

Contemporary Models of Youth Development and Problem Prevention: Toward an Integration of Terms, Concepts, and Models

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Over the past several years, increased interest in preventing youth problems and promoting healthy youth development has led youth and family practitioners, policy makers, and researchers to develop a wide range of approaches based on various theoretical frameworks. Although the growth in guiding frameworks has led to more complex models and a greater diversity in the options available to scholars and practitioners, the lack of an integrative conceptual scheme and consistent terminology has led to some confusion in the field. Here, we provide an overview of three approaches to youth development and problem prevention, critically examine their strengths and weaknesses, and offer some elaborations to help clarify, extend, and integrate the models. We conclude by discussing some general implications for researchers, practitioners, and policy makers.

In recent years, efforts to address youth problems and enhance youth development have become increasingly more broad-based, involving families, professionals, and community leaders representing a wide range of professions and constituencies. Family professionals are likely to be key players in these initiatives, given their interest in the well-being of youth and the important role that families play during adolescence. Paralleling this movement toward broad-based, community approaches to youth issues has been the growth of conceptual frameworks used to guide policy and programs aimed at preventing youth problems and enhancing development. Although this growth has led to more complex models and greater diversity in options available to scholars and practitioners, the lack of an integrative conceptual scheme and consistent terminology has fostered confusion in the field. Such issues are not unique to the field of youth development or to adolescence, but also are germane to family scholars interested in other periods of the life course as well.

In this article, we briefly review the most prominent of these approaches, examine their origins, and highlight what we believe are their primary strengths and weaknesses. We then discuss how these approaches can be better integrated and expanded. We end by considering some implications for both theory and practice.

Contemporary models of youth development and problem prevention generally can be grouped into one of three types: prevention, resiliency, and positive youth development. Although each approach makes a unique contribution to our understanding of coping, development, and human adaptation, they also share several key features and a mutual vision directed at improving the life chances of young people. Unfortunately,

the literature in this area fails to provide consistency in the terminology used to designate certain fundamental constructs common to them all, especially with respect to terms related to risk and protection, assets or resources, and the designation of successful outcomes. For this reason, we begin with a brief discussion of terminology to provide a clearer understanding of our use of these terms.

Clarification of Key Concepts

Within the literature on youth development and problem prevention, a common source of confusion occurs in the use of various terms related to risk and protection. For example, one important but frequently overlooked distinction is between risk and protective *factors* that serve as probability markers or social address indicators (Bronfenbrenner, 1979) for the incidence of particular outcomes and risk and protective *processes* that seek to describe specific causal paths or mechanisms to explain the reason for increased risk or protection (Kirby & Fraser, 1997; Rutter, 1993).

The construct of a risk factor initially was derived from studies in epidemiology, where the goal was to identify statistical correlates of illnesses, such as breast cancer or heart disease, within a particular group or population. Risk factors typically are defined as individual or environmental markers that are related to an increased likelihood that a negative outcome will occur (Coie et al., 1993; Kirby & Fraser, 1997). Conversely, protective factors usually are defined as individual or environmental safeguards that enhance a person's ability to resist stressful life events, risks, or hazards and promote adaptation and competence (Rutter, 1987). As currently defined and used, risk and protective factors serve as probability markers for the likelihood of a problem occurring. Consequently, they are more useful in predicting outcomes for populations than for individuals (Durlak, 1997).

Although risk and protective factors provide general information about where to target intervention efforts, the identification of processes or mechanisms provides insight into what might be done to alter the situation. For example, poverty is a frequently cited risk factor for a host of problematic youth and family outcomes. In and

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of itself, poverty does not explain why an increased risk exists; rather, it serves as a marker for a host of risk processes that commonly accompany poverty: Poor families have fewer financial resources to purchase material goods, have access to lower quality services and schools, live in more dangerous neighborhoods, experience higher levels of day-to-day stress, and have fewer social supports due to greater mobility rates and increased family isolation (see Brooks-Gunn, Duncan, & Aber, 1997).

In addition, a protective factor is not the same as the absence of a risk factor, nor is it the same as a developmental asset, although these terms commonly are used interchangeably. To avoid confounding these constructs, it is worth recalling Rutter's (1987) often overlooked but important distinction: A protective factor only operates when a risk factor is present. Although protective factors serve to decrease an individual's vulnerability to risk, they do not necessarily enhance a person's potential in other areas. For example, the use of condoms may serve as a protective mechanism for sexually transmitted diseases, but only when an individual is sexually active and exposed to a disease.

On the other hand, developmental assets are responsible for enhancing and promoting outcomes that are indicative of competence among youth. Assets are defined as the building blocks that are crucial for promoting healthy youth development and well-being (Benson, 1997; Benson, Leffert, Scales, & Blyth, 1998). Just as being disease-free is not all there is to being healthy, a risk-free youth is not necessarily fully prepared for adulthood (Pittman & Irby, 1996).

We believe that a lack of assets is directly related to a person's failure to thrive, but only indirectly related to problem behaviors. As is often the case among children with few assets, a failure to thrive occurs when a child lacks essential growth opportunities needed for normal development. However, these same conditions also may heighten vulnerability, because the positive features that are absent in asset-poor environments tend to be replaced by hazardous or socially toxic conditions that generate risk (Garbarino, 1995). We believe that it is the presence of risk, rather than a lack of assets, that likely leads to problem behaviors. Therefore, while a youth with many assets may thrive developmentally, he or she may still exhibit problems if risk processes are present.

Finally, in any discussion of developmental outcomes, attention must be paid to how the goals of development are defined and operationalized. In the most general sense, the aim of research and practice in youth development and problem prevention is to reduce problem behaviors and enhance competence among youth (Eccles & Gootman, 2002). However, difficulties can arise when individuals differ in their opinions as to what may constitute a problem behavior or a display of positive development. For example, assertiveness usually is regarded as a sign of competence in Western society, but it may be interpreted as a problem behavior in other cultures (Garcia-Coll, Meyer, & Brillion, 1995). Therefore, it is important to recognize that social, cultural, and historical forces play a large role in any evaluation of outcomes as positive or negative (Bartelt, 1994; Brodsky, 1997; Luthar, 1993). It is not our purpose here to establish criteria for what constitutes a desirable or undesirable outcome. Instead, our purpose is to encourage individuals to be cognizant of the role that contextual, historical, and cultural factors play in both their views and those of others.

Having established a basic terminology, we turn to a brief review of three prominent approaches to youth development and problem prevention: prevention, resilience, and positive youth development. Although these approaches are built upon the basic principles of risk, protection, assets, and outcomes, they differ

with regard to the relative emphasis placed on each. Our goal is to provide an overview of the primary features that distinguish each approach and to highlight the inherent strengths and weaknesses of each.

Prevention Approaches

The prevention approach grew out of the realization that it can be more cost-effective and efficient to prevent problems from occurring initially than to treat them after they are established. Although prevention approaches have existed since the early 1900s (Durlak, 1997), the modern prevention movement related to the well-being of youth and families, emerged about 20 to 25 years ago. It grew out of public health and epidemiological approaches to disease prevention (Bloom, 1996; Leavell & Clark, 1953) and also was influenced by the mental health field, especially the work on schizophrenia and other mental illness (Caplan, 1964; Cicchetti & Garmezy, 1993). This approach serves as the foundation for many current youth initiatives, such as the Communities that Care program (Hawkins, Catalano, & Associates, 1992), the Prevention Youth Development Model (Lofquist, 1983), and Wisconsin's Youth Futures program (Bogenschneider, 1996).

Traditionally, three types of prevention have been identified: primary, secondary, and tertiary (Caplan, 1964). Primary prevention is concerned with preventing the initial occurrence of a problem within a normal population. Secondary prevention involves intervening with populations that show signs of early problems so that more serious problems can be avoided. Tertiary prevention involves the reduction of a problem among a group of people who already are experiencing it (Bloom, 1996). Recently, preventionists have argued that only interventions that occur before the onset of serious problems should be considered prevention (Durlak, 1997; Institute of Medicine, 1994; Munoz, Mrazek, & Haggerty, 1996), while interventions that address an existing problem (i.e., tertiary prevention) should be viewed as a form of treatment. They also recommended that prevention be differentiated into three intervention subcategories: universal, selective, and indicated. Universal prevention involves interventions directed at the general public or an entire population (e.g., all middle school students); selective preventive interventions are directed at a subgroup of a population that is at risk of developing the problem but is not yet exhibiting any difficulties; and indicated prevention involves interventions targeted at high-risk individuals who show some signs or symptoms of a problem. In terms of old and new terminology, primary and universal prevention often are used interchangeably, as are indicated and secondary prevention (Durlak, 1997).

Programmatically, the two key strategies in the prevention approach are to reduce or eliminate risk factors and increase or promote protective factors. In addition, it may involve enhancing the strengths, skills, or competencies of the target group so they are better able to cope with the stress or challenge that may result in future problems (Durlak, 1997).

Most contemporary prevention researchers and practitioners view prevention within an ecological framework (e.g., Coie et al., 1993; Kelly, 1986). This assumes that risk and protective factors can exist both within individuals and across the various settings in which they live, such as the family, peer group, school, and community. An important corollary of this approach is that efforts to prevent youth problems must account for and target these multiple settings (Bogenschneider, Small, & Riley, 1990; Small & Luster, 1994). Closely related to this view is the idea that most problems are multiply determined; that is, there may be diverse paths to the

development of a particular problem, and efforts to address a single cause are likely to fail because most problems have multiple causes (Small & Luster, 1994). In addition, the same risk factor can be related to a variety of different outcomes.

Risk factors often co-occur. When they do, they appear to carry additive and sometimes exponential risks (Masten, Morison, Pellegrini, & Tellegen, 1990; Rutter, 1979). Children with one or two risk factors may be at no higher risk than those with no risk factors present. However, when risks begin to accumulate, the probability of a problematic outcome occurring may increase substantially. For example, Rutter (1979) found no differences in the rates of child psychiatric disorders between children with one or no risk factors. However, the probability of a psychiatric disorder increased 5 times for those children with 3 or 4 risk factors and 20 times for those children who had 4–6 risk factors. One explanation for the cumulative effect of risk factors is that when more risks are present, the more likely it is that an individual will be exposed to causal processes to which they are vulnerable. An alternative and equally plausible explanation for this effect noted by Garbarino (1995) is that as the accumulation of risk factors reaches a certain threshold, individuals are overwhelmed and unable to cope with the accumulated stress.

Strengths, Weaknesses, and Elaborations of the Prevention Approach

The prevention approach is widely used in the youth development field, serving as the primary blueprint for most current drug, delinquency, violence, and adolescent pregnancy prevention programs (e.g., Kumpfer, Molgaard, & Spoth, 1996; Olweus, Limber, & Mihalic, 1999). The model provides an intuitive, logical framework and language for conceptualizing and addressing youth problems. Perhaps most importantly, a fairly substantial research-based literature has emerged in the past 15 years that has identified numerous risk and protective factors related to common youth problems (e.g., Hawkins, Catalano, & Miller, 1992; U.S. Department of Health and Human Services, 2001).

One limitation of the prevention approach is that it tends to be deficit-oriented, emphasizing youth problems (Benson, 1997; Pittman & Cahill, 1991), leading people to focus on what is wrong with youth rather than what is right. From a practitioner's view, this can be problematic because of the potential to stigmatize youth, undermine their motivation, or discourage them from becoming involved in programs at all. We believe that the most critical limitation of the approach is that it usually gives little attention to how to promote normative youth development. Although there are some exceptions (e.g., Cowen, 1994), most prevention programs that emphasize promoting positive characteristics do so primarily as a strategy to prevent a particular problem.

Another shortcoming of the prevention approach is the limited attention given to the relative importance of various risk and protective factors. Our review of program curricula related to prevention suggests that risk and protective factors often are viewed as equally influential. Prevention programs often give equal weight to factors that vary greatly in their strength of association and their malleability. As a general rule, the more proximal the process or influence is to the individual, the more powerful the effect (Bronfenbrenner, 1979). It is our observation that much of the available evidence on risk factors is correlational, which hampers our ability to determine whether a risk factor is simply a statistical marker or an explanatory, causal mechanism.

There also appears to be little recognition that a hypothesized risk or protective mechanism may not apply equally to all persons within a population. As O'Connor and Rutter (1996) point out, a risk mechanism may apply only to a subset of vulnerable individuals, and a protective process may be more effective for some individuals than for others. In addition, if we accept Rutter's (1987) conceptualization of protective processes as being specific to risk processes, then we must be more thoughtful about the protective processes targeted in interventions.

Resilience Approaches

The study of resilience emerged from the field of primary prevention when researchers observed that most children who experienced developmental adversity were not destined to develop problematic outcomes (Garmezy, 1993). The primary aim of resilience research has been to identify and understand those factors that distinguish individuals who demonstrate good adaptation when confronted with adversity from those who emerge with problem behaviors. Most scholars agree that two conditions must exist for resilience to be demonstrated: the experience of extreme stress or multiple stressors and the manifestation of successful adaptation or competence despite such stress (Bartelt, 1994; Masten, 2001; Rutter, 1987; Werner, 1993). These two factors represent a temporal arrangement of events that must be observed for resilience to be manifested.

The resilience approach has resulted in the development of initiatives designed to foster resilience among disadvantaged youth. Examples include such programs as Say It Straight (SIS), which targets individual communication skills (Englander-Golden et al., 1996), Families and Schools Together (FAST), which provides family skills training (McDonald et al., 1991), and the Resilient Youth Curriculum (Richardson & Nixon, 1997), which is aimed at helping youth avoid violence, drugs, and crime and promoting productive, responsible citizenship.

Early research on resilience focused on identifying children living in a variety of stressful situations (e.g., parental mental illness, urban poverty, community violence) and examining the personal qualities and social processes that differentiate between those who demonstrate successful adaptation from those who do not (Luthar, Cicchetti, & Becker, 2000). During these formative years, resilience often was characterized under the rubric of stress and coping research. For example, Rutter (1983) defined coping as "individual differences in children's responses to all manner of stressful events and resilience as part of this general topic" (p. 2). In recent years, research on resilience can be distinguished from coping by the greater emphasis that coping places on identifying the specific cognitive and behavioral efforts individuals employ to manage a stressful situation (Ayers, Sandler, & Twohey, 1998). Resilience approaches place a greater emphasis on identifying stable characteristics in the child or environment that serve to either aid an individual in weathering stressful situations or to permit the recovery or adaptation after a period of disorganization (Masten, 2001).

Recently the concept of resilience has been expanded from its original emphasis on individual development to include a broader focus addressing social institutions that foster development, such as the family (McCubbin, McCubbin, Thompson, Han, & Allen, 1997) and community (Center for Community Enterprise, 2000). For example, McCubbin and his colleagues view resiliency as the positive behavior patterns exhibited by both individuals and the family when they are able to recover in the face of adversity. In addition to viewing the family as possessing the potential to be

resilient, these scholars also make a conceptual distinction between protective factors that are associated with the family's ability to endure and recovery factors that are associated with the family's ability to regroup after a period of disorganization.

Strengths, Weaknesses, and Elaborations of the Resilience Approach

The appeal of the resilience approach rests largely on the hope that youth who experience severe stress or adversity can escape the associated negative consequences and develop into competent, problem-free individuals. However, progress in our understanding of resilience is hampered by the lack of consistency in its definition and the implications drawn from the various ways it is currently used. Some scholars define resilience so broadly that it loses its conceptual coherence as a unique construct. For example, Bernard (1996) has argued that "the development of resilience is none other than the process of healthy human development" which is based upon a "biological imperative for growth" that "unfolds naturally in the presence of certain environmental attributes" (p. 7). This position omits the necessary qualification that resilience can only be demonstrated within the context of severe adversity and glosses over the grim realities that afflict youth who fail to demonstrate resilience. The implication is that the concept of resilience can be broadly applied to anyone experiencing normative developmental stress.

Some critics argue that a resilience approach can result in a tendency to disregard environmental conditions (Tolan, 1996). For example, severe environmental stressors, such as homelessness and abuse, have a negative impact on even the hardest of youth (Hagan & McCarthy, 1997; Luster & Small, 1997). To ignore this fact and focus only on bolstering a person's resilience can place undue burden on the individual and create the potential for blaming the victim. In addition, an overemphasis on making the individual more resistant can divert attention from efforts to reduce the effects of contextual risk over which practitioners and policy makers may exert more influence.

Another concern is whether resilience is best conceptualized as a phenomenon that is robust across developmental domains or one that is more domain-specific (Luthar, 1993). In the early days of resilience research, individuals who appeared particularly stress-resistant and demonstrated successful adaptation despite exposure to severe adversity were identified as invulnerable or invincible (e.g., Anthony, 1974; Werner & Smith, 1982). The implication being that the factors that made these individuals resilient in one domain were assumed to transfer across most life situations. However, Rutter (1993) pointed out that it is misleading to assume that certain individuals are invulnerable, because this implies that a person possesses an unchanging intrinsic characteristic that imparts absolute resistance to damage in all risk circumstances. Instead, he emphasized that everyone is vulnerable to some degree of stress, and because the processes that foster resilience are as likely to reside in the social context as in the individual, they are likely to vary by context.

Based on the literature, we believe that resilience is best demonstrated when an individual both avoids problem behaviors and attains developmental expectations despite exposure to significant risk (Rutter, 1993; Masten, 1994). We posit that resilience results from a combination of at least four distinct processes that either allow the individual to retain those assets necessary for a person to display competence and thrive developmentally, or avoid the development of problem behaviors despite their

experience of risk. These processes are not mutually exclusive and may co-occur. Below, we elaborate on how these processes may operate and suggest some conceptual distinctions to bring greater clarity to the construct.

Resilience may result from the successful operation of protective processes. This is the most commonly studied pathway to resilience, because the processes responsible often are contextual and more easily manipulated. Protective processes operate to eliminate risk before damage is done, and serve to buffer an individual from the impact of a stressor or hazardous condition. They often are conceptualized as outside the volitional control of the individual, resulting instead from the actions of others or conditions in the environment. Therefore, unlike coping, which requires action on the part of the individual, we posit that protective processes can operate without the individual's knowledge or active involvement. However, in order for resilience to be manifested, the operation of protective processes must occur in conjunction with other processes that bolster assets or promote asset building.

Resilience may occur as a result of certain exceptional personal characteristics (e.g., intelligence or sociability). Such characteristics often are associated with an individual's innate abilities, unique temperament, or the result of an individual's developmental history. Assets within themselves, further serve to enable the individual to acquire the additional resources they may need to thrive developmentally and to perceive and avoid risks and hazards which may lead to negative outcomes. Although efforts can be made to develop these personal characteristics, our capacity to intervene sometimes is limited. Characteristics that have a strong genetic basis or that result from a long developmental history may be less amenable to intervention. However, knowledge of how such characteristics operate can be used to develop strategies that complement them or compensate for their absence.

Resilience also may be achieved by successfully recovering from a stressful situation or crisis event. In contrast to protective processes, recovery processes operate after a crisis event has occurred, and damage has been done to the individual or to the adaptational systems he or she relies upon for development. Recovery may require a variety of actions, including eliminating or reducing the number and intensity of demands created by the crisis, acquiring additional resources to aid the individual or family, using coping strategies for managing personal tension and stress, and reevaluating meanings related to a situation to make it more constructive, manageable, and acceptable (McCubbin et al., 1997).

Resilience may occur through the process of steeling. Steeling occurs when individuals overcome challenging experiences that strengthen their capacity to withstand subsequent stressful situations (Rutter, 1981, 2000; Rutter & Maughan, 1997). Unlike biologically based personal characteristics, steeling develops in response to prior experiences that challenge but do not overwhelm the individual and his or her resources. It can be compared to a technique used by gardeners to increase the hardiness of greenhouse plants prior to planting outdoors. By placing young plants outside for increasingly longer periods, plants grow stronger and are better able to withstand the harsher outdoor environment. Although there have been few empirical examinations of this process, Elder's (1974) seminal study, *Children of the Great Depression*, provides an example of how steeling may occur. He found that adolescent boys whose families were hardest hit by the Depression actually profited from the experience, doing better later in life than their peers who experienced less hardship. Apparently, the experience of

economic loss and deprivation “hardened” them by leading them to take on adult roles and responsibilities that resulted in later developmental benefits.

Positive Youth Development Approaches

A fairly recent approach that emphasizes the positive aspects of youth development and health has emerged among youth policy makers, programmers, and practitioners. This approach is especially popular with traditional youth-serving agencies that provide after school and nonformal educational programs and with communitywide initiatives that seek to foster youth development and youth involvement in the community. Positive youth development initiatives include the Search Institute’s Developmental Asset model (Benson, 1997), Public/Private Venture’s Community Change for Youth Development (Hartmann, Watson, & Kantore, 2001; Sipe, Ma, & Gambone, 1998), and the Center for Youth Development and Policy Research’s Youth Development Mobilization framework. In contrast to prevention approaches, these initiatives emphasize the promotion of positive development and the conditions that contribute to youth health and well-being. They emphasize that simply preventing problems is not enough to prepare youth for adulthood (Roth, Brooks-Gunn, Murray, & Foster, 1998).

Some confusion exists regarding the term positive youth development. As Whitlock and Hamilton (2001) noted, the term has been used in at least three ways: (a) to describe the natural process of development in children and adolescents; (b) as a category of programs and organizations that provide activities to promote youth development; and (c) as a unifying philosophy characterized by a positive, asset-building orientation that builds on strengths rather than categorizing youth according to their deficits. It is with this last definition that our interest lies. The asset-building orientation to fostering youth development is directly related to and has been influential in how organizations and community groups develop programs and community initiatives on behalf of youth (see Eccles & Gootman, 2002, for examples).

Drawing on the work of scholars in this area (Connell, Gambone, & Smith, 1998; Pittman & Irby, 1996; Pittman & Zeldin, 1995; Roth et al., 1998), the positive youth development approach is based on the following assumptions:

1. Helping youth achieve their full potential is the best way to prevent them from experiencing problems.
2. Youth need to experience a set of supports and opportunities to succeed.
3. Communities need to mobilize and build capacity to support the positive development of youth.
4. Youth should not be viewed as problems to be fixed, but as partners to be engaged and developed.

Scholars posit that there are a number of critical experiences, opportunities, and supports that young people need to develop successfully into adulthood. For example, Pittman and Irby (1996) argued that youth need seven critical “inputs:” stable places, basic care and services, healthy relationships with peers and adults, high expectations and standards, role models, resources and networks, challenging experiences and opportunities to participate and contribute, and high-quality instruction and training. Zeldin, Kimball, and Price (1995) suggested that what youth need can be reduced to three critical things: safe places, challenging experiences, and caring people.

One of the most widespread and influential positive youth development frameworks is the Search Institute’s Developmental Assets model (Benson, 1997). This model is built around 40 developmental assets defined as the building blocks that are crucial for promoting healthy youth development and well-being (Benson, Leffert, Scales, & Blyth, 1998). According to the Search Institute, assets center on the relationships, social environments, patterns of interactions, and norms that are central to promoting youth development. The 40 developmental assets in the Search model are divided into internal and external assets that are categorized into 7 different types: support, empowerment, boundaries and expectations, constructive use of time, commitment to learning, positive values, and social competence.

A recent variant of positive youth development is the community youth development approach (Hughes, & Curnan; 2000; Perkins, Borden, & Villarruel, 2001). Community youth development builds on the positive youth development model, adding an emphasis on engaging young people as contributors to and active shapers of their communities. As Perkins et al. noted, “community youth development shifts the emphasis from a dual focus on youth being problem-free and fully prepared, to a triadic focus for youth being problem-free, fully prepared and engaged partners” (p. 41).

Strengths, Weaknesses, and Elaborations of the Positive Youth Development Approach

The current appeal of the positive youth development approach stems from a number of factors. First, by promoting assets, the positive youth development approach has relevance for all youth, rather than just certain targeted groups. Thus, it has wider appeal than public health, juvenile justice, and prevention approaches, which focus primarily on groups or individuals at risk for specific problems and typically ignore both the developmental needs of youth in general and the skills and attitudes they must acquire to become responsible and capable adults.

Secondly, it is our experience that politically it is often safer to identify and confirm what is right about young people than to come to agreement about what is wrong with them. Reaching consensus about whether a social problem exists, is worthy of attention, or how it should be addressed, can be politically complex. In contrast, a broad, strengths-based, positive focus on youth development provides an attractive conceptualization around which politically and institutionally different groups, programs, and organizations can unite.

Finally, an asset-based framework can be helpful to youth practitioners and community leaders. We see it providing a common language and an easy to understand framework for thinking about and planning youth development programs and policies.

We believe that the positive youth development is not without shortcomings. For example, the approach tends to overlook the fact that youth face risks that can jeopardize their health and development if not addressed. We have found in our own work (Memmo & Small, 2003) that, although the likelihood of a problem behavior steadily decreases as the number of assets an individual possesses increase, the presence of even one risk factor can double or triple the occurrence of a problem behavior, even among youth who report many assets.

Further, as with the prevention approach, little discussion has occurred among those who promote the youth development approach regarding the relative importance of particular assets. Typically, all assets are viewed as equally significant. However, our research (Memmo & Small, 2003) shows that certain assets are

more important than others, and that the significance of a particular asset is likely to vary as a function of both individual and contextual factors (e.g., developmental status, ethnicity, historical context, community conditions) and the developmental outcome. In addition, all assets are not equally amenable to change. Some assets are more easily promoted because of a better understanding of the change processes involved, the availability of the community resources and expertise needed, or because the political climate in the community is more receptive to addressing the factor.

Compared with other models, the Search Institute's Developmental Assets model is more detailed, has been more widely written about, and incorporates a survey process that permits documentation of assets in a particular community. It also has a simplicity that makes it easy to understand and apply. However, this same simplicity can diminish its value to guide research and practice. Because assets are operationalized broadly, they are sometimes too inclusive, often incorporating protective factors, the absence of risk factors, coping processes, recovery factors, developmental resources, and developmental outcomes. This tendency to include most things as assets stands in contrast to the Search Institute's definition of an asset, which is more limited: building blocks that are crucial for promoting healthy youth development and well-being (Benson, Leffert, Scales, & Blyth, 1998). Operationalizing assets broadly dilutes their usefulness as both a theoretical construct and as practical strategy. As discussed here, there are important differences between risk and protective factors and processes, coping strategies, and developmental assets. Failing to recognize these conceptual distinctions oversimplifies the complex processes that they entail and limits our understanding. From a practical perspective, policy makers and practitioners must recognize and understand the different strategies that stem from these unique concepts. For instance, building assets through enhancing a community's infrastructure is a different strategy from reducing risks by increasing legal sanctions or reducing the drug supply.

General Implications

We now discuss some implications that are derived from our examination of these youth development approaches. Although our emphasis is primarily on youth development, we believe that many of the implications we note have wider relevance for family researchers, practitioners, and policy makers interested in understanding and promoting family well-being and human development across the lifespan.

Knowledge Is Cumulative

Although the field of youth development and problem prevention has evolved significantly over the past 25 years, there has been a tendency among practitioners and policy makers to view innovations in a noncumulative way, seeing each as a unique and unrelated approach. There is a surprising lack of awareness of the historical connections among the models. Our observation is that it is not uncommon for practitioners and policy makers to embrace particular approaches while ignoring or even disparaging others. An essential feature of scientific knowledge is its cumulative nature. New insights are built upon the discoveries and innovations of earlier ones. Unfortunately, scholars and practitioners sometimes fail to recognize this, ignoring or discarding older approaches and findings in

light of new ones. In doing so, they may overemphasize what is new and fail to attend to the lessons of the past.

All youth development approaches possess both strengths and weaknesses. We see our responsibility as scholars and practitioners to examine each carefully and embrace and build on those innovations and ideas that are supported by the research. At the same time, we must guard against the weaknesses and limitations of particular approaches, so we do not waste time and resources on ineffective or harmful strategies. By building on existing knowledge and carefully testing new ideas, a constantly expanding knowledge base will develop that is both useful and reliable. However, as we do this, we must not forget our earlier lessons.

Agreeing on Our Terminology Is Important

A significant problem has been the lack of consensus regarding the appropriate terminology to designate key constructs. When terms like resilience are used to represent different concepts, their usefulness is reduced and confusion increases. Precision also is lost, and with it, important distinctions that have implications for what is done. New concepts surface because existing terms are inadequate. We think that there is value in using terms as originally defined and not expanding or corrupting their meaning. We advocate for agreement on definition of terms as the first step in creating a unified science and practice of youth development.

Self-Interest Can Blind Us to Other Possibilities

There is a natural, self-preserving tendency for people and organizations to have vested interests in the particular models and approaches with which they are working. These interests influence how problems are defined and approaches are applied. Because a lack of awareness of how self-interests can bias definitions of problems, self-interests may blind people to other ways of seeing an issue and the potential benefits of alternative strategies. For example, adolescent drug abuse may be viewed by law enforcement as a need to reduce the drug supply. Health educators may view this problem as a lack of programs that effectively educate young people about the dangers of drug use. Practitioners with a resiliency orientation may see the problem as a need to enhance the abilities of youth, by teaching skills to resist the pressure to use drugs. Because of a tendency to define problems in ways that are consistent with one's expertise and professional roles, other equally (or more) effective approaches may be ignored.

There Is No One Best Approach

We believe that alone, all three approaches discussed here are incomplete. Each addresses a unique and vital part of a comprehensive youth development strategy. Given the diversity among youth and their families, the complexity of the process of human development, and the dynamic nature of community life, no single approach is adequate to address all of these challenges. Our concern is that too often, a limited degree of success using one approach may blind people to the potential that exists when more than one approach is used.

We believe that all three youth development approaches have a place in youth policy and practice. In fact, a broad-based approach that includes a variety of strategies is apt to have the best chance of improving the life chances of youth (Connell & Kubisch, 2001; Eccles & Gootman, 2002). For example, a preventive approach is appropriate if the goal is to reduce the chances that youth succumb to problems that can derail their development.

Similarly, building resiliency among youth is a worthy strategy, especially for those who live in dangerous environments that are not easily changed. However, even when comprehensive programs succeed at reducing risk and building resiliency, we suggest that it is still necessary to provide youth with the supports and opportunities that contribute to their healthy development. Building assets and empowering youth to take advantage of growth-enhancing experiences can contribute to their well-being and the health of our communities (Benson, 1997; Perkins, Border, & Villarruel, 2001). Thus, we advocate for a comprehensive, community-based approach that includes aspects of each of these strategies, because such an approach is most apt to address the needs of the widest range of individuals. In addition, it is likely to contribute to synergistic effects that result in benefits which exceed the sum of the parts (Small & Supple, 2001).

Be Strategic About Where To Begin

If the ultimate goal is to develop a comprehensive, community-based infrastructure, it is impossible for any one organization or agency to do it all, or for a community-wide coalition to do everything at once. Settling on where to begin is the first step in building a comprehensive strategy. Deciding which individual approach is best in a given situation depends on the focal issue and the context. Issues are the problems or concerns to be addressed. Context includes the history, politics, and values of the community, the mission of the particular organization or agency, and the programs and supports that exist. Some issues lend themselves to certain approaches more so than others. For example, if the immediate concern is the spread of AIDS and STDs, a preventive approach is a more appropriate place to begin. Of course, this would not preclude also initiating a more broad-based positive youth development strategy that addresses the more general developmental needs of local youth. The identification of issues also depends on the context in which they are found. For example, some communities are more ready and willing to acknowledge youth problems and to develop strategies that address them. Other communities may have difficulty reaching consensus about the existence of a problem and whether the community has a responsibility to address it. Still other communities may find it easier to rally community support around the more optimistic and less controversial goal of positive youth development. In addition, agencies and organizations may have specific mandates or missions that can make it difficult for the adoption of certain approaches. Though understandable, they can contribute to the problem when an organization continues to provide programs or services based largely on a mission or tradition that has become obsolete, rather than adapting its goals and strategies to better meet the changing needs of the community and its youth.

Identify and Address Underlying Processes

It is important to differentiate between factors and processes when the goal is to reduce risk, foster protection, or build assets. To make a difference, we must identify and understand the mechanisms or processes that help explain a problem, the factors that contribute to its reduction, and the strategies that facilitate positive adaptation and development. Although identifying asset markers, and risk and protective factors provides insight, enhancing development and reducing problems will not result without identifying and addressing the underlying processes.

This identification of underlying processes is crucial to program designers and practitioners interested in creating interventions that lead to positive change. For example, the practice of targeting risk factors that only are proxies for underlying risk processes is seldom fruitful. Instead, adopting the strategy of looking for the explanatory causal mechanisms and addressing them in a tactical manner is more likely to yield successful results (O'Connor & Rutter, 1996). This strategy is applicable regardless of whether one's interest is risk reduction, protection, resilience, or asset building.

Target Factors Strategically

In both the prevention and positive youth development literatures, distinctions rarely are made about the importance of particular assets or risk factors. Program designs and policy decisions must consider which factors are most important and whether they can be addressed realistically. The importance of a factor can be assessed on a number of criteria, including how strongly it is related to the outcome of interest, how much is known about the underlying mechanism, how easily the factor can be changed, and whether efforts to address a factor are politically feasible.

A simple examination of effect size can provide a starting place for determining which assets or risk factors are most important for the prediction of particular outcomes. For example, in our own work (Memmo & Small, 2003) we distinguished between simple assets and "critical assets" (those assets that are most strongly related to the developmental outcomes of interest within a particular context). We found that we can maximize our statistical prediction of a general measure of positive youth development with a subset of critical assets. In other words, in our model, 11 critical assets statistically predicted our outcome as well as did using all 25 assets.

As a general rule, the literature suggests that the more proximal (and direct) a process is to an individual, the more influential it is likely to be in affecting development and behavior (Bronfenbrenner, 1979). For example, family factors (e.g., parenting practices) tend to be more strongly related to adolescent behavior than are distal factors (e.g., media or the economy). Consequently, when considering factors to target for intervention, it is often expedient to select those that are closely tied to the individual's immediate environment.

We also need to take into account the contextual relevance of individual factors, because a particular process may have more relevance or impact under certain conditions such as a specific community or cultural context. For example, we found that a key developmental asset for a number of youth outcomes is perceiving the community as a safe place (Memmo & Small, 2003). Although the statistical relationship between this variable and positive youth outcomes held across most communities, there was wide variability in how safe youth perceived a particular community to be. Consequently, the goal of increasing community safety for youth should be a higher priority in dangerous communities than in those where most youth feel safe.

Some assets and risk processes are more amenable to change than are others, and we need to consider whether the current knowledge, change technologies, and resources needed to promote or change a particular process are available. For instance, it is a significant leap from knowing that certain parenting practices that naturally occur are related to particular developmental outcomes to knowing how to change the behaviors of parents who do not typically use these practices.

Finally, community values and political climate also need be considered. Communities vary greatly in their readiness to address particular social issues. Based on a community's history, values, and political climate, some approaches will garner greater support. For example, although a school-based health clinic might be an effective way to increase adolescent contraceptive use and provide youth with better access to health care, such a strategy is less likely to receive support and succeed in a religious or politically conservative community.

Conclusion

Our review of the literature leads us to conclude that there is no single best approach to addressing all issues related to youth development and problem prevention. Efforts based on prevention, resilience, or positive youth development approaches each have a place in practice, programming, and policy making. Whether a particular approach is appropriate depends on the issue being addressed, the populations targeted, and the community context. Our view is that a comprehensive community strategy for youth development ultimately should include some aspects of all three of these approaches. As we have noted, each approach has both strengths and weaknesses. Therefore, researchers, practitioners, and policy makers must bring a critical eye to how they interpret and apply a particular approach, recognizing that there will be new innovations as some ideas and practices become obsolete. Finally, if the field of youth development is to mature into a unified discipline, more consistent use of terminology is needed, as is work toward developing a more integrated conceptual framework and creating more opportunities for dialogue among both practitioners and researchers. We hope that our ideas offer a first step in that process.

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