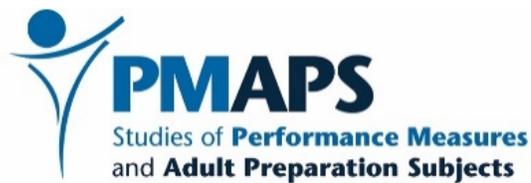


CONCEPTUAL MODELS FOR ADULTHOOD PREPARATION SUBJECTS WITHIN THE PERSONAL RESPONSIBILITY EDUCATION PROGRAM (PREP)



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IX. UNIFIED FRAMEWORK FOR ADDRESSING ADULTHOOD PREPARATION SUBJECTS IN PREP

Mathematica:

Elizabeth Clary
Heather Zaveri
Christopher Jones
Katie Eddins
Katie Adamek

Child Trends:

Kristin A. Moore
Mindy E. Scott
Deana Around Him
Monica Arkin
Isabel Griffith

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IX. UNIFIED FRAMEWORK FOR ADDRESSING ADULTHOOD PREPARATION SUBJECTS IN PREP

For the APS conceptual models study, the study team developed conceptual models for the six APSs (adolescent development, educational and career success, financial literacy, healthy life skills, healthy relationships and parent-child communication). The team then developed a unified framework to identify connections across subjects and explore how to incorporate positive youth development (PYD) into PREP programming. Together, the models and framework are intended to help ACF support effective programs by providing PREP grantees with guidance on what constitutes adulthood preparation programming, what infrastructure is needed to support it, how to offer such programming within adolescent pregnancy prevention programs, and what outcomes are anticipated. The models draw on theoretical and empirical literature. Other sources included consultations with stakeholders and experts; feedback from staff in FYSB and OPRE; and interviews with PREP grantees about their experiences designing and implementing APS programming.

The Family and Youth Services Bureau (FYSB) and the Office of Planning, Research, and Evaluation (OPRE), both within the Administration for Children and Families (ACF), contracted with Mathematica and its partner, Child Trends, to develop conceptual models for the adulthood preparation subjects (APSs) and to determine how they fit within PREP programming.

PREP grantees must adhere to four program requirements: (1) implement evidence-based or evidence-informed curricula; (2) provide education on both abstinence and contraception for the prevention of pregnancy, sexually transmitted infections (STIs), and HIV; (3) educate youth on at least three of six APSs; and (4) focus on high-risk populations, such as youth residing in geographic areas with high teen birth rates, adjudicated youth, youth in foster care, minority youth, and pregnant or parenting teens. PREP grantees are also required to implement a positive youth development (PYD) approach in their programs. Grantees have discretion in how to meet these requirements. This discretion allows them to tailor their programs to fit the needs of the targeted population and their priorities.

The intention of supplementing pregnancy prevention programs with APS content is to further prepare youth for the transition to adulthood. It is hypothesized that incorporating APS content will strengthen the ability of programs to reduce sexual risk behaviors and expand the range of outcomes that programs affect.

This report is a first step toward helping PREP grantees understand issues of integrating and implementing APSs into their programming. The information presented herein reflects grantee perspectives and published literature on the APSs. The primary aim of this report is to provide grantees with a framework to support the implementation of APSs in their projects.

This chapter presents the APS unified framework through a schematic and supporting narrative. It starts by discussing the purpose of the framework (Section A) and briefly describing how the study team developed it (Section B). Section C describes the model and how it differs from the APS conceptual models. Sections D, E, and F review each component of the unified framework, with Section E focusing specifically on PYD. Section G offers suggestions to PREP grantees for using it.

A. Purpose of the APS unified framework

The APS unified framework is intended to help PREP grantees understand how the addition of APS content, including use of a positive youth development (PYD) approach, can improve

outcomes for participating youth. The framework first identifies commonalities across the six APS conceptual models, focusing on the precursors and outcomes that are common across APSs. PREP grantees can use the precursors in the unified framework to understand the needs of their target population of youth, or to choose which APSs to cover based on relevant precursors. Grantees can also use the model to target specific enhanced or expanded outcomes, selecting the APSs that show changes in the outcomes of interest.

The unified framework does not include program topics or design and implementation features, because those elements are largely distinct for each APS, so there are few overlaps. Instead, the framework describes the PYD approach that is relevant to all APSs and demonstrates how it can support positive outcomes in PREP programs. The Interagency Working Group on Youth Programs defines PYD as:

An intentional, prosocial 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 young people’s 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 (FYSB 2007).

Other definitions of PYD emphasize that youth can experience positive development and contribute to their families, schools, and communities if they receive guidance and support from caring adults (Singson 2015). Research has shown that incorporating PYD principles can enhance youths’ strengths, help engage youth in their communities, and promote positive relationships and opportunities for them (Gavin et al. 2010).

B. Development of the APS unified framework

The unified framework builds from the six APS conceptual models. Each APS conceptual model schematic follows a common layout that includes precursors, program topics, design and implementation features, and expected outcomes. The unified framework integrates precursors and outcomes across APSs. Precursors—factors that influence youth who participate in PREP programming—include developmental tasks, risk factors, and protective factors. Outcomes are expected changes in youth behaviors as a result of participating in programming for the APS. The study team organized outcomes into two categories—enhanced and expanded—based on whether they focus on changes to outcomes related to the prevention of pregnancy and STIs among youth (enhanced) or outcomes not related to the prevention of pregnancy and STIs among youth (expanded).

To develop the unified framework, the team created a series of tables that listed the precursors and outcomes included in each APS model and identified the APSs that were relevant for each precursor and outcome (included in Appendix C). They then reviewed the tables to identify common precursors and outcomes. The unified framework includes only precursors and outcomes that were included in two or more APS conceptual models. Therefore, some precursors and outcomes are missing from the unified framework but are important for a specific APS.

C. APS unified framework model

Figure IX.1 shows the APS unified framework, which depicts commonalities across the six APS conceptual models for the precursors and outcomes, which are listed in descending order, beginning with those relevant to the most APSs. For each precursor and outcome, the framework uses abbreviations to identify the relevant APS:

- AD: adolescent development
- EC: educational and career success
- FL: financial literacy
- HL: healthy life skills
- HR: healthy relationships
- PC: parent-child communication

In addition, the unified framework incorporates PYD principles, which are applicable to all six APSs. The following sections describe each component.

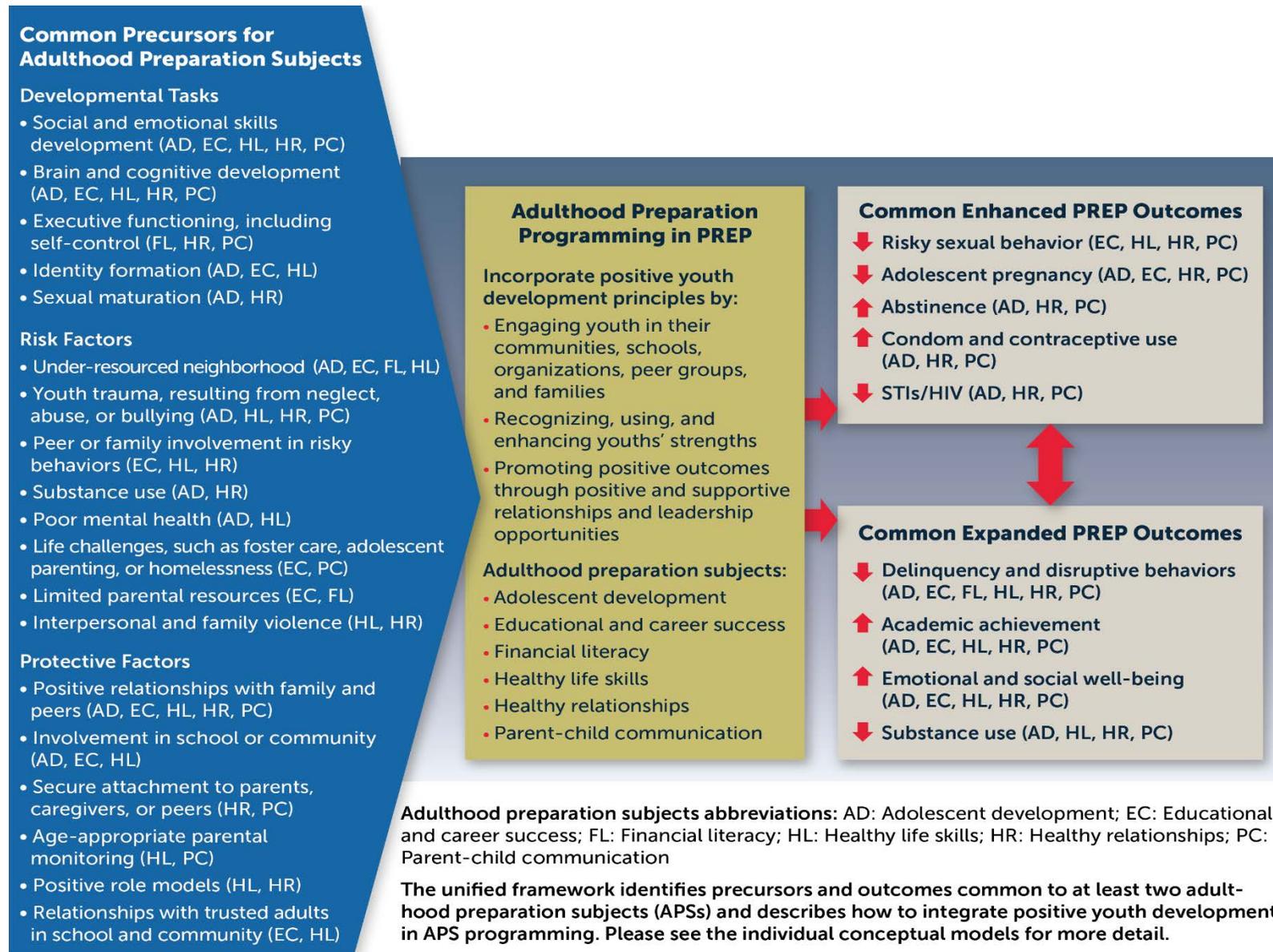
D. Precursors for adulthood preparation subjects

The unified framework starts with three sets of precursors for adulthood preparation: developmental tasks, risk factors, and protective factors. Developmental tasks recognize that adolescents start at different places and progress at different rates through social and emotional skills development, brain and cognitive development, executive functioning, identity formation, and sexual maturation. Risk factors make youth more likely to engage in negative behaviors or harder for them to develop strengths; protective factors make youth less likely to engage in negative behaviors, mitigate risks, and promote resilience and positive development among youth.

Developmental tasks. The APS conceptual models identified nine developmental tasks across the six APS schematics. Five development tasks were identified for at least two APSs.²³

1. **Social and emotional skills development** (AD, EC, HL, HR, PC): Social skills development includes feeling connected to and having trust with parents, peers, and other adults; feeling connected and valued by larger social networks; and having a commitment to civic engagement. Although peer relationships take on greater importance as youth mature, the process of relationship exploration is unique to each individual. During adolescence, youth also develop emotional skills, including positive self-regard; coping and conflict resolution skills; self-efficacy; prosocial and culturally sensitive values; and strong moral character.

²³ Because the unified framework presents a high-level summary of findings, citations are not included in the lists of developmental tasks, risk and protective factors, or outcomes. Detailed findings are in the individual APS chapters. A list of references, by chapter, is in Appendix A.

Figure IX.1. Unified Framework Model

2. **Brain and cognitive development** (AD, EC, HL, HR, PC): Brains continue to develop during adolescence and, in some ways, throughout the life span, contributing to the development and refinement of social, academic, emotional, and communication skills. Brain development during adolescence enhances youths' capacity to build critical thinking and reasoning skills that allow them to think more abstractly, self-regulate emotions, and take the perspective of others.
3. **Executive functioning, including self-control** (FL, HR, PC): Executive functioning is a set of mental skills that help one to remain focused on the task at hand and to juggle multiple priorities. Self-control is the ability to inhibit impulsivity, regulate one's emotions, delay gratification, and process information. These skills are learned throughout life, starting at a young age, and are necessary for everyday functioning.
4. **Identity formation** (AD, EC, HL): Adolescents typically form their identity by exploring their abilities and future potential and defining their sexual, ethnic, or cultural identity.
5. **Sexual maturation** (AD, HR): Sexual maturation is defined by the physical onset of puberty and the ability of youth to reproduce. Youth progress through sexual maturation at different rates, depending on the timing of their hormonal changes.

Risk factors. The APS schematics included 28 risk factors, of which 8 were relevant in at least two APSs. The following list identifies and briefly describes the 8.

1. **Under-resourced neighborhood** (AD, EC, FL, HL): Economically and resource challenged neighborhoods that lack resources to promote healthy development (such as high quality and safe schools, safe communities, employment opportunities, and mainstream financial institutions) may contribute to negative outcomes for youth.
 2. **Youth trauma, resulting from neglect, abuse, or bullying** (AD, HL, HR, PC): Experiencing trauma during **childhood** or adolescence increases the likelihood of negative outcomes related to mental health, physical health and development, and social competence in adulthood.
 3. **Peer or family involvement in risky behaviors** (EC, HL, HR): Peers and family members who are currently or were previously involved in risky behaviors, such as substance use, risky sexual behavior, delinquency, or violence (such as fighting or dating violence), may influence youth to become involved in these behaviors as well.
 4. **Substance use** (AD, HR): Youth who drink alcohol or use drugs are at risk for both dating violence and risky sexual behaviors. Substance use is also positively correlated with early initiation of sexual behavior, low contraceptive use among those who are sexually active, delinquency, and academic failure.
 5. **Poor mental health** (AD, HL): Youth who experience mental health problems, such as depression, anxiety, or post-traumatic stress disorder, may be at increased risk of poor outcomes related to life skills and adolescent development, including sexual health.
 6. **Life challenges (such as foster care, adolescent parenting, or homelessness)** (EC, PC): Life challenges, such as dropping out of school, living in a juvenile detention center
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or foster care, and being pregnant or parenting, can lead adolescents to engage in risky sexual behavior.

7. **Limited parental resources** (EC, FL): Potential risk factors for youth may include their parents' and caregivers' behaviors and practices, including attitudes and expectations toward learning, such as the importance of education, and parents' and caregivers' access to resources, including time, as well as human, social, and financial capital. When parents are less involved at home or at school, that can negatively affect the parent-child relationship and the child's academic achievement.
8. **Interpersonal and family violence** (HL, HR): Youth who experience family or interpersonal violence, including dating violence, are more likely to engage in unhealthy relationships or risky sexual behaviors and are thus at higher risk for adolescent pregnancy.

Protective factors. Across the six APS schematics, the study team identified 21 protective factors, of which the following 6 were relevant in at least two schematics:

1. **Positive relationships with family and peers** (AD, EC, HL, HR, PC): Positive relationships with family members and peers protect against negative outcomes for youth, such as engagement in risky behaviors, and may contribute to youth developing prosocial behaviors and attitudes related to sexual health, such as the prevention of pregnancy and STIs.
2. **Involvement in school or community** (AD, EC, HL): Civic engagement through school or the community may contribute to youths' social and physical development.
3. **Secure attachment to parents, caregivers, or peers** (HR, PC): Increased closeness and satisfaction with the parent-child relationship leads youth to be more comfortable communicating with their parents and caregivers. Secure attachments with close prosocial friends may allow youth to better express and regulate their emotions.
4. **Age-appropriate parental monitoring** (HL, PC): Age-appropriate, consistent parental monitoring is linked to reduced youth engagement in sexual activity.
5. **Positive role models** (HL, HR): Youth who have positive role models are more likely to engage in healthy dating behaviors and to show greater resilience and better academic achievement, motivation, and success.
6. **Relationships with trusted adults in school and community** (EC, HL): Youth who witness and experience positive, supportive relationships with adults in schools or the community are more likely to develop positive coping skills, healthy relationships, and successful strategies to solve problems and achieve goals.

E. Adulthood preparation programming in PREP

APS programming in PREP includes two components. First, grantees are required to incorporate PYD into their programs. Second, as required in the legislation that established PREP, grantees must select at least three of the six APSs and offer content for them. The unified framework highlights the PYD approach that all PREP grantees must use. Because content and

implementation strategies are unique to each APS, they are not part of the unified framework. Instead, such strategies can be found in the individual APS schematics.

PYD is not a specific curriculum or program model; it is both a framework for thinking about how youth develop and a way to structure programming for youth. PYD emphasizes (1) youths' strengths rather than their shortcomings, (2) positive relationships, and (3) the context and opportunity for youth to gain competencies (Gavin et al. 2010; Singson 2015; FYSB 2007). Applying a PYD approach strengthens adolescents' ability to respond effectively to developmental changes and challenges (Gavin et al. 2010). Using the PYD framework enhances the prospect of youth engagement and positive outcomes (House et al. 2010; Catalano et al. 2004; Guerra and Bradshaw 2008, FYSB 2007).

Programs can provide opportunities for youth engagement and leadership at the personal, organizational, and community levels. At the personal level, programs can stimulate youth leadership and growth, by asking youth (1) to take on leadership roles, (2) to plan and lead activities, and (3) to use or display creative talent such as art, writing, or athletics. At the organizational level, programs can include youth in decision making, governance, and rule making; gather youth input on new programs; and provide opportunities for youth to mentor or tutor other youth. At the community level, programs can provide volunteering opportunities and encourage youth to make their voices heard through participation in governance, decision making, or the media (for example, through a youth-run newspaper, website, or radio station) (FYSB 2007).

F. Outcomes for adulthood preparation subjects

Together, the six APS conceptual models identified 50 outcomes (14 enhanced, 36 expanded) that programming in at least one APS would affect. Of these 50, the unified framework includes 5 enhanced and 4 expanded outcomes that were present in at least two APS schematics. The conceptual models identified outcomes as short-, medium-, or long-term, depending on when change could be expected to occur. The unified framework does not make this distinction, because the expected timing of three outcomes (emotional and social well-being, substance use, and academic achievement) varied across APSs. The following list describes each outcome shared across two or more APSs, and factors that influence the outcome.

Enhanced PREP outcomes

1. **Risky sexual behavior** (EC, HL, HR, PC): Positive relationships with peers and partners, positive role models, life skills programming, improved self-efficacy, positive attitudes about their ability to learn and their future potential, positive attitudes and knowledge about sex, and improved parent-child communication may lead to reduced engagement in risky sexual behaviors, such as multiple sexual partners and having sex while under the influence of alcohol or drugs.
 2. **Adolescent pregnancy** (AD, EC, HR, PC): Healthy relationship education; life skills programming that promotes academic achievement and goal-setting; and improved attitudes, beliefs, and knowledge related to parent-child communication may contribute to decreases in adolescent pregnancy.
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3. **Abstinence** (AD, HR, PC): Strong connections and positive bonds to adults, improved parent-child communication, the perception that peers are not engaging in sexual activity, and increased perceptions of attachment to or love for a romantic partner may contribute to increased abstinence and a delay of sexual initiation.
4. **Condom and contraceptive use** (AD, HR, PC): Academic achievement; positive relationships with peers and partners; and improved attitudes, beliefs, and knowledge about sexual health may contribute to higher rates of condom and contraceptive use.
5. **STIs/HIV** (AD, HR, PC): Improved parent-child communication is associated with improved attitudes, beliefs, and knowledge about STIs and HIV. Youth who have had only a single romantic relationship or demonstrate healthy relationship skills are at lower risk of contracting an STI or HIV.

Expanded PREP outcomes

1. **Delinquency and disruptive behaviors** (AD, EC, FL, HL, HR, PC): Improved communication and conflict resolution skills, increased relationship quality with peers, improved life skills, and increased parental monitoring may contribute to reduced involvement in delinquency or disruptive behaviors.
2. **Academic achievement** (AD, EC, HL, HR, PC): Improved life skills, such as those that promote positive social adjustment; development of goal-setting and problem-solving skills; positive relationships as young adults; and positive parent-child communication, may contribute to improved academic achievement.
3. **Emotional and social well-being** (AD, EC, HL, HR, PC): Improved social skills, healthy relationship and life skills, and positive parent-child communication may contribute to improved emotional and social well-being.
4. **Substance use** (AD, HL, HR, PC): Having a positive role model, enhancing youths' social competency and self-management skills, and engaging in positive parent-child communication may lead to decreased substance use.

G. Conclusions

The purpose of incorporating APS content into PREP programming is to help youth improve their physical, cognitive, social, and emotional well-being, which in turn may result in decreased involvement in risky sexual behaviors, delinquency, and substance use, among other outcomes. Across the six APSs identified in the PREP legislation, there are numerous common factors that may influence outcomes. Using the unified framework to identify these factors may assist PREP grantees in selecting which APSs to cover, based on their target populations or outcomes. Further, by incorporating PYD principles into APS programming, PREP programs may enhance youths' strengths, engage youth in their communities, and promote positive relationships and opportunities for the youth they serve. The unified framework and the individual APS schematics are resources to help grantees determine what constitutes APS programming, what infrastructure is needed to support this programming within adolescent pregnancy prevention programs, and how APS programming might affect youth outcomes. A program's ability to achieve the intended results will depend in part on the content presented to youth, the quality of program implementation, and youths' attendance and engagement. PREP grantees should strive to implement high quality programs that present APS content to youth in an engaging manner.
