

THE TEEN OUTREACH PROGRAM (TOP) A YOUTH DEVELOPMENT APPROACH THROUGH SERVICE & LEARNING

The **Teen Outreach Program (TOP)** is an exciting comprehensive program aimed at fostering positive youth development. In a non-threatening environment under the guidance of a caring adult, young people thrive and develop positive self-image, learn valuable life skills and establish future goals. The Teen Outreach approach has proven to be highly effective for preventing teen pregnancy and helping young people make consistent progress in school.

The Teen Outreach Program is one of the few youth development initiatives with more than a decade of experience and evidence of significant outcomes. In a recent ten-year evaluation of the program conducted by Philliber Research Associates, TOP students when compared with non-students in a comparison sample demonstrate:

- 8% lower rate of course failure;
- 18% lower rate of suspension;
- 33% lower rate of pregnancy;
- 60% lower school dropout rate.

Generally implemented as a school-based program, Teen Outreach is designed for young people between the ages of 12-17. Teen Outreach is not an “add-on” program. TOP is highly adaptive and can be easily integrated into the school day schedule or offered in a variety of out-of-school settings where young people routinely meet.

Teen Outreach is a nationally replicated program that gives communities a framework for cultivating a variety of strategies for local implementation. The framework guide posts are TOP goals, principles/elements and program components.

TEEN OUTREACH GOALS

- ◆ Promote young people’s **healthy behavior** for successful achievement in school and attainment of their life-long goals.
- ◆ Help young people acquire **life skills** to develop the necessary competencies and capacities to grow into the healthy, self-sustaining adults we all want them to be.
- ◆ Give young people a real **sense of purpose** through authentic opportunities that allow them to contribute in meaningful ways to their communities.

TEEN OUTREACH PRINCIPLES/ELEMENTS

- ◆ The Teen Outreach Program employs the **youth development approach** in that young people are valued as assets and resources. Teen Outreach does not seek to “fix” what is wrong with young people, but rather to help young people discover their own strengths and potential.

(More)

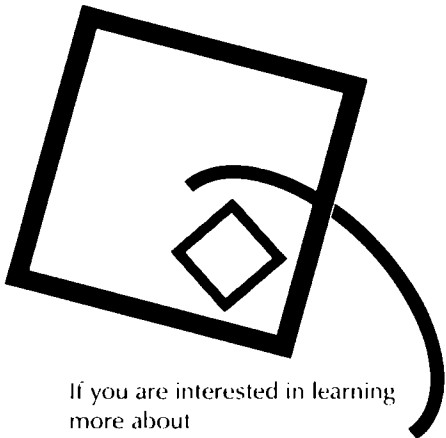
- ◆ The Teen Outreach Program can be the impetus for broad-based **community involvement**. A successful Teen Outreach Program requires strong community-wide partnerships to design, implement and monitor program success. Programs are designed to enhance current local youth development efforts, strategies and initiatives.
- ◆ The Teen Outreach Program offers a **learner-centered education** approach to respond to the different needs, developmental stages, interest, learning styles and life situations of young people. Activities in the classroom and out in the community are experiential, age-appropriate, affective and adaptable.
- ◆ The Teen Outreach Program connects learning gained through service experiences to classroom academics and vice versa. Adults in Teen Outreach utilize **academic extensions** strategies to help young people reap the benefits of being able to apply learning to life.

TEEN OUTREACH PROGRAM COMPONENTS

- ◆ **Community Service** offers young people an opportunity to help others as they help themselves. Service work helps young people develop new skills, learn about new people and places and reconnects them to their communities through the age-old arts of helping and caring.
- ◆ **Classroom-based Activities** consist primarily of small group activities and discussion on topics of special interest to young people. *Changing Scenes*, the TOP curriculum, is the educational tool used in the classroom to guide student discussions. Classroom learning focuses on helping young people develop the skills and competencies they need as they move from dependence to independence.
- ◆ **Service-learning** is the learning strategy through which young people begin to connect the community service experience to classroom learning, and ultimately to their lives. Through the service-learning concept, young people prepare for volunteer work, they think about what they have experienced in their work, and reflect on that experience in related discussions, writings, research activities, or creative presentations.

The foundation of the Teen Outreach Program framework is **Program Continuity**. Local program operators must demonstrate capacity for: 1) supporting the growth and development of well-trained and committed staff; 2) establishing stable and consistent funding options to support program-related cost; and 3) creating a system of communications and accountability to ensure open and honest dialogue between staff and sponsoring partners.

To learn more about the TOP replication and dissemination project, contact Cornerstone Consulting Group, P.O. Box 710082, Houston, Texas 77271-0082, (215) 572-9463.



If you are interested in learning more about TOP or want assistance in implementing a TOP program, please call:

TOP Dissemination and Replication Project
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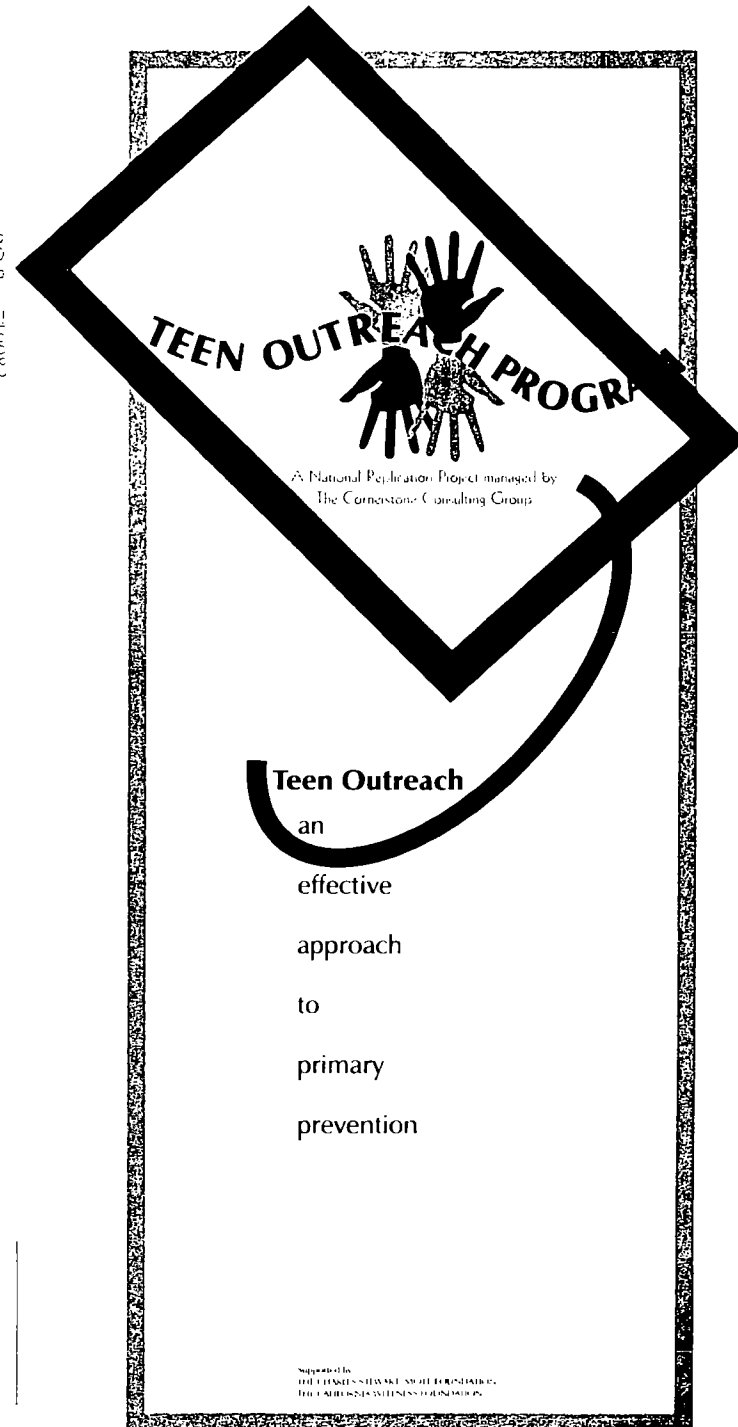
or write to:

Cornerstone Consulting Group
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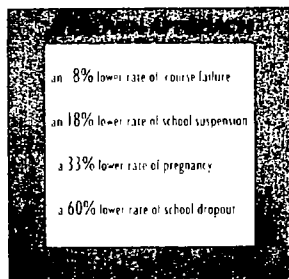
THE TEEN OUTREACH PROGRAM (TOP)

The Teen Outreach Program is a school-based program that involves teenagers in curriculum guided group discussions linked to volunteer services in their communities. TOP is one of the few youth development initiatives with more than a decade of experience and evidence of significant outcomes that include the promotion of school continuation and pregnancy prevention. The Teen Outreach Program national demonstration effort was led by the Association of Junior Leagues International, Inc (AJLI) until the summer of 1995.

TOP is ideally suited to reach young people in both middle schools and high schools. The program has two components: 1) weekly classroom discussions using the TOP life skills curriculum and 2) weekly participation in community service.

The Teen Outreach Life Skills Curriculum is the centerpiece of the classroom component. In a trusting atmosphere, trained teachers or counselors facilitate experiential exercises focusing on topics relevant for adolescent development. Concurrent with the classroom experiences, youth assess their communities and identify issues they want to address through service projects. TOP effectively links school experiences to community service learning.

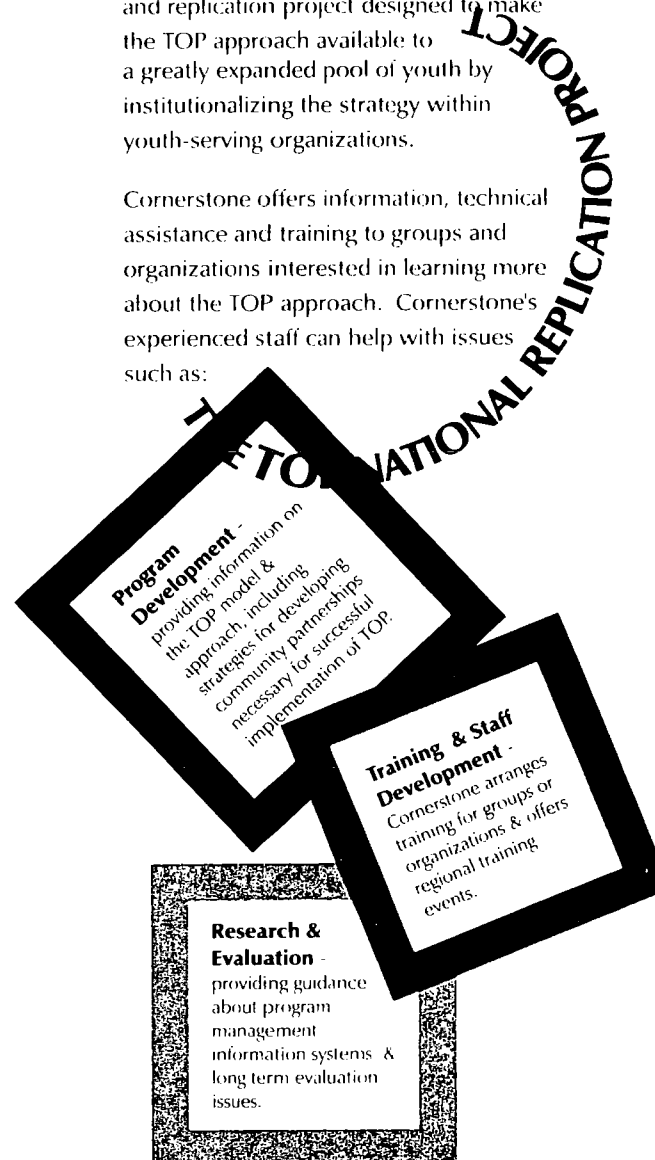
Philliber Research Associates (PRA) has evaluated the TOP national program since 1984. PRA's findings for a ten year sample show the program has produced important impacts:



Research conducted by PRA shows similar findings in many settings and for varying audiences

Cornerstone Consulting Group, Inc, is responsible for a national dissemination and replication project designed to make the TOP approach available to a greatly expanded pool of youth by institutionalizing the strategy within youth-serving organizations.

Cornerstone offers information, technical assistance and training to groups and organizations interested in learning more about the TOP approach. Cornerstone's experienced staff can help with issues such as:

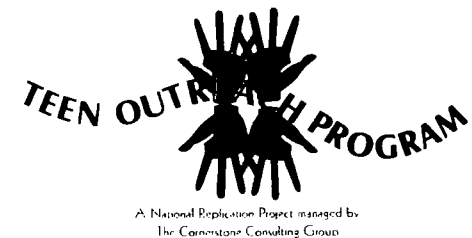


ABOUT CORNERSTONE

Focused on education, health, social services, and community development, the Cornerstone Consulting Group is helping a broad range of public and private organizations to achieve their goals. Cornerstone's staff and associates bring the background and experience necessary to analyze complex and difficult problems, and to fashion practical solutions. Cornerstone is committed to doing quality work that makes a difference.

ABOUT THE TOP CALIFORNIA STATEWIDE NETWORK

The largest statewide concentration of TOP sites is located in California, part of the TOP California Statewide initiative. Begun in 1993, the California Initiative consists of school/community partnerships across the state. Cornerstone provides technical support, training and annual conferences. TOP is being replicated throughout the state by Cornerstone staff working in concert with a variety of partner organizations and school systems.



Teenage Girls Who Work as Volunteers Are Less Likely to Get Pregnant, Study Finds

By Jay Mathews
Washington Post Staff Writer

Teenage girls are less likely to become pregnant if they are involved in community service projects, and the amount of sex education they receive is not as important a factor, according to a new study.

The study, published yesterday in the August issue of the journal *Child Development*, found a pregnancy rate of 4.2 percent among 283 girls who participated in the national Teen Outreach Program throughout high school instead of enrolling in sex education classes. The program consisted mostly of community service and provided little or no information about birth control.

In contrast, a group of 287 girls who took regular health and sex education classes instead of doing the volunteer work had a pregnancy rate of 30.5 percent.

The study by Joseph Allen, an associate professor of psychology at the University of Virginia, and other researchers concluded that teenage girls are less likely to become pregnant when their work on behalf of others helps them realize they are "autonomous, capable individuals."

Specialists who were not involved in the research said the results stand out because the study was one of the most carefully controlled of its kind. Both groups of girls were taken from the same 25 schools in 13 states. About half of the students in the Teen Outreach group volunteered to participate, and the other half were assigned. Similarly, half of the students in the control group had wanted to participate in Teen Outreach but had not been accepted because there was not enough room. Both groups consisted of girls and boys.

"It is the strongest evidence we have that social programs can reduce teen pregnancy,"

said Douglas Kirby, a California sociologist who has spent 20 years studying teenage behavior.

Allen said the study takes neither side in the heated debate over how much and what kind of sex education should be taught in schools. Some groups call for more birth control information, while others prefer lessons on abstinence.

The study results come at a time when an increasing number of schools are requiring their students to perform community service.

Educators and health officials have argued for years that teenagers engaged in community service gain the self-respect that helps them avoid bad choices. The Teen Outreach Program study, funded by grants from the Charles Stewart Mott Foundation and the Lila Wallace Reader's Digest Fund, provides the clearest evidence of that link, several specialists said.

"It gave me a sense of: 'Hey, I'm important. I'm somebody,'" said Noemi Medina, 20, who participated in the program two years ago at a school in

California's San Fernando Valley. She said she worked at shelters for the homeless and in elementary schools during the program.

The program, which enrolls about 6,000 students a year, was started in 1978 by Brenda Hostetter, a St. Louis school administrator, and is now run by the Cornerstone Consulting Group, of Houston. It operates at 120 sites, mostly in schools as part of health education programs.

The ninth- to 12th-grade students are placed in volunteer activities that match their interests and needs. Some work as aides in hospitals and nursing homes, some tutor other students, and others engage in events such as walkathons.

In the study by Allen and co-authors Susan Phillips, Scott Herring and Gabriel P. Kuperminc, the Teen Outreach participants averaged about 45.8 hours of community service a year and also had at least one class a week in coping skills. The amount of sex education they received varied because of differing local guidelines. But

no school spent more than 15 percent of Teen Outreach Program time on sex education, and many participants got no sex education at all.

The study also said that 27 percent of the Teen Outreach group, both girls and boys, failed courses during the five-year study period, pared with 47 percent of the control group.

Activists on both sides of the sex education issue said yesterday that the study of the Teen Outreach Program has not changed their views.

"I think that is a good program, but I think it has a direct link to abstinence-only education," said Robin DeJarnette, government relations director for the Richmond-based I Foundation, which supports abstinence lessons.

Debra W. Haffner, president of the Sexuality Information and Education Council of the United States, said that she was impressed by the results but that she still supports education about contraception. "There is not a single magic bullet in preventing teen pregnancy," she said.

Preventing Teen Pregnancy and Academic Failure: Experimental Evaluation of a Developmentally Based Approach

Joseph P. Allen, Susan Philliber, Scott Herrling, and Gabriel P. Kuperminc

A true experimental evaluation was conducted of a national volunteer service program, Teen Outreach, that was designed to prevent adolescent problem behaviors by enhancing normative processes of social development in high school students. This evaluation addressed 2 problem behaviors in adolescence—teenage pregnancy and school failure—for which experimental evidence about successful preventive programs has been largely lacking. High school students ($N = 695$) in 25 sites nationwide were randomly assigned to either a Teen Outreach or Control group and were assessed at both program entry and at program exit 9 months later. Rates of pregnancy, school failure, and academic suspension at exit were substantially lower in the Teen Outreach group, even after accounting for student sociodemographic characteristics and entry differences between groups. Results are interpreted as suggesting the potential value both of the Teen Outreach Program specifically and also more generally of interventions that seek to prevent problem behaviors by addressing broad developmental tasks of adolescence rather than by focusing upon individual problem behaviors or micro-skills.

INTRODUCTION

Among the long list of social problems that can occur in adolescence, two problems—teen pregnancy and school failure—are of particular concern as a result of their persistent and costly consequences. When teen pregnancy leads to teen childbearing, long-term costs are often severe for the adolescents involved, for their offspring, and for the larger society, with estimates of total societal costs of teen parenthood ranging from \$9 to \$29 billion annually (Center for Population Options, 1992; Furstenberg, 1991; Maynard, 1996). Teen pregnancy also serves as a marker of sexual behavior that brings a substantial risk of contracting AIDS and other sexually transmitted diseases. Similarly, school failure and academic behavior problems are two of the best predictors of school dropout (Engel, 1994; Oakland, 1992; Powell-Cope & Eggert, 1994), which has immense lifetime consequences for both the individual and society (estimated at \$260 billion in lifetime lost income and taxes for each year's class of dropouts; Catterall, 1987). Both school failure and teen pregnancy have been the foci of intensive preventive intervention efforts, although evaluation of such efforts has often been sporadic and uneven in quality.

Several recent reviews of teen pregnancy prevention programs and their evaluations have noted how little positive evidence exists that any program can reduce teen pregnancy rates (Frost & Forrest, 1995; Kirby et al., 1994; Moore et al., 1994; Philliber & Namerow, 1995). Two recent reviews of the most rigorously evaluated programs targeting teen sexual be-

havior (Frost & Forrest, 1995; Philliber & Namerow, 1995) have identified a total of nine programs that targeted teen sexual behavior and that were evaluated with true random assignment designs (Philliber & Namerow, 1995). Among these, one program that provided contraceptive services to teens had a clear effect in reducing pregnancy rates (Winter & Breckenmaker, 1991), consistent with a line of quasi-experimental research suggesting the efficacy of programs that distribute contraceptives (e.g., Zabin, 1992; Zabin, Hirsch, Smith, Streett, & Hardy, 1986; Zabin et al., 1988a, 1988b). Several behavioral skills training programs and educational programs also have produced increased reported contraceptive use among selected groups of adolescents (i.e., those with no prior sexual experience, minority males, and so on; Barth, Leland, Kirby, & Fetro, 1992; Eisen & Zellman, 1992; Eisen, Zellman, & McAlister, 1990, 1992; Jemmott, Jemmott, & Fong, 1992; St. Lawrence, Jefferson, Alleyne, & Brasfield, 1995). And a community service/life options program reported effects in reducing birth rates by the end of the second year of the program, although pregnancy rates were not influenced and birth rates were not affected in the first year of the program (Hahn, 1994). Other than contraceptive distribution programs, the one other true experimental program with evidence of ability to reduce pregnancy rates was the Perry Preschool project, a comprehensive, developmentally focused program that demonstrated a trend toward significant ef-

fects ($.10 > p > .05$) 14 years after program implementation when former participants were age 19 (Schweinhart, Barnes, & Weikart, 1993).

Programs to prevent academic failure and dropout are also widespread, and evidence has been accumulating that several types of programs may have some impact on failure and dropout rates (Felner, Brand, Adan, & Mulhall, 1993; Oakland, 1992). Nevertheless, true experimental evaluations of such programs are also quite rare. Given the difficulty of implementing and evaluating preventive interventions for adolescents, questions are being raised both within the social sciences and in the larger policy arena about whether problems, such as teen pregnancy and academic failure and dropout, can be effectively addressed with psychologically focused interventions or whether harsher economic incentives must be implemented (Males, 1993; Personal Responsibility and Work Opportunity Act, 1995).

Although programs can apparently succeed by targeting highly specific skills and micro behaviors on the part of adolescents (e.g., condom use, homework completion, school attendance) or by targeting broader antecedent developmental factors that have been related to the risk of serious problem behaviors, the latter group of programs have the potential, at least in theory, to reduce the incidence of *multiple* problem behaviors. Numerous writers have acknowledged the common roots or causes of problem behaviors among adolescents and thus pointed to the need for multipronged and developmentally oriented programs dealing more comprehensively with young people (Carrera & Dempsey, 1988; Donovan & Jessor, 1985; Donovan, Jessor, & Costa, 1988; Schorr, 1988). Long-term outcome data from the Perry Preschool project (Schweinhart et al., 1993) suggest the potential advantage of developing programs that apply a broad developmental focus to preventing problems in *adolescence*, although few such programs targeting adolescents have had their effects carefully evaluated.

Such an approach would also be particularly promising in helping to better understand the common elements that may underlie different kinds of problem behaviors in adolescence. Our understanding of common underlying causes for multiple adolescent problem behaviors is based primarily on naturalistic observations and correlational data (Allen, Leadbeater, & Aber, 1994; Donovan & Jessor, 1985; Donovan et al., 1988; Yamaguchi & Kandel, 1987). Identifying an intervention that simultaneously affected multiple problem behaviors could provide *experimental* evidence about common underlying causes of these behaviors and also provide further

insight into the developmental antecedents that may underlie syndromes of problem behaviors.

To the extent that preventive interventions target broader developmental goals, they can also eliminate some of the stigma associated with programs that seek to address specific skill deficits (e.g., condom distribution programs). With particularly controversial adolescent problems (such as teenage pregnancy) for which community pressure may lead adults to select interventions that make them comfortable rather than those that have been shown effective (Philiber & Namerow, 1995), a broad developmental approach might make successful intervention politically and practically feasible where it would not otherwise be.

In summary, evaluation of broad, developmentally focused interventions targeting the prevention of multiple diverse problem behaviors can help (1) expand the variety and flexibility of preventive interventions targeting controversial problems of adolescents, particularly teen pregnancy; (2) inform the policy arena about the potential of psychological/educational interventions to truly alter critical outcomes for at-risk adolescents; and (3) highlight potential causal mechanisms and/or protective factors that are common to multiple problem behaviors and that are susceptible to intervention. Yet the true experimental evaluations of such interventions that would be needed to influence policymakers, practitioners, and researchers have been largely lacking.

This article describes an experimental evaluation of a nationally replicated program—Teen Outreach—directed toward reducing rates of teenage pregnancy, school failure, and school suspension. The primary focus of Teen Outreach is to engage young people in a high level of structured, volunteer community service that is closely linked to classroom-based discussions of future life options, such as those surrounding future career and relationship decisions. Volunteer service is increasingly being linked to positive outcomes for young people and is achieving substantial national attention (Clinton, 1996), although controlled experiments on the impact of volunteer service have thus far been lacking (Moore & Allen, in press). Volunteer service offers students a chance to see schools in a new role, and it allows them to begin to take on adult roles in ways that, unlike some work for pay, do not necessarily undermine parental or school authority structures (Steinberg & Dornbusch, 1991; Steinberg, Fegley, & Dornbusch, 1993). The Teen Outreach Program has an explicit developmental focus, helping teens understand and evaluate their future life options. This focus attempts to further teens' progress in the devel-

opmental task of establishing their competence and autonomy in a context that maintains their sense of relatedness with important adults (Allen, Hauser, Bell, & O'Connor, 1994; Connell & Wellborn, 1993). It provides an opportunity to be viewed in a positive role by program facilitators, adults at volunteer sites, and by other youths, while also reflecting about future roles as a competent, autonomous adult. Although several studies using nonexperimental designs have suggested the value of the program (Allen, Kuperminc, Philliber, & Herre, 1994; Allen, Philliber, & Hoggson, 1990; Philliber & Allen, 1992), these studies remain open to criticism about the influence of possible participant self-selection effects, particularly with a program that emphasizes *volunteer* community service.

Given promising initial evaluation data, the program has grown dramatically over the past decade, and in 1994–1995 was offered in 45 schools in 13 states. The program is now targeted primarily toward high school age students, as a result of preliminary evaluation efforts indicating that it was maximally effective within this age range. The current evaluation utilized a random-assignment design and data collected in the 1991–1995 school years at 25 sites nationwide to provide a true controlled experimental evaluation of the efficacy of this program. Specifically, the evaluation considered whether (1) the program had a demonstrable impact upon teen pregnancy rates of participants; (2) it had an impact upon school failure and suspension rates; and (3) the impact of the program appeared to vary depending upon student gender, parental education level, household composition, or racial/ethnic minority status.

METHOD

Settings

The high school version of the Teen Outreach Program was evaluated at 25 different random assignment sites nationwide from 1991 through 1995. Students were randomly assigned to either Teen Outreach participation or the control condition either at the student level (i.e., sites had more students sign up for Teen Outreach than could be accommodated in the program, and participants and controls were randomly selected by picking names out of a hat or choosing every other name on an alphabetized list) or, less frequently, at the classroom level (i.e., Teen Outreach was offered in lieu of regular curricular offerings in Health or Social Studies, and it was possible to randomly select, via a coin toss, which class

received Teen Outreach and which received the regular curricular offerings).

All sites known to the investigators to be running Teen Outreach were contacted in late spring of each school year and asked if they were interested in participating and potentially able to participate in the random assignment evaluation of Teen Outreach during the following school year. Approximately 10% of extant Teen Outreach sites participated in the random assignment evaluation of the program during the period of this evaluation. Sites that did not participate typically either found random assignment too awkward or unwieldy to implement, did not have enough interested students to fill both a treatment and a control group, or found random assignment objectionable because it would require turning away interested students.

Teen Outreach is a program for high school age students that consists of three interrelated elements: Supervised community volunteer service, classroom-based discussions of service experiences, and classroom-based discussions and activities related to key social-developmental tasks of adolescence.

Teen Outreach participants, who were in grades 9–12, engaged in a range of volunteer activities supervised by trained staff often working in conjunction with staff and volunteers of local community organizations. Volunteer activities were selected by participants under the supervision of trained staff and adult volunteers to be sensitive to the needs and capacities of both participants and of local communities. These experiences varied substantially in their nature and in the amount of commitment they required of participants. Volunteer activities included work as aides in hospitals and nursing homes, participation in walkathons, peer tutoring, and a wide range of other types of work. Teen Outreach sites were required to provide a minimum of 20 hours per year of volunteer experience to participants. Participants in the program actually averaged 45.8 hours of volunteer service over the course of the program ($SD = 44.6$), with the median participant performing 35 hours of service.

In addition to volunteer service, students also participated in ongoing classroom discussions that occurred at least once weekly throughout an academic year. All classroom discussions and activities were based upon the Teen Outreach Curriculum (Edwards, Bell, & Hunter-Geboy, 1996), which is designed to engage students via structured discussions, group exercises, role plays, guest speakers, and informational presentations. Classroom discussions and activities focused either upon maximizing learning from the service experiences or upon helping teens

cope with important developmental tasks they faced. Service-learning discussions focused upon helping students prepare for and make plans about their service experiences (including dealing with a lack of self-confidence, social skills, assertiveness, self-discipline, and so on), think about what they have experienced while volunteering, and hear others do the same. In developmentally oriented classroom discussions and activities, a trained facilitator led small groups of students in activities and topics of particular interest and relevance to young people. Topic areas included understanding yourself and your values, life skills, dealing with family stress, human growth and development, and issues related to the social and emotional transitions from adolescence to adulthood. In covering these topics, facilitators encouraged students to discuss their feelings and attitudes about important developmental issues (e.g., managing family relationships, new academic and employment challenges, handling close friendships and romantic relationships, and so on). Facilitators were given considerable latitude in covering topics in the curriculum, and for each topic, the curriculum contains a wide array of activities and materials for discussion, so that facilitators may draw from the specific activities for a given topic those that appear most useful and relevant for their group. Most strikingly, the program placed very little direct emphasis upon the two target behaviors to be prevented. Specifically, material about sexuality comprises less than 15% of the written curriculum and was often not used (discretion is given to individual sites) when it overlapped with other material being offered in school or conflicted with prevailing community values.

Classroom discussions were led by trained facilitators, who were often school teachers or guidance personnel. Classroom sessions met at least once weekly during a full academic year, beginning in September and running through May or June (depending upon the school schedule of individual sites). Most sites held once-weekly meetings, although a few met two to three times per week. Prior nonexperimental research has found no evidence of differential program impact for sites varying in numbers of class sessions within this range (Allen et al., 1990).

Cost analyses of the program indicate that it can be offered for a full academic year to a class of 18–25 students for approximately \$500–\$700 per student. These figures include costs for facilitator and site-level coordinator time; when this time is provided as an in-kind contribution by schools and community volunteer service organizations, the direct costs of the program drop to under \$100 per student.

Participants

Participants in the experimental evaluation of Teen Outreach included 342 students who participated in the Teen Outreach Program and 353 control students. All students were in the ninth through twelfth grades (mean grade level = 10.1; $SD = 1.0$). Students sought to enter the program (prior to being randomly assigned to the participant or control conditions) as part of their "health" curricula, as an academic elective in response to teacher/guidance counselor suggestion, and as an after-school activity. A small number of participants (3.5%) had been previously involved with the Teen Outreach Program.

Attrition over the course of the study, as a result of student dropout from the program or from school or from failure to fully complete exit questionnaires, was 5.3% among Teen Outreach students and 8.4% among control students. Attrition analyses revealed that students who dropped out of the study did not significantly differ at program entry from those who remained in terms of history of class failure, membership in a racial/ethnic minority group, parents' education levels, or household composition (living with one versus two parents). Students who did not complete the study were more likely to have had or caused a prior pregnancy, been suspended, been younger, and been male. Although dropouts from the study differed from those who completed it, there was no evidence that these differences were in any way linked to treatment versus control group membership (i.e., there was no interaction of attrition with group membership). For example, previously pregnant students were less likely to complete the study, but among those students, previously pregnant Teen Outreach participants were no less likely to complete the study than were previously pregnant control group members.

Information on the demographic characteristics of both Teen Outreach and control students for whom both entry and exit data were available is presented in Table 1. These data indicate that the treatment and control groups were well matched demographically at entry, with no significant differences between groups on any measures. They also indicate that the program sampled an ethnically and socioeconomically diverse group of students. Females were highly overrepresented in the sample, probably as a result of increasing awareness among facilitators and others responsible for recruiting students of the program's potential impact on teen pregnancy.

Measures

Demographic characteristics. Students filled out a brief self-report questionnaire indicating their age,

Table 1 Sociodemographic Characteristics of Teen Outreach and Control Students at Entry

	Teen Outreach (<i>N</i> = 342)	Control (<i>N</i> = 353)
	Mean (<i>SD</i>)	Mean (<i>SD</i>)
Age (years)	15.8 (1.13)	15.9 (1.24)
Grade in school (%):		
Ninth	35.1	36.0
Tenth	33.9	33.1
Eleventh	19.6	19.8
Twelfth	11.4	11.1
Gender (%):		
Females	86.0	83.3
Males	14.0	16.7
Race/ethnicity (%):		
Black	67.7	66.6
White	17.0	20.4
Hispanic	12.9	9.6
Other	2.4	3.4
Parent's education level	2.08 (.77)	2.16 (.79)
Live in two-parent household (%)	45.6	45.6

Note: No group demographics differences were statistically significant.

grade level in school, race, predominant household composition (one- versus two-parent), and parents' education levels (1, not a high school graduate; 2, high school graduate; 3, some college; 4, college graduate).

Problem behaviors. Self-report questionnaires were used to assess students' problem behaviors. When sensitively collected, anonymous self-report instruments have been found to be among the *least* biased means of assessing adolescent problem behaviors such as teenage pregnancy, with substantial evidence available to support their overall reliability and validity (Elliott, Huizinga, & Menard, 1989; Farrington, 1973; Patterson & Stouthamer-Loeber, 1984). At entry, we asked students whether (1) they had ever been pregnant (females) or responsible for a pregnancy (males); (2) they had failed any courses during the prior year at school; and (3) they had been suspended in the prior year at school. At exit, we asked the same questions of students (except that the pregnancy question was modified to refer only to the academic year of the program).

Procedure

Both the Teen Outreach Program and its evaluation typically occurred as part of the regular school curriculum over a single school year, with participa-

tion usually occurring as part of a class (typically health or social studies) taken for credit. Students were assessed during the first several weeks of the school year (which typically began in late August or early September) and then again at program exit at the end of the school year in May or June. Questionnaires were administered by Teen Outreach facilitators during an early Teen Outreach class or in study halls and other school settings for control students. Students were told that the information they provided would be kept without identifying information, and they were specifically reassured that none of their answers would be available to program facilitators or to other school officials.

RESULTS

Preliminary Analyses

Consistent with prior research, student sociodemographic factors displayed numerous links to student problem behaviors at entry and exit. Specifically, relations were found between problem behaviors and students' gender, family composition (living with one versus two parents), racial/ethnic minority status, and grade in school. To minimize the likelihood that these factors could produce spurious results in analyses, each was entered as a covariate into all analyses of program outcomes, and the specific effects of each variable are reported along with those analyses below.

To ascertain whether our estimates of program effects would differ depending upon the sociodemographic characteristics of students, we also examined the statistical interaction of the effects of program participation with all of the entry demographic and problem behavior variables assessed. This interaction assessed whether the program was significantly more or less effective when it served different groups of students (e.g., racial/ethnic minority versus majority, male versus female, and so on) by adding the interaction of each demographic factor $\times$ program participation in predicting outcomes in each of the primary analyses of program effects described below. We found such an interaction in only one case: The effect of program participation on pregnancy rates interacted with student gender. This effect was in the direction of indicating more positive program effects for females than for males, $\chi^2(1, N = 370) = 33.06, p < .001$. We examined student genders separately, but due to the small number of males and male reported responsibility for pregnancies, it was not mathematically possible to compute program effects for males in our logistic regression analyses. Thus, pregnancy data below are presented only for females.

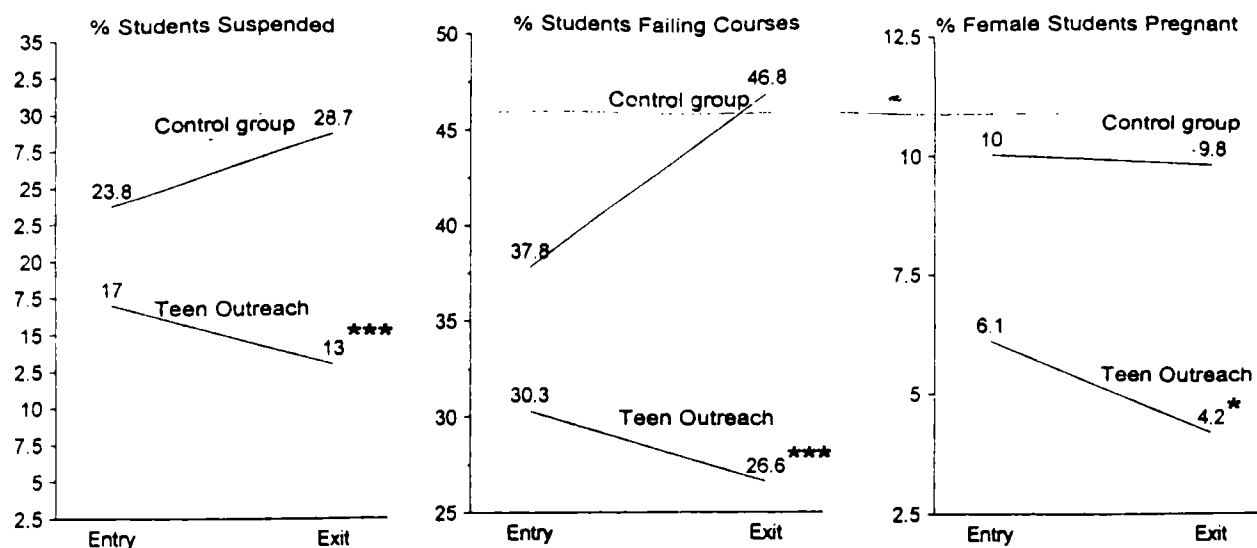


Figure 1 Entry to exit change in problem behaviors. *** $p < .001$; * $p < .05$. Tests are for difference between groups at exit after accounting for differences at entry and effects of sociodemographic characteristics. Pregnancy data at entry reflect percentages ever pregnant; exit data reflect pregnancies since program entry.

We found no interaction effects of program participation with household composition, parental education levels, racial/ethnic minority status, student grade in school or history of prior problem behaviors in predicting program outcomes. This indicates that the Teen Outreach program did not work significantly better or worse when it served students who varied along these dimensions.

Entry Data

Initial analyses revealed that even given random assignment of students to groups and the well-matched nature of the sample in terms of demographic characteristics at program entry, by the time of initial data collection (which typically occurred 1–2 weeks into the program), the control group demonstrated higher levels of prior course failure, $\chi^2(691) = 4.3, p < .04$, school suspension, $\chi^2(693) = 4.9, p < .03$, and teen pregnancy, $\chi^2(690) = 6.6, p < .01$. Given these entry differences between groups, which are presented in Figure 1, we used several different approaches to assure that entry differences would not lead to spurious or artifactual findings.

First, we performed a site-by-site inspection of the entry data to determine if control groups at any site deviated from the Teen Outreach group in terms of entry characteristics or attrition at rates unlikely to be seen by chance after correcting significance tests to account for the large number of sites and behaviors examined (i.e., $p < .05$ after Bonferroni corrections).

One site was identified in which control group students were significantly more problematic than Teen Outreach students under this criteria. Further, two sites were determined to have prematurely given up their efforts to track their control groups by program exit (i.e., attrition rates between 80% and 90%). All three sites were dropped from the data set for further analyses, leaving 22 sites. Analyses of the effects of these decisions are described further below.

Figure 1 depicts raw data for both entry and exit levels of problem behaviors.

Primary Analyses of Program Effects

Our primary analytic strategy for considering the data presented in Figure 1 was to examine effects of program participation upon exit problem behavior levels after covarying prior levels of all problem behaviors and all demographic factors described above. Experimental designs provide one of the few places where such covariance is truly statistically appropriate (Campbell & Stanley, 1969; Cook & Campbell, 1979).

Results from logistic regression analyses conducted for each of the three problem behaviors are presented in Table 2. Examination of the odds ratios from logistic regressions produces an estimate of the relative risk of each problem behavior in the Teen Outreach group as compared to the control group, controlling for all other demographic factors and for any differences between groups at program entry.

Table 2 Logistic Regressions Predicting Exit Problem Behaviors from Demographic Factors and Program Participation

	Problem Behaviors Reported at Exit					
	Course Failure		Suspension		Pregnancy	
	Standardized Estimate (N = 665)	Odds Ratio	Standardized Estimate (N = 664)	Odds Ratio	Standardized Estimate (N = 560)	Odds Ratio
Demographics:						
Gender (1 = male, 2 = female)	-.08	.66	-.12*	.56	...	...
Grade in school	-.18***	.73	-.11	.82	.06	1.12
Racial/ethnic minority status (0 = no, 1 = yes)	.02	1.01	.13	1.82	.25	3.14
Live in single parent family	-.03	.90	.03	1.13	.03	1.12
Parents' education level	-.08	.83	-.04	.91	-.07	.84
Prior problem behaviors:						
Course failure	.37***	4.01	.12*	1.58	.04	1.18
School suspension	.11	1.66	.34***	4.70	.23*	3.06
Pregnancy (ever)	.18***	3.44	.14**	2.47	.52***	33.65
Program participation	-.24***	.42	-.26***	.39	-.24*	.41
Chi-square for model	143.2***		122.2***		102.0***	

Note: Odds ratios reflect relative odds of behavior for high versus low members (as dummy coded) of group (i.e., ratio of risk of course failure in Teen Outreach versus control group is .42 to 1). Pregnancy data are for females only.

Thus, an odds ratio approaching 1.0 reflects no difference in levels of risk across the levels of the variable being examined, whereas a ratio that is substantially above or below 1.0 indicates that the relative risks of the problem behavior differ across different levels of the independent variable.

The ratios presented in Table 2 indicate that, after accounting for demographic variables and prior problem behaviors, risk of school suspension in the Teen Outreach group was less than half the size (i.e., 42%) of the risk of school suspension for members of the control group (a null effect would be for the risk to be as large—i.e., 100%—as in the control group). Risk for course failure was 39% as large in Teen Outreach relative to the control group. Risk of teen pregnancy was only 41% as large as in the control group. Each of these program effects was statistically significant, even after removing effects of entry demographic and problem behavior variables. These effects indicate that Teen Outreach participants experienced significantly lower levels of course failure, school suspension and teenage pregnancy than students in the control group, even after accounting for baseline levels of these behaviors and for sociodemographic characteristics of students.

Effects of Group Differences at Entry

Although group differences at entry were controlled in the analyses above, one concern was that

these differences might have influenced results in a way that inflated the apparent effects of program participation. For example, it may have been easier to work with and achieve positive change in the less troubled Teen Outreach group than in the more problematic control group. Although such an effect in favor of the Teen Outreach Program would run counter to "regression to the mean" effects that are more typically a concern when groups differ at entry, we nevertheless wanted to examine this possibility.

We thus classified the final 22 program sites into those in which the control group was *more* problematic than the Teen Outreach group at entry versus sites where the control group was *less* problematic than the Teen Outreach group at entry. We made these classifications based upon the average number of the three possible problem behaviors that were exhibited by youths in Teen Outreach or control groups at a site. If observed program effects were merely an artifact of the control group participants being relatively more problematic at program entry than the Teen Outreach participants (and then deteriorating even more than would be expected thereafter), then we would expect that the sites that had the greatest level of problems in the control group relative to the Teen Outreach group would demonstrate this effect the most. That is, the sites that most reflected the overall pattern in the sample for the control group to be more problematic at entry should show the best outcomes for Teen Outreach relative to the control

group students, if these entry differences were in fact artifactually driving the results of analyses by capitalizing on an unusual degree of deterioration in functioning in the control group.

We examined this possibility statistically by creating a dichotomous variable for whether each student's site contained more problematic Teen Outreach versus control students at entry. We then tested the interaction of this variable with program participation (i.e., do program participation effects change depending upon differences between groups at entry?) in predicting outcomes for each of the analyses described above. Essentially, this approach asks whether differences between groups at entry were statistically related to the program effects observed at a given site. This interaction effect did not approach significance ($p > .20$) for any of the three analyses above. This indicates that lack of equivalence between Teen Outreach and control groups at sites was not significantly linked to any observed program effects by program exit.

We then further inspected data along the same lines to consider whether an effect such as that described above may have been enhancing the apparent effects of participation, even though it was not large enough to reach statistical significance. We examined the percentage change in incidence of each problem behavior from entry to exit for the Teen Outreach group relative to the control group. Although not statistically significant, we found that for those sites where Teen Outreach students were *more* problematic at entry, they appeared to make relatively greater changes from program entry to exit than did control students. Thus, because most sites had Teen Outreach students who were *less* problematic at entry, the overall differences between the Teen Outreach and control groups would have tended to have a small effect of reducing our estimates of program effectiveness, if they had any effect at all.

In addition, we also examined the effect of our a priori decision to drop three sites from analyses, due to either significantly nonrandom entry data or to overwhelming difficulties in recontacting control group students at exit. All primary analyses described above were rerun with these sites included. In these alternative analyses, all effects of program participation remained at the same significance levels as reported above. This indicates that the decision to drop three sites did not significantly alter the findings reported.

We also reexamined the data by dropping additional sites in which the control group was most different from the Teen Outreach group until the entry differences in problem behaviors between treatment

and control groups were no longer significant (i.e., all ps for entry-level differences $> .10$). In effect, this approach forces the groups to be statistically indistinguishable by deleting from analyses those sites that were creating differences between groups. Four additional sites, containing a total of 103 students, were deleted using this procedure. Even with the reduction in sample size from this approach, all of the findings regarding effects of program participation remained at the same level of significance as reported above. In other words, had the sites that contributed to the entry differences between our treatment and control groups not been included in the study, our results would have been unchanged.

Reconsideration of Self-Report Data

Finally, we also wanted to consider whether there might be a tendency of Teen Outreach students to bias their reports of problem behaviors in a way that could inflate estimates of program effects. We sought to examine this possibility even though self-reports are widely used and accepted as valid means of assessing problem behaviors in adolescence (Elliott et al., 1989; Farrington, 1973). We assessed a sample of all students from one of our nonrandom sites which made archival data available regarding history of course failure and school suspension. Results are presented in Table 3. These results indicate that most students were accurate in reporting both suspensions and course failures. Further, there were no significant differences between groups in accuracy of reporting at either program entry or exit. Finally, as Table 3 indicates, even the slight differences that did exist between groups in accuracy of reporting would not have resulted in a bias in favor of the Teen Outreach program.

Dosage Effects

Two indices of program intensity, the number of classroom sessions attended and the number of hours of volunteer service, were examined in logistic regression analyses predicting outcomes within the Teen Outreach group. These analyses assess whether variations in program intensity (within the range of variation that actually occurred among evaluated sites) were related to program outcomes. The same logistic regression strategy outlined above for primary analyses was used, except that the number of sessions attended and the number of hours of volunteer service were entered as predictors (along with demographic factors and levels of problem behavior at program entry) in lieu of a dummy variable for

Table 3 Comparison of Percentages of Students with Accurate versus Inaccurate Reports of Failure and Suspension (%)

	School Failure		School Suspensions	
	Teen Outreach (N = 58)	Control (N = 35)	Teen Outreach (N = 58)	Control (N = 35)
Entry data:				
Fully accurate	76	74	72	71
Overreports	19	23	7	9
Underreports	5	3	21	20
Net overreporting	+14	+20	-14	-11
Exit data:				
Fully accurate	64	71	85	82
Overreports	26	24	7	12
Underreports	9	6	7	6
Net overreporting	+17	+18	+0	+6
Entry overreporting minus exit overreporting	-3	+2	-14	-17
Net "advantage" to Teen Outreach program due to inaccurate reporting		-5		+3

Note: No differences between groups approached statistical significance (all $ps > .50$). Net advantage of Teen Outreach group was calculated as: (Teen Outreach entry - exit overreporting) - (Control entry - exit overreporting).

program participation, and all analyses were performed within the Teen Outreach sample. No significant effects were found from either measure of program intensity to predictions of either pregnancy or academic suspension. A significant effect was found for prediction of course failure by the number of volunteer hours worked (standardized estimate = $-.216$, $p < .04$), indicating that Teen Outreach students who performed more volunteer service were at lower risk for course failure during the program.

DISCUSSION

Teen Outreach, a program combining volunteer community service opportunities with classroom discussions about life options, was found to substantially reduce rates of teen pregnancy, course failure, and school suspension during the year of the program. Even after accounting for the effects of differences among students at entry to the program, the risk of all three problem behaviors among students assigned to participate in Teen Outreach was less than half the risk in a control group of students. These findings appeared in random assignment data obtained from 25 sites nationally over a 5 year period, and thus they appear to represent a broad sampling of the program's impact that is not limited to the skill of any single program facilitator nor to artifacts of events at any single site.

These data are quite consistent with analyses of

nonrandom assignment data obtained on this program over the past 10 years that have yielded similar findings and effect sizes (Allen et al., 1990; Allen, Juperminc, Philliber, & Herre, 1994; Philliber & Allen, 1992), further suggesting the efficacy of the program. These prior nonexperimental studies actually had somewhat closer matches between treatment and comparison groups, possibly because the samples were far larger, allowing random variations in the data to average out. The treatment and control groups in the current study were well matched demographically at entry, but the treatment group displayed lower initial levels of problem behavior. One possible explanation of this effect was that it reflected an early spurt upward, toward better adaptation in the Teen Outreach group, an interpretation consistent with findings from psychotherapy outcome research that substantial benefits from therapy often are seen in the first weeks after it begins (Howard, Kopta, Krause, & Orlinsky, 1986). Given that entry data were typically collected in the first few weeks of the program and that, in some cases, students had learned at the end of the prior school year that they had been selected to be in the program, it may be that an early response to the program, or possibly an effect of knowing one was accepted into a selective program (albeit randomly; Shapiro & Morris, 1978), was being manifest in the entry data. It is important to note that any such effect would actually tend to reduce the apparent effect of the program in produc-

ing change in levels of problem behavior from entry to exit by reducing apparent levels of entry problem behavior in the Teen Outreach group.

The observed program effects were quite robust with respect to initial differences between treatment and control groups, although no analytic strategy can fully ensure that such differences did not in some way create artifactual programmatic effects. Nevertheless, the effects remained consistent when data were subjected to multiple analytic strategies, including analyses that (1) covaried out initial group differences, (2) examined whether initial differences could account for program effects at the site level, and (3) excluded sites contributing to treatment versus control group differences at entry. In addition, analyses that considered whether biases in students' self-reports of problem behaviors could have artifactually created apparent program effects found no evidence supporting this possibility, although this possibility can only be conclusively ruled out with studies that rely primarily upon data from other sources. No interactions of student demographic characteristics with program effects were found with the exception of student gender: the program had a greater effect in reducing reported pregnancies or responsibility for pregnancies in female than in male students. The lack of interactions with student race/ethnicity, socioeconomic status, household composition, or grade level indicates that the program was not significantly more or less effective across these demographic groups. In sum, these findings provide a degree of evidence of the effectiveness of the Teen Outreach program that is infrequently found among widely disseminated, national prevention programs and that is virtually without parallel among teen pregnancy prevention programs not explicitly focused upon distributing contraceptives.

One of the more striking features of the Teen Outreach program is that it does *not* explicitly focus upon the problem behaviors it seeks to prevent but rather seeks to enhance participants' competence in decision making, in interacting with peers and adults, and in recognizing and handling their own emotions. Particularly in the field of teen pregnancy prevention, this focus has important practical implications, because it means the program may be politically acceptable in communities where programs that explicitly focus upon sexual behavior may not be feasible to implement. Given that most pregnancy prevention programs with at least quasi-experimental evidence of success focus explicitly upon sexual behavior (Kirby et al., 1994), these results suggest the presence of an alternative avenue for intervening to prevent teenage pregnancies.

The effectiveness of the program in preventing two very different types of problem behaviors with an approach that does not explicitly target either behavior also is informative about the nature of these behaviors. Several lines of prior research based upon correlational data have suggested that adolescent problem behaviors often co-occur as part of a syndrome, raising the possibility that they share common underlying causal agents (Allen, Leadbeater, & Aber, 1994; Donovan & Jessor, 1985; Donovan et al., 1988). These studies have sometimes diverged, however, as to whether sexual behavior was part of this syndrome (Gillmore et al., 1991). The present study advances this line of research by indicating that behaviors leading to academic and sexual difficulties do not just co-occur but also *all change* in response to the same intervention. This provides further evidence that these behaviors share a common underlying causal agent or, alternatively, that they share a common protective factor that is enhanced by program participation.

Knowing that the Teen Outreach program is effective in reducing problem behaviors naturally leads to the question of *why* it has this effect. Analyses of dosage effects provided some evidence that higher levels of volunteer service (within the Teen Outreach group) were associated with reduced risk of course failure. Although the causal direction of this association cannot be determined, it is consistent with previously published data at both the individual and site level indicating that volunteer service is associated with program efficacy (Allen et al., 1990; Allen, Kuperminc, Philliber, & Herre, 1994). Notably, the program has increasingly emphasized volunteer service as a core component of the program, which makes it increasingly difficult to ascertain the impact of high versus low levels of such service because very few sites offer low levels of service to students. Thus, the lack of observed relation between volunteer service and pregnancy and suspension rates may well be attributable to the restricted range in levels of volunteer service in the sample.

Given that collection of comprehensive process data was not feasible in the current round of evaluation, results from extensive process studies conducted in prior nonexperimental evaluations of Teen Outreach may be of use in suggesting interpretations of the present data (Allen et al., 1990; Allen, Kuperminc, Philliber, & Herre, 1994). These prior studies assessed naturally occurring variations in the implementation of Teen Outreach across different sites as potential predictors of student outcomes (after covarying student characteristics at program entry). Although this prior research does not directly account

for the present findings (because it was based on a different sample and a nonexperimental design), it can complement the present study by providing a rich source of empirically grounded hypotheses about the mechanisms by which the Teen Outreach program works.

Prior studies of Teen Outreach have indicated that presence of volunteer community service is closely linked to the programs' success (Allen et al., 1990; Allen, Kuperminc, Philliber, & Herre, 1994). This finding is consistent with nonexperimental data from evaluations of other programs that suggest the potential value of volunteer service and with helper-therapy theory, which suggests that serving in a helping role will often be therapeutic for the helper (Riesmann, 1965). In contrast, variations in amount of classroom time and exact fidelity to the Teen Outreach curriculum have not been found to be related to program outcomes (Allen et al., 1990).

Prior studies of Teen Outreach have also found that the most successful program sites were those that aided students in the task of establishing autonomy in the context of positive relationships with peers, with program facilitators, and with persons at volunteer sites (Allen, Kuperminc, Philliber, & Herre, 1994), a task that has frequently been identified as critical to adolescent social development (Allen, Hauser, Bell, & O'Connor, 1994). For example, although many characteristics of volunteer work have been previously assessed, the one characteristic that has been most linked to positive program outcomes is students' perception that they had a great deal of input in selecting the work they would do (Allen, Kuperminc, Philliber, & Herre, 1994). Although students engaged in a huge range of volunteer activities in the program, this does not mean that "anything goes" with respect to volunteer work. Quite the opposite. Volunteer service that is effectively tailored to the needs and interests of young people as determined by those young people has previously been found to be most closely linked to program success (Allen, Kuperminc, Philliber, & Herre, 1994).

Effective sites not only provide for student autonomy, they also do so in a manner that allows students to become increasingly connected to others. For example, within both the classroom and volunteer components of the program, feeling safe, listened to, and respected were linked to positive student outcomes (Allen, Kuperminc, Philliber, & Herre, 1994). Volunteer service and linked classroom activities may thus offer young people (particularly those who are struggling in their social development) a relatively non-threatening opportunity to see themselves as competent individuals who can be both autonomous and

successful in relating to adults in their lives. Rather than leaving students to question whether their strivings for autonomy will undermine relationships with adults, volunteer service and classroom discussions led by sensitive facilitators may help students establish themselves as autonomous, capable individuals *while* interacting closely with other adults and young people. Such findings raise the question of whether other programs or modifications of current educational practices that seek to reduce pregnancy and failure rates might benefit by incorporating these principles into their approaches.

One potential additional explanation for the program's impact is that of a "Hawthorne effect" in which the attention given students as a result of their participation in the program produced changes having little to do with the content of the program. Although such an effect cannot be definitively ruled out without an attention-placebo control condition (and may help account for group differences that emerged prior to the initial assessment of students but after they were selected into the program), the existence of such an effect appears unlikely as a primary explanation for the programs' efficacy in these analyses. Numerous intervention programs with goals similar to Teen Outreach that provide a great deal of attention to young people have been found to be unsuccessful, particularly with respect to preventing teen pregnancies (Frost & Forrest, 1995). Also, in this study, control group students *were* receiving substantial attention from trained educators in their regular classrooms—Teen Outreach was simply an alternative class for most participants.

There are some significant limitations in this study. The entry differences between treatment and control groups are the clearest example of the complexity inherent in large-scale program evaluation. Future studies would do well to strive to collect entry data before students knew of their assignment to Teen Outreach or control groups, even if this involved collecting data at the end of the prior school year. It should be reiterated, however, that when examined from multiple possible analytic perspectives, no evidence could be found that entry differences either produced or inflated the observed effects of program participation. The slightly (although not significantly) higher rates of attrition in the control group could also have produced spurious effects in the data, although only if students lost from the control group experienced *lower* rates of problem behavior than those who remained would this attrition lead to overestimating the efficacy of Teen Outreach. An additional caution in interpreting these data is that the sites participating in this experimental evaluation

of Teen Outreach were not a random sample of all sites implementing the program and may very well represent the better established sites. Thus, these data support the efficacy of the program for students in the specific sites examined, but whether and how these findings would generalize to other unexamined Teen Outreach sites cannot be assessed from these data. The reliance of the study primarily upon self-report data was necessitated by the logistical difficulty of obtaining data from student records from diverse schools and school districts. Although data from other reporters would be optimal, a great deal of evidence suggests the validity of self-report data regarding problem behaviors (Elliott et al., 1989), and in any case, a small empirical examination of this issue within this study turned up no evidence that use of self-report data artifactually enhanced the apparent effects of the Teen Outreach program.

Finally, long-term follow-up data would be highly desirable to determine whether the program's effects persist after it ends. It should be noted, however, that truly long-term effects in preventing pregnancy and academic difficulties are somewhat less relevant for high school students for whom the critical risk period for these problems is time-limited. Academic difficulties need only be surmounted through twelfth grade to minimize dropout risk, and pregnancies need not be delayed indefinitely. Thus, delay of these problems for a year with a program requiring a relatively modest investment of time and resources in itself represents a significant accomplishment with enduring positive effects for young people. The lifetime cost of teen parenthood *just to the teen* has been estimated at \$109,000, even after accounting for the effects of observable preexisting risk factors affecting teen parents (Maynard, 1996), with similar, if not larger, costs to school dropouts (Catterall, 1987). Although not all pregnancies or course failures lead to parenthood or to dropping out of school, the costs of even single instances of these problems are clearly of such a magnitude as to warrant attention to programs such as Teen Outreach that offer a realistic hope of preventing them at a very modest cost.

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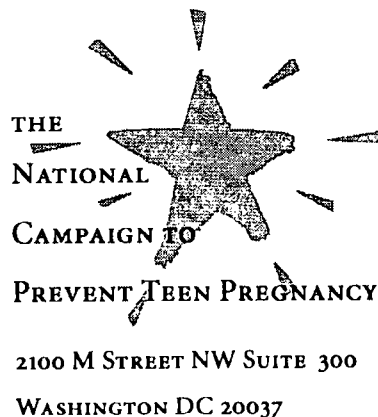
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January 7, 1998

Memorandum:

To: Cynthia Rice
Andrea Kane

From: Sarah Brown

Re: State of the Union Address

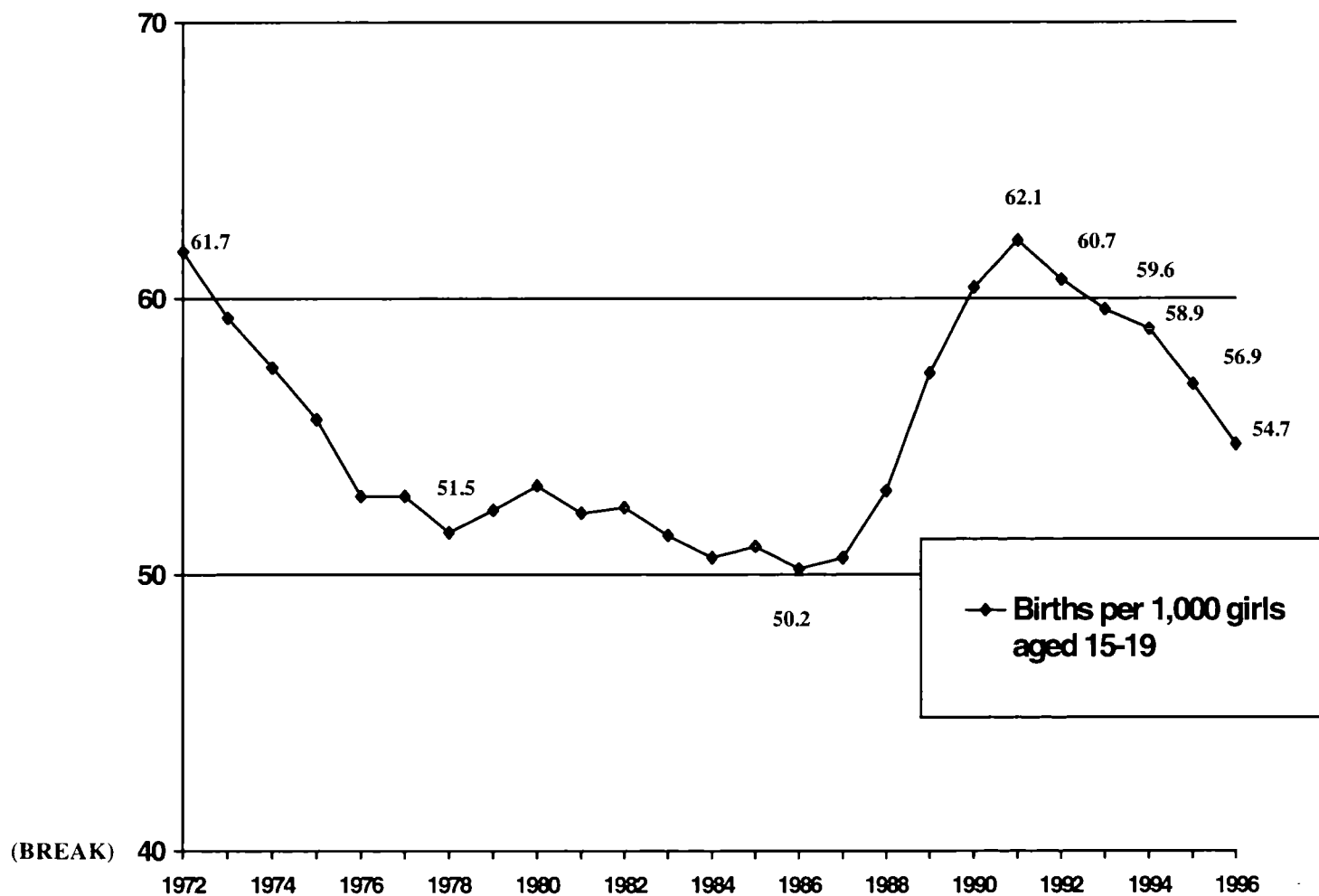
Here are the ideas we discussed for possible inclusion in the State of the Union address:

1. The teen birth rate continues to decline (see attached graph)
2. The private sector has mobilized intensely (Campaign), as the President urged in 1995.
3. We are gradually learning how to work on this problem with **measurable success** at the community level (focus on the Teen Outreach Program -- see attached materials)
4. We are even beginning to include men and boys in the solutions (relevant Campaign and Urban Institute reports attached)
5. More still needs to be done: in collaboration with the National Campaign to Prevent Teen Pregnancy, the White House will hold a meeting (this summer?) to encourage the media to become part of the solution to teen pregnancy, to highlight constructive media contributions already underway, and to underscore what more needs to be done.

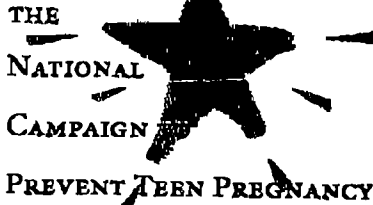
If you'd like us to flesh out any of these ideas a bit, please let us know.

cc: Isabel Sawhill, Campaign President

Teen Birth Rate 1972-1996



Sources: Ventura, S.J., Clarke, S.C., & Mathews, T.J., "Recent Declines in Teenage Birth Rates in the United States: Variations by State, 1990-1994," *Monthly Vital Statistics Report*, 45(5), Suppl., 1-13, December 19, 1996; Rosenberg, H.M., et al., "Births and Deaths: United States, 1995," *Monthly Vital Statistics Report*, 45(3), Suppl. 2, 1-40, October 4, 1996; "Births and Deaths: United States, 1996," *Monthly Vital Statistics Report*, 46(1), Suppl. 2, September 11, 1997.



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1/8/98

Memorandum

To: Cynthia Rice
Andrea Kane

From: Sarah Brown 

Re: And another thing...

Last night I was able to talk a bit with other Campaign leaders about our conversation yesterday afternoon and to reflect on the options we've discussed.

I am writing today simply to say perhaps even more clearly than I did on the phone (or the memo) that a meeting at the White House of entertainment industry leaders with the President is a spectacular idea and one that we know would be substantive, press worthy and critical to all of our collective efforts to reduce teen pregnancy. We will work closely with you all to plan such an event at any time that is convenient for you.

We have suggested that this media leaders meeting and the Campaign anniversary events the last 2 days of April be planned separately. For example, the media meeting with the President could be any time in the spring or summer (with a *slight* preference for May, inasmuch as May is "teen pregnancy prevention month"), and the anniversary event on April 30 could be hosted by the First Lady, as was the case last year. I will be discussing this possibility with Melanne Verveer this Friday. But I want to emphasize again that if your strong preference is to combine the two, we are most willing to do so.

Whatever the precise scheduling, I encourage you again to consider having the President announce in the State of the Union address that he will meet with entertainment industry leaders "within the next several months." The pitch would be: rates of teen pregnancy are going down, which shows we can solve this problem, but we still have the highest rates among the western democracies. Media must be part of the solution -- and to help move in that direction, a meeting will occur within the next several months to talk with media leaders about how they can become part of the solution.

A final small point. Yesterday we discussed important administration initiatives in the area of teen pregnancy prevention. I neglected to mention the wonderful CDC grant program in 13 communities around the country. This program is now into its third year, but it is "new" in that this year (this past summer, in fact) marks the beginning of the first real year of activity in these 13 areas -- the first two years were planning only. If you need any material on this program, let me know. The key CDC official is Dr. Michael Dalmat (770-488-5136).

I hope we'll talk soon. Thanks so much.

Sarah Brown

1/7

- Continuing decline in teen births
- Private sector stepped up to the plate
- Growing evidence in ~~know what works~~

Teen outreach program

~~Hotel program~~

good
regard

still

in gallery

Doesn't think about Grl Power!
is deep enough to highlight

1995 challenge from POTUS

96 said had reported

97 nothing

Urge us not to get,

Laura Lindbergh UrbanTns

Catalogues
27 programs

descrip

15-16-17 having babies
w/ fathers 5 yrs older or more
about 8% of teen births

American Bar Assoc report 2 days ago

New national attention takes two to tango

→ very popular message

→ particularly from women

Chips

No male programs for which we had good evaluation

Dollar a Day program
in Denver

Evaluation suggested it doesn't work

Wall Street Journal 11/24/97 Dann Millbank

→ Remarkable decline in teen
pay in Vermont

"tougher well rules + creating
jobs on jobs"

Recognize states

Vermont
Kentucky
California

1998 honorees

1) Trying to i.d. company
→ employees time w/ teenage daughter

2) Melia

→ NBC for "The More You Know"

→ Danza

→ ER Boss nurse

3) Researcher

4) Best programs

TOP - teen outreach program

Parents-type prog

Hours bet. 3-6

- Factoid from juvenile justice data
- No pregnancy-specific data

In July 1st # on on Adolescent survey

→ parents matter (Post article)

→ parent-child communication

→ Not which favor home

→ Deeply satisfying rel
w/children is what matters

Teen Outreach involves caring community
adults

Now strong data

→ condoms + info do not
lead to more sex

TOP - was developed by Junior League
- Cornerstone Consulting
now do t-a. for people
who want to start new

- more many sites

- evaluated

12/15
Sarah Brown

Roundtable Series

- (1) Role of men + boys → new publication
- (2) Culture of Girlhood (last week)
- (3) Contraceptive use by Sexually Active Teens
(w/ Advocates for Youth) (≥ June)

Five areas

(1) Bring new leadership to the table

① Religious leaders → major meeting in '98
(funded by f.d.s.)
(now talking)

→ strengthen families

→ attention from adults

② → all improve lives of Y.P.
+ reduce teen preg

③ youth development groups

→ get the biggest reduction in teen preg

→ after school programs

④ Bipartisan House + Senate → Bill DeYoung through prob

(24)

(2)

② Refan

→ Commissioned paper from Harvard Prof
→ what for Bill DeYoung

→ will release paper showing media ^{writes}

→ ① Nat'l Press Club
w/ Hausert Senate group

→ if part of larger strategy and
→ if sustained over time

② State + Local Trade Force

→ Directory of 59 orgs that help state + local groups

→ 500 state + local

→ Toolkit → Sarah will review draft
→ send her no copy

(3)

3

③ Media

→ mtg of people from 41 States → reports

~~③~~

~~ABC~~ → ABC mtg in Spring
daytime

→ Ann Moore

→ Asked Mrs. Clinton

① girls may ~~also~~ mtg

→ Briefing Warners Bros.

ER + Friends

June / July

often begin new scripts

- BET 4 town summits (2 done; 2 to come)

→ Whoopi Goldberg

→ event w/ Teens

→ on t.v.

④ ^{delugant} Task Force on Public Values / Galston

→ paper - wh

→ sense of community develops

San Bernardino mid-March
one of BCDC communities

⑤ Research Task Force

→ what we know from science about
how adults + parents matter

Theme in Spring

→ Adults + Parent matter

→ Resume Guide for Parents

5

Friday May 1st

- press coverage
stories in paper

Wed April 29th

- Board mts
- Evening dinner for honorees
(will be landed in Feb)

Thursday, April 30th

Parents + Adults
Matter in the
Lives of Children

Event @ White House

2 Reception w/ honorees
w/ many people

→ O'Leary
+ Mayor

posters
about parents matter

→ Report on role of adults +
parents in children's lives

→ Review
of research

→ parents
+ adults
matter

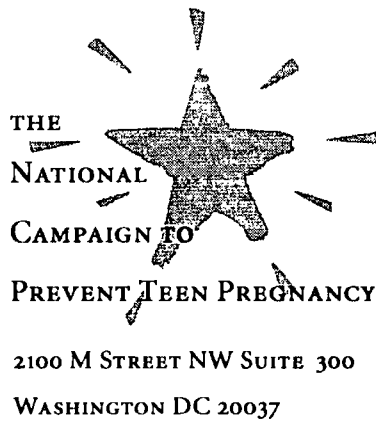
→ Putting
opinion
polling

Princeton

→ Resource guide for parents

→ At White House or
@ school

→ Toolkit for state + local practitioners



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January 7, 1998

Memorandum:

To: Cynthia Rice
Andrea Kane

From: Sarah Brown 

Re: White House/Campaign Events

As promised, this memo summarizes three different ideas that we have discussed recently about possible events that would involve the White House and the President in particular. The first, targeted for April 30, is the most immediate, but the other two are also very important to us and of a very high priority. We have discussed some of these ideas with the Office of the First Lady, as you know.

I. One year anniversary celebration of the National Campaign to Prevent Teen Pregnancy

The National Campaign to Prevent Teen Pregnancy is planning a series of events in the spring to highlight progress made in our first year, to release some new data that offer important ideas about how to make a difference in teen pregnancy, to honor community groups and various leaders hard at work on this topic, to kick off May as Teen Pregnancy Prevention Month, and to thank and motivate those who are helping the Campaign pursue its ambitious agenda.

The reception that the First Lady hosted for the Campaign last May was deeply meaningful to all it touched; our chairman, Gov. Tom Kean, for example, has spoken often of how motivating the recognition was for the program honored from his home state of New Jersey. Our fondest hope is that we may again bring our "family" to the White House this spring. This memo outlines very briefly our dream scenario, but we all understand well that it is at best only a starting point for discussion.

All of our spring events are centered on the last couple of days in April, as shown on the attached draft agenda. Our specific proposal is that we be able to schedule an event (open to the

press) at the White House on the **morning of Thursday, April 30**, led by the President.

The event would center on the Campaign's anniversary theme of the potent role that adults, families and parents especially play in preventing teen pregnancy (we plan to release a report and related materials on April 30, described in more detail below).

Two other themes that the President is already very vocal about can be sounded as well:

(1) parenting is the hardest and most important job anyone undertakes, and teens aren't ready for it. Adults generally, and parents in particular, need to help the young people in their lives to postpone parenthood.

(2) volunteerism (by parents, teens and adults) is part of the solution to teen pregnancy, echoing the messages of the volunteer summit convened a year ago. See the attached article on the "Teen Outreach Program" from *U.S. News and World Report* which notes that volunteer service by *teens themselves* is a proven way to reduce teen pregnancy.

In addition, we would hope that the President would thank the Campaign members for all their hard work. As he said in the 1995 State of the Union address, government alone can't solve teen pregnancy and the private sector must help. The National Campaign exemplifies the called-for private sector leadership (said she modestly). Many people became involved in the Campaign in response to the President's call to action; they would be highly motivated by his encouragement and appreciation, as would many new players we're trying to draw into our work.

We would also ask him to recognize briefly this year's honorees (about 6, not yet formally selected):

We propose that this event be **open to the press**, and that those invited from the Campaign include the honorees, Campaign Board, staff, our Campaign teen group, task force members, major funders, and members of the Campaign's House/Senate Advisory Panels. We understand that we are responsible for covering expenses, as we did last year.

The publications that will be made available that day will include the following:

1. A report (embargoes until that day) which presents and discusses new numbers (from the federally-financed Adolescent Health Survey) on the effect of parent/adult action in reducing teen pregnancy.
2. The tool kit being developed by the Campaign for DHHS, which contains a wide variety of very practical; "how to" ideas for states and communities, and will include a section on parent/adult involvement.
3. A summary of 9 focus groups that the Campaign held with adults and parents about teen pregnancy and their role in reducing it.

4. A brief listing of resources for parents and adults to help them talk to kids about sex, love and what the difference is.
5. A brief document that we call "snap shots" of significant parent and adult involvement programs around the country.
6. (Tentative) some polling data on some aspect of parent/adult involvement
7. Several posters on the theme of adult/parent involvement

II. White House meeting on teen pregnancy prevention and how the media can help

We are all very excited about doing a meeting that brings together, in the presence of the President, some media leaders who are trying to help in this area (by including, for example, some story lines in their entertainment shows that are consistent with pregnancy prevention) along with some who we would all like to see do more.

The Campaign has already developed constructive relationships with leaders in the following media organizations: *People* Magazine, YM, *Teen People*, ABC Daytime, MTV, Warner Bros. Television Productions, BET, NBC's *The More You Know* Campaign," and others as well, as we have discussed. We hope to expand this circle over the next several months and will have some very concrete products to point to in the months ahead which demonstrate the creative ways in which media can be part of the solution.

We are very eager to plan a meeting to motivate this sector to do more. Our sense is that July or September are the best windows of opportunity. **But the event itself could be announced on April 30 -- or even in the State of the Union address in order to get the ball rolling.** We now have some staff in LA who, with our DC office, can do all the substantive planning on this.

3. A White House meeting encouraging religious leaders and faith communities to do more

Similar to the media meeting, we are already planning in 1998 (funding permitting) to bring together a wide range of faith leaders to discuss what this sector can do to help decrease teen pregnancy. Data and community experience both show that this angle on the problem holds great promise, as yet largely untapped. We would be very eager to plan such a meeting in concert with the DPC.

* * * * *

We look forward to discussing these options further. All are very important and can show that the President has maintained his focus on this problem. I'll call in a few days to get your reactions!

cc: Isabel Sawhill, Campaign President

Attachments:

Full DRAFT agenda of anniversary events, April 28 through April 30

Rosters of the Campaign's Board, House and Senate Advisory Panels, funders and four task forces

Article from *U.S. News and World Report*

A brief list of recent Campaign accomplishments and our last two *Updates*

National Campaign to Prevent Teen Pregnancy

DRAFT Agenda for Tuesday, April 28 through Thursday, April 30, 1998

All events in Washington, DC

Discussion Draft

Tuesday, April 28

12:00 **Press lunch** at National Press Club for key journalists to: (1) report on the Campaign's progress since its official launch a year ago; and (2) to discuss an embargoed report (and related materials) with new data being released two days later on the critical role that adults and parents play in reducing teen pregnancy.

Wednesday, April 29

10:00 to 2:30 **Board meeting**

3:00 to 6:00 **All Campaign "Family Meeting."** Invitees include Board members, White House representatives (if available), members of all four task forces, our teen group (about 15 teens from the Washington area), funders and members of the Campaign's House/Senate Advisory Panels.

6:00 to 7:00 Reception

7:00 to 9:00 **Honors dinner** celebrating the work of 6 groups and individuals (yet to be formally selected); invitations extended to the full Campaign family (noted above), the honorees and their families, and a few extra invited friends from the Washington area.

Thursday, April 30

10:00 **Reception at the White House**

Invitees from the Campaign side to include the honorees, Campaign Board, staff, task forces, the Campaign's teen group, major funders, and members of the Campaign's House/Senate Advisory Panels. Content and messages of this meeting are noted in the memo accompanying this schedule. (Open to the press)

12:30 - 1:30 **Briefing on Capitol Hill** convened by either the Campaign's House or Senate Advisory Panels:

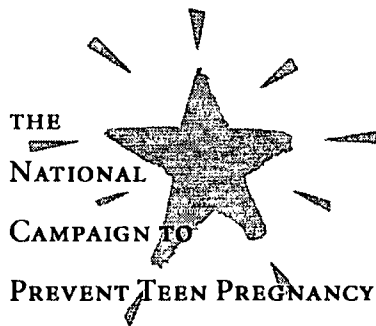
Focus on report being released that day by the Campaign with new data on the critical role that adults and parents play in reducing teen pregnancy.

Other Campaign documents also noted and to be made available:

- tool kit
- adult focus group report
- polling data
- parent resource guide
- "snap shots" of significant parent programs around the country
- several posters on the theme of adult/parent involvement

Honorees noted in the press packets

Q and A



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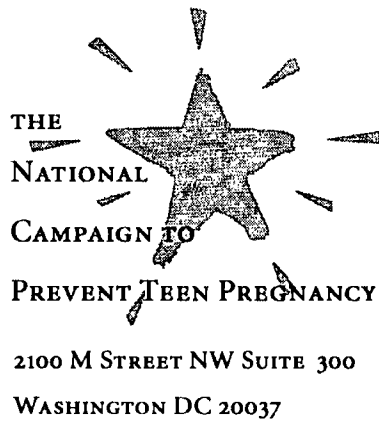
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Isabel C. Stewart, National Executive Director, Girls Incorporated

Andrew Young, former Ambassador to the U.N. and Co-Chairman, GoodWorks International

Campaign Director

Sarah Brown



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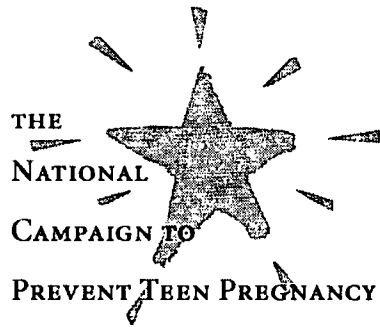
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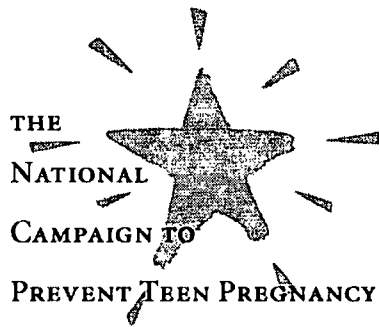
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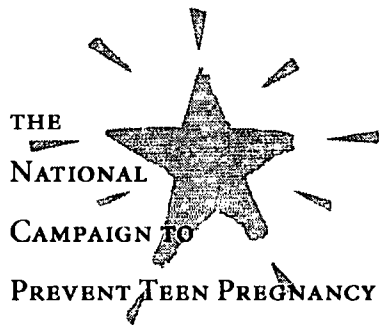
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1/7/98



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U.S. News & WORLD REPORT

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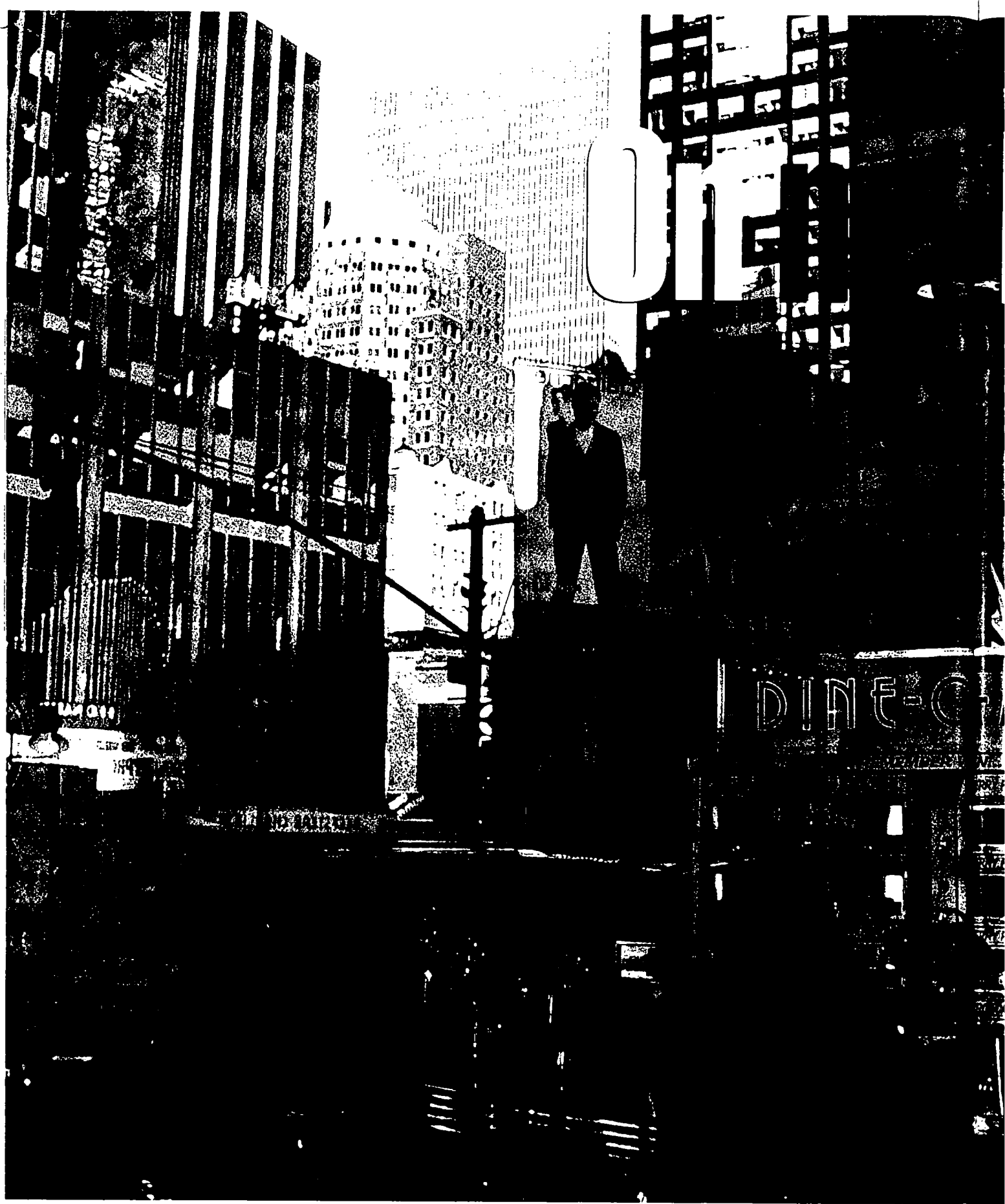
Silver Bullets

SMART IDEAS
TO FIX THE
WORLD

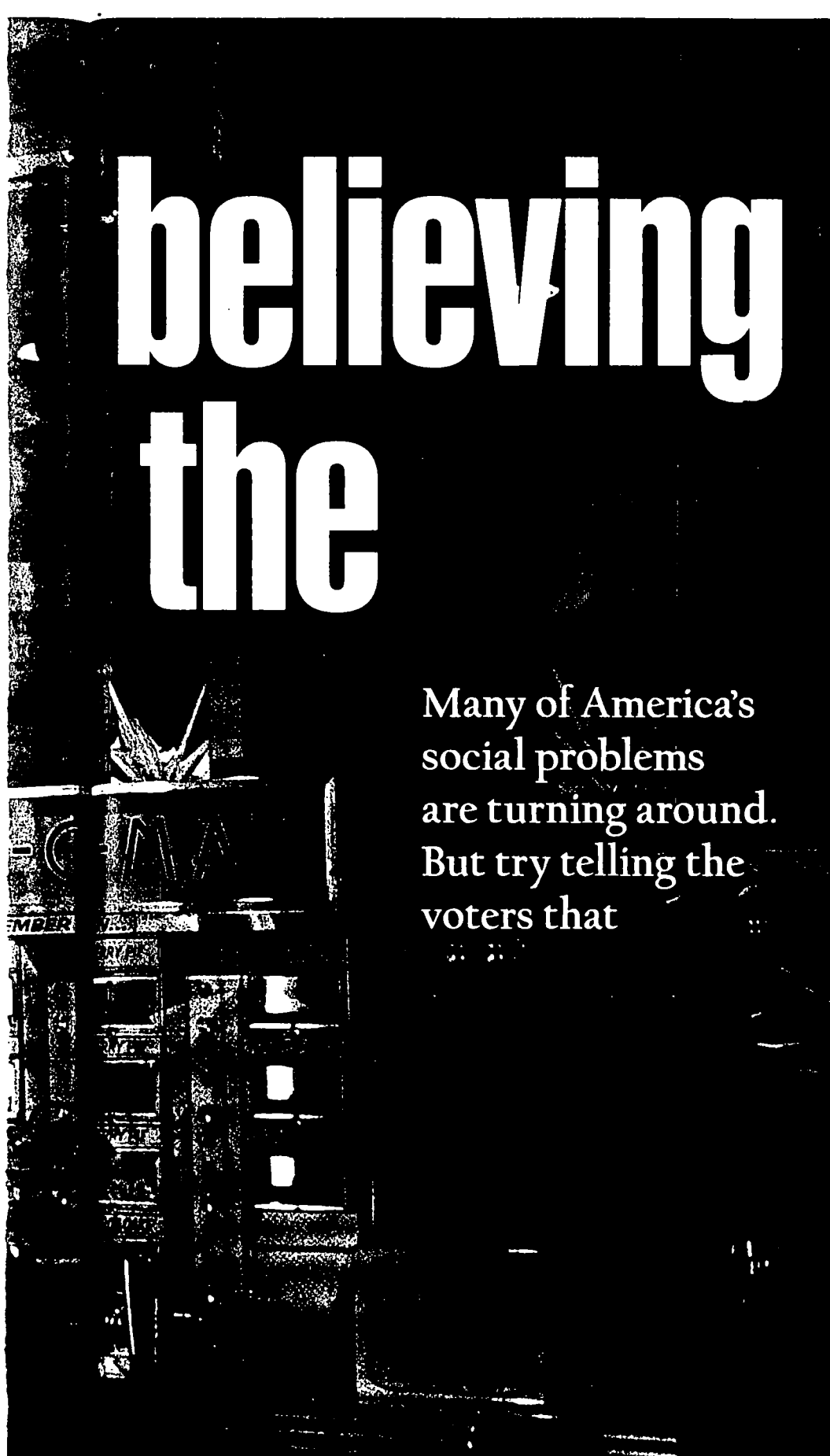
Memorable
Pictures

Plus: Farewells to

and



BY DAVID WHITMAN



believing the

news

Many of America's
social problems
are turning around.
But try telling the
voters that

THE PAST YEAR, TO PARAPHRASE FRANK Sinatra, was a very good year in one surprising respect: Most of the nation's "intractable" social problems turned out to be not so intractable after all.

Name nearly any social ill and track the trend line. Black poverty and infant mortality? Both are at record lows. AIDS? The AIDS death rate fell 26 per-

cent last year, the first such decline since the epidemic's onset. Unemployment? The last time it was lower was 1973. Inflation? The "cruellest tax" is waning and is now at a 30-year low. How about welfare? During 1996 and the first half of 1997, the relief rolls shrank by almost 20 percent.

The turnaround is not just some statistical blip—it has lasted now for much of the decade. The incidence of violent crime has fallen five years in a row. The murder rate is now lower than at any time since 1969, and property crimes are much less common than a quarter century ago. The abortion rate has also dropped five years in a row—to a level not seen since 1976. And after 45 years of rising relentlessly, even the proportion of children born out of wedlock has stopped climbing.

Yet the proof of progress has not bolstered citizens' faith in the future or in the capacity of institutions to help resolve social problems. It has taken seven years of economic growth, rising real incomes, a record bull market, the creation of more than 13 million new jobs since 1993, and the near collapse of our Asian competitors to finally convince a

PHOTOGRAPHY BY ALEX WEBB—MAGNUM

majority of Americans that the economy is performing reasonably well. There's even a kind of triumphalism in the press about how the world should take lessons from the U.S. economy. Yet most Americans still do not believe that the country is headed in the right direction or that the current generation of kids will do better than their parents. A Harris Poll taken earlier this year showed that 2 in 3 adults think violent crime is on the rise, with almost half saying it is increasing "a lot." Other recent surveys show that less than a third of the public believes that the number of AIDS-related deaths has actually declined or that the proportion of teens engaging in sex has dropped.

An unwillingness to accept the notion that many things in the nation are getting better is part of an old American tradition. The electorate's mood has long swung between boosterish optimism—as during the first two decades after World War II—and stubborn skepticism of the kind popular today. Charles Dickens described this skeptical attitude toward politics and public life more than a century ago in his travel journal, *American Notes*. He argued that in America, the "one great blemish in the popular mind . . . and the prolific parent of an innumerable brood of evils, is Universal Distrust. Yet the American citizen plumes himself upon this spirit, even when he is sufficiently dispassionate to perceive the ruin it works."

In 1997, Americans again plume themselves on their skepticism, second-guessing politicians and journalists as in Dickens's day. Everyone now "knows," for example, that campaign finance reform will never really happen. Spin the clock back just a year, however, and it turns out that most voters were then equally sure that President Clinton and the Republican Congress would fail to make significant progress toward balancing the budget. Good news, such as the virtual elimination of the budget deficit or the plummeting crime rate, no longer seems to restore Americans' faith in the power of collective action and deliberate policy to help make things better.

What's behind the exaggerated cynicism? In part, it's experience. For decades, social ills really did worsen, and Americans wearied of hearing politicians and advocates overhype reforms. There also is an element of mystery as to what has prompted the turnaround in social trends. Researchers, for instance, can only estimate how much of the drop in the welfare rolls is due to the new welfare law as opposed, say, to the robust economy. But the public's pessimism also reflects the triumph of a certain mind-set: the notion that social changes happen largely because of big, impersonal forces, like unemployment and demographics, which overwhelm the efforts of humans to direct their own fate.

To take one example: Many a criminologist and more than a few police chiefs have long assumed the truth of Rossi's Iron Law—the belief that the net impact of any social intervention is zero. Thus, changes in the law enforcement system—be they shifts in police procedures, the mandating of longer prison terms, or tough public rhetoric from mayors and police

chiefs—are said to have no long-term impact on the crime rate. The conventional thinking has been that only glacial forces—such as the emergence of a large cohort of violence-prone teenagers or swings in the unemployment rate—boost or lower the overall level of crime.

None of these causes, however, fully accounts for New York City's well-publicized, abrupt drop in violent crime. In just four years, the murder rate dropped 49 percent, robbery declined 43 percent, and motor vehicle theft fell 47 percent. The homicide rate has dropped so sharply that it is now back to the levels of the 1960s. And crime fell even as unemployment in the city was still roughly double the national average, family breakdown continued unabated, and crack use by adult arrestees in Manhattan failed to plummet, as it did in some urban areas.

It is hard to document a cause-and-effect relationship, but

several policy reforms implemented by former New York Police Commissioner William Bratton and Mayor Rudolph Giuliani did appear to be effective in cutting crime. The NYPD, for example, started arresting people for minor "quality of life" offenses, such as aggressive panhandling, car window washing, prostitution, graffiti, and small-time drug dealing. Many of those arrested turned out to have rap sheets for violent crimes or were carrying unregistered firearms. As a result, word spread on the street that it was a bad idea to carry weapons in public, which curbed street violence and

drove more of it indoors, where innocent passersby were less likely to get hurt. "Gang members aren't so eager to go into a heavily fortified drug house and have a shootout when they used to be able to shoot someone in the back on the street," explains Bratton. "Some of these dirtballs aren't so brave."

The promise of such reforms, and the turnaround of harmful social trends, do not mean that the country should become a nation of self-satisfied Pollyannas. Millions of Americans still are the victims of violent crimes and suffer from inferior



The good news of 1997 pokes a hole in the fashionable if somewhat lazy view that "nothing works."

schools, broken families, AIDS, and other social ills. Some maladies have worsened in absolute terms, too. Child abuse and neglect are up, propelled by the crack epidemic. The wages of unskilled workers continue to decline. Health care costs keep rising, as does the percentage of children who are uninsured.

Yet it is hard to make the case that all these enduring problems overshadow the good news of 1997, or that efforts to solve problems inevitably fail. The following pages offer 16 ideas to solve society's problems—from proposals to reduce deaths from land mines to ways to clean up college athletics. Some may seem more plausible and persuasive than others. But all are meant to reopen debate about how America can respond to problems that are often dismissed as insoluble. As the new year begins, Americans might resolve to take a bit less pride in the distrust that Dickens lamented so long ago. ■

SILVER BULLETS

16 smart ideas to fix the world

JIM PORTO FOR US&WR



1. **How to reduce the number of teenage pregnancies.** Involve girls in voluntary community-service projects.
2. **How to clean up big-time college athletics.** Make universities provide additional scholarships for football and basketball players—after they quit playing.
3. **How to “de-corrupt” foreign security forces.** Subsidize good wages and pensions for cops—but only the honest ones.
4. **How to fix campaign finance, Part 1.** Throw away the rule book and give candidates free money.
5. **How to fix campaign finance, Part 2.** Disclose the names of big donors in all political advertisements.
6. **How to reduce land-mine casualties.** Invest in fast new gizmos that can unearth them safely.
7. **How to slim down the world’s fattest society.** Tax the unhealthy junk food that contributes to obesity.
8. **How to revive the Chesapeake Bay.** Filter its murky waters with billions and billions of oysters.
9. **How to save Monday Night Football.** Send Al Michaels, Frank Gifford, and Dan Dierdorf packing.
10. **How to keep young toughs from committing violent acts.** Promise gangs swift and certain punishment—and deliver on the promise.
11. **How to avert an accidental war.** Take all nuclear arsenals off of hair-trigger alert.
12. **How to keep elite universities diverse after affirmative action.** Create an Army-style prep school to help promising minority students compete.
13. **How to reduce teenagers’ road accidents.** Make teens earn driving privileges with “graduated licenses.”
14. **How to make immigration work better for America.** Create a point system and give extra credit to aliens with education and job skills.
15. **How to give working parents more time with their kids.** Create public schools in the workplace.
16. **How to fix the flaws and annoyances of American life.** Let foreigners tell us what to do, just this once.

1 How to reduce teen pregnancy

Voluntary community service



These are not young mothers. In fact, the act of volunteering to work with others' crack babies may help these teens delay pregnancy.

BY MARCI McDONALD

In a rainbow-bright nursery at Faith House, a gleaming new home for crack babies in St. Louis, spindly infant arms reach out from between crib slats for love. Among the beds, 10 ninth graders on a community-service field trip from McCluer High School shuffle uneasily, clearly shy about answering that age-old call for human contact. Then suddenly, deftly, Erin Meyer, a delicate 15-year-old in black overalls, scoops up a squirming bundle and begins to rock him in her arms. "I've wanted a baby for a long time," she says. "But it makes me sad to see how these kids got here. I realize that if I have a baby, I want it to be under circumstances so I can have it myself, not have other people look after it."

Meyer's conclusion would delight any social worker wrestling with the bedevil-

ing problem of teen pregnancy. Nearly 1 million American teenagers a year become pregnant—76 percent of them out of wedlock and 40 percent under the age of 17. Still, the epiphanies prompted by a school outing to Faith House might not seem surprising. After all, how better to warn teens against the perils of premature motherhood than to confront them with colicky, damp-diaper reality? What has surprised experts is a recent discovery that it doesn't matter whether teens cuddle crack babies or clean up roadside trash. The best way to help teenage girls avoid becoming pregnant is to involve them in voluntary activity, whether or not it is explicitly designed to point out the pitfalls of early parenthood. This is the strategy behind the Teen Outreach Program, which appears to be the most effective deterrent to teen pregnancy yet devised.

Begun in St. Louis nearly two decades

ago, TOP has since spread to 120 classrooms in 25 cities with consistently remarkable results. Now, a meticulous, four-year evaluation by University of Virginia psychologist Joseph Allen reports that teens in the program had 40 percent fewer pregnancies than a control group of adolescents who had applied to join but lost out in a random draw for participation. That success rate far outstrips those from any current sex-education, contraception, or abstinence campaigns—the leading, and decidedly more direct, approaches to the issue. According to Douglas Kirby, research director of ETR Associates, who conducted a landmark 1996 survey of those approaches entitled *No Easy Answers*, none made more than a modest dent in teen birth rates, compared with TOP's dramatic results. "This is the best evidence we have," Kirby says, "that any single program can

actually reduce teen pregnancy."

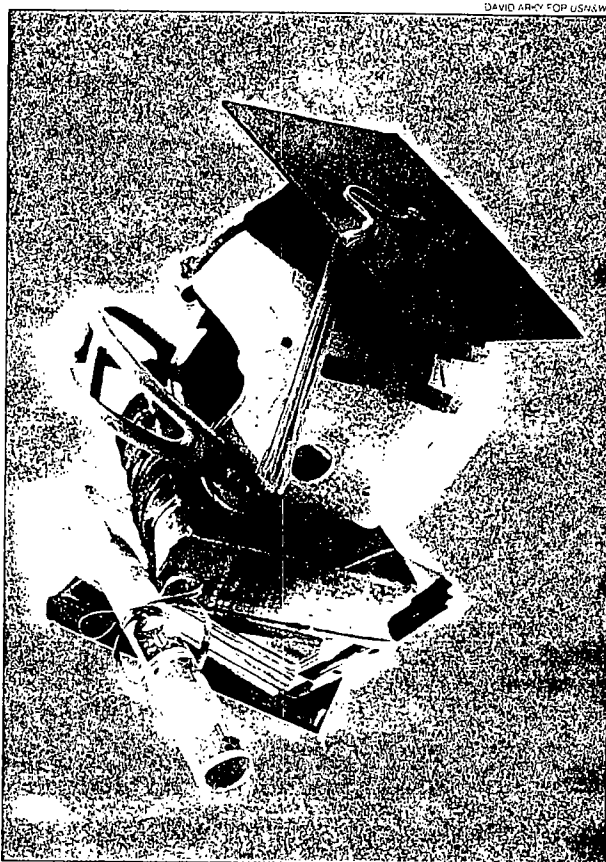
Allen credits the TOP curriculum both with bolstering self-esteem and modifying adolescents' worldviews. "What this program does is change kids' perceptions about themselves and tell them that they have a role in the community," he says. "When they learn to take care of others, they learn to take care of themselves." His findings make the conventional debate about how to prevent teen pregnancy—in which conservatives and liberals square off over the merits of giving teens condoms or moral strictures—seem beside the point. In fact, TOP's greatest strength may be the obliqueness of its approach. A mix of community service, gab sessions, and activities designed to foster the spirit of an exclusive club, it devotes less than 12 percent of its time to focusing directly on sex. And so flexible is its curriculum that it can be adapted by communities that prefer not to broach the dread subject at all. "This program comes in the back door," says Rita Helm, TOP director at Ferguson Middle School in St. Louis.

Warring camps. But crusaders for the warring camps of both sex education and abstinence counseling have shown themselves notably reluctant to rush forward and beat the drums for a program that calls into question their own stakes in the issue. "There is no one magic bullet to prevent teen pregnancy," insists Debra Haffner, president of SIECUS, the Sexuality Information and Education Council of the United States. "This in no way says sexual education for young people isn't important." Meanwhile, conservatives are unlikely to abandon their own beachhead: In a virtually ignored clause of last year's welfare-reform bill, they succeeded in locking in a \$50 million-a-year windfall of new federal funding to be made available to states that promote a strict definition of abstinence—despite the lack of evidence that it works.

Now run by Houston-based Cornerstone Consulting, TOP is financed entirely by private foundations and boasts 6,000 members of both sexes from New York City to San Francisco. But at a time of pinched social-service budgets, it could have even wider appeal. If included in an academic curriculum, it can cost as little as \$100 per student a year; paying after-school facilitators and hiring buses to deliver groups to volunteer sites may add an estimated \$500 a head to the bill. That's not a trifling amount to the average struggling inner-city school district. But compared with the estimated \$6.9 billion a year in extra services that births to teenage mothers cost society each year, the TOP program looks like a sound investment. ■

② How to clean up college athletics

Scholarships for jocks, after they quit playing



DAVID ARCY/TOP USNAW

studies. But by then the scholarship money is gone. Big-sports Division I athletes typically receive up to four years of tuition, room, and board. Many universities tacitly allow athletes—especially in football and basketball—to spend those four years on campus while barely cracking a book. The instant their eligibility expires, the former Saturday heroes are abandoned, as schools rush to restock with the next round of dreamers. If all sports (tennis, track, and so on) are included, athletes graduate at a slightly higher rate than college students generally. But for men who play on high-profile Division I football and basketball teams, graduation rates are notably lower than among the student body at large. In these sports, universities keep the consider-

able revenue that the athlete's talents have generated, while too often the player ends up with no meaningful education.

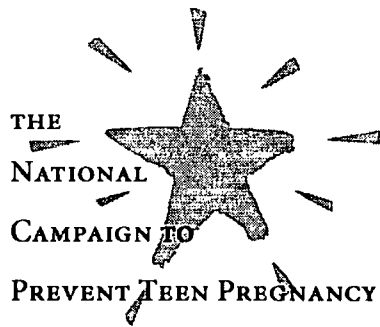
Because the education of big-sports college athletes is often so poor, it has long been proposed that Division I colleges drop their pretenses and simply pay basketball and football players. But this wouldn't solve the problem. Not only would it spoil amateur athletics but it would still deny many players what they most need to advance in life, an education.

A second chance. Consider instead this solution: Change the rules so that for every year a student athlete plays a revenue-producing sport, he receives up to two years of scholarship toward a baccalaure-

BY GREGG EASTERBROOK

Every year hundreds of college athletes buy into the dream of a professional sports career. Convinced they will be among the fortunate few to land a lucrative contract, they devote much of their energy and concentration to the practice field, barely sliding by academically in dubious majors like "human potential." Then reality hits. Draft day comes and goes without a phone call. No tryout invitations. The vast majority of hopefuls suddenly face the fact that their dream will never be anything more than that.

By the time this realization dawns, athletes may wake up and finally be ready to apply themselves to their



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CAMPAIGN ACCOMPLISHMENTS

- We have a distinguished board made-up of individuals representing business and philanthropy; former state and national political leaders; community, religious, and voluntary sector leaders; entertainment figures; leaders in medicine and health care; and practitioners and experts in the field. In addition, we have established four task forces and recruited about 60 additional national and community-based leaders to work closely with us on our ambitious agenda.
- Isabel Sawhill serves as our President and Sarah Brown as our Director. Together they have raised a budget of \$2 million per year, assembled a staff of 16, and developed a strategy for accomplishing the Campaign's mission which is to reduce the teen pregnancy rate by one third by the year 2005.
- We have insisted from the beginning that the Campaign's work be of the highest quality and based on the best research. We have published a definitive guide to what is known about effective programs to reduce teen pregnancy and issued many other publications that are now in wide use, especially by local communities.
- We are working closely with the media, including BET, MTV, NBC, ABC, and Warner Brothers, to produce public service announcements on teen pregnancy and to incorporate new, more positive messages and story lines into prime time television, soap operas, and films.
- We have made personal visits to 28 states where we have provided technical assistance, revitalized community or state-wide coalitions, made substantive presentations at conferences, and deepened our own understanding of the issue. With funding from the Department of Health and Human Services, we are now producing a "tool kit" or guidebook with practical suggestions for local communities struggling to prevent teen pregnancy.

- We are also seeking ways to deal with the conflict that so often impedes efforts in this area by respectfully involving and listening to different points of view within the Campaign's Task Force on Religion and Public Values (chaired by Bill Galston) and by sponsoring carefully structured community discussions to deal with controversy at the local level.
- We have established two bipartisan advisory panels, one in the Senate co-chaired by Joseph Lieberman and Olympia Snowe and one in the House co-chaired by Nita Lowey and Mike Castle. We have done a number of special projects with both groups and when requested, have worked with their staffs on legislative ideas.
- We have hosted a number of seminars or conferences on such topics as the role of men and boys in teen pregnancy, how to run a media campaign at the state level, the cultural messages that may affect the self image and sexual behavior of teenage girls, and the role of youth-serving organizations and youth development programs in preventing teen pregnancy.
- Last May, we held an awards dinner and reception at the White House with the First Lady during which national and community leaders who have made particularly outstanding contributions in this arena were honored. We brought together for the first time such groups as Planned Parenthood and the Best Friends Foundation. The event at the White House was especially motivating for the honorees, board and task force members, and everyone else who has worked so hard to make this Campaign a success.

December, 1997

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Campaign Update

SUMMER 1997

Campaign Officially Launched in May

Little more than a year after a few leaders met in response to President Clinton's call for a national effort against teen pregnancy, the National Campaign to Prevent Teen Pregnancy was formally "launched" in May with a series of high-profile events and new reports that brought heightened attention to the importance of reducing teen pregnancy.

■ Sue Cameron, County Commissioner of Tillamook County, Oregon, for her community's success in reducing its teen pregnancy rate by nearly 75 percent between 1990 and 1994, accomplished by moving ahead in the face of conflict over what prevention strategies to employ — that is, to "agree to disagree."

The First Annual Honors Dinner

The launch calendar began Thursday, May 1 — the start of Teen Pregnancy Prevention Month — with the National Campaign's first annual honors dinner, where the many people involved with the birth of the Campaign were thanked and 12 individuals and organizations were honored for their contributions to teen pregnancy prevention across the nation. This year's honorees highlighted several key Campaign themes, such as involving men and boys in teen pregnancy prevention, enlisting the help of the media, engaging young people directly in solving this problem, making progress in the face of deep value disagreements, involving the business sector, and encouraging parent-child communication. The honorees were:

■ Patricia Canessa, President of the Board, the National Organization on Adolescent Pregnancy, Parenting, and Prevention (NOAPPP), and Russell C. Deyo, Vice President for Administration, the Johnson and Johnson Family of Companies, for their partnership in the National Urban Adolescent Pregnancy Prevention Program, an effort to identify, evaluate, and disseminate information about successful adolescent pregnancy prevention programs.

■ Elayne G. Bennett, President and Founder of the Best Friends Foundation, a school-based program for girls in grades five through twelve that fosters self-respect and promotes



The National Campaign honored the work of *Sex etc.* — A Newsletter by Teens, for Teens, at the First Annual Honors Dinner. Susan N. Wilson (center), executive coordinator for the Network for Family Life Education, which publishes the newsletter, is joined by editorial board members (from left to right), Katrina Braxton, Cecilia V. Lalama, Ira Lederer, and Seo Hee Koh.

responsible behavior and abstinence, for the program's comprehensive approach in stressing values, future plans, and self-esteem.

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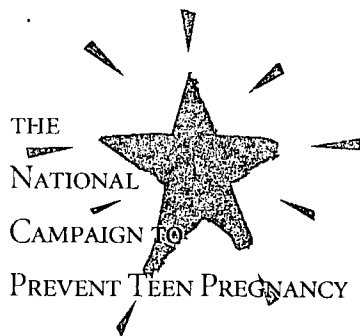
In This Issue	
■ Tapping the Power of the Media to Reduce Teen Pregnancy	page 3
■ Sharing Lessons from States and Communities	page 5
■ Campaign Research Review Shows No Easy Answers	page 9

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Campaign Update

FALL 1997

Shalala Calls for Creating Safe Passages for Youth

Calling youth development programs a "strategic investment," U.S. Department of Health and Human Services (DHHS) Secretary Donna Shalala cautioned that teenage pregnancy rates will only decline with encompassing intervention in all aspects of children's lives. "It's the comprehensiveness of programs that makes a difference," she said.

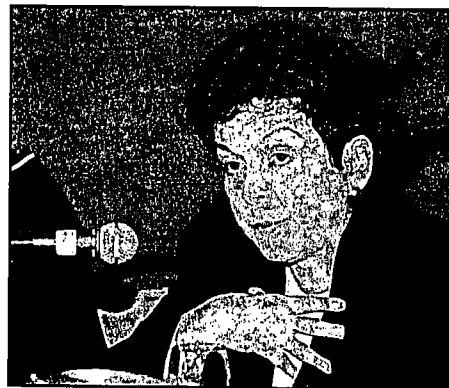
Shalala brought her message of support for solving teen problems through broad, asset-building strategies to a meeting of national youth development leaders, members of Congress and the Clinton Administration, researchers, experts, and teens. The meeting was co-hosted by the Campaign, the National Urban League, and Girls Incorporated. The Secretary issued a challenge to participants to "convince Americans that [youth development] is a shrewd way to get young people safely through adolescence."

The "Creating Safe Passages for Youth" meeting explored the challenges that young people face today, examined evaluations of youth development programs, and searched for ways that organizations such as the Campaign can learn from the success of youth development models.

"It's not enough to focus on the problems of teens; we must arm them with skills so they can make positive choices. Youth development offers a holistic approach," said Rep. Connie Morella (R-MD), a member of the Campaign's House Advisory Panel. Simply stated, youth development programs should "start early and stay late," advised Girls Incorporated National Executive Director Isabel C. Stewart, a Campaign board member.

Pollster Dan Yankelovich said the public is already behind the concept of youth

development programs even if they don't know it. "People support solutions that develop character," he said. Researcher Robert Blum cautioned that these solutions "need to be driven less by what we want to work and more by what we've found to work." Effective youth development programs promote self-efficiency, last at least nine months, seek to improve social

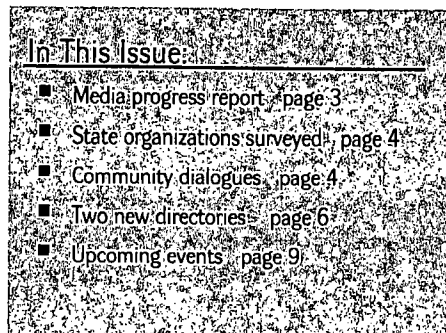


Health and Human Services Secretary Donna Shalala addresses youth development meeting.

norms and take place in several social settings, according to the research of panelist Richard Catalano, who is currently evaluating a number of youth development programs under the auspices of DHHS.

The wide-ranging discussion elicited advice and guidance from many youth development practitioners and other experts:

Continued on page 2



Boys have role, too, in curbing teen pregnancy

OUR VIEW Most programs concentrate on girls, but ignoring boys ignores half the problem.

Teen-age boys begin having sex at an earlier age than girls. They typically have more sexual partners. And though most boys have had sex by their 17th birthday, they use condoms inconsistently at best.

Those findings are contained in a riveting study on teen pregnancy to be released this week by The Urban Institute. Yet in spite of the data documenting the active sex lives of teen-age boys, these adolescents are still left out of most public health efforts aimed at reducing teen pregnancy through sex education and birth control.

About 1 million teen-age girls become pregnant every year. More than half of them have babies. Ignoring the role teen-age boys play in this \$6.9 billion public health problem makes no sense.

Yet until 1988, the government didn't collect any statistics about teen-age boys' sexual behavior. And The Urban Institute's report is the first documenting the role of teen-age boys in problems including teen pregnancy, out-of-wedlock births and the spread of sexually transmitted disease.

It comes just as compelling new legal reasons are emerging for teen-age boys to take more responsibility.

Spurred by welfare reform, states are pairing with the federal government to establish paternity and set child-support orders for all children born out of wedlock. As a result, more males are being held financially responsible for their offspring.

At the same time, several states are trying to reduce pregnancies among young teens by cracking down on statutory rape laws that typically allow the criminal prosecution of adult men who have sex with girls under the age of 16.

Improving sexual education of teen-age boys is also important to public health since condom use is viewed as the best way to prevent HIV among the sexually active.

Against this backdrop, several states have reached the long overdue conclusion that previous pregnancy-prevention efforts were, at best, halfway measures. The Urban Institute estimates that 40 states are re-vamping their pregnancy-prevention programs to target teen-age boys.

That's a promising start. But there's still a significant knowledge void surrounding the best ways to teach young men about sexual responsibility. Fortunately, a handful of models offer promising guidance.

► In Hartford, Conn., the nonprofit Always on Saturday program discourages high school boys from fathering children by

Male sexual experience

A new report from The Urban Institute gives a comprehensive look at the sexual experiences of teen-age males.

Those who have had sex

Age 15	27%
Age 16	45%
Age 17	59%
Age 18	68%
Age 19	85%

Partners in past year

0 partners	10%
1 partner	44%
2 partners	26%
3-4 partners	14%
5 or more	6%

Condom use in past year

Inconsistent or no use	56%
Consistent use	44%

Pregnancy and birth

All male teens	
Made a partner pregnant	14%
Fathered a child	6%
White	
Made a partner pregnant	10%
Fathered a child	5%
Hispanic	
Made a partner pregnant	19%
Fathered a child	8%
Black	
Made a partner pregnant	22%
Fathered a child	10%

offering tutoring and trips to neighborhood pharmacies where teens learn how to purchase and use condoms.

► Houston's Baylor Teen Health Clinic attracts teen-age boys by offering sports and work physicals and then awards prizes to those who avoid contracting sexual diseases between clinic visits.

► After failing to reduce sexually transmitted diseases among its female clients, Planned Parenthood in Camden, N.J., began targeting males through its Teens on Track program, which recruits boys through basketball and swimming teams.

Programs like these have yielded important information about the best ways to reach teen boys. Among their findings: Boys are more willing to use condoms to avoid disease than prevent pregnancies, and boys can be attracted to health clinic programs through sports teams.

Expanding and refining that type of information can help public health officials make a serious dent in teen pregnancy rates. Until there are better ways of reaching teen-age boys, pregnancy-prevention programs ignore half the problem.

Abstinence is answer

OPPOSING VIEW Don't send mixed messages. Sex outside marriage is just plain wrong.

By Tim Wildmon

Why are we afraid to teach our youth that sex outside of marriage is wrong?

Most of us — liberals and conservatives included — would tell our youth it is better for them to avoid a sexual relationship until they are married.

We tell them about sexually transmitted diseases. We tell them about unwanted pregnancies. We explain to them the consequences of their behavior.

To this extent, I applaud the efforts of The Urban Institute in its attempt to reach the young male population of our country who often escape responsibility when they get a young girl pregnant. But nowhere in the press release "Involving Males in Preventing Teen Pregnancy" is abstinence mentioned.

However, any form of sex education that does not begin with the premise taught by the Bible — and all major world religions — that sex outside marriage is sinful in the sight of God is fundamentally flawed. If we remove God and the Bible from the issue, we are left without a moral guide to human sexuality.

So then, what's really wrong with any type of sexual activity, including behavior involving unmarried teen-agers? We are left with the cause-and-effect argument alone as our hope for shaping behavior. And what young person ever thought "it could happen to me"?

This is not to say we shouldn't make clear to young men and women that sex has consequences. But if we ever hope to return to the days of few teen-age pregnancies, abortions and sexually transmitted diseases, then we must have a stronger point of persuasion than just telling them about the potential fallout from sex.

We send a convoluted message to a generation looking for guidance. Even if we encourage them to avoid having sex, we hand them a condom on the way out of class. That's like teaching teens traffic laws in driver education and then handing them a radar detector as they complete the course. Or teaching them to just say no to drugs and giving them a pack of clean needles.

We must recognize that the moral teachings of the Bible — such as the Ten Commandments and the Sermon on the Mount — have been given to us for the good of the individual and the society. These teachings should be lauded and esteemed, not undermined, dismissed and ignored.

Tim Wildmon is vice president of the American Family Association, Tupelo, Miss.

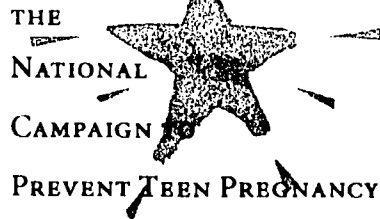
Re-Bugged

Forget the flu bug. Here comes the VW Beetle bug. Will it give you fever? Delirium? A case of the all-shook-ups? The answer is hazy. Previous models, last sold here in 1979, had a rear-mounted, air-cooled engine. The new one is front-mounted and water-cooled. The car still looks like a pregnant roller skate. But it has a wider stance and, inscrutably, a bud vase.

Preliminary reviews are flattering. But bud vases aside, aren't most boomers a little too "prosperous" for the cramped rigors of a Bug? Let's hope not. A new round of Beetlemania would give the Children of the Boom a shared moment with their parents, while validating the hours a generation invested in misspending its youth.

A caution, though. As you wax nostalgic for the cramped Bug of yore, some smart alecks will conclude that what boomers really need is not a car but a life. Ground them until they show some respect.

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December 4, 1997

The Honorable William J. Clinton
Office of the President
1600 Pennsylvania Avenue, N.W.
Washington, D.C. 20500

Dear Mr. President:

I am writing to report to you on the activities and progress of the National Campaign to Prevent Teen Pregnancy. As you will recall, this group was created in early 1996 after your 1995 State of the Union address and a follow-up meeting at the White House during which you challenged the private sector to get involved. We remain extremely grateful for your leadership, and for the First Lady's great interest in, and assistance to, the Campaign.

I want to highlight for you, the First Lady, and your staffs some of the accomplishments of the Campaign over the past two years:

- We have a distinguished board, including some members who are there as a result of your or your staff's efforts: David Hamburg, Warren Rudman, Nancy Kassebaum-Baker, Whoopi Goldberg, Andrew Young, Hugh Price, Judy McGrath, Everett Koop, Bill Galston, Jody Greenstone Miller and others. In addition, we have established four task forces and recruited about 60 additional national and community-based leaders to work closely with us on our ambitious agenda.
- Isabel Sawhill serves as our President and Sarah Brown as our Director. Together they have raised a budget of \$2 million per year, assembled a staff of 16, and developed a strategy for accomplishing the Campaign's mission which is to reduce the teen pregnancy rate by one third by the year 2005.
- We have insisted from the beginning that the Campaign's work be of the highest quality and based on the best research. We have published a definitive guide to what is known about effective programs to reduce teen pregnancy and issued many other publications that are now in wide use, especially by local communities.

- We are working closely with the media, including BET, MTV, NBC, ABC, and Warner Brothers, to produce public service announcements on teen pregnancy and to incorporate new, more positive messages and story lines into prime time television, soap operas, and films.
- We have made personal visits to 28 states where we have provided technical assistance, revitalized community or state-wide coalitions, made substantive presentations at conferences, and deepened our own understanding of the issue. With funding from DHHS, we are now producing a "tool kit" or guidebook with practical suggestions for local communities struggling to prevent teen pregnancy.
- We are also seeking ways to deal with the conflict that so often impedes efforts in this area by respectfully involving and listening to different points of view within the Campaign's task force on Religion and Public Values (chaired by Bill Galston) and by sponsoring carefully structured community discussions to deal with controversy at the local level.
- We have established two bipartisan advisory panels, one in the Senate co-chaired by Joe Lieberman and Olympia Snowe and one in the House co-chaired by Nita Lowey and Mike Castle. We have done a number of special projects with both groups and when requested, have worked with their staffs on legislative ideas.
- We have hosted a number of seminars or conferences on such topics as the role of men and boys in teen pregnancy, how to run a media campaign at the state level, the cultural messages that may affect the self image and sexual behavior of teenage girls, and the role of youth-serving organizations and youth development programs in preventing teen pregnancy.
- Last May, we held an awards dinner and reception at the White House with Mrs. Clinton during which national and community leaders who have made particularly outstanding contributions in this arena were honored. We brought together for the first time such groups as Planned Parenthood and the Best Friends Foundation. The event at the White House was especially motivating for the honorees, board and task force members, and everyone else who has worked so hard to make this Campaign a success. We hope we can hold a similar event in late April of this year when we will again be honoring a variety of leaders in this field. (Our awards dinner will be held on April 29.)

Thank you again for your leadership. We hope you will continue to speak out about this issue and to support the work of the Campaign. We would be happy to brief you or your staff at any time and would welcome your continued assistance in accomplishing our mission.

Sincerely,



Thomas H. Kean
Chairman

National Campaign to Prevent Teen Pregnancy

Possible event April 30, 1998

The Campaign is planning several events in Washington at the end of April to kick off Teen Pregnancy Prevention month in May. The Campaign's board will meet Wednesday, April 29th. There will be an honoree dinner that evening to acknowledge no more than 12 organizations doing good things to prevent teen pregnancy (similar to last year, but fewer honorees). Thursday April 30th is available for some kind of event and the Campaign would welcome the participation of the President or First Lady. The Campaign will be highlighting the theme that parents/adults matter in reducing teen pregnancy. Sarah Brown is giving this more thought, but in the meantime, possible options include:

- 1) **White House reception for honorees** with President and/or First Lady (similar to last year).
- 2) **Event with media leaders** who commit to do something concrete in support of the Campaign, i.e. air a show highlighting the issue, work it in as a theme in soap operas, do PSAs, etc. Campaign staff have been meeting with various industry folks and this could be used to both thank those who have gotten on board and inspire others to do so.
- 3) **Release the following Campaign publications** (could be at the White House or at a local school):
 - Research report on impacts of parent/adult involvement in adolescent sexual risk taking
 - Resource guide for parents on how they can get involved and where they can get information.
- 4) **Release tool kit for states and communities** on addressing teen pregnancy. This is funded by ASPE. (It might take some reprioritizing for this to be ready for release on 4/30).
- 5) **Unveil posters highlighting the 'parents matter' theme.**

An event could probably be structured to include any combination of the above items.

Update on Campaign Activities

The Campaign has organized around five major issues.

- 1) **Leadership**--to draw new groups into the effort.

Past activities include:

- Meeting with Youth Development Organizations to highlight research on the effectiveness of comprehensive youth development programs in reducing teen pregnancy.
- Establishing House and Senate Advisory groups. Key members include Senators Lieberman and Snowe. These groups have commissioned a paper on lessons about the impact of media campaigns (on other public health issues).

Future activities:

- Senate group will release above report on media campaigns (probably at National Press Club).

- Meeting with religious leaders sometime in 1998.

2) State and Local Involvement

Past activities:

- Establish state and local advisory committee
- Serve as resource for state and local activities including sending speakers to events, sending materials, and brokering information among communities.
- Recently released 'Partners in Prevention' directory of assistance that national organizations can provide to state and local communities.

Future activity:

- Publish tool kit for state and local communities. ASPE is funding this, is involved in reviewing it during development, and has final review. The Campaign has developed an outline and commissioned authors for 13 sections/topics. Deadline to get final draft to ASPE is 4/15/98.

3) Media

Past/current activities:

- Convened 41 states to discuss their use of media in preventing teen pregnancy. A report called 'Sending the Message' has just been published that summarizes the meeting and serves as a resource guide.
- Campaign staff is working closely with TV producers and directors, as well as media company CEOs to brief them on the issue and engage them in various ways. BET has done 2 town summits, with 2 more planned; NBC has committed to do a More you Know series on teen pregnancy.

Future activities:

- Briefing for ABC soap opera writers in NY and CA.
- Anne Moore, President of People, has invited First Lady to speak to meeting of girls and women's magazines.
- Briefing for writers and producers of 6 major shows (including ER and Friends) in June/July to give them ideas to incorporate into Fall scripts.
- Trying to engage Whoopi Goldberg (she's on the Campaign board) -- may propose a TV special.

4) Religion and Public Values--to think through and help communities deal with the tough issues.

Future activities:

- Releasing paper on what people are arguing about in the teen pregnancy field.
- Facilitate community dialogues--1st one scheduled for San Bernadino in mid-March.
- Meeting of religious leaders (see above).

5) Research--to synthesize and disseminate data and research findings.

Past activities:

- Released No Easy Answers

Future activities:

- Review of data on impact and nature of parental/adult involvement from federally-funded Adolescent Health study.

Also holding series of round tables with follow-up publications. Report on Involving Men and Boys has just been released, round table on the Culture of Girlhood held last week, and round table on Contraceptive Use by Sexually Active Teenagers planned for June.

The Campaign will also do some polling, particularly on parental/adult involvement, with the idea of releasing data in conjunction with late April events.

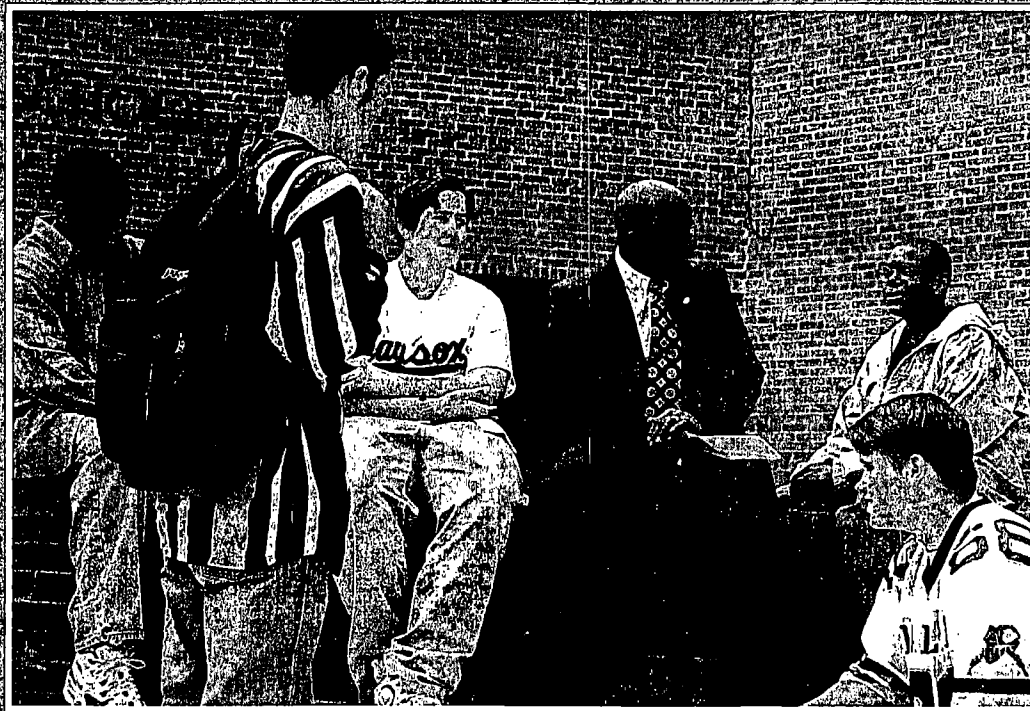
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THE
NATIONAL
CAMPAIGN TO
PREVENT TEEN PREGNANCY



Not Just For Girls

THE ROLES OF BOYS AND MEN

IN TEEN PREGNANCY PREVENTION

A REPORT FROM THE
NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY

NOVEMBER 1997