatrics have established protocols and procedures which allow for the early detection of many of the biological morbidities that will benefit from early intervention. However the key factor is access; teens may not use services when they are available, or the services may not be available because of geographic, financial or attitudinal restrictions.

Finally the specificity and sensitivity of the detection tool often interferes with the establishment of an effective operational link between detection and early intervention.

These factors determine the significance of the finding given its context and directs the type of intervention that will be most effective.

In cases of Category I biological morbidities this is quite easy. For example, chlamydia infection of the male urethra is highly specific for the development of chlamydia urethritis. Detection tools used at the routine physical examination of persons at high risk by virtue of the fact that they are sexually active can detect these infections before disease begins. Antibiotics can effectively eradicate the infection and prevent the development of illness.

This paradigms cannot be so easily applied to Category II and III morbidities which have major behavioral components. For example, cigarette smoking is a factor that is predictive of substance use. Yet the interplay of the steps that lead from cigarettes to cocaine is not understood well enough for this finding to be a highly specific predictor of cocaine use. Furthermore this predictor points to no effective early intervention. The solution to this puzzle requires a full appreciation of the factors that explain the behavioral issues related to health. Why do we make the health choices we make; and how can the selection of options be modified? The answers to these questions have been proposed in a number of theories and models which have sought to explain adolescent behavior.

A Review of Theories of Adolescent Problem Behaviors

In the last twenty years most credible early intervention programs have included theory or model based designs that have guided the content and predict the outcomes of the specific efforts. In a 1995 review of adolescent substance use interventions Pertains,

Flay and Miller[20] critiqued the theories that have been advanced to explain adolescent substance use. In doing so, they proposed a useful framework around which to organize a general consideration of the theories that explain adolescent problem behavior. This framework organizes the theories into five categories:

a. **Cognitive-Affective Theories** – theories that describe how the personal decision making process contributes to behavioral choices.
b. **Social Learning Theories** – theories that emphasize the effects of role models which promote specific behaviors.
c. **Conventional Commitment and Social Attachment Theories** – theories that detail how various factors promote withdrawal from conventional society, detachment from parents, and attachment to peers.
d. **Theories in which Intrapersonal Characteristics Play a Key Role** – theories that search for the roots of behaviors in the personality traits and affective states of adolescents.
e. **Theories That Integrate Cognitive-Affective, Learning, Commitment and Attachment, and Intrapersonal Constructs** – theories that seek to integrate cognitive-affective, social learning, commitment and attachment and interpersonal constructs.

Cognitive – Affective Theories

These theories are based on the assumption that adolescents make behavioral decisions based on a cost benefit analysis. Decisions are the consequence of the expectations and perceptions that the adolescent has about the outcomes of a behavior. Other variables in the adolescents environment operate through their effect on the behavior specific cognitions, evaluations and decisions.

Theory of Reasoned Action[21]

- A specific behavior is determined exclusively by an adolescent's decisions or reasoned intentions to engage in the specific behaviors.

- When properly measured a persons attitudes and subjective norms about a behavior can be used as a predictors of behavior.

- Adolescents who perceive that a behavior is common among their peers will be more likely see it as a normal behavior (i.e. social norms).

- Intentions are affected by adolescents' attitudes regarding their own behavior. Teens will hold positive attitudes toward a behavior if the expected benefits of the behavior are valued more than the expected costs.

- Decisions are affected by an adolescent's beliefs regarding the social norms surrounding the behavior. Social normative beliefs are based on an adolescent's perception that others want him or her to engage in the behavior and on the adolescent's motivation to comply with the behavior-specific wishes of those people. Consequently teens will feel strong pressure to engage in a behavior if they believe that important friends and family members endorse the behavior. They might also feel strong pressure to engage in a behavior if they overestimate the prevalence of the behavior among peers and adults in general.

- Early interventions based on elements of this theory attempt to assess individual attitudes, beliefs and perceptions about a specific problem behavior. The specific intervention attempts to change the individual attitudes and beliefs and perceptions as well as the perception of the social norm. Often this change in the social norms is achieved through the use of influential peers.

Theory of Planned Behavior[22]

- Behavioral intentions are not only affected by attitudes and normative beliefs, but also by self-efficacy .

- Self-efficacy plays a critical independent role in shaping behavioral intentions. The intention to engage in a behavior must be supported by the perceptions of control over the successful completion of the particular behavior.

- Interventions which include elements of this model have focused on developing adolescents skills (or plans) to engage in beneficial behaviors. These efforts assume that teens who develops positive attitude and perceptions about a positive behavior are more likely to chose the positive behavior if he had the skills to use that behavior. An example is interventions which encourage condom use by developing positive attitudes about condom use as well as condom use skills.

Cognitive Dissonance[23]

- Behavior change can be stimulated by producing cognitive dissonance between behaviors and personal attitudes and beliefs.

- This effect can be achieved through cognitive inoculation with pre-treatments that stimulated these dissonant feelings. [24]

- Interventions such as behavioral contracts and virginity pledges are base on elements of this theory.

Social Learning Theories

Social Learning Theories focus on the causes of the beliefs and perceptions an adolescent has about a behavior rather than specific beliefs or perceptions. Central to these theories is the assumption that behaviors are socially learned in small informal groups such as families or peer groups.

Social learning theory[25, 26]

- Behavior-specific cognitions are the strongest predictors of adolescent behavior; however these cognitions originate with the person or persons who serve as the adolescent's most significant role models.

- Adolescents also acquire their beliefs about a behavior from their role models, especially close friends and parents who engage in or support the behavior. The actions of these role models will have three effects of the adolescent:
  1. they will observe and imitate the specific behaviors;
  2. the behavior will be socially reinforced;
  3. the adolescent will expect positive social and physiological consequences from his future involvement in the behavior.

- Early interventions which have been based on Social Learning Theories have included Near Peer Just Say No and media modeling of positive health behaviors using near peers or pro-social individuals.[27] Social Inoculation[28] is frequently used in these interventions to employ peer pressure as a motivating force to modify social beliefs.

Conventional Commitment and Social Attachment Theories

Like social learning theories these theories assume that emotional attachments to peers who engage in a behavior is a primary cause of a specific behavior. However, unlike social learning theories, they focus on the causes of those attachments, specifically targeting weak conventional bonds to society and institutions and individuals that discourage deviant behaviors.

Social control theory[29]

- Focuses on social systems by targeting academic and occupational strain, disorganization among social institutions (e.g., local economies, schools, and families), and inadequate socialization.

- This theory posits three causes of youths' weak commitment to conventional society and weak attachment to conventional role models:
  1. Strain - the discrepancy between adolescents' aspirations and their perceptions of the opportunities to achieve those aspirations. Adolescents who feel that their academic or career aspirations are being frustrated by their educational and occupational options will feel uncommitted to conventional society and, consequently, will become more attached to deviant peers. Furthermore, some adolescents might feel strain at home because they want but are not receiving closer relationships with their parents. This stain will weaken attachments to parents and encourage attachments to peers.
  2. Social Disorganization - weakness or breakdown of established institutions or the inability of local institutions to produce effective communities. Adolescents will feel uncommitted to conventional society if they come from disorganized neighborhoods (high crime and unemployment, poor schools, ineffective or unresponsive social institutions) which give adolescents no hope for the future. They might also feel less attached to parents if they come from disorganized families.
  3. Ineffective Socialization - adolescents who have not been socialized into conventional society (by their families) become attached to deviant peers and fail to adopt conventional standards.

- Early interventions that use elements of this theory attempt to strengthen families and improve academic and economic opportunities. Head Start is a successful example of an early intervention that has adopted elements of this theory.

The social development model[30]

- The development of bonds between adolescents and social units (e.g. family, peer groups) creates a system of rewards and punishments.

- When these social unit's clearly and consistently express conventionally normative expectations the adolescent will follow the norms because he/she feels socially bonded to the social unit.

- Adolescents become attached to deviant peers if they feel uncommitted to conventional society or unattached to their parents and other conventional role models.

- The relative influence that families, schools, and peers wield over an adolescent's behavior shifts developmentally, with parents dominating preadolescent years, and peers dominating behaviors during adolescence.

Theories in Which Intrapersonal Characteristics Play Key Roles

Theories in this category build upon previous theories by focusing more equal attention on both the characteristics of adolescents' social settings (e.g., peers, communities, and families) and the characteristics of adolescents themselves (e.g., their self-esteem and coping skills). Central to these theories is the assumption that within a given social setting, adolescents will differ from each other in their attachment to peers who engage in a specific behavior and their motivation to engage in the behavior. These individual differences are based on characteristics such as personality traits, affective states, and behavioral skills.

Self-derogation theory[31]

- Adolescents experience low self-esteem and frequent self-derogation if they repeatedly receive negative evaluations from socially conventional peers, authority figures and role models or if they feel deficient in socially desirable attributes such as academic performance.

- In defense of their egos, these adolescents might become alienated from conventional role models and feel motivated to rebel against conventional standards. They may

also develop the belief that their self-worth can be enhanced by engaging in alternatives to conventional behaviors, and become involved with deviant peers who boost their sense of self-worth.

- Early interventions that use elements of this theory seek to enhance adolescents' self esteem and reinforce self worth.

Multistage social learning model[32]

- Integrates the social learning processes with intra-personal characteristics - low self-esteem, emotional distress, inadequate coping skills, deficient social interaction skills, and a personal value system that emphasizes present-oriented goals over long-term and conventional goals concerning families, education, and religion.

Family interaction theory[33]

- Emotional attachment to parents (especially the emotional attachment between mother and child), social learning and intra-personal characteristics of adolescents directly affect deviant behaviors.

- If this strong emotional attachment is associated with (a) conventional values among parents, (b) affectionate or supportive parenting styles, (c) maternal psychological adjustment, and (d) maternal control over a child it will result in the development of conventional and well-adjusted adolescent personalities, infrequent involvement with deviant peers and, infrequent problem behaviors.

- Early interventions which use elements of this theory focus on the development of supportive and effective parenting skills.

Theories That Integrate Cognitive-Affective, Learning, Commitment and Attachment, and Intrapersonal Constructs

These theories draw upon aspects of all of the previously described theories to develop a comprehensive explanation of adolescent behavior. They represent the latest advances in the field. Moreover they have significantly contributed the most effective early interventions.

Problem-behavior theory[34]

- Adolescents who are prone to one problem behavior are also prone to other problem behaviors. The vulnerability of an adolescent to problem behaviors is a function of

their environment and their personality.

- Environment is divided into proximal and distal structures.
  Distal Structure - attachments to family and peers. Adolescents are at risk if they are unattached to their parents, are close to their peers, and are more influenced by their peers than their parents.
  Proximal Structure - social modeling and the behaviors of friends and family members. Adolescents are at risk if they have friends and/or family members who support or model a deviant behavior.

- Personality is divided into distal, intermediate and proximal structures.
  Distal: Personal Belief Structure – adolescents will be at risk if they are socially critical and culturally alienated; have low self esteem and feel they have little risk through deviant behaviors; have an external locus of control; believe that their conventional behaviors are not socially rewarded and that their deviant behaviors are not socially punished.
  Intermediate: Motivational Instigation Structure - the direction of the adolescents dominant goals, expectations and personal values. Adolescents will be at risk if they highly value their involvement with peers, seek independence from parents and devalue academic achievement or have low expectations for academic achievement.
  Proximal: Personal Control Structure – attitudes toward deviant behaviors. Adolescents will be at risk if they are tolerant of deviant behaviors or believe that the benefits of the deviant behavior outweighs the risk

- This theory posits four domains of health - physical, psychological, social and personal. Since a single behavior can affect several health domains effective interventions will address all of these areas.[35]

Neo-cognitive Learning Theory[36]

- In 1993 Kelly described a theory that was based on a "wellness" model of human psychological functioning that operated from three major principles or assumptions:
  1. The Natural Mental Health of Children – "...every child begins life with a natural, inborn capacity for healthy psychological functioning. At birth, children have an innate capacity for healthy functioning which includes the use of common sense, a desire to learn, and the motivation to develop and utilize these abilities in pursuing prosocial lifestyles. Further, this mind state incorporates unconditional, positive self-worth, a desire to learn for the satisfaction of learning, and a natural joy in the understanding and mastery of the environment. From this natural psychological perspective, high self-esteem is automatic and effortless. It need not be taught, developed, or strengthened. Self-esteem, in this mind state, is not derived from outside activities, but serves instead as the motivation behind the desire to achieve."

2. The Learning of an Alienated Frame of Reference – "...delinquency and other dysfunctional behaviors become possible to the degree that children begin to learn and incorporate into their belief systems alienated frames of reference. Such alienated mind-sets are molded by ongoing conditioning which starts early in the family environment as a result of continuous exposure to conflict, negative beliefs, and other forms of unhealthy parental and family functioning. Repeated exposure to such dysfunctional processes leads to feelings of insecurity, often experienced by children at very early ages. It is the internalization (i.e., conditioned programming) of a negative, alienated belief system which blocks the expression of innate healthy psychological functioning. Learning and performance become effortful and deviant behavior desirable through conditioned beliefs. If youths do not incorporate an alienated belief system through early cognitive programming, their innate capacity for healthy functioning will evolve naturally into mature behavior, unconditional self-esteem, and emotional well-being."

3. Drawing Out Children's Natural, Healthy functioning – "...any child's innate capacity for healthy, mature psychological functioning can be rekindled regardless of prior history of delinquent or other self-damaging behavior. If certain conditions are present, alienated youths have the ability to understand how their thinking process works, and through this understanding regain access to natural, healthy psychological functioning. A key to drawing out healthy functioning is discerning what factors, at any given moment, determine whether a youth will function at unconditioned levels (learning and behaving by insight) rather than more conditioned levels of insecurity-driven learning and motivation. While high-risk youths have higher levels of learned insecurity, they can be helped to achieve frames of mind that are less likely to stimulate insecurity."

- Early intervention programs based on Neo-cognitive Learning Theory take a multidimensional approach which includes improving the safety of the environment and providing safe and supervised activities for children. They have effectively reversed trends by affecting these core issues.[37, 38]

Resilience Model[39]

- Stress is a universal experience. Success in life is less determined by the stress experienced than it is related to the resources available to address the stress. Furthermore negative life events are not rare experiences and they do not invariably lead to a life of deprivation.

- Resiliency is the capacity to recover and adapt after an insult. Resilience is not a trait that some have and others do not; rather, it represents an interaction between the individual and the environment. Resilience implies resistance to threat, but it is a graded phenomenon. Resilience can be defeated by cumulative risk or insults .

- Resilience is interactive with risk; it is developmental in nature, stemming from biology and experiences earlier in life and protective factors that may operate in different ways at different stages of development.

- Resiliency-based early interventions focus on enhancing competence and building individual strengths with an aim to address those factors that predispose an individuals to one or multiple risks. They build on competence (literacy, employability, interpersonal, vocational and academic skills), connection (caring relationships built through mentoring, tutoring, leadership, and community service), character (individual responsibility, honesty, community service, responsible decision-making, and integrity) and confidence (hope, self-esteem, and a sense do success in setting and meeting goals) to focus on the adolescents' strengths rather than narrowly on risk reduction.

Outcomes – Has Early Intervention made a difference?

The theories reviewed in the last section have developed a more comprehensive and functional view of the adolescent and his/her behavior. The have also strengthen our ability to discern the predictive value of specific behaviors and human interactions. In particular, Problem Behavior Theory, Neo-Cognitive Theory and the Resilience Model provide a framework for interventions that effectively target the root antecedents of many correlated problem behaviors. However when early interventions are looked at in the field we find that they have not always lead to sustained benefits. This has been particularly true with efforts that focus narrowly on risk reduction (e.g. delinquency, drugs, pregnancy):[40]

- In 1997 Farrell reported on the effectiveness of a school-based curriculum for reducing violence among sixth grade students.[41] The intervention included elements designed to address the known antecedents of violence in a population at risk as identified by the presence of these antecedents. The intervention did lesson the rate of entrance of boys into more violent behaviors. However there was no longitudinal

component that could determine if the intervention gains persisted beyond the immediate outcome. The study also did not look at the other factors that may be operating to help to achieve the benefits.

- Student assistance programs have become a model approach for early intervention in adolescent substance abuse. However few evaluations have been done. A study of programs in Washington State in 1993 shows that students benefit in regard to their level of substance abuse but there was insufficient data to judge if these programs are superior to other approaches.[42]
- In 1991 the Pacific Institute for Research and Evaluation report on their review of adolescent substance abuse early intervention programs. Most programs were found to have no evaluation. The report also suggested that some adolescents may have been harmed by inappropriate labeling.
- An evaluation of Teen Outreach in various national sites revealed that the best outcomes were in programs that were perceived by students as promoting their own autonomy and sense of relatedness with other students and Teen Outreach facilitators. The findings also suggested that programs at the middle school level were most effective if they fostered adolescents development and the establishment of themselves as capable and independent individuals within the context of positive relationships with adults.[43]
- In a review of teen pregnancy prevention programs Kirby concluded that the only programs that seem to make a sustained difference are those that enhance adolescent development.[44] The most effective programs focused less on skills to resist early onset of sexual activity and unprotected intercourse and more on issues related to the

improvement of life options (school failure, vocational options, adult mentorship, etc.)

- Joy Dryfoos found in her review of adolescent risk reduction programs that most, regardless of their target, didn't have sustained effects.[45]
- In its 1996 review of the progress toward the achievement of the Year 2000 targeted health goals for adolescents the Department of Adolescent Health of the American Medical Association concluded:[46]

    1. Physical Activity and Fitness – improving but hampered by cut backs in school physical education programs and youth preferences for sedentary leisure time activities.
    2. Nutrition – awareness improved but hampered by declines in youth activity.
    3. Tobacco – increasing numbers of adolescent smokers.
    4. Alcohol and Other Drugs - some declines but alcohol and marijuana use continue to increase.
    5. Family Planning – pregnancy rates have stabilized but they are still high.
    6. Mental Health and Mental Disorders – suicide rates are increasing.
    7. Violent and Abusive Behavior – homicide rates are increasing
    8. Unintentional Injuries – rates have improved significantly
    9. Sexually Transmitted Diseases – rates have improved in males but worsened in females.
    10. Clinical Preventive Services – little data available to make determinations.

Although there is no generally agreed upon explanation for this lack of progress, probable explanations are suggested in two studies that were published earlier this year. ***Improving Adolescent Health: An Analysis and Synthesis of Health Policy Recommendations*** is a report of the National Adolescent Health Information Center which reviewed more than 1,000 recommendations and strategies found in 36 reports on adolescent health status and how to improve it that have been issued in last 10 years[47]. Most of these recommendations endorsed interventions that contained elements of the theories and models that integrated cognitive-affective, learning, commitment and

attachment, and intra-personal constructs. Environment (formal and informal settings and institutions where adolescents spend most of their time or which significantly impact on their lives; family, school, religious organizations etc.) was recognized as the element that has the determinant effect on the adolescents resultant behavior. In this context effective early interventions should focus on efforts to recognize and minimize the environmental factors which produce deviant behaviors. However despite the recognition that setting affects behavior the report found that most policy efforts have focused on improving adolescent health and well being through changing individual behavior without emphasizing the social context of their lives[48], elements found in Cognitive-Affective Theories and Social Learning Theories.

The second report ***Priorities for Prevention Research at NIMH***[49] is a review of the current status of mental health prevention research. The report was issues by the National Advisory Mental Health Council Workgroup on Mental Disorders Prevention Research of the National Institute of Mental Health. This report found that....

> "Although NIMH has a relatively large and well-developed research program that examines mental health treatment services in large-scale, real-world settings, that program does not encompass research on prevention services. In fact, a review of the NIMH research portfolio reveals that virtually no prevention services research of any kind is being sponsored by NIMH in any of the three major components of health service research: a) organization and financing; b) clinical services research; and c) dissemination research...the development of research-based prevention interventions is not complete until they have been used and assessed in such settings and service systems. It is precisely at this final research stage, however, that the translation process founders. Some promising prevention research findings never leave the pages of research journals, while others are adopted outside the research community with no systematic tracking of where and how often they are implemented - and in what form, to what effect, and at what cost. Furthermore, a small number of scientifically validated prevention interventions compete in the real world with a vast array of prevention approaches of untested and unproven merit."

The report suggested research initiatives in the following areas to remedy this deficit:

- Studies of policies and procedures that facilitate or hinder the adoption and implementation of effective interventions.
- Research on the technology of effective dissemination.
- Studies on the effects of age, gender, ethnicity and/or socio-cultural status factories that affect access to or use of available prevention interventions.
- Studies of the cost associated with delivery of preventive interventions as well as methods of financing such interventions.

Although these findings and recommendations were specific to mental health research, it is most probable that the absence of investigations on how to negotiate the design, financial and political barriers applies to the entire prevention field.

Conclusion – What's Next?

I began this paper with a definition of early intervention and its operational elements - morbidities that have identifiable and detectable causal antecedents; reliable tools that can effectively detect the antecedents in all populations of adolescents; and interventions that can reliably halt the progression of these identifiable antecedents toward an undesirable goal. This review has demonstrated that although we don't have all of the answers we have made enough progress at meeting the conditions outlined above to conclude that we have the technological means to achieve greater success from early intervention. However these benefits to our youth cannot be realized unless policies are developed which support the utilization and implementation of the most effective theory based interventions. Furthermore these policies must be supported by research which enhances the translation of these effective interventions into broad national applications.

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Attachment F

Connections that Make a Difference in the Lives of Youth

Over 30,000 copies of this publication have been distributed. Our research team (with Resnick, Bearinger, and Blum with others) published the first analysis of the National Longitudinal Study of Adolescent Health (funded primarily by the National Institute of Child Health and Human Development). The scientific article appeared in the Journal of the American Medical Association (September 1997) on the same day that we released 20,000 copies of the monograph designed for non-scientific audiences.

This monograph has been instrumental in reframing and redirecting the dialogue about adolescence and teenagers. There could be no better goal for the White House meeting.

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Attachment G

The State of Native American Youth Health

Though this monograph is aging, it still is the best there is for addressing Native American youth health issues. It was developed by a University of Minnesota research team in collaboration with the Indian Health Services, following a national survey of 14,000+ reservation-based in-school youth.

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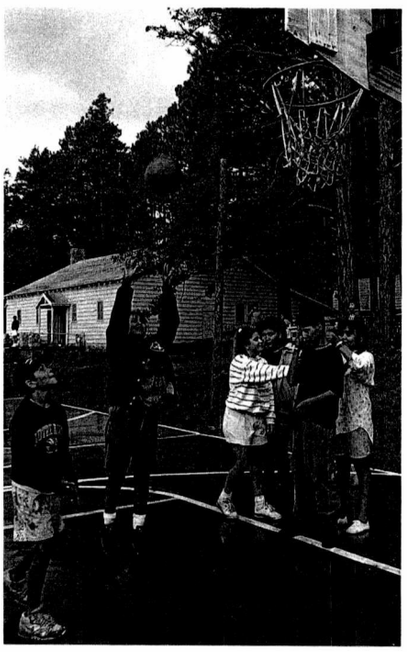
The State of Native American Youth Health



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