

**Contribution of Positive Youth Development to the Understanding of Adolescent
Behaviour**

Sneha Saha

Certificate Course in Research Methodology

Alexis Institute Initiative

An Autonomous Centre of Alexis Foundation

September 2016-November 2016

PREFACE

“From Problem Child to Potential Child”

This book has been designed around the quote “From Problem Child to Potential Child”. This book efficiently addresses the Gen Y issues and motivate them towards a holistic development towards adulthood. Throughout this book writing experience, it was witnessed that youths today specifically adolescents (who need adult guidance and supervision in comparison to adult youths) harbor a lot of potential within themselves but due to the traditional expectations and biological changes, these potentials are often subdued and the adolescent youths are only viewed for their problems. We live in a much changed world, after the technological upliftment has taken place. Adolescents are exposed to a lifestyle that was traditionally adult oriented and previously a rightful passage with the help of elders allowed them to enjoy this lifestyle. At least in terms of technological advancements, co-curricular activities, student exposure and academic enrichment schools and parents have progressively constructed some solid base ground. But after the academic security of the adolescents, a psychological security and wellbeing remains a big point in education sector and youth development unit. Most of the government policies and political parties are youth oriented, education sector is booming on youth population and our country possess the highest youth ration in the world, but somewhere down the line almost everyone has overlooked on the psychological properties of youth and how these properties can contribute towards building or demolishing a youth force. Psychology plays a pivotal role in survival and living. It is an engine that propels all survival mechanisms. Without good psychological wellbeing one might find themselves to be gasping for approval, lack of confidence and no success in crossing milestones of livelihood. In a more grave turn, without good psychological wellbeing, one might find themselves in crossfire with mental illness as well. Thus psychological wellbeing is a necessity and not an option for a healthy survival in this world.

Contribution of Positive Youth Development to the Understanding of Adolescent Behaviour serves as a remarkable platform to understand adolescents from Gen Y perspective and showcases a unique system that would help these adolescents realize their own potentials. This book lays foundation towards the study of Positive Youth Development, its importance and applications in India. The present study focuses on the concept of positive youth development (PYD) and its contribution in understanding adolescent behavior. The

core objective incurred during the research process was to assess the dimensions of Positive Youth Development among adolescents and its effect on adolescent problem behaviour. Several sub-objectives incurred during this research process were Gender differences in Positive Youth Development, Behavioral specificity of adolescents and interventional properties of Positive Youth Development. Exploratory research designed was used to assess the dynamics of positive youth development in 100 adolescents (age 16-18years). The obtained data have been analyzed using descriptive statistics like Mean, Standard Deviation (SD), and Independent sample t test. Data analysis was aided by SPSS software. These adolescents were selected and treated with Positive Youth Development short intervention to practically assess the effects on adolescent behavior.

This book has been purposefully researched and written to corroborate the insights into adolescent minds and behaviours. It aims to understand the risk and protective factors in adolescent development. This book is primarily addressed to educators, researchers and policy makers who play a very important role in the growth and development of an adolescent. An understanding of psychological processes, as one of the basic factors that influence behavior will help them provide for better means of meeting the complex needs of adolescents with varied mental abilities, and physical and emotional make-ups.

ACKNOWLEDGEMENTS

This book holds a very special place in my life, primarily because it's my first. I have aspired to write a book for some time now and what better way to start with one which has been a special journey and experience all together. I want to thank Alexis Institute Initiative, Alexis Foundation for providing me with an opportunity to complete my vision. This course has been a rigorous journey to sharpen my research skills and contributing towards the community.

There is an array of people to whom I am unconditionally thankful for everything. It is not about their contribution to this journey in specific, it is about how glad I am that they are a part of my journey called life. They have been there when I was a nobody and loved me throughout, and now when am on the verge of writing my first book, they are the ones who are the proudest and most supportive of all. My father, Mr. Snigdha Kr Saha and my mother Mrs. Chhaya Saha have been the ideal parents a child needs while growing up. They have been always there to boost me to do things which I was certain that I won't be able to complete. My younger sister, Ms. Shreya Saha who always has been like elder sister to me, taking major responsibilities and caring when she knows I need academic time. My fiancé, Mr. Anubhav Pratap, who has been a wonderful companion and support system for 10 years now; without him it would have been difficult to come the long way that I have come today. His confidence in me and patience while I go bonkers with all my energy is what that has kept me sane throughout. Being thankful and saying thank you are small gestures to what these gems of my life keep doing for me.

There could not have been a better topic to write this book on. My doctoral degree is based on the concept of positive youth development, and lately wherever I go, whatever I do positive youth development is on what I want to focus all my energy on. In this essence I would like to thank the entire team of Shri Ramswaroop Memorial University including my dearest supervisor Dr. Priyanka Shukla for providing me with a platform to achieve my research aspirations and contribute to the society.

I am utterly thankful to the world of technology for providing every aid on just one click. The accessibility of helpful tools at any time of the day has been a boon to researchers like us. Search

Engines like Google, and applications like Word, Mailing Systems and Adobe has made a better researcher out of me.

I would like to thank the research libraries at IIM- Lucknow, IIT-Delhi and ICSSR-Delhi, for their updated and technology savvy libraries that has been definitive to complete an honest research review.

A huge heartfelt thanks goes to the participants and schools that have participated in this research. Without their support this research would not have shaped. It was a great experience to work with these young and enthusiastic adolescents, and am happy my research gave them zeal to enjoy life.

CONTENTS

Preface.....	02
Acknowledgement.....	04
1. Introduction.....	06
1.1 Adolescent Behaviour.....	07
1.3 Risk and Protective Factors in Adolescence.....	13
1.3 Positive Youth Development.....	15
1.4 Positive Youth Development: Program Characteristics.....	17
1.5 Positive Youth Development: Models.....	19
2. Literature Review.....	24
2.1 Historical Perspective.....	26
2.2 Adolescent Behavior.....	29
2.3 Positive Youth Development.....	31
2.4 Positive Youth Development Interventions and Adolescent Behaviour.....	36
2.5 Significance of the research.....	37
3. Research Methodology	39
3.1 Pilot Study.....	39
3.2 Aim of the Study.....	39
3.3 Sampling.....	40
3.4 Hypotheses.....	40
3.5 Instrumentation.....	40
3. 6 Procedure.....	41
3.7 Research Design.....	41
3.8 Data Analysis.....	41
3.9 Intervention.....	41
3.10 Result.....	42

3.10.A Plan of analysis.....	42
3.10.B Intervention effects.....	42
Table 1: Showing gender differences calculated by t-testing.....	43
Table 2 Descriptive Statistics and Results of Analyses of Intervention Effects on Adolescents.....	43
4. Discussion and Conclusions.....	44
4.1 Discussion.....	45
4.2 Unaddressed Issues.....	47
4.3 Possible Solutions.....	48
4.4 Conclusion.....	49

References

Chapter 1

Introduction

Almost every newspaper on an average carries sensational headlines related to the adolescent on daily basis. The headlines vary from : “15 year old rapes 5 year old niece”, What verves within the reader’s psyche is where is this generation going?, How come these kids are not controlled by their parents and authorities? And the most common it is all because of mobile, laptops and internet. People actually living and working (parents and teacher) with adolescents realize how different these kids are from the time they were a kid. These analogies and reflections are common worldwide, all the adults understand that kids today are a different story all together. This research attempts to focus on these “changes” in adolescents. Although biological and sociological factors have been previously researched, the psychological factors remain under the radar for research purposes. Most of the headlines mentioned earlier shows behavioural abnormalities among adolescents, an issue largely effected by psychological processes. This research aims to highlight, the behavioral tendencies of adolescents and closely work with behavioural modifications through positive youth development interventions.

Adolescents are among the most vulnerable of the total Indian population. To the extent that they are born into broken homes, abused or neglected, or exhibit mental problems like that of depression, anxiety, developmental disorders, learning disabilities, substance abuse, conduct disorders, Indian adolescents are both themselves and affect the future of India as a nation. The data that exist on mental health problems suggest that Indian adolescents have more serious mental health problems than the U.S. all races population with respect to: developmental disabilities, such as mental retardation and learning disabilities; depression; suicide; anxiety; alcohol and substance abuse; self-esteem and alienation; running away; and school dropout. While the causes of mental health problems are not known with certainty, the life situations of many Indian adolescents are filled with stressors that can lead to emotional distress and serious mental and behavioral problems. These stressors include (in addition to those listed above): recurrent otitis media and its consequences for learning disabilities and psychosocial deficits; fetal alcohol syndrome and its consequences for mental retardation and less severe forms of developmental disabilities, as well as psychosocial deficits; physical and sexual abuse and neglect; parental alcoholism; family disruption; and poor school environments (OTA Special Report).

Adolescents face a number of challenges. The literature indicates that at the individual level, early marriage, early and unsafe initiation into sexual activities and consequently early childbearing, limited knowledge about and access to contraception, unwanted pregnancies and lack of access to safe abortion services, exposure to sexually transmitted infections, and lack of autonomy and gender-based power imbalances exacerbate young people's vulnerabilities. At the family or household level, the barriers include lack of family support, unequal gender norms and limited communication between parents and adolescents on sexual and reproductive health related matters. Additionally, laws that aim to protect the young - like the prevention of early marriage, sexual harassment, rape, sex selection, prohibition of dowry - are not implemented to their fullest extent (UNICEF, 2013). This is of particular concern given the sheer number of young people in India—an estimated 31% (358 mn) of national population is aged between 10-24 years and almost 22% comprise of 10- 19 year olds (242 mn) (Office of the Registrar General and Census Commissioner of India 2006). It is expected that about 50% population will be living in urban areas in the country in next two decades. The urbanization brings deleterious consequences for mental health through the influence of increased stressors and factors such as overcrowded and polluted environment, dependence on a cash economy, high levels of violence, and reduced social support. There is considerable stigma attached with mental disorders and ignorance regarding information about mental illness and available help and treatment. The mental health care in urban areas is at present limited to psychiatric hospitals and departments of psychiatry in medical colleges. Mental health problems at early stage remain unrecognized and untreated. There is tendency to conceal even severe psychiatric problems due to stigma (WHO).

This chapter aims to introduce the concepts of positive youth development and adolescent behavior for a better understanding of the psychological issues underling adolescent development. After reading this chapter the reader will be insightful towards a new arena in adolescent development and will be able to navigate through this book effortlessly.

1.1 Adolescent Behaviour

Adolescent (a person aged between 10-19 years) + **Behaviour** (acting or conducting oneself) = Actions and Conduction in specificity to a person aging between 10-19 years

Behaviour has been universally studied on living (human and animals) and nonliving (machines) things to understand how they react to a specific stimulus through their actions and conduction. Various scholars have researched and addressed the issue of human behavior in varied perspectives:

- For a sociology scholar behavior is primarily derived from societal relationships and dynamics.
- For an anthropology scholar behavior is determined by numerous factors in the genes and inheritance.
- For a law scholar behavior is largely based on social laws set out by authorities.
- For an economics scholar behavior is based on survival and flourishing.
- For a biology scholar behavior is largely determined by the physical structure of the brain.
- For a psychology scholar behavior is primarily based on the mind and its processes.

A psychological perspective to behavior will be the core to this chapter and book. A holistic definition for behavior has been introduced by Descriptive Psychology, where an equation has been formulated to elaborate behavior. Descriptive Psychology focuses on empirical domain of behavior – the set that has as its members all behaviors and possible behaviors – can best be captured for scientific purposes by employing a formulation that includes eight parameters:

$$(B) = (I, W, K, K-H, P, A, PC, S)$$

Where,

B= Behavior (e.g., the behavior of Peter moving his rook during a chess match)

I= Identity, the identity of the person whose behavior it is; an aspect of every behavior is that it is someone's behavior (e.g., Peter)

W= Want (the motivational parameter), the state of affairs that the person seeks to bring about; an aspect of every behavior is that it is an attempt to bring about some state of affairs (e.g., to achieve an improved strategic position in the chess match)

K= Know (the cognitive parameter): the distinctions (concepts) that are being acted on; an aspect of every behavior is that it is a case of acting on distinctions (e.g., rook vs. queen, knight, etc.; permissible rook movements vs. nonpermissible ones)

K-H=Know-How (the skill or competency parameter): an aspect of every behavior is that it entails the here and now exercise of some broader or more general competency or competencies (e.g., when Peter makes his move, he exercises his general ability to move the various chess pieces in the manner appropriate to each)

P=Performance: the process, or procedural aspects of the behavior, including all bodily postures, movements, and processes that are involved in the behavior; an aspect of every behavior is that it involves the occurrence of physical processes, which processes can in principle be described at any level of analysis appropriate to the describer's needs, ranging from the very molar to the very molecular (e.g., Peter's grasping and moving the rook, or the relevant brain events transpiring as he does so).

A=Achievement: (the outcome parameter): an aspect of every behavior is that it is the bringing about of some outcome – something is different by virtue of the behavior having occurred (which may or may not coincide with the desired state of affairs specified in W) (e.g., Peter's rook being in a new position; his opponent being in check)

PC= Personal Characteristics (the individual difference parameter): an aspect of every behavior is that in its enactment personal characteristics of the behavior are expressed; these may include Dispositions (Traits, Attitudes, Interests, Styles, Values), Powers (Abilities, Knowledge), and/or Derivatives (Capacities, Embodiments, States, Statuses) (e.g., Peter's competitiveness, knowledge of chess, or tendency to prefer bold, unexpected moves)

S= Significance: what the person is doing by doing the concrete thing he or she is doing; the more inclusive pattern of behavior enacted by virtue of enacting the behavior in question (e.g., by making his concrete, specific move of relocating a piece of onyx from one square to another on a board, Peter is “making a chess move” and “participating in the broader social practice of playing chess”; depending on the context, he might also be gaining revenge for an earlier defeat, teaching his child the game of chess, or trying to show the world that a grand master can defeat a computer at the game of chess).

What seems to be unique about this definition is the fact that all other definitions include only the overt observable behaviors of a person, but in this definition the component of mind and mental processes underlying a behavior have been included as well. This perspective to the definition of behavior can be considered exclusive to human behavior.

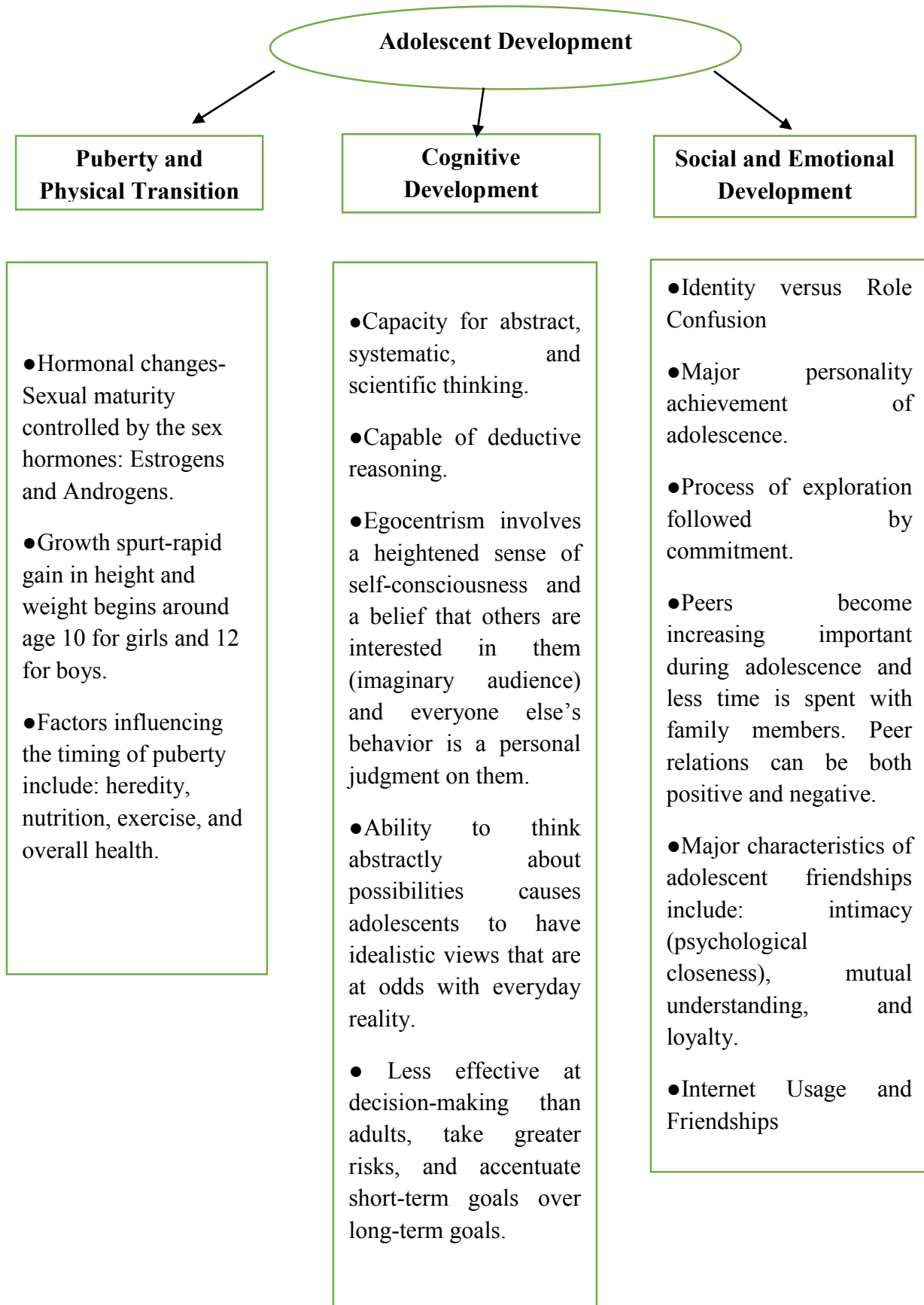
Human behavior in general is a very complex domain to define, specifically because there exists various milestones in a human life expectancy and each milestone offers a different explanation and characteristic to the human behavior. A human life is made up of the following milestones (Thomas Armstrong, 2008):

1. **Prebirth: Potential** – The child who has not yet been born could become anything – a Michaelangelo, a Shakespeare, a Martin Luther King – and thus holds for all of humanity the principle of what we all may yet become in our lives.
2. **Birth: Hope** – When a child is born, it instills in its parents and other caregivers a sense of optimism; a sense that this new life may bring something new and special into the world. Hence, the newborn represents the sense of hope that we all nourish inside of ourselves to make the world a better place.
3. **Infancy (Ages 0-3): Vitality** – The infant is a vibrant and seemingly unlimited source of energy. Babies thus represent the inner dynamo of humanity, ever fueling the fires of the human life cycle with new channels of psychic power.
4. **Early Childhood (Ages 3-6): Playfulness** – When young children play, they recreate the world anew. They take what is and combine it with the what is possible to fashion events that have never been seen before in the history of the world. As such, they embody the principle of innovation and transformation that underlies every single creative act that has occurred in the course of civilization.
5. **Middle Childhood (Ages 6-8): Imagination** – In middle childhood, the sense of an inner subjective self develops for the first time, and this self is alive with images taken in from the outer world, and brought up from the depths of the unconscious. This imagination serves as a source of creative inspiration in later life for artists, writers, scientists, and anyone else who finds their days and nights enriched for having nurtured a deep inner life.
6. **Late Childhood (Ages 9-11): Ingenuity** – Older children have acquired a wide range of social and technical skills that enable them to come up with marvelous strategies and inventive solutions for dealing with the increasing pressures that society places on them. This principle of ingenuity lives on in that part of ourselves that ever seeks new ways to solve practical problems and cope with everyday responsibilities.

7. **Adolescence (Ages 12-20): Passion** - The biological event of puberty unleashes a powerful set of changes in the adolescent body that reflect themselves in a teenager's sexual, emotional, cultural, and/or spiritual passion. Adolescence passion thus represents a significant touchstone for anyone who is seeking to reconnect with their deepest inner zeal for life.
8. **Early Adulthood (Ages 20-35): Enterprise** – It takes enterprise for young adults to accomplish their many responsibilities, including finding a home and mate, establishing a family or circle of friends, and/or getting a good job. This principle of enterprise thus serves us at any stage of life when we need to go out into the world and make our mark.
9. **Midlife (Ages 35-50): Contemplation** – After many years in young adulthood of following society's scripts for creating a life, people in midlife often take a break from worldly responsibilities to reflect upon the deeper meaning of their lives, the better to forge ahead with new understanding. This element of contemplation represents an important resource that we can all draw upon to deepen and enrich our lives at any age.
10. **Mature Adulthood (Ages 50-80): Benevolence** – Those in mature adulthood have raised families, established themselves in their work life, and become contributors to the betterment of society through volunteerism, mentorships, and other forms of philanthropy. All of humanity benefits from their benevolence. Moreover, we all can learn from their example to give more of ourselves to others.
11. **Late Adulthood (Age 80+): Wisdom** – Those with long lives have acquired a rich repository of experiences that they can use to help guide others. Elders thus represent the source of wisdom that exists in each of us, helping us to avoid the mistakes of the past while reaping the benefits of life's lessons.
12. **Death & Dying: Life** – Those in our lives who are dying, or who have died, teach us about the value of living. They remind us not to take our lives for granted, but to live each moment of life to its fullest, and to remember that our own small lives form of a part of a greater whole.

As described in these stages, each stage is unique and holds a key to the survival and wellbeing of a human's life. The stage of adolescence is viewed differently because it is Multidirectional, Multicontextual, Multicultural and Multidisciplinary. Within the stage of adolescence there are many milestones that an

adolescent has to experience and cope with. The following flowchart provides an overview on the major milestones of development in adolescence.



1.2 Risk and Protective Factors in Adolescence

As a child enters into adolescence, there are many transitions to face; it starts with the physical transition to the cognition development and engaging in social and moral responsibilities. Amidst of these transitions there are many factors that act as a catalyst or barrier to the developmental competencies. The catalysts in the developmental competencies of an adolescent can be defined as the factors that enhance their competencies and skills. These catalysts are theoretically called “Protective Factors”. The barriers to the developmental competencies of an adolescent can be defined as the factors that hinders the natural competencies and encourage negative behaviors and mind processes. These barriers are theoretically called “Risk Factors”. By definition, factors are called “protective” if they discourage one or more behaviours that might lead to negative health outcomes (e.g., having sex with many partners) or encourage behaviours that might prevent a negative health outcome (e.g., using condoms and contraception). Similarly, factors are labelled “risk” if they either encourage or are associated with one or more behaviours that might lead to a negative health outcome or discourage behaviours that might prevent them (Kirby, 2002).

Protective factors include an amalgamation of individual, parental and authority support towards an adolescent to encourage positive and enforced behaviors. These protective factors may include unconditional love, support, societal connectedness, empathy and guidance etc. Protective factors also include the tendency of an adolescent to avoid negative consequences and cope with the stressors effortlessly.

A risk factor is any attribute, characteristic or exposure of an individual that increases the likelihood of developing a disease or injury. Risk factors include factors that motivates negatives manners and behaviors in adolescents. These can be any behavioral, hereditary, environmental, or other consideration which increases the likelihood of becoming involved in dangerous situations.

Risk and protective factors can affect children at different stages of their lives. At each stage, risks occur that can be changed through prevention intervention. Early childhood risks, such as aggressive behavior, can be changed or prevented with family, school, and community interventions that focus on helping children develop appropriate, positive behaviors. If not addressed, negative behaviors can lead to more risks, such as academic failure and social difficulties, which put children at further risk for later drug abuse.

In Broadening the Horizon, CAH commissioned analyses from developing country datasets exploring risk and protective factors for youth health. These findings together with research from industrialized countries suggest a set of critical factors yet to be well researched and published in the developing country literature:

School

- Connection to school
- Teacher expectations and support
- being treated fairly

Peers

- Social isolation
- perceived vs. actual peer behaviour
- Prejudice
- Positive peer models

Family

- Connection to parents

- Family size/child spacing

- parenting styles

- Domestic violence

- Family mental illness

- Single parent

Community

- Community/cultural norms, values expectations
- Media exposure
- Migration
- Role models

Some risk and protective factors are fixed: they don't change over time. Other risk and protective factors are considered variable and can change over time. **Variable risk factors** include income level, peer group, adverse childhood experiences (ACEs), and employment status.

Individual-level risk factors may include a person's genetic predisposition to addiction or exposure to alcohol prenatally.

Individual-level protective factors might include positive self-image, self-control, or social competence.

The presence or absence and various combinations of protective and risk factors contribute to the mental health of youth. Identifying protective and risk factors in youth may guide the prevention and intervention strategies to pursue with them. Protective and risk factors may also influence the course mental health

disorders might take if present. The following table elucidates the risk factors and their resultant protective factors in various domains.

Risk Factors	Domain	Protective Factors
Early Aggressive Behavior	Individual	Self-Control
Lack of Parental Supervision	Family	Parental Monitoring
Substance Abuse	Peer	Academic Competence
Drug Availability	School	Anti-drug Use Policies
Poverty	Community	Strong Neighborhood Attachment

Source: <https://www.drugabuse.gov/publications/preventing-drug-abuse-among-children-adolescents/chapter-1-risk-factors-protective-factors/what-are-risk-factors>

1.3 Positive Youth Development

Youths have always been best described by the metaphor of wet clay, which can be molded best by the parents, teachers, and other responsible and concerned adults in their lives. This metaphor has been strongly used in terms of understanding a youth and their related problems like that of problem behavior, risk behavior, substance abuse, teenage pregnancy, suicide and addiction. For most part of the psychological researches, focus has been laid on “what went wrong with this molding”, whether it was parental misguidance, cultural shift or educational lacking. Researchers and clinicians viewed adolescence as a time of “sturm und drang” (storm and stress), in which emotional turmoil was a necessary step toward maturity. Hall (1904) interpreted each person’s maturation as a retelling of how mankind as a whole evolved from primitive beasts to civilized social animals, with the teenage years reflecting a critical point in that story of transformation. Anna Freud (1969) wrote of emotional upheavals within adolescents and in their close relationships with family and friends. Erik Erikson (1959) described the adolescent’s identity crisis as he or she struggled to achieve a more mature sense of self. In short, early researchers and clinicians alike based their observations and theories on the underlying assumption that adolescents are inherently “at risk” for behaving in uncivilized or

problematic ways; they were “broken” in some way, and needed repair. There were problems to be managed (Roth & Brooks-Gunn, 2003). In contrary to the age old viewpoints, emergence of positive psychology advocated positivity and capacities of adolescents to be a fully functioning mind. These advocacies led to the introduction of positive youth development programs, where youth were given an efficient environment to grow and flourish to their full capacities.

Positive youth development is an intentional, pro-social approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances youths' strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths. Young people need safe, structured places to learn and links to basic services that, if absent, can prevent them from learning and functioning within our society.

Positive Experiences + Positive Relationships + Positive Environments = Positive Youth Development

Positive Youth Development (PYD) is based on the belief that, given guidance and support from caring adults, all youth can grow up healthy and happy, making positive contributions to their families, schools, and communities. The term “positive youth development” often generates several different responses. Most commonly people hear “youth development” and think of child and adolescent development, meaning biological, social, emotional, and cognitive development. Or they think of youth services, all the programming and services communities provide to young people to address their needs and foster their growth. Or they might think of a distinct approach or philosophy of interacting and working with young people, one that informs programming and promotes adolescent development. We understand positive youth development as an approach or philosophy that guides communities in the way they organize services, supports, and opportunities so that all young people can develop to their full potential.

Positive youth development interventions, born from positive psychology research, can aid youth practitioners in achieving desired positive outcomes including increased optimism, strong social connections and healthy self confidence. Positive youth development is an ideal platform for the application of positive psychology. Adolescent coaching provides adolescents with an opportunity to maximize their potential and improve their overall wellbeing through vision, action and accountability. Positive youth development addresses the ways in which adolescents can integrate positive psychology

research and interventions into private and group coaching sessions, in order to affect lasting positive change on adolescents' self-esteem, friendships, and future orientation. The establishment of a sound positive environment around youths is a key to their effective functioning and survival. Positive environment is dependent on positive relationships and strengths established at school, family or social environment through interactions with parents, teachers, peers and society. The development of a positive ethos within youths is the foundation for better opportunities to understand themselves as youths and engage in activities that would lead physical, psychological and social upliftment of the youth– 'Positive Youth Development' will enable youths to become successful learners, confident individuals, responsible citizens and effective contributors.

1.4 Positive Youth Development: Program Characteristics

The following are essential features of effective learning environments and settings that facilitate positive youth development for young people inside and outside of school. These features of positive developmental settings and characteristics of successful positive youth development staff can be used for training staff, designing programs, and developing standards and assessment tools:

- Physical and Psychological Safety – Safe and health-promoting facilities; practice that increases safe peer group interaction and decreases unsafe or confrontational peer interactions.
- Appropriate Structure – Limit setting, clear and consistent rules and expectations, firm enough control, continuity and predictability, clear boundaries, and age-appropriate monitoring. Supportive Relationships – Warmth, closeness, connectedness, good communication, caring, support, guidance, secure attachment, responsiveness.
- Opportunities to Belong – Opportunities for meaningful inclusion, regardless of one's gender, ethnicity, sexual orientation or disabilities; social inclusion, social engagement and integration; opportunities for socio-cultural identity formation; support for cultural and bicultural competence.
- Positive Social Norms – Rules of behavior, expectations, injunctions, ways of doing things, values and morals, obligations for service.

- Support for Efficacy and Mattering – Youth-based, empowerment practices that support autonomy, making a real difference in one's community, and being taken seriously. Practice that includes enabling, responsibility granting, meaningful challenge. Practices that focus on improvement rather than on relative current.
- Opportunities for Skill Building – Opportunities to learn physical, intellectual, psychological, emotional, social skills; exposure to intentional learning experiences; opportunities to learn cultural literacy, media literacy, communication skills, and good habits of mind; preparation for adult employment; opportunities to develop social and cultural capital.
- Integration of Family, School, and Community Efforts – Concordance, coordination, and synergy among family, school and community

Youth development gained a much greater following in the 1980s, though, when it became clear that prevention programs targeting specific “risky” behaviors were either not achieving significant positive results or were not doing enough to help youth become healthy, productive members of society. As Karen Pittman, a noted youth researcher, famously observed: “Problem free is not fully prepared.” She advocated for a massive conceptual shift “from thinking that youth problems are merely the principal barrier to youth development to thinking that youth development serves as the most effective strategy for the prevention of youth problems.”

In a systematic review Catalano et al (2004) looked at which interventions achieve best results in boosting the positive development of children and young people and preventing problematic behaviour. This review found 77 well-researched interventions which answer to the criteria they listed for positive youth development programmes. Significant impact of interventions has been found in among others interpersonal skills, quality of relationships with adults and peers, problem solving and cognitive competences, personal effectiveness and educational achievement. Some interventions also showed impact on decrease of problematic behaviour, such as the use of drugs and alcohol, smoking, aggressive behaviour and other problematic behaviour in school.

Effects of Positive Youth Development Interventions:

- Adolescents move from fixing problems to building on strengths.

- Instead of reacting to problem behavior, adolescents are pro-active, building positive outcomes.
- Instead of targeting troubled youth, practitioners engage all youth.
- Practitioners and authorities move from looking at youth as recipients of services to youth as resources and active participants. Traditionally theorists focused on programs and interventions, now they focus on relationships.

1.5 Positive Youth Development: Models

PYD starts from a holistic view on development and growing up and pays attention to all aspects of development (physical, cognitive, social, emotional and moral development). An optimal development of young people takes place in an environment that boosts the development of competences and offers young people opportunities to use and generalize these skills (Catalano et al, 2004; National Research Council & Institute of Medicine, 2002; Durlak, 2007).

Programmes focused on positive youth development all aim to promote one or more of the following factors (National Research Council, 2013):

- Children's physical and mental safety
- Opportunities for involvement
- Positive social standards
- Skills development
- Cooperation and matching of interventions and activities in various domains

(a.) The 5Cs Model of Positive Youth Development (Lerner, Fisher, and Weinberg (2000))

In his book, *Liberty*, youth development expert Richard Lerner theorizes that young people will thrive if they develop certain behaviors, dubbed the “five Cs,” over the course of childhood and early adolescence: competence, connection, character, confidence, and caring/compassion. According to Lerner, a youth with the five thriving behaviors is on the path to attaining a sixth C: contribution – to self, family, community, and civil society. It is the sixth C that leads to positive adulthood. “Committed— behaviorally, morally, and spiritually—to a better world beyond themselves,” he writes, “they will act to sustain for future generations a society marked by social justice, equity, and democracy and a world wherein all young people may thrive.”

Five C's	Extension of Five C's
Competence	Enhancing participants' social, academic, cognitive, and vocational competencies.
Connection	Building and strengthening adolescents' relationships with other people and institutions, such as school.
Confidence	Improving adolescents' self-esteem, self-concept, self-efficacy, identity, and belief in the future.
Character	Increasing self-control, decreasing engagement in health-compromising (problem) behaviors, developing respect for cultural or societal rules and standards, a sense of right and wrong (morality), and spirituality.
Compassion/Caring	Improving youths' empathy and identification with others.

(b.) SOS Structure

Youth development programs build their services and activities around the SOS structure, ideally using a broad range of community partnerships to implement this multi-faceted model and create the rich environment that youth need to be successful. Organizations using a youth development approach therefore provide services, opportunities, and supports (SOS) that enhance the young person's environment and increase his or her ability to reach these outcomes.

SOS	Extension of SOS
Services	<i>Services</i> are the critical interventions needed to enhance the essential well-being of the young person—the traditional services that are generally provided by public welfare, health, school, and recreational programs.
Opportunities	<i>Opportunities</i> offer youth meaningful and real ways to influence the world around them, nurture their interests and talents, practice and enhance their skills and competencies, and increase their connectedness to community.
Supports	<i>Supports</i> are the ongoing positive relationships that young people have with adults, peers, and organizations that provide the safety, structure, motivation, nurturing, and guidance to allow youth to explore, learn, grow, and contribute.

(c.) 40 Developmental Assets (Search Institute)

Search Institute has identified 40 developmental assets that enable young people to succeed in life. These findings provide a useful set of measurable building blocks that unify the social development model and the concept of key competencies. These 40 developmental assets are grouped into two major types. External assets include positive experiences that young people receive from people and institutions in their lives. Internal assets focus on nurturing the internal qualities of young people to guide choices and create a sense of self, purpose, and focus (e.g. commitment to learning, positive values, social competencies, positive identity). This research indicates that the more assets youth have, the less likely they are to engage in risk-taking behaviors and the more likely they are to engage in pro-social behaviors.

External Assets	Internal Assets
Support 1. Family Support, 2. Positive Family Communication, 3. Other Adult Relationship, 4. Caring Neighborhood, 5. Caring School Climate, 6. Parent Involvement in Schooling	Commitment to Learning 21. Achievement Motivation, 22. School Engagement, 23. Homework, 24. Bonding to School, 25. Reading for Pleasure
Empowerment 7. Community Values Youth, 8. Youth as Resources, 9. Service to Others, 10. Safety	Positive Values 26. Caring, 27. Equality & Social Justice, 28. Integrity, 29. Honesty, 30. Responsibility, 31. Restraint
Boundaries & Expectations 11. Family Boundaries, 12. School Boundaries, 13. Neighborhood Boundaries, 14. Adult Role Models, 15. Positive Peer Influence, 16. High Expectations	Social Competence 32. Planning & Decision Making, 33. Interpersonal Competence, 34. Cultural Competence, 35. Resistance Skills, 36. Peaceful Conflict Resolution
Constructive Use of Time 17. Creative Activities, 18. Youth Programs, 19. Religious Community, 20. Time at Home	Positive Identity 37. Personal Power, 38. Self-Esteem, 39. Sense of Purpose, 40. Positive View of Personal Future

(d.) Five Promises

The Five Promises are a framework put forth by America's Promise outlining five resources that all children need in their lives to be successful. Based on highly regarded research from the *National Promises Study*, *The Voices Study*, and *Investing in our Young People*, when children have at least four of the five promises consistently in their lives, their chances of success are greatly increased and the risks of failure are greatly mitigated.

Five Promises	Extension of Five Promises
1. Caring Adults:	Ongoing relationships with caring adults—parents, mentors, tutors or coaches— offer youth support, care and guidance.
2. Safe Places	Safe places with structured activities provide a space for youth to learn and grow.
3. A Healthy Start And Future	Adequate nutrition, exercise, and health care pave the way for healthy bodies, healthy minds, and smart habits for adulthood.
4. Effective Education	Marketable skills through effective education help youth navigate the transition from school to work successfully.
5. Opportunities To Help Others	Opportunities to give back to the community through service enhance self-esteem, boost confidence and heighten a sense of responsibility to the community.

The following programs are based in research and have been evaluated for effectiveness:

Beacons (School-Community partnership)

The Beacons are school-based centers for disadvantaged young people, ages 4-19, which stresses youth development rather than youth deficit. Young people are viewed as central players in their own lives. Managed by community, nonprofit organizations in 41 New York City neighborhoods, the Beacons draw more than 30,000 New Yorkers (including parents, teachers, and other adult community members) each year. Activities vary across sites but include recreational, educational,

health and community services. By engaging youth in various activities and a continuity of supports, the Beacons allow them to develop caring relationships. The centers set high expectations and clear standards and provide opportunities to engage in high quality activities and make a contribution. Youth also sit on Community Advisory Councils, which plan and assist in the implementation of Beacon activities. The NYC Department of Youth Services founded the Beacons in 1991.

Big Brothers, Big Sisters

Big Brothers, Big Sisters of America (BBBS) is a 93-year-old program using autonomously funded local affiliates to support one-on-one mentoring matches between volunteer adults and young people. Outside evaluation by the Public/Private Ventures demonstrated that participants in this program were 46% less likely to initiate alcohol use and minority Little Brothers and Sisters were 70% less likely to initiate drug use. Little Brothers and Sisters were also 27% less likely to hit someone. The following are key components that assist with the development and maintenance of BBBS quality matches:

- 1) Stringent guidelines for screening volunteers by professional program staff to eliminate applicants who pose a safety risk, are unlikely to keep a commitment, or are unlikely to form positive relationships with a young person;
- 2) An orientation for volunteers to learn program requirements and rules, with some sites providing more extensive training on sexual abuse, developmental stages of youth, communication and limit-setting skills, tips on relationship-building and other issues;
- 3) A matching process which takes into account adult volunteers, youth and parental preferences, geographical proximity of adult volunteer and youth, gender, race, and religion (most matches are made within gender, and staff try to make same-race matches); and
- 4) Supervision to support effective matches, including required monthly telephone contact by agency case managers with the adult volunteer and the youth and/or parent.

Self Enhancement, Inc. (SEI)

Self Enhancement, Inc. (SEI) has designed a comprehensive program that bolsters every environment in which inner-city children learn, live and grow into adults. Self Enhancement, Inc.'s

Youth Program provides structured, goal oriented personal development and violence prevention services to over 1,500 2nd through 12th grade inner-city Portland children and youth each year. Program services: ***School Day Program*** – case management and advocacy for SEI participants within their schools and within the community, tracking scholastic achievement and behavior. ***After School and Weekend*** – supervised, task focused education, recreation and performing arts activities that provide safety and options typically unavailable to inner-city children and youth. ***Summer Program*** -- all day expansion of school year program. Self Enhancement, Inc. was recognized in 1993 by the United States Center for Disease Control and Prevention as a national model of youth violence prevention.

Youth as Resources

Youth as Resources (YAR) is an initiative of the National Crime Prevention Council (NCPC), a private, nonprofit organization whose principal mission is to empower people to prevent crime and build safer and more caring communities. YAR was started in 1987 in three Indiana communities with initial funding from the Indianapolis-based Lilly Endowment. The success of this program led NCPC and the Indiana Department of Corrections to introduce YAR as a special initiative in five Indiana juvenile correction facilities. YAR encourages youth engagement in communities by providing small grants to youth-designed and youth-implemented projects that address social problems and contribute to positive community change. Young people work as partners with adults in all levels of the program, including governing boards responsible for awarding the grants and developing program policies. To support YAR's expansion, the Center for Youth as Resources (CYAR) was created in 1995 as a separately incorporated area of the NCPC. Youth participants ranged from 11 to 25 years of age.

As recognition of positive energy among youth and adolescents, positive psychology practitioners theorized positive youth development where a positive environment, support and guidance are provided for young minds to thrive. However it was also found that positive youth development practice is limited to western world practice and has not been keenly researched on Indian grounds. It is of utter importance that equal recognition of therapeutic effects of positive youth development on youths should be recognized. This recognition would ideally lead the young minds of India towards a positive development as well.

Chapter 2

Literature Review

In the present chapter, the thrust of the researcher is to highlight review of researches performed with adolescents and on positive youth development. There have been many researches on Indian grounds to understand adolescent development and problems, however Indian researches on Positive Youth Development remain scarce. It is among the first attempts by the researcher to establish an empirical base for Positive Youth Development in India. For the sake of convenience the section has been divided into various subheadings:

2.1 Historical Overview introduces the past and emergence of youth development studies.

2.2 Adolescent Behavior reviews researches from national database of WHO, UNICEF and other government and private agencies working thoroughly and solely towards understanding adolescent behavioral problems.

2.3 Positive Youth Development reviews researches from pioneer researchers in the west who have closely worked with positive development programs. It showcases how positive youth development has been successfully used with variables like that of identity formation, vocational training, self-regulation, pro social behavior etc.

2.4 Positive youth development interventions and Adolescent behavior reviews researches specific to adolescent behavior and their modification by positive youth development programs.

2.5 Significance of the research explains how this particular research could be of help to the adolescent population and people working closely with this population like that of parents and educators.

2.1 Historical Perspective

Historical perspective serves as a tremendous opportunity to reflect on research trends and contributions that have influenced the field of positive youth development over time and also consider issues of practice that continue to evolve and challenge the field. The frame of this portion

of literature review is on the issue of bridging research and practice around youth development with attention to the impact on the lives of young people.

The concept of youth development draws its origin from the west. The historic works of Lawrence Cremin (1964) tells the story of great social, political and economic change for Americans. Cremin cites the rise of Progressive Education, the expansion of scientific methods, attention to social welfare and human rights, and the impact of urbanization, industrialization and immigration as key features shaping the lives of individuals and the missions of organizations in the early 1900s. The U.S. Census Bureau (1900) lists the median age of the male population at 23 years and females at 22 years; more than half of the population of 76 million was under 23 years of age. There were no radios and no movies. There were an estimated 8,000 automobiles and 10 miles of paved roads. Social activism and reform focused on anti-child-labor laws, the expansion of public education, battles to extend the vote and eliminate corruption in politics and industry, as well as to emphasize scientific solutions to problems of the day. Progressive educators promoted child-centered learning and John Dewey's philosophy of experiential learning coincided with the rise of juvenile organizations. Religious communities, the temperance movement, settlement houses and various clubs for young men sponsored public events, study groups, athletic competitions and Sunday schools for young people in the 19th century.

In the first 20 years of 20th century, Youth organizations were founded, imported and promoted during this time reflect the priorities and concerns of the young nation. Jane Addams and an army of settlement house workers engaged poor urban and immigrant children in learning for life in America. Luther Halsey Gulick and his wife Charlotte founded Camp Fire Girls to promote physical fitness and skills befitting a wife and mother. Elizabeth Cady Stanton fought for play grounds in urban settings while the YMCA promoted attention to the body, mind and spirit of young men. Ernest Thompson Seton's passion for woodcraft lore influenced the Boy Scouts of America as well as the dozens of clubs and organizations which took children to the woods to explore nature and learn life skills not taught in the schools. Generally these organizations had missions grounded in health and well-being, family roles, citizenship, cultural and national pride, handicrafts, and skills for everyday life and work. From the beginning, these organizations were not themselves progressive in the sense of being advocates for educational reform, youth policy or youth advocacy more broadly. They sat largely outside the world of policy creation and active

reform. They were adult-led organizations with agendas driven by adult concepts of what young people needed and should be doing. They valued the spirit and energy of young people which could be mobilized for the betterment of neighborhoods, communities and families.

Group work in these settings typically focused on personal development, leadership within the faith, cultural or fraternal community value framework, and pursuit of common interests. These organizations grew organically from the interests and events of the day. They came to be recognized by affiliation (faith, sports, outdoors, gender) not by academic discipline or field of study. They were associated with space, place and environment more than with a common theory, research base or academic specialty. Today the practice of youth work is a vibrant mix of programs ranging from athletics to leadership, from small group work to national conventions, from personal growth to community revitalization.

Through the 1950s many community-based youth organizations depended on adult volunteer leaders and met in the out-of-school time in groups organized in small units like clubs or troops.

Fun, friendships and active learning flourished in these settings. Between 1960 and 1980, in response to a moral panic around young people and their perceived potential for troublesome, criminal, self-destructive and generally bad behavior, new youth programs were organized and the older organizations adopted programs around drug prevention, anti-drunk driving campaigns (reminiscent of the temperance movement), pregnancy prevention, and productive alternatives for troubled, vulnerable, at-risk youth. This period is noteworthy in its embrace of the medical model of problem diagnosis and “fixing kids.” By the 1980s one begins to see the growing enthusiasm for programs that build or develop young people in positive, normative ways. Thus enters the concept of youth development, a descriptor widely recognized today but still lacking a firm definition agreed upon across the field.

For much of the century, those doing group work with or on behalf of children and young people relied on research theories and findings in education and human development focused on individual development. The adolescent was studied, not the context for working with adolescents in arenas beyond the classroom. Standardized tests were popular and highly valued as measures of normalcy or deviance. Likewise, the outcomes of prevention and intervention efforts were

measured in terms of individual change with minimal attention to the nature and role of the contexts, relationships, and engagement strategies associated with that change.

The focus on the individual began to change in the 1970s. Theories such as attachment, resiliency and protective factors acknowledged Urie Bronfenbrenner's articulation of an ecological model of human development (1976). Explorations of the ecology of young people's development had a great influence on professionals working with children, youth and families in the last quarter of the century. Bronfenbrenner advocated studying young people in their context, paying attention to the role people and interactions played in the research. He promoted research of discovery and understanding in addition to experimental studies and hypothesis testing. His work was conceptually instrumental in bringing researcher and practitioner closer in the process of study.

In the 1970s the articulation of positive youth development concepts was gaining use in policy contexts as well as in applied research focused on social group work. One such attempt was a 1973 report commissioned by the Federal Department of Health, Education and Welfare which framed a concept of positive development grounded in fundamental human rights with application across physical, social, emotional, cognitive and moral domains (Konopka, 1973).

The practice of youth work preceded research on the practice. "The youth development movement began with professionals and volunteers engaged day-to-day with young people in their communities, in Boys and Girls Clubs, parks and recreation programs, faith groups, families, essentially in settings or contexts other than schools . . . Youth development is not unique in arising from practice" (Hamilton & Hamilton, 2004).

By linking current practice to the history of youth work practice, the evolution of an idea more clearly and come to understand that the practice of youth development did not begin in the 1990s as much of the literature would suggest. Given the way that the terminology is both new and philosophically entwined with the traditions and history of hundreds of youth organizations, we can understand the confusion that arises when we start talking youth work practice and youth development research.

2.2 Adolescent Behavior

Most young people are presumed to be healthy but, as per WHO, an estimated 2.6 million young people aged 10 to 24 years die each year and a much greater number of young people suffer from

illnesses ‘behaviors’ which hinder their ability to grow and develop to their full potential. Nearly two-thirds of premature deaths and one-third of the total disease burden in adults are associated with conditions or behaviors initiated in their youth (e.g. tobacco use, physical inactivity, high risk sexual behaviors, injury and violence and others). The behavioral patterns established during this developmental phase determine their current health status and the risk for developing some chronic diseases in later years.

At least 20 per cent of young people are likely to experience some form of mental illness - such as depression, mood disturbances, substance abuse, suicidal behaviors, eating disorders and others. A meta-analysis of five psychiatric epidemiological studies yielded an estimated prevalence of mental morbidity including 16 mental and behavioral disorders (classified into eight groups of organic psychosis, schizophrenia, manic affective psychosis, manic depression, endogenous depression, mental retardation, epilepsy, phobia, generalized anxiety, neurotic depression, obsession and compulsion, hysteria, alcohol/drug addiction, somatization, personality disorders and behavioral/emotional disorders) of 22.2 per 1000 population among 15 to 24 years.

Harmful drinking among young people is an increasing concern in many countries and is linked to nearly 60 health conditions. It increases risky behaviors and is linked to injuries and violence resulting in premature deaths. A national review on harmful effects of alcohol reported greater social acceptability of drinking, increasing consumption in rural and transitional areas, younger age of initiating drinking, and phenomenal socio-economic and health impact, more so among young people.

Interpersonal violence among youth ranging from minor acts of bullying to severe forms of homicide contribute greatly to the burden of premature death, injury and disability; harming not just the affected but also their families, friends and communities. An average of 565 adolescents and young adults between the ages of 10 and 29 yr die each day as a result of interpersonal violence across the world. Deb et al in a sample of students aged 14 to 19 yr showed that 20.9, 21.9 and 18.1 per cent of the children experienced psychological, physical and sexual violence, respectively. Sharma et al¹ showed that 13.5 per cent adolescents aged 14 to 19 yr had threatened or injured someone with a weapon in the past 12 months; 49.1 per cent boys and 39.6 per cent girls reported being involved in a physical fight in the past 12 months. Both the genders were commonly involved in inter-personal violence as shown by Baruah and Baruah where 42 per cent males and 49.6 per

cent female aged 15-29 years had indulged in interpersonal violence and 48 per cent males and 60.4 per cent females had indulged in self inflicted violence.

Systematic review of 15 studies across India aged 13-15 year showed a median prevalence of tobacco use (ever users) to be 18.2 per cent; 14 per cent among males and 6.3 per cent among females. Global Youth Tobacco Survey (GYTS) 2006 and 2009 across India covering 13 to 15 year old adolescents in 180 schools highlighted an increase in the current users of any form of tobacco from 13.7 to 14.6 per cent and current users of cigarette from 3.8 to 4.4 per cent from 2006 to 2009. At the Indian level, a few studies have shown hypertension among the young people to vary from 2.4 to 5.9 per cent comparable to global level (4.5%).

Significant difficulties have been experienced in quantifying and qualifying stress. Some studies have tried to quantify the stress levels among young people, while others have given a mean stress score (influenced by methods of measuring stress). Sahoo et al using Depression Anxiety Stress Scale (DASS) observed that 20 per cent young adults experienced stress. Dabut et al using life stress scale found that among adolescent girls studying in 12th standard from Hisar and Hyderabad, 47.5 and 72.5 per cent, were in the moderate category of family stress; financial stress was reported by 60 and 50 per cent and, 90 and 85 per cent had moderate level of social stress, respectively. Sharma & Sidhu in a study, among adolescents aged 16-19 years using self-made questionnaire based on Bisht Battery of Stress found that 90.6 per cent adolescents had academic stress.

2.3 Positive Youth Development

Flay, B. R. (2002) found comprehensive programs with positive results in multiple domains like that of risky/unhealthy/antisocial behaviors, poor mental health, and poor academic achievement.

Roth, J. L. and J. Brooks-Gunn (2003) concluded drawing on both the literature and the results from a survey of highly regarded youth development programs, 3 defining characteristics of the youth development program-program goals, atmosphere, and activities. The results suggested a provisional definition of youth development programs based on the prevalent aspects of the goals, atmosphere, and activities reported by respondents. Youth development programs seek not only to prevent adolescents from engaging in health-compromising behaviors but to build their abilities and competencies. Youth development programs seek not only to prevent adolescents from engaging in health-compromising behaviors but to build their abilities and competencies. They do

this by increasing participants' exposure to supportive and empowering environments where activities create multiple opportunities for a range of skill-building and horizon-broadening experiences

Siu AM, Cheng HC, Leung MC (2006) reviewed longitudinal studies that have shown prosocial behavior increases gradually over adolescence, and that the development of prosocial behavior is closely linked to the development of moral reasoning, perspective taking, and regulation of personal distress. It was noteworthy to find that females have a higher prosocial orientation than males, and peer influence could be a major mediating factor of interventions to foster prosocial norms and behavior during adolescence.

Durlak (2007) studied containing the necessary information produced several mean effect sizes that were statistically significant, and ranged from modest to large in magnitude. These data indicated that attempts to change social systems affecting children and adolescents can be successful. Future work should measure more thoroughly the extent to which the systemic changes that are targeted through intervention are achieved, and investigate how such changes contribute to the development and sustainability of the outcomes that might be demonstrated by participants of competence-promotion programs.

McDonald, C. C., et al. (2011) observed that their study helps to better delineate relationships between community violence exposure and positive youth development by adding new knowledge to the literature on the role of family functioning. Points of intervention should focus on families, with attention to parental figures in the home and overall family functioning.

Schmid, K. L., et al. (2011) Results indicated that earlier hopeful expectations for the future may be influential for later intentional self-regulation abilities, although both constructs were strong predictors of positive youth development in middle adolescence.

Mueller MK, Phelps E, Bowers EP, Agans JP, Urban JB, Lerner RM. (2011) examined the relationship between adolescents' self-regulation skills (selection, optimization, and compensation) and their participation in youth development (YD) programs across Grades 8 and 9 in predicting Grade 10 PYD and Contribution. Results indicated that while self-regulation skills alone predicted PYD, self regulation and YD program participation both predicted Contribution.

Robert J. Barcelona and William Quinn (2011) performed extensive literature review on Positive youth development programs from the year 2000-2010. This review identified 12 main topical areas that best captured the breadth of positive youth development research. These 12 non-exclusive topical areas (i.e. studies could, and often did, encompass more than one topic) included professional development, youth activities, youth development processes and outcomes, academic engagement, positive youth development influence on risk behavior, youth engagement, resilience, asset- and capacity-building, family, health and wellness, peer relationships, and youth-adult relationships.

Ilona Kajokiene and Ingrida Gabrielaviciute (2013) With the present study, we aimed to evaluate the effectiveness of youth development program implemented in one of the high schools in Vilnius, Lithuania. 351 ninth to tenth grade students participated in an 8 weeks long Youth Development (YD) program with the 4 month long optional volunteering possibilities and were compared to 262 students in a demographically and academically similar control high school. Both the participants of the YD program and the controls were evaluated three times during one academic year. Pre-test, post-test and follow-up evaluations in an experimental and control group were conducted. The results showed limited time effect on connection. The change of contribution, internalizing and externalizing problems to the direction opposite than hypothesized were found over the one year for both groups.

David Campbell, Davis Kali Trzesniewski et al. (2013) advocated Positive youth development is strongly associated with three outcomes of particular public significance: improved school achievement and graduation rates, decreased incidence of risk behaviors and increased sense of personal efficacy and empathy. A strong economic case could be built for increasing public investment in positive youth development programs.

Mahadzirah Mohamad, Morliyati Mohammad and Nor Azman Mat Ali, (2014) findings of this study revealed that different aspects of positive youth behaviour had different influence on youths' life satisfaction in Malay adolescents. The study also indicated that Malay female youths had higher pro-social norm and life satisfaction compared to their Malay male counterpart.

Catalano, R. F., et al. (2002) results suggest that both youth development and prevention science approaches have grown from similar roots and make similar recommendations for the future of

youth programming. Further, data on precursors suggest that focusing on promoting protection and reducing risk is likely to prevent problems and promote positive youth development. Yet advocates of these approaches often are at odds, suggesting that the approaches provide different paradigmatic approaches to youth programming. We conclude that cooperation between these two approaches would further progress in the field of youth programming.

Gavin, L. E., et al. (2010) concluded PYD programs can promote adolescent sexual and reproductive health, and tested, effective PYD programs should be part of a comprehensive approach to promoting adolescent health. However, more research is needed before a specific list of program characteristics can be viewed as a “recipe” for success.

While it has been argued that a major goal of formal education should be to equip students with self-regulatory skills (Bakracevic Vukman & Licardo, 2010; Boekaerts, 1997), the reality is that most secondary school students are not exposed to overt, coherent, and systematic programs such as these (Zimmerman, 2002).

Dignath and Büttner (2008) in a meta-analysis of 35 SRL intervention studies, found that interventions were more effective when conducted by researchers rather than regular teachers. The researchers explain this finding by suggesting that teachers lack knowledge about SRL and spend minimal time teaching strategies associated with SRL.

Effective self-regulated learners actively set goals, decide on appropriate strategies, plan their time, organize and prioritize materials and information, shift approaches flexibly, monitor their learning by seeking feedback on their performance and make appropriate adjustments for future learning activities (Butler & Winne, 1995; Meltzer, 2007; Puustinen & Pulkkinen, 2001; Winne, 1995; Zimmerman, 1989, 2001).

Evidence for the differences in the meaning of prosocial behavior between two urban cultural contexts comes from studies, investigating the judgment of different scenarios in which an individual requires help (e.g., Miller, Bersoff, & Harwood, 1990): While Hindu Indians tended to frame help towards another person as a social responsibility, also in less severe, non life-threatening situations, Euro-Americans tended to interpret helping in these situations as an issue of personal choice.

When working from a conceptual framework where the person is a key mediator of change, self-regulation becomes a central process of human functioning (Karoly, Boekaerts, & Maes, 2005) and Posner and Rothbart 2000) have stated that ‘understanding self-regulation is the single most crucial goal for advancing an understanding of development’.

One of the most significant changes in adolescence involves the emergence of formal operational thought, and the capacity therefore to form abstract ideas, to think about hypothetical problems, and to formulate multiple hypotheses regarding an outcome of an event (Piaget, 1970). Higher-order reasoning, problem solving, and symbolic thought develop, and memory, mental representations, and attentional focus grow. These abilities make it possible for the young person to use multiple rules to control behavior in different situations (Demetriou, 2000). Future events can now be represented cognitively, thereby enabling the formulation of goals and motivating behavior (Bandura, 2001). For instance, the young person understands that more difficult tasks require more effort and that, while effort may compensate for low ability, it only does so to a certain degree (Demetriou, 2000).

Five Cs model of PYD (e.g., Lerner et al., in press), posited that Intentional Self Regulation is a youth strength that, when aligned with the resources in their environments (such as parental resources), would lead to positive development.

British Youth Council, 2008 found the most common type of pro-social activity among the young is being a member of a local or community group (68.2%). This is similar to the level reporting some informal volunteering (67.9%) and higher than the proportions reporting formal volunteering (51.9%) and civic participation (24.8%). Civic participation is the least common form of pro-social behaviour among all age groups – and particularly low among young people. This may reflect the fact that involvement in decision-making bodies may require a greater degree of commitment and/or responsibility.

Maite Garaigordobil (2008) the intervention consisted of a weekly two-hour play session throughout the school year. The programme’s activities stimulate communication and prosocial behaviour. Results of the analysis of variance suggest positive impact of the intervention, as the experimental participants significantly increased their behaviours of self-control and leadership, as well as their prosocial behaviour; moreover, an increase was observed in the number of

classmates considered prosocial. Highest levels of improvement were found in the experimental participants who, at pretest, had few behaviours of consideration for others, self-control and leadership and low prosocial behaviour, but many withdrawal behaviours. Some effects of the programme were found to be influenced by gender, as the girls showed more decrease in their withdrawal behaviours and a greater increase in the number of classmates perceived as prosocial.

2.4 Positive Youth Development Interventions and Adolescent Behaviour

A recent review of PYD programs reflects the growing importance of identity within the positive youth development movement, which maintains that a clear and positive identity is an important domain of development (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 1999; Montgomery, Kurtines, Ferrer-Wreder, Berman, Lorente, Briones, et al. 2008; Ferrer-Wreder, Montgomery, & Cass Lorente, 2003; Montgomery et al., 2008; Montgomery & Sorell, 1998; Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2004).

The Changing Lives Program (CLP) is a PYD intervention that enhances the competence of its participants by promoting positive change in core domains of psychosocial development such as sense of self and identity. In order to achieve this goal, the CLP must perform the challenging task of intervening at the level of identity while promoting positive change in youth.

The Miami Youth Development Project (YDP) is a youth development program that utilizes an outreach research model in order to serve the needs of Miami's multiproblem youth. It draws upon descriptive and explanatory knowledge in order to promote long-term developmental change in self and identity among adolescents (Kurtines & Silverman, 1999; Kurtines, Montgomery, Eichas, Ritchie, Garcia, & Albrecht et al., 2008).

2.5 Significance of the research

Adolescents are moving from a period of childhood (in which they have things done for and to them), to a period of incrementally becoming more independent and self-reliant. The physical, social and psychological changes young people undergo does not only impact their behavior and how they interact with the world, but can also impact how the adults around them respond to this transformation. During this time of significant transition and increasing independence, resources and systems for youth must be constructed in a developmentally appropriate approach. Research demonstrates that youth with more developmental assets, such as positive family communication,

caring school climate and sense of purpose, have reduced morbidity and better health outcomes. In addition, key protective factors, such as connectedness to parents and family, connectedness to school and optimism, promote healthy youth behaviors and outcomes while diminishing the likelihood of negative health and social outcomes. Therefore, a dual strategy of risk reduction and promotion of protective factors through an intentional positive youth development approach holds the greatest promise as a public health strategy to improve outcomes for youth.

All youth possess strengths, such as the capacity to change their behavior, to develop new cognitive abilities, cultivate different interests, acquire new behavioral skills, and establish new social relationships. If the strengths of youth can be aligned with the strengths of families, schools, and communities—for instance, the capacities of adults to provide for young people a nurturing, positive milieu in which their strengths may be honed and enhanced—then young people may be resources for the healthy development of themselves and of others (Lerner, 2004). The Positive Youth Development (PYD) perspective integrates two key ideas. First, there is the belief that all young people possess strengths. Second, there is the “hypothesis” that PYD may be promoted when youth strengths are aligned with the strengths, or “developmental assets,” (Benson, Scales, Hamilton, & Sesma, 2006) for healthy development present in their ecologies.

Chapter 3

Research Methodology

This chapter details out the research methodology for the present study. It explains the research objectives, aims, hypotheses and methodology used. In more details, in this part the author outlines the research strategy, the research method, the research approach, the methods of data collection, the selection of the sample, the research process, the type of data analysis, the ethical considerations and the research limitations of the project.

3.1 Pilot Study

The present study focuses on the concept of positive youth development (PYD) and its contribution in understanding adolescent behaviour. The ore objective of this study was to assess the dimensions of positive youth development among adolescents. Positive Youth Development Inventory developed by Arnold, M.E., Nott, B. D., & Meinhold, J. L. (2012) was used for data collection. Data comprised of 100 adolescents (50 males and 50 females) age range between 16-18 years for the present study. The obtained data was analyzed using descriptive statistics like Mean, Standard Deviation (SD), Independent sample t test. The study showed higher scores of female participants in comparison to the male participants on Positive Youth Development. It was also found that females scored higher on the dimensions of Positive youth development that are emotionally regulated like character, connection and caring. While males scored higher on cognitive dimensions of positive youth development like competence and confidence. Based on the results of the pilot study, research designed a short term intervention to assess the effects of positive youth development on adolescent's behavior.

3.2 Aim of the Study

Reflecting on the novelty of the research topic, this research primarily aimed to lay empirical grounds towards positive youth development research in India. This study is a compilation of theoretical and practical approach to adolescent behavioral problem. This research could then be implemented and evaluated in further studies. The scientific evaluation of positive youth development could provide answers with a view to obtaining a better cultural understanding of the processes needed to facilitate positive developmental change among Indian adolescents.

3.3 Sampling

Probability sampling was applied where 100 students (50 girls and 50 boys) age-range between 16-18 years voluntarily participated for this study. These students reside in Lucknow City Area. Around 30 students were selected from this sample (on the basis of their performance in the initial assessment) to participate in the short term intervention program based on positive youth development.

3.4 Hypotheses

On the basis of in depth literature review and pilot study, following hypotheses were formulated:

1. There will be gender differences on the effects of positive youth development.
2. There will be positive correlation between positive youth development and adolescent behavior.

3.5 Instrumentation

Positive Youth Development Inventory developed by Arnold, M.E., Nott, B. D., & Meinhold, J. L. (2012) was used for data collection. The questionnaire contained 55 items divided in Five dimensions measuring 5 C's of positive youth development: Competence, Character, Connection, Caring, Confidence. Positive Youth Development questionnaire is designed to work with 4 point response scale ranging from 1 as strongly disagree to 4 as strongly Agree. Cronbachs Alphas for internal validity Overall for the complete PYDI scale - .97. The alphas for each separate C are as follows: Competence - .91 Character - .91 Connection - .86 Caring - .92 Confidence - .89 Contribution - .91.

The Behavior Problem Index (BPI; Peterson & Zill, 1986) was used to assess internalizing(INT) and externalizing(EXT) problem behaviors. The 32 items of the BPI were taken from the Achenbach Behavior Problems Checklist (Achenbach & Edelbrock, 1981), a more extensive measure that is widely used with children and adolescents. Items are rated on a 3-point scale, labeled "often true," "sometimes true," or "not true". Items were reverse-coded prior to analysis, such that 1 = "not true" and 3 = "often true" in order to simplify interpretation. Mainieri (2006) reported Cronbach's alphas of .86 for EXT and .83 for INT in the PSID-CDS II sample. Cronbach's alphas for the present sample were .81 and .85 for the EXT and INT, respectively.

3.6 Procedure

The researcher obtained approval to conduct the study from the schools. Children implied their assent by their completion of the questionnaires, but the researcher emphasized that their participation was voluntary. Researcher collected the questionnaires from each participants and scoring of each dimensions were performed. These scores were then further calculated for t-test with the help of SPSS.

Furthermore, in the next step, students who scored low in the questionnaire were selected as voluntary participant to the short term intervention program. 30 participants participated in the intervention.

3.7 Research Design

Exploratory research was performed to assess the dynamics of positive youth development in adolescents. Exploratory research provides insights into and comprehension of an issue or situation. Exploratory research is a type of research conducted because a problem has not been clearly defined. Exploratory research helps to determine the best research design, data collection method and selection of subjects.

For assessing relationship between positive youth development and adolescent behavior, correlational research design was performed. A correlational study determines whether or not two variables are correlated. This means to study whether an increase or decrease in one variable corresponds to an increase or decrease in the other variable.

3.8 Data Analysis

The obtained data have been analyzed using descriptive statistics like Mean, Standard Deviation (SD), Independent sample t test and correlation. Data analysis was aided by SPSS 20 software.

3.9 Intervention

The Positive Youth Development (PYD) framework is a strengths-based model that advocates building upon the assets and competencies of youth to promote desirable outcomes (Farruggia & Bullen 2010). One PYD model, known as 'Lerner's Five Cs', posits that there are five specific traits that stimulate positive development, namely caring, confidence, competence, character, and positive connections with institutions and people (Lerner 2002). The model predicts that effective

youth development programs that target each of these traits should lead to the emergence of a sixth characteristic – contribution. The intervention was based on this model of five C's. The intervention scheduled for one hour over the span of two-weeks. The interview schedule included activity based conducive environment where participants were actively environment in decision making processes and itinerary. These activities were influenced by cultural specifications, and activities such as daan, yoga and vradhasewa were included to cultivate the five c's- Competence, Confidence, Connection, Character, and Caring. The schedule also included activities like talking cures and my voice, where participants were encouraged to speak and act their minds.

3.10 Result

3.10.A Plan of analysis

In the pilot study participant scores were analysed using t test as shown in Table 1 to understand the relevance of positive youth development on adolescents. The study showed higher scores of female participants in comparison to the male participants on Positive Youth Development. It was also found that females scored higher on the dimensions of Positive youth development that are emotionally regulated like character, connection and caring. While males scored higher on cognitive dimensions of positive youth development like competence and confidence.

Pre- and post-intervention means were compared using t-tests to evaluate any changes in adolescent behaviours.

3.10.B Intervention effects

The results of t-tests and are reported in Table 2 for adolescent behavior outcomes; Pearson's r is also provided to understand the effect of intervention on adolescent behavior. Adolescents reported significantly greater character, and confidence. In addition, adolescents reported increased competence and decreased connection.

Table 1: Showing gender differences calculated by t-testing

	Gender (n=100)	Mean	t- statistics	Sig. (2- tailed)
Competence	Male	3.3428	.836	.405
	Female	3.1734		
Character	Male	3.0012	-.766	.446
	Female	3.0736		
Connection	Male	2.9256	-1.865	.065
	Female	3.1066		
Caring	Male	2.9810	-.649	.518
	Female	3.0558		
Confidence	Male	3.1748	.465	.643
	Female	3.1802		

*Inferences: $p > .05$ (.405, .446, .065, .518, .643).

Table 2 Descriptive Statistics and Results of Analyses of Intervention Effects on Adolescents

Adolescents (n = 30)	Pre intervention M(SD)	Post intervention M(SD)	t-statistics	Prepost r
Competence	2.59 (0.75)	2.80 (0.70)	-.166	-.57
Character	0.56 (0.23)	0.75 (0.30)	-2.80	-.12
Connection	1.06 (0.65)	0.82 (0.57)	1.83	-.35
Caring	1.65 (0.70)	2.03(0.56)	-3.21	-.57
Confidence	1.70 (0.67)	1.98 (0.37)	-2.37	-.44

Inference: * $p < .05$; ** $p < .01$, *** $p < .001$

Chapter 4

Discussion and Conclusion

There comes a time in every lifetime where one feels physically awkward, socially surrounded and experientially in a new phase of livelihood. For the majority of us this phase is called Adolescence, a phase which is most important and equally troublesome for the young minds. It takes a toll on the young people that suddenly their body is experiencing puberty, and very suddenly their puberty signifies that they are a grown up now. It takes time for their physical changes to set in properly and adjust to the new changes in features, voices and capacities of the body. What makes or breaks a teenager in this crucial point of their lies is the support that a responsible adult can pour in to sooth and hold up the confused adolescent. Most adolescence look up to their seniors for the correct guidance to deal with the changes. It has been observed that a correct or incorrect guidance can shape the future of impressionable adolescent. Most young minds are found to indulge in substance abuse and risk behaviors to cope with the current changes and in light of peer pressure. Apart from the predicament in physical changes what drives the dilemma in young minds is the increased logical and analytical capacity of the brain, sensitivity towards self and surrounding, recognition of self and anxieties related to performance and survival. Youths build a large and productive part of the nation's population. Most of the government policies, school training and corporate job profiles work on the angle of youth empowerment, where the capacities of youth are used to boost country's earning, increase the wealth of national knowledge and use less taxes on health care, welfare benefits and psychiatric care. Research shows that teenagers are at increased risk of poor mental health, antisocial behaviour and risk-taking behaviour such as substance misuse. This might be because of stronger emotional responses in adolescence, changes in motivation, or difficulties balancing emotions and behaviour.

The anxiety and stress of an adolescent mind is at all-time high because of the mesh between societal expectation and self-behaviors. Society expects the young mind to behave like an adult but want them to behave with restrictions of being a child. This kind of standpoint often confuses and leads the adolescent minds to steer off in a direction which will not be fruitful for them in near future. Most researchers suggest, habits formulate and sustained during adolescence are the ones which are often followed into adulthood as well. The term at-risk behavior is used synonymously

to denote the turmoil and changes in adolescence. At-risk behaviors can be defined as the negative and unconstructed behaviors of adolescents leading them to negative consequences. The word at-risk has been used to describe including disadvantaged, culturally deprived, low ability, dropout, low performing, not acquiring skills and discipline problem. Youth at risk are defined as children and adolescents who are not able to acquire and use the skills necessary to develop their potential and become productive members of society. Youth can be at-risk for a variety of reason. Youth are at- risk because of environment in which they live, grow and learn or because of their own behaviour or by other individual. There are a great number of factors that put youth at-risk for not succeeding educationally or in life. Most have been influenced by unpleasant circumstances, such as poverty, low self-esteem, drug or alcohol abuse, poor health or nutrition, poor academic performance, inadequate opportunities for success in school, loss of hope for the future, and the lack of life goals.

4.1 Discussion

The present study provided preliminary support for the immediate effectiveness of a brief and preventatively focused interventions young adolescents undergoing the transition to adulthood. At post-intervention, the quantitative data suggested that adolescent participation in the intervention was associated with increases in four c's-Competence, Character, Caring, and Confidence. An important strength of this research was its focus on the potentially positive effects of inherent Indian culture for adolescent development, an element that is typically missing from evaluations of other programs. Correlational research suggests that adolescent problem behavior, such as peer problems, depression and antisocial behavior significantly decreased and has a negative correlation with positive youth development. The present study builds on this work by demonstrating that brief intervention that targets the factors within the adolescent context is associated with adolescent problem behaviour improvements in critical PYD-promoting traits, such as connection to family and school, and caring for others (Lerner 2002). Although these results are promising, further experimental work is needed involving larger, more diverse samples and randomised controlled designs to provide a better test of the impact of intervening in the parenting and family context on PYD.

Overall, the present study supports and extends current knowledge and evaluations of interventions for teenagers and suggests that brief and low-intensity program has the potential to bring about positive changes for adolescents. Furthermore, positive family and individual benefits were reported by the adolescents themselves, who are often the forgotten but critically important consumers of positive youth development programs. However, the findings of the study need to be considered within the context of several key limitations: notably the absence of a control group, the lack of assessment of the sustainability of intervention effects through long-term follow-up, the use of a small sample of mostly well-educated adolescents, and reliance on self-report rather than direct observational outcome measures.

Positive psychology views young people as resources, who need to shape themselves into a ‘Full-fledged Adult’. Young people need their needs met (shelter, food etc) and feel safe before they can grow and learn. Young people need to develop competencies and skills to ready themselves for work and adult life. Young people need to belong, to be connected to family and community to thrive. Young people need opportunities to engage in meaningful activities, have a voice, take responsibilities for their actions and actively participate in civil discourse.

Positive youth development interventions like the Five C’s have an important role to play in the provision of adolescent support and well being within the community. The Five C’s have been designed to improve the availability and population reach of evidencebased programs through its ability to be delivered to a large number of adolescents at once and by a variety of service providers in different community contexts (e.g. education, primary health care). In addition, its preventative and inclusive focus and relatively small time commitment should make it attractive to busy working parents who do not have any particular concerns about their adolescent but would nonetheless like to receive some new and effective ideas for parenting their teenager. In combination, these factors mean that the Five C’s could be easily incorporated into programs supporting an adolescent’s transition to adulthood.

Primary prevention aims to reduce the incidence or number of new cases of an undesirable condition. But a second component of Youth Development goes beyond prevention to promote thriving, not just avoiding problems. Youth Development strategies consists of a vision, principles, aims, goals and also suggests actions that can be taken to support positive development in youths.

The basic tasks of adolescence include accustoming oneself to a physically and sexually maturing body, developing more complex ways of thinking, achieving emotional and financial independence, building an individual identity and learning how to relate to peer and parents in more adult ways. In Positive Youth Development, interest lies in what is needed for young people to grow into constructive, autonomous, individuals with a high level of well-being. The actions and support of parents, teachers, friends, school authorities and other people that adolescence come into contact with can all help them master these tasks. Working on a different angle from that of ‘prevention’ to ‘reaction’, Positive Youth Development interventions organized by researchers makes a positive difference on youth participants. Positive youth development motivates youth to achieve their full capacity and energies themselves for active engagement in meta-development. The establishment of a sound positive environment around youths is a key to their effective functioning and survival. Positive environment is dependent on positive relationships and strengths established at school, family or social environment through interactions with parents, teachers, peers and society. The development of a positive ethos within youths is the foundation for better opportunities to understand themselves as youths and engage in activities that would lead physical, psychological and social empowerment of the youth.

4.2 Unaddressed Issues

There are a number of issues in the field about which wise and well-intended people simply do not agree. They include tensions around definition, dimensions of practice and accountability. Some of these issues have been discussed in this section.

First, there is no consistent usage or agreed upon definition of youth development. This presents problems in general when speaking to those outside the youth development field. Barcelona and Quinn (2011) anchor their understanding of youth development in the world of practice. They describe youth development as an approach to working with young people that is grounded in the social and group nature of programs. They raise the question about the vague nature of the term “youth development research,” and question how this is the same or different from research on adolescents. In their article, Lerner and colleagues (2011) have adopted the term “positive youth development” or PYD which seems to focus on young people while striving to incorporate the principles and context shaping practice. Depending on the audience and purpose, the field may be

referred to as youth development, after-school, out-of-school time, informal education, complementary learning, expanded learning opportunities or nonformal learning. These are not irrelevant distinctions; they mean slightly different yet significant things to different people.

A second related issue is lack of agreement on important dimensions of youth development practice, in terms of both which practitioners are included as well as how to advance the profession. Borden et al. (2011) provide one broad, all-encompassing definition while others prefer distinct descriptions that have meaning to a particular sector and represent the nuanced nature of specific types of work.

A third area of tension involves accountability associated with research and program evaluation. Practitioners and researchers alike regularly adjust their programmatic and research agendas to fit ever-changing funding demands and priorities. While it is widely recognized that the field gains strength from a solid, scientific, experimental research base, many argue that youth development in program settings can best be understood naturalistically, ecologically, synergistically and culturally (Larson et al., 2011). As Arnold and Cater (2011) note, a limiting factor is that strong research and evaluations take time, money and knowledge resources, things that most youth serving organizations do not have.

But in the big picture (in comparison to the fields of medicine, law, education) youth development is a young field. In this 21st century, we should take the time to define the field more clearly and to decide where to be open and flexible, and where to be more prescriptive. This should be guided by the lessons of history, the converging findings of research, the missions and purposes of organizations, the philosophy and beliefs of youth workers, the requirements and accountabilities of funders, the needs of young people, and the priorities of families and communities.

4.3 Possible Solutions

There is increasing recognition that young people are complex, developing organisms that need to be understood holistically in order to promote the achievement of positive life outcomes. In order to move forward in any meaningful way with achieving population-wide healthy outcomes for youth, we need systematic approaches to work on these bridging functions:

- Extract research findings and translate them for practical application,
- Create and make available tools for teaching and training,

- Study and test the new strategies in practice settings, and
- Make findings and recommendations for practice widely available.

There is a pressing need for a coordinated, ongoing effort to sort and disseminate findings from developmental science so that what is learned can be put into practice. Blyth (2011) makes a compelling argument that real impact happens and important discoveries are made within the program environment. Likewise Larson and colleagues (2011) argue that more program level observation will benefit scholars and practitioners. Strong and influential systems play a critical role in influencing youth policy, creatively linking systems impact and public accountability, and supporting the bridging work that serves the field broadly.

4.4 Conclusion

The present study is among the first to evaluate the impact of participation in a short term program on traits considered integral for PYD (Lerner 2002) in India. The findings provide preliminary support, albeit from a small pre- to post-intervention evaluation, for the notion that adolescents can be effectively taught strategies to create intra-environments that foster Positive Youth Development. Future research on the Five C's interventions and other similar programs for adolescents and parents of teenagers should involve long-term follow-up and randomised controlled trials to provide more conclusive evidence for the effectiveness of programs in promoting the assets and competencies that help adolescents develop into healthy and well-adjusted young adults.

References

- Arnett, J. J. (1999). Adolescent storm and stress, reconsidered. *American Psychologist*, 54, 317–326.
- Arnold, M.E., & Cater, M. (2011). From Then to Now: Emerging Directions for Youth Program Evaluation. *Journal of Youth Development*, 6(3).
- Ahmad A, Khalique N, Khan Z, Amir A. Prevalence of psychosocial problems among school going male adolescents. *Indian J Community Med* 2007; 32 : 219.
- Barcelona, R.J., & Quinn, W. (2011). Trends in Youth Development Research Topics: An Integrative Review of Positive Youth Development Research Published in Selected Journals Between 2001-2010. *Journal of Youth Development*, 6(3).
- Blyth, D.A. (2011). The Future of Youth Development: Multiple Wisdoms, Alternate Pathways, and Aligned Accountability. *Journal of Youth Development*, 6(3)
- Borden, L.M., Schlomer, G.L., & Wiggs, C.B. (2011). The Evolving Role of Youth Workers. *Journal of Youth Development*, 6(3).
- Bronfenbrenner, U. (1976). The experiential ecology of education. *Educational Researcher*, 5(9),5-15.
- Bakracevic Vukman, K., & Licardo, M (2010). How cognitive, metacognitive, motivational and emotional self-regulation influence school performance in adolescence and early adulthood. *Educational Studies*, 36 (3), 259-268.
- Bandura, A. (2001). The changing face of psychology at the dawning of a globalization era. *Canadian Psychology*, 42, 12–24.
- Berk L (2001) *Development through the Lifespan*, Needham Heights, MA: Allyn and Bacon.
- Best Practices: Positive Youth Development, Oregon Commission of children and family, State of Oregon (PosYthDev.pdf)
- Broadening the Horizon: Balancing Protection and Risk for Adolescents. Department of Child and Adolescent Health and Development, World Health Organization, Geneva, 2002.
- Baruah A, Baruha A. Epidemiological study of violence: a study from North East India. *Indian J Community Med* 2007; 32 : 137-8.

- Bansal V, Goyal S, Srivastava K. Study of prevalence of depression in adolescent students of a public school. *Ind Psychiatry J* 2009; 18 : 43-6
- Childhood Mental Disorders In Rural School Children, Dr. Manju Mehta Additional Professor (Duration: 1988-91) Division Of Noncommunicable Diseases, Indian Council Of Medical Research, Ramalingaswami Bhawan, Ansari Nagar, New Delhi, 2005
- Christie, D., & Viner, R. (2005). ABC of adolescence: Adolescent development. *British Medical Journal*, 330, 301-304
- Cremin, L.A. (1964). *The transformation of the school: Progressivism in American education, 1876-1957*. New York: Vintage Books.
- Catalano, R., Berglund, M., Ryan, J., Lonczak, H. & Hawkins, D. (2004). Positive youth development in the United States: Research findings on evaluations of positive youth development programs. *The Annals of the American Academy of Political and Social Science*, 591; 98.
- Durlak JA, Taylor RD, Kawashima K, Pachan MK, DuPre EP, Celio CI, Berger SR, Dymnicki AB, Weissberg RP (2007). Effects of positive youth development programs on school, family, and community systems, *Am J Community Psychol*. 2007 Jun;39(3-4):269-86.
- Deb S, Modak S. Prevalence of violence against children in families in Tripura and its relationship with socio-economic factors. *J Inj Violence Res* 2010; 2 : 5-18. 119.
- Deb S, Chatterjee P, Walsh KM. Anxiety among high school students in India : comparisons across gender, school type, social strata, and perceptions of quality time with parents [serial on the Internet]. *Aust J Educ Dev Psychol* 2010; 10 : 18-31.
- Dignath, C., & Büttner, G. (2008). Components of fostering self-regulated learning among students. A meta-analysis on intervention studies at primary and secondary school level. *Metacognition and Learning*, 3(3), 231-264.
- Demetriou, A. (2000). Organization and development of self-understanding and self-regulation: Toward a general theory. In M. Boekaerts, P.R. Pintrich, & M. Zeidner (Eds.), *Handbook of self-regulation* (pp. 209–251). San Diego: Academic Press.

- Erikson, E. H. (1959). Identity and the life cycle. *Psychological Issues*, 1, 50-100.
- Freud, A. (1969). Adolescence as a developmental disturbance. In G. Caplan & S. Lebovici (Eds.), *Adolescence* (pp. 5-10). New York: Basic Books.
- Flay, B. R. (2002). "Positive youth development requires comprehensive health promotion programs." *American Journal of Health Behavior* **26**(6): 407-424.
- Garaigordobil, M. (2004a). Effects Of A Psychological Intervention On Factors Of Emotional Development During Adolescence. *European Journal Of Psychological Assessment*, 20, 66-80.
- Gururaj G, Murthy P, Rao GN, Benegal V. Alcohol related harm: Implications for public health and policy in India. Publication No.: 73. Bangalore: National Institute of Mental Health & Neuro Sciences; 2011. p. 160. Available from: http://www.nimhans.kar.nic.in/deaddiction/CAM/Alcohol_report_NIMHANS.pdf, accessed on January 14, 2013.
- Gajalakshmi V, Kanimozhi CV. A survey of 24,000 students aged 13-15 years in India: Global Youth Tobacco Survey 2006 and 2009. *Tob Use Insights* 2010; 3 : 23-31.
- Ghaderi AR, Kumar GV, Kumar S. Depression, anxiety and stress among the Indian and Iranian students. *J Indian Acad Appl Psychol* 2009; 35 : 33-7.
- Hines, A.R. & Paulson, S.E. (2006). Parents and teachers perceptions of adolescent storm and stress: Relations with parenting and teaching styles. *Adolescence*, 41, 164, 597-614.
- Harper & Row. Hamilton, S.F. & Hamilton, M.A. (Eds). (2004). *The youth development handbook: Coming of age in American communities*. Thousand Oaks: Sage.
- Hall, G. S. (1904). *Adolescence: Its psychology and its relations to physiology, anthropology, sociology, sex, crime, religion, and education*. New York: Appleton
- Ilona Kajokienė et al (2015). "The Effects of Lithuanian School-Based Positive Youth Development Program on Positive and Problem Outcomes, *International Journal of Psychological Studies*; Vol. 7, No. 4; 2015
- Karoly, P., Boekaerts, M., & Maes, S., (2005). Toward consensus in the psychology of self-regulation: How far have we come? How far do we have yet to travel? *Applied Psychology*, 54, 300–311.

- Konopka, G. (1973). Requirements for healthy development of adolescent youth. *Adolescence*, 8(31), 2-25.
- Kurtines, W. M., & Silverman, W. K. (1999). Emerging views of the role of theory. *Journal of Clinical Child Psychology*, 28, 558-562.
- Kuhn, D. (2009). Adolescent thinking. In R. M. Lerner & L. Steinberg (Eds.), *Handbook of adolescent psychology* (3rd ed., pp. 152-186). Hoboken, NJ: John Wiley & Sons.
- Kirby, D. **Emerging Answers 2007: Research findings on programs to reduce teen pregnancy and sexually transmitted diseases**. National Campaign to Prevent Teen and Unplanned Pregnancy, Washington, DC; 2007
- Kumar J, Deshmukh PR, Garg BS. Prevalence and correlates of sustained hypertension in adolescents of Rural Wardha, Central India. *Indian J Pediatr* 2012; 79 : 1206-12.
- Latha KS, Reddy H. Patterns of stress, coping styles and social supports among adolescents. *J Indian Assoc Child Adolesc Ment Health* 2007; 3 : 5-9.
- Lerner, Richard M., Celia B. Fisher, and Richard A. Weinberg (2000). Toward a science for and of the people: Promoting civil society through the application of developmental science. *Child Development*, 71(1): 11-20.
- Lerner, R.J., Lerner, J.V., Lewin-Bizan, S., Bowers, E.P., Boyd, M. J., Kiely Mueller, M., et al. (2011). Positive Youth Development: Processes, Programs, and Problematics. *Journal of Youth Development*, 6(3).
- Lerner, R. M. (2006). Developmental science, developmental systems, and contemporary theories of human development. In R. M. Lerner (Ed.), & Richard M. Lerner, & William Damon (Editor-in-Chief). *Theoretical models of human development. Handbook of child psychology* (Vol. 1, 6th ed., pp. 1–17). New York: Wiley
- Luciana, M. (2014). Adolescent brain development in normality and psychopathology.
- Larson, R.W., Kang, H., Cole Perry, S., & Walker, K.C. (2011). New Horizons: Understanding the Processes and Practices of Youth Development. *Journal of Youth Development*, 6(3).
- Lerner, R.J., Lerner, J.V., Lewin-Bizan, S., Bowers, E.P., Boyd, M. J., Kiely Mueller, M., et al. (2011). Positive Youth Development: Processes, Programs, and Problematics. *Journal of Youth Development*, 6(3).

- Montgomery, M. J., Kurtines, W. M., Ferrer-Wreder, L., Berman, S. L., Lorente, C. C., Briones, E., Silverman, W., Ritchie, R., & Eichas, K. (2008). A Developmental Intervention Science (DIS) outreach research approach to promoting youth development: Theoretical, methodological, and meta-theoretical challenges. *Journal of Adolescent Research*, 23, 268-290.
- Miller, J. G., Bersoff, D. M., & Harwood, R. L. (1990). Perceptions of social responsibilities in India and in the United States: moral imperatives or personal decisions? *Journal of Personality and Social Psychology*, 58(1), 33–47.
- Mission Australia. (2010). National survey of young Australians: Key and emerging issues. Retrieved August 1, 2011, from <http://www.missionaustralia.com.au/downloads/national-survey-of-young-australians/271-2010>
- National Research Council and Institute of Medicine (2013) Improving Inter-group Relations among Youth: Summary of a Research Workshop. Forum on Adolescence, Board on Children, Youth, and Families, Commission on Behavioral and Social Sciences and Education. Washington, DC: National Academy Press.
- Narayanappa D, Rajani HS, Mahendrappa KB, Ravikumar VG. Prevalence of prehypertension and hypertension among urban and rural school going children. *Indian Pediatr* 2012; 49 : 755-6.
- Non-Communicable diseases and adolescents- an opportunity for action. The AstraZeneca. Available from: <http://www.jhsph.edu/research/centers-and-institutes/center-for-adolescenthealth/az/noncommunicable.pdf>, accessed on May 20, 2013.
- Nair MK, Paul MK, John R. Prevalence of depression among adolescents. *Indian J Pediatr* 2004; 71 : 523-4.
- Overton, W. F. (2010). Life-span development: Concepts and issues. In W. F. Overton (Ed.), *Cognition, biology, and methods* (pp. 1–29). Vol. 1 of R. M. Lerner (Ed.-in-Chief), *The handbook of life-span development*. Hoboken, NJ: Wiley
- Piaget, J. (1970). Piaget's theory. In P.H. Mussen (Ed.), *Carmichael's manual of child psychology*. Vol. 1 (3rd ed., pp. 703–723). New York: Wiley.

- Posner, M.I., & Rothbart, M.K. (2000). Developing mechanisms of self-regulation. *Development and Psychopathology*, 12, 427–441.
- Pittman, K., Irby, M., and Ferber, T. *Unfinished Business: Further Reflections on a Decade of Promoting Youth Development*. Tacoma Park, MD: The Forum for Youth Investment.
- *Promoting Positive Youth Development in New York State: Moving From Dialogue to Action*. August 2000. Partners for Children.
- Pal R, Tsering D. Tobacco use in Indian high-school students. *Int J Green Pharm* 2009; 3 : 319-23.
- Ravens-Sieberer, U., Erhart, M., Gosch, A., & Wille, N. (2008). Mental health of children and adolescents in 12 European countries - results from the European KIDSCREEN study. *Clinical Psychology and Psychotherapy*, 15, 154-163
- Reddy VM, Chandrashekar CR. Prevalence of mental and behavioural disorders in India: a meta-analysis. *Indian J Psychiatry* 1998; 40 : 149-57.
- Roth, J. L. and J. Brooks-Gunn (2003). "What exactly is a youth development program? Answers from research and practice." *Applied Developmental Science* 7(2): 94-111.
- Smetana, J. G., Campione-Barr, N., & Metzger, A. (2006). Adolescent development in interpersonal and social contexts. *Annual Review of Psychology*, 57, 255-284.
- Sawyer, M. G., et al. (2000). The National Survey of Mental Health and Wellbeing: The child and adolescent component. *Australian and New Zealand Journal of Psychiatry*, 34, 214-220.
- Sharma R, Grover VL, Chaturvedi S. Risk behaviors related to inter-personal violence among school and college-going adolescents in south Delhi. *Indian J Community Med* 2008; 33 : 85-8
- Sharma A, Grover N, Kaushik S, Bhardwaj R, Sankhyan N. Prevalence of hypertension among schoolchildren in Shimla. *Indian Pediatr* 2010; 47 : 873-6.
- Sahoo S, Khess CR. Prevalence of depression, anxiety, and stress among young male adults in India: a dimensional and categorical diagnoses-based study. *J Nerv Ment Dis* 2010; 198 : 901-4.
- *The Mentoring Fact Sheet*, U.S. Department of Education, Office of Safe and Drug-Free Schools, Mentoring Resource Center, 13.January. 2007

- Thomas Armstrong, *The Human Odyssey: Navigating the Twelve Stages of Life*. New York: Sterling, 2008.
- US Department of Health and Human Services. July 1996. *Reconnecting Youth and Community: A Youth Development Approach*. Washington, DC: National Clearinghouse on Families and Youth.
- US Department of Health and Human Services. January 1997. *Understanding Youth Development: Promoting Positive Pathways of Growth*. Washington DC: CSR, Incorporated.
- U.S. Congress, Office of Technology Assessment, Indian Adolescent Mental Health OTA-H-446 (Washington, DC: U.S. Government Printing Office, January 1990).
- United Nations Children's Fund (UNICEF), Adolescents in India A desk review of existing evidence and behaviours, programmes, and policies, November 2013
- World Health Organization. 10 facts on adolescent health. Available from: http://www.who.int/features/factfiles/adolescent_health/facts/en/index4.html, accessed on January 14, 2013.
- Zimmerman, B. J. (2002). Achieving self-regulation: The trial and triumph of adolescence. In F. Pajares & T. Urdan (Eds.), *Academic motivation of adolescents* (pp. 1-28). Greenwich, CT: Information Age.

Online Resources

- British Youth Council (2008) 'Recognise and Respect Us' Overcoming Barriers to Youth Volunteering Available online: <http://www.byc.org.uk/media/18384/Recognise%20and%20Respect%20Us.%20Overcoming%20Barriers%20to%20Youth%20Volunteering.%20Full%20Report%2024%20July%202009.pdf>
- <http://5promiseshc.org/the-5-promises/> For five promises
- <http://www.search-institute.org/assets>. For a list of the 40 Developmental Assets, see <http://www.search-institute.org/assets/forty.htm>
- <http://www.bbbs.org> For big brother big sister
- <https://www.selfenhancement.org> For Self Enhancement Inc

- www.youthasresources.org For Youth as resources
- Adolescent Health Services: Missing Opportunities. Available from: http://books.nap.edu/openbook.php?record_id=12063&page=1, accessed on January 8, 2013.
- Young people: health risks and solutions. Fact sheet no. 345. World Health Organization; 2011. Available from: <http://www.who.int/mediacentre/factsheets/fs345/en/index.html>, accessed on June 8, 2013. 9.