

Supporting Youth at Risk



A Policy Toolkit for Middle Income Countries

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Middle-Income Countries



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Toolkit Overview

This policy toolkit on youth at risk in middle-income countries contains five sections:

Section I: Introduction

- Background and Rationale
- Definitions and Conceptual Framework

Section II: Core Policies (6)

These six policies have an established track record in *preventing* disadvantaged children and young people from engaging in risky behavior and, thus, should form the basis of any country's youth portfolio. We recommend that governments of middle-income countries should adopt and implement these policies on a large scale. These core policies consist of (i) expanding integrated early child development for children from poor households; (ii) increasing the number of young people who complete secondary school, particularly those from poor families; (iii) using the fact that students are a captive audience while in school to provide them with key risk prevention messages and to identify at-risk youth who are in need of remedial support; (iv) developing youth-friendly pharmaceutical services; (v) using the media to describe the costs of risky behavior and present alternatives (combined with improved services); and (vi) promoting effective parenting of and by young people.

Section III: Promising Approaches (9)

These nine approaches focus on *helping* those affected by risky behavior to recover and return to a safe, productive path to adulthood. Young people in this category range from school dropouts to the incarcerated and are more difficult to reach than others in their age group. Although not as many of the interventions in this category have yet been evaluated, there is sufficient evidence to enable us to make some recommendations in the areas of (i) education equivalency, (ii) job training, (iii) financial incentives for completing secondary school, (iv) after-school programs, (v) formal youth service programs, (vi) mentoring, (vii) employment services, (viii) life skills training in all interventions aimed at youth at risk, and (ix) self-employment and entrepreneur programs.

Section IV: General Policies with a Disproportionately Positive Effect on Youth at Risk (7)

These seven policies address critical risk factors at the community and macro levels, but also have been shown to be particularly effective at reducing risky behavior by young people and should therefore form an essential part of an overall strategy to reduce the number of youth at risk. Examples of these types of policies include (i) safe neighborhood investments that support community policing and improved services for high-violence communities, (ii) reducing the availability of firearms, (iii) restricting the sale of alcohol, (iv) increasing access to contraception, (v) promoting anti-violence messages in all media, (vi) strengthening the justice system to focus on treating and rehabilitating rather than incarcerating young people, and (vii) registering the undocumented.

Section V: Moving from a Wish List to Action

This section presents strategies and tools for turning these policy recommendations into a well-designed and well-implemented youth portfolio. Included in this section are thoughts on how to assign and coordinate institutional responsibilities based on comparative advantage; how to reallocate resources away from ineffective programs toward recommended programs; how to improve the development, analysis, and use of data for program monitoring and impact evaluations; how to select programs based on cost-effectiveness and a cost-benefit analysis; and how to benchmark progress against international data sources.

Introduction

Background and Rationale

Today, there are 1.5 billion people between the ages of 12 and 24 worldwide, with 1.3 billion of them living in developing countries—making the young the largest segment of developing country population in recorded history. More important, young people constitute a disproportionately large part of the world’s poor. While they represent 50 percent of the developing country population, they represent nearly 60 percent of the poor in those countries.¹ Young people can be a source of growth and development for their countries, but a subset of young people—those known as youth at risk—are a source of the inequality, poverty, exclusion, and much of the crime and violence that plagues every region in the world, thereby imposing enormous costs on themselves, their families, and society at large.

The World Bank has produced this Policy Toolkit in response to a growing demand from our government clients and partners for advice on how to create and implement effective policies for at-risk youth. We have highlighted 22 policies (six core policies, nine promising policies, and seven general policies) that have been effective in addressing the following five key risk areas for young people around the world:

- i) youth unemployment, underemployment, and lack of formal sector employment
- ii) early school leaving
- iii) risky sexual behavior leading to early childbearing and HIV/AIDS
- iv) crime and violence
- v) substance abuse

The objective of this Toolkit is to serve as a practical guide for policy makers in middle-income countries—as well as professionals working within the area of youth development—on how to develop and implement an effective policy portfolio to foster healthy and positive youth development.

Definitions and Conceptual Framework

Youth at risk can be defined as individuals between the ages of 12 and 24 who face “environmental, social, and family conditions that hinder their personal development and their successful integration into society as productive citizens.”² They have a greater propensity than their peers to engage in or be subject to *risky behavior*, including school absenteeism, risky sexual behavior, delinquency, violence, and substance use and abuse. The consequences of these risky kinds of behavior are extremely costly to young people in terms of their ability to make a successful transition to adulthood and include such *negative outcomes* as school dropout, unemployment, adolescent pregnancy, sexually transmitted diseases, addiction, incarceration, and social exclusion.

Risk Factors and Protective Factors

- **Risk factors** are those that increase the likelihood that a young person will experience negative outcomes.
- **Protective factors** are those that have been associated with reducing negative outcomes or that increase the likelihood that a young person will make a positive transition into adulthood.

Risky Behavior and Negative Outcomes

- **Risky behavior** consists of those actions that hinder the development of a young person’s human capital and impede his or her successful integration into society. Risky kinds of behavior include the following, among others: not attending school, poor academic performance, working in settings that are damaging to a young person’s development (including premature entry into the labor market or working in illicit activities against one’s will), having unprotected or unsafe sex, participating in criminal or violent activities, drug dealing, and substance use and abuse (including alcohol).
- For the unfortunate, risky behavior leads to **negative outcomes**, such as school dropout, adolescent pregnancy, addiction to drugs or alcohol, or incarceration. Because of the enormous costs of these outcomes—both to the individual and to society—this is where the key concerns of policy makers lie. Yet, once a young person has experienced these outcomes, his or her return to a positive path of development is often costly. Therefore, it is usually more beneficial to youth and more cost-effective for societies to promote the healthy development of young people through limiting their exposure to risk and equipping them with the skills and coping mechanisms they need to resist engaging in risky behavior.

Types of At-Risk Youth

During the crucial transition from dependence to independence, disadvantaged young people become more vulnerable to environmental factors that may qualify them as “at risk.” It is important to distinguish among the levels of risk that young people face at various stages of their development to formulate the most appropriate policies accordingly. Young people tend to fall into one of the following three types:

- **Type I**—Young people who face risk factors in their lives but who have not yet engaged in risky behavior (for example, those living in disadvantaged situations who are at risk of dropping out of school or of being unemployed).
- **Type II**—Young people who engage in risky behavior but have not yet suffered severe negative consequences (for example, youth who are often absent from school but have not yet dropped out, youth who are engaged in risky sexual behavior but have not yet acquired a sexually transmitted disease (STD), or youth who are involved in delinquent activities but have not yet been arrested).
- **Type III**—Young people who are experiencing severe negative consequences as a result of risky behavior (for example, youth who have dropped out of school, youth who have experienced unplanned pregnancies or have contracted HIV/AIDS, youth who are incarcerated, and youth who are addicted to alcohol or drugs).

What Factors Influence Risky Behavior?

- Factors at the **individual level** are related to the cognitive, physiological, and behavioral nature of the individual, much of which is determined in early childhood.³ While some individual risk factors are biological—such as race, sex, ethnicity, and mental or physical disabilities—many are strongly influenced by a person’s environment and by the interaction between this environment and the individual’s inherited traits. For example, the existence and intensity of rage and violence among children and youth often vary depending on the level of violence to which these youth have been exposed, both within the family and through society.⁴ In a nonsupportive environment, children and youth can also be led to believe that they are worthless, which may prompt them to drop out of school or engage in risky sexual behavior. By contrast, protective factors at the individual level include strong self-esteem and social skills, a positive self-image, and spiritual beliefs.
- The **micro level** refers to the institutions and individuals with which a young person interacts on a personal basis, generally at the community level, including families, peers, schools, teachers,

neighborhoods, the police, and health personnel. *Interpersonal relationships* such as these play a crucial role in influencing a young person's choice to engage in risky behavior. Of these relationships, the family seems to be the primary source of both risk and protective factors. Key risk factors include abuse and violence in the household, parental substance abuse, or general violence including corporal punishment, and household poverty.⁵

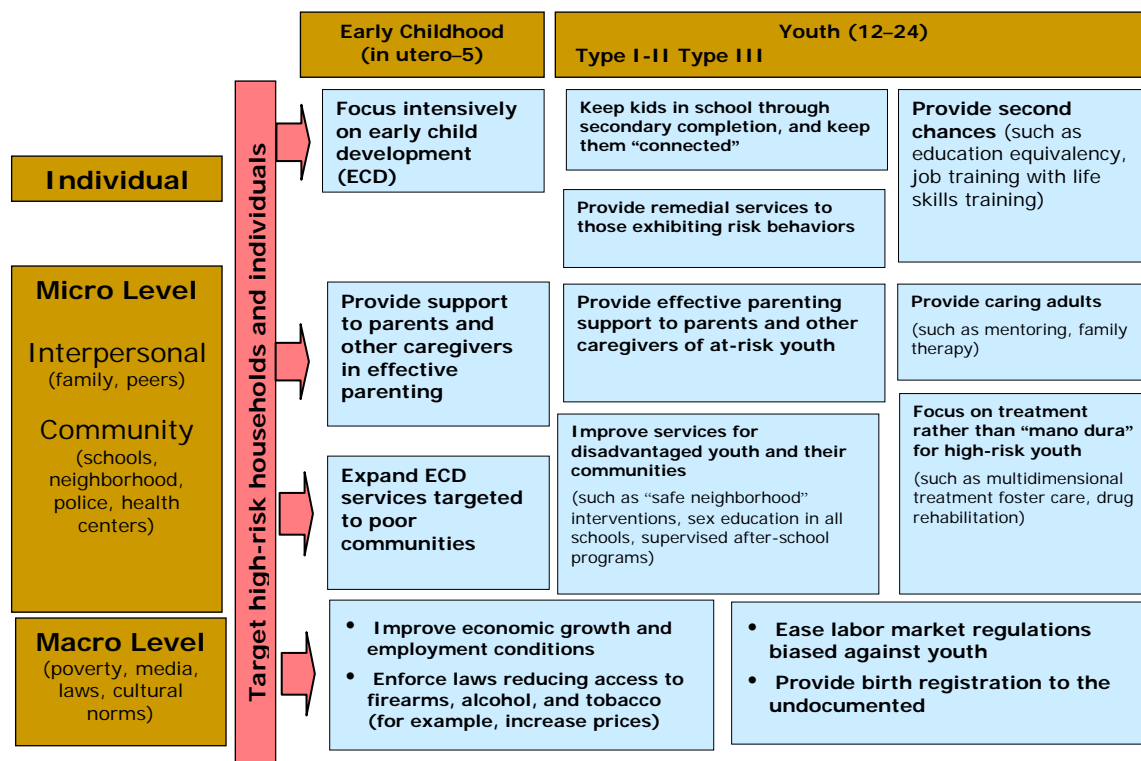
Communities also have an important influence on risky youth behavior through such factors as the availability and quality of schools, neighborhood safety, police presence, and what relationships a young person has with other young people in the community. As with families, schools and school connectedness play a central protective role in the lives of young people, especially during the secondary school years when young people are most likely to engage in risky behavior, particularly if they have dropped out of school.⁶ It is important to note that young people rely more or less heavily on certain types of micro-level factors at different stages of their development. For example, their peers become increasingly influential in their early teens, although family continues to play an important role.

- ***The macro level*** refers to the systems and institutions that affect an individual but with which he or she has no direct contact, such as overall economic conditions, income inequality, the media, laws, and cultural norms. For example, macro-level factors that contribute to youth violence include economic and social policies that maintain socioeconomic inequalities, the availability of weapons, and a weak judicial system. They also include social norms such as those relating to male dominance over females or parental dominance over children, as well as cultural norms that endorse violence as an acceptable method for resolving conflicts.⁷

Relationship among Levels of Influence, Risk Factors, Risky Behavior, and Negative Outcomes

To formulate and implement an effective set of policies regarding interventions targeted to youth at risk, it is first necessary to identify the cause-and-effect relationship among environmental factors, risky behavior, and negative youth outcomes (figure 1).

Figure 1. Prevention of Negative Youth Outcomes



Endnotes

- World Bank. 2006. *World Development Report 2007: Development and the Next Generation*. New York: World Bank and Oxford University Press; World Bank Children and Youth Webpage: <http://www.worldbank.org/childrenandyouth>.
- Cunningham, Wendy, and Maria Correia. 2003. *Caribbean Youth Development: Issues and Policy Directions*. Washington, D.C.: World Bank; Barker, G. and M. Fontes. 1996. "Review and Analysis of International Experience with Programs Targeted on Youth At-Risk." LASHC Paper Series No. 5. World Bank, Washington, D.C.
- UNESCO. 2007. *Strong Foundations: Early Childhood Care and Education*. EFA Global Monitoring Report. Paris, France: UNESCO Publishing; Mary Young, ed. 2002. *From Early Child Development to Human Development; Investing in our Children's Future*. Washington, D.C.: The World Bank; World Bank. 2005. *World Development Report 2006: Equity and Development*. New York: World Bank and Oxford University Press; World Bank. 2006. *World Development Report 2007: Development and the Next Generation*. New York: World Bank and Oxford University Press.
- World Bank. 2003. "A Resource Guide for Municipalities: Community Based Crime and Violence Prevention in Urban Latin America." Finance, Private Sector and Infrastructure Sector (LCSFP). World Bank, Washington, D.C.; Blum, R. and M. Ireland. 2004. "Reducing Risk, Increasing Protective Factors: Findings from the Caribbean Youth Health Survey." *Journal of Adolescent Health* 35: 493-500.
- Blum, R.W. 1998. "Healthy Youth Development as a Model for Youth Health Promotion: A Review." *Journal of Adolescent Health* 22(5): 368-375; Resnick, M. et al. 1997. "Protecting Adolescents from Harm: Findings from the National Longitudinal Study on Adolescent Health." *Journal of Research on Adolescence* 8(4): 423-459; McNeely, et al. 2002. "Mother's Influence in Adolescents' Sexual Debut." *Journal of Adolescent Health* 31(3): 256-265.
- Blum, R.W., and P. Rinehart. 1997. *Reducing the Risk: Connections that Make a Difference in the Lives of Youth*. Division of General Pediatrics and Adolescent Health. Minneapolis, MN: University of Minnesota.
- Guerra, N.G. 2006. "Youth at Risk in Latin America and the Caribbean: Preventing Violence and Crime Policy Recommendations for the World Bank Toolkit." Policy paper prepared for the World Bank "Youth at Risk in the Latin America and Caribbean Region: Building a Policy Toolkit." Department of Psychology, University of California at Riverside, Riverside, CA; World Health Organization. 2002. *World Report on Violence and Health*. Geneva: WHO.

CORE POLICY # 1

Focus on the First Five Years of Life to Prevent Risky Behavior among Young People

Early child development (ECD)¹ aims to improve young children’s capacity to develop and learn with a combination of programs and activities, including basic nutrition; health care; activities designed to stimulate children’s mental, verbal, physical, and psychosocial skills; and parenting training.²

Investing in quality ECD programs not only has long-term benefits for human capital development but is also one of the most cost-effective ways to prevent risky behavior among young people, particularly among those who are most disadvantaged. Recent longitudinal studies have revealed that ECD programs can reduce the risk of early pregnancy, criminal and violent activity, and substance abuse during adolescence and young adulthood.³

The ECD approach, the ultimate goal of which is to improve young children’s *capacity* to develop and learn, is based upon the facts that most brain development occurs within the first five years of life and that the stimulation that the brain receives during these early years greatly influences cognitive and linguistic development as well as social and psychological behavior later in life. ECD interventions—which can take place at community centers or at home and be formal or informal—can include health care; nutrition supplementation; cognitive, social, and emotional stimulation; and—most important—effective parenting training (see Core Policy # 6 for more information on effective parenting). Programs targeted to children in their very early years (0 to 3) focus primarily on the parent by offering parental education and support activities, whereas programs targeting older children (3 to 5 years) usually include quality preschool or community center–based programs run by trained teachers.⁴

How Does ECD Prevent Risky Youth Behavior?

ECD interventions help prevent risky youth behaviors by ensuring healthy brain development and by fostering positive cognitive, social, and emotional skills in children that have long-lasting effects on their ability to learn and their capacity to self-regulate behavior and emotions.⁵ Quality ECD programs increase primary school completion rates, which in turn increase the likelihood of these children enrolling in and completing secondary school, which is a critical protective factor for young people. Because learning is cumulative, ECD interventions can increase children’s subsequent learning achievement and, for example, can also increase the impact of job training programs, because those who have more schooling tend to earn more money.⁶ Investments made during early childhood can also reduce the intergenerational transmission of inequality and poverty, which is a risk factor for young people. In addition, ECD programs for a family’s youngest children can free their older siblings, particularly girls, from the responsibility for caring for their younger siblings and allow them to attend primary and secondary school. Studies from the Philippines show that good nutrition at a young age has led to academic success, measured in terms of a higher probability of being enrolled in school and lower repetition rates, even by the time students are 11 years old.⁷ Finally, early childhood programs that target at-risk children and families and teach developmentally appropriate ways for both children and parents to develop decision-making and problem-solving skills are also critical for helping prevent children from engaging in chronic violence in later life.⁸

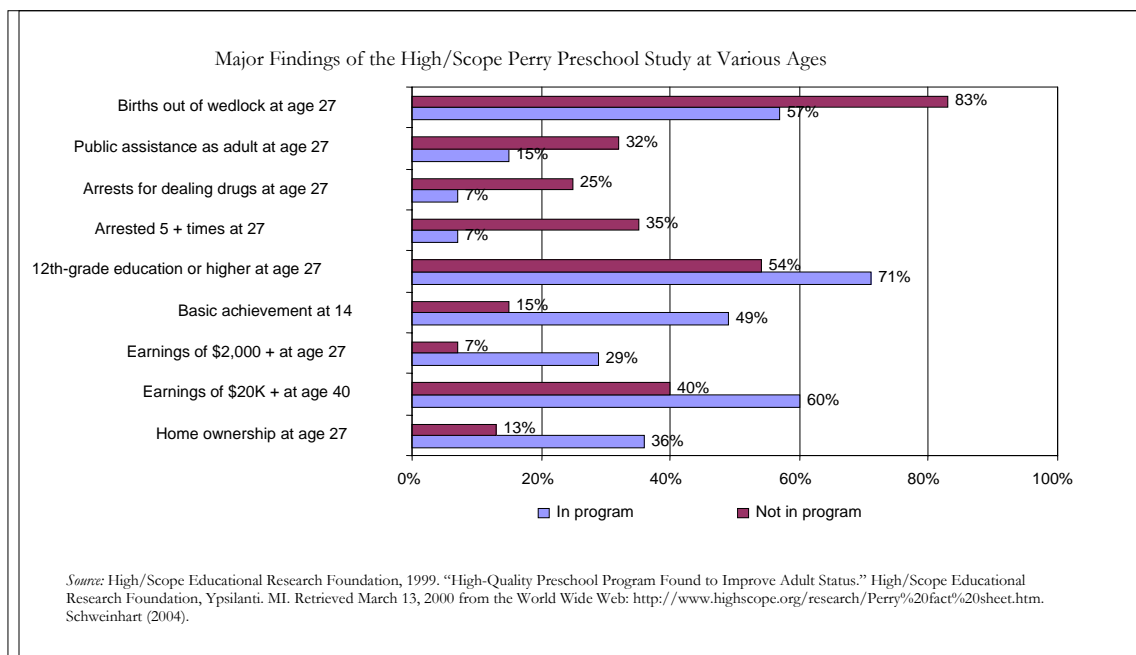
Conversely, children who do not receive proper care, nutrition, and attention in their formative years are at risk of developing major behavioral problems, with lifelong negative consequences for their educational achievement, employment, and earnings.⁹ At-risk children are particularly susceptible to these negative outcomes as they are already exposed to unhealthy and risky environments.¹⁰

Research Findings: Providing the Evidence Base

The effect of ECD interventions on behavioral patterns in later life is well documented, both in developing and developed countries. In the United States, evaluations of the celebrated *High/Scope Perry Preschool Project*—which is considered to be the gold standard of ECD programs—have demonstrated that young people and adults born into poverty who participated in high-quality preschool programs committed fewer crimes, had higher earnings, were more likely to hold a job, and were more likely to have graduated from high school (see figure) than those who did not participate.¹¹ *The Abecedarian Project*, a randomized prospective trial of full-time quality child care from infancy through age five, also yielded similar positive outcomes up to the age of 21. *Abecedarian* participants were less likely to become teen parents than were children who had not participated in the program.¹² An evaluation of the *Chicago Parent-Child Program*, which offered comprehensive, educational center-based, early intervention for low-income children and family support services, demonstrated that children who did not participate in the program were 70 percent more likely than the participants to be arrested for a violent crime by the age of 18.¹³

Similar findings have emerged in developing and middle-income countries. In Brazil, a study of the impact of preschool showed a benefit-cost ratio of 2 to 1 for children who attended one year of preschool, as well as a delay in the age of first pregnancy for the female participants.¹⁴ In Turkey, a mother-child education program, which provides cognitive enrichment to children and training and support for mothers, yielded positive effects for children and mothers in both the short term (for example, cognitive gains for children) and the long term (for example, greater educational attainment, reduced delinquency, and empowerment of mothers within families).¹⁵ The *Colombia PROMESA* project led to an increase in third-grade enrollment of 100 percent, indicating lower dropout and repetition rates for program children than for those in the control group.¹⁶

Investing in ECD to Reduce Risky Behavior among At-risk Youth



Moving Forward: Factors for Success

- **Provide quality ECD interventions right from the start** because the earlier and longer children are enrolled in ECD programs, the greater the effect those programs will have on them.

- **Ensure the holistic development of young children** by promoting supportive relationships and rich learning opportunities in addition to basic nutrition and health-care services.
- **Include parenting training as a key component of ECD programs** to prevent child abuse and neglect and achieve the long-term goals of ECD interventions, while being sensitive to the specific needs of teenage parents.
- **Involve parents and the community in implementing the program** to foster local ownership of the program and a sense of connectedness between parents and children.
- **Establish ECD programs that are inclusive of all children**, including children with special needs.
- Ensure the early childhood **curriculum is developmentally appropriate and participatory**.
- **Establish coordination and cooperation among the government line ministries and with agencies that provide ECD services** because of the cross-sectoral nature of ECD programs.

Endnotes

1. ECD typically refers to interventions that take place from birth until the age of 5. However, because many ECD programs are preschool programs, which typically serve children between the ages of 2 and 5, these two terms are often used interchangeably.
2. World Bank Early Child Development Website: <http://go.worldbank.org/BJA2BPVW91>
3. World Bank. 2006a. "Preventing Youth Risky Behavior through Early Child Development." *Youth Development Notes* 1(3). Human Development Network, Children and Youth Unit. World Bank, Washington, D.C.
4. World Bank Early Child Development Web site: <http://go.worldbank.org/AP9EZQVHD0>.
5. World Bank 2006a.
6. World Bank. 2006b. *World Development Report 2007: Development and the Next Generation*. New York: The World Bank and Oxford University Press.
7. World Bank 2006b.
8. U.S. Surgeon General. 2001. *Youth Violence: A Report of the Surgeon General*. U.S. Department of Health and Human Services. Washington, D.C.
9. World Bank 2006b.
10. World Bank 2006a.
11. Schweinhart, L.J., J. Montie, Z. Xiang, W.S. Barnett, C.R. Belfield, and M. Nores. 2005. "Lifetime Effects: The High/Scope Perry Preschool Study Through Age 40." Monographs of the High/Scope Educational Research Foundation, 14. Ypsilanti, MI: High/Scope Educational Research Foundation. <http://www.highscope.org/Research/Perryproject>.
12. Campbell, F.A., C.T. Ramey, E.P. Pungello, S. Miller-Johnson, and J.J. Sparling. 2002. "Early Childhood Education: Young Adult Outcomes from the Abecedarian Project." *Applied Developmental Science* 6 (1): 42–57.
13. Reynolds, A.J., and D.L. Robertson. 2001. "Long-term Effects of an Early Childhood Intervention on Educational Achievement and Juvenile Arrest: A 15-Year Follow-up of Low-income Children in Public Schools." *Journal of the American Medical Association* 285 (18): 2339–2380.
14. World Bank. 2001. "Brazil: Early Child Development—A Focus on the Impact of Preschool." Report No. 22841-BR. World Bank, Washington, D.C.
15. Kagitcibasi, C., D. Sunar, and S. Bekman, 2001. "Long-term Effect of Early Intervention: Turkish Low-income Mothers and Children." *Applied Developmental Psychology* 22: 333–361.
16. World Bank. 1995. "Investing in Young Children." Discussion Paper No. 275. World Bank, Washington, D.C.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Improved cognitive development and school achievement • Less grade repetition and lower dropout rates • Higher and timelier school enrollment • Improved nutrition and health status • Improved social and emotional behavior • Improved child-parent relationships • Less child abuse and neglect
Secondary Effects	<ul style="list-style-type: none"> • Delay in first birth • Reduction in number of teenage births • Reduction in criminal activity and violent behavior • Reduction in substance abuse • Increased earning potential as an adult • Increased female labor force participation
Responsible Agency/Sector	Ministries of Education, Health, Social Protection, or Community Development
Targeted Risk Group	Type 1
Targeted Age Group	Children age 0–5 years
Necessary Initial Conditions	<ul style="list-style-type: none"> • Targeting mechanisms in place to identify who is in need of interventions and programs • Community awareness and ownership of program • Sufficient knowledge and training on the importance of ECD for key government officials and ministries • Partnership/agreement across sector ministries, at least at the local level • School curriculum strengthened to include and implement ECD approaches • Regulatory mechanism to ensure quality and a cadre of ECD professionals and caregivers
Specific Examples & Level of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • <i>Perry Preschool Project</i> (United States)—Strong evidence • <i>Abecedarian Project</i> (United States)—Strong evidence • <i>Chicago’s Parent-Child Program</i> (United States)—Strong evidence • <i>Early Enrichment Project</i> (Turkey)—Strong evidence • <i>PROMESA Program</i> (Colombia)—Strong evidence
Examples of Cost Elements per Beneficiary	<ul style="list-style-type: none"> • <i>Perry Preschool Project</i>: US\$14,716 in cost per participant. By increasing the number of children per teacher from five to eight, the program’s cost per child per year could be reduced to US\$5,398. • <i>Abecedarian Project</i>: US\$13,000 per child (2002 dollars). Benefits outweighed the costs by a factor of US\$4 for every US\$1 spent. • <i>Indonesia Early Childhood Development Project</i>: Initial estimated cost per year per child is US\$15; average project benefit-cost ratio is 6 to 1.
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Developmentally appropriate curriculum that views children as active, self-initiated learners • Small classes containing no more than 20 children and at least two staff members to allow a supervised and supportive learning environment • Staff trained in ECD and education who receive supervision and ongoing instruction and who meet frequently with parents and other caregivers • Sensitivity to the noneducational needs of disadvantaged children and their families, including providing meals and recommending other social services • Ongoing monitoring and evaluation of both teachers’ activities and children’s behavior and development

CORE POLICY # 2

Keep Children in School until They Have Completed Secondary School

The most common terms used to define the main stages of nonuniversity education are primary, lower secondary, and upper secondary. Primary schooling starts between the ages of 5 and 7 and is compulsory; lower secondary begins between the ages of 10 and 14 and is compulsory in most countries in Latin America and the Caribbean; and upper secondary begins between the ages of 14 and 16 and is typically not compulsory.¹

Today most middle-income countries have achieved universal primary education, but they continue to face enormous challenges in trying to achieve the same enrollment and graduation rates in secondary schools. This is due to both demand and supply-side constraints that are faced by many poor young people and their families, including the inability of families to pay for secondary education;² a lack of knowledge about the returns from secondary education; a lack of information about schooling options; the low quality and irrelevance of much secondary schooling; a lack of access to secondary schools; and the opportunity costs faced by some poor families in sending their children to school because of their dependence on child labor. The implementation of policies to encourage secondary school enrollment and completion are critical because secondary school completion is one of the most important preventive investments a country can make in at-risk youth—both in terms of improving their educational outcomes and of reducing nearly all risky kinds of behavior.³

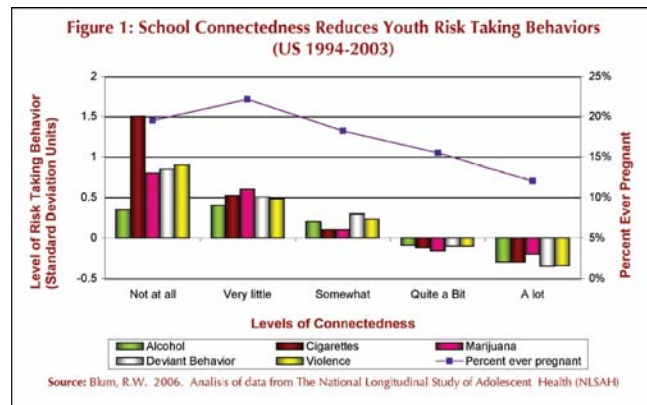
Examples of policies that have shown to be successful in improving secondary school enrollment and completion—particularly when implemented together—include the following:

- (i) Provide *financial incentives*, such as conditional cash transfers (CCTs), school vouchers, loans, grants, individual learning accounts, school supplies, and free public transportation to school, to increase the demand for secondary school and offset competing demands such as work and child care.
- (ii) Take steps to *improve school quality*, such as strengthening the connection between school and work; improving teacher training and increasing their experience; reducing teacher absenteeism; involving the local community as monitors of both teacher and student performance; initiating peer tutoring programs; introducing innovative programming, such as nonformal education; eliminating grade repetition; improving the quality of infrastructure; and making schools safe and accessible.
- (iii) Provide *second chance* programs, such as literacy and comprehensive educational/job training programs that provide young people who are not in school with the opportunity to complete high school and enter tertiary education or the labor market.
- (iv) *Combine approaches* into programs that use one or more of the elements above.

How Does Completing Secondary School Prevent Risky Youth Behavior?

Completing secondary school can serve as one of the strongest protective factors for young people in two key ways: through the knowledge and skills that they acquire, which enable them to make informed decisions, and through the sense of connectedness that students often feel to adults within the school. School connectedness is based on the idea that most young people want the support and approval of a caring adult and, if this is forthcoming as a reward for positive behavior, then the young person will behave in a positive manner. Furthermore, young people behave more positively in an environment where they feel safe and

accepted. Schools can serve both of these functions and, when combined with caring parents or other adults outside of the school, the probability of reducing risky behavior is even greater.



Studies in the United States, Brazil, the Caribbean, Mexico, Honduras, and Chile have shown that increasing the students' sense of connection to their schools decreases absenteeism, fighting, bullying, and vandalism. A sense of connection also promotes educational motivation and classroom engagement, improves academic performance, and increases school attendance and completion rates (see figure). Students who feel more connected to their schools are less likely than others to exhibit disruptive and violent behavior, carry or use a weapon, experiment with illegal substances, smoke cigarettes, drink to the point of becoming intoxicated, appear emotionally distressed, consider or attempt suicide, or engage in sexual intercourse at an early age. In addition to improved educational outcomes, evidence also shows that sexual and reproductive health outcomes are better, the higher the number of years of schooling attained by young people. Better academic performance is also consistently associated with a lower likelihood of reporting ever having had sexual intercourse, and education is also associated with decreased pregnancy rates. Commitment to school has also been one of the few protective factors that has been found to reduce exposure to specific risks for violence.⁴ Conversely, school failure and dropout are risk factors for youth violence and delinquency.⁵

Research Findings: Providing the Evidence Base

Financial incentives. Mexico's CCT program, *Oportunidades*, increased secondary enrollment rates by 8 percent, the transition to secondary school by nearly 20 percent, and grade attainment by 10 percent, with significantly larger effects for girls than boys.⁶ Preliminary results from Brazil's *Bolsa Escola* program have shown that participants had lower dropout rates (0.4 versus 5.6), higher promotion rates (80 versus 72 percent), and were more likely to enter school at the right age than nonparticipants.⁷ Evidence from Colombia's *Familias en Acción* CCT program has shown that the program substantially increased the school attendance of children ages 12 to 17 by 10.1 percentage points in rural areas and 5.2 percentage points in urban areas.⁸ Preliminary studies of Turkey's CCT program, the *Social Risk Management Project*, showed an increase in the net primary enrollment rate from 82.6 to 89.7 percent and from 65.4 to 73.6 percent in the net secondary school enrollment rate.⁹ Also, a program in Colombia that offered vouchers to poor individuals to attend private schools (PACES) had a positive long-term impact on their learning achievement.¹⁰ The United States' (Ohio) *Learning, Earning, and Parenting* (LEAP) program is a mandatory statewide program that provides financial incentives, in addition to case management services, transportation, and child care assistance, to encourage young mothers on welfare to enroll in school and attend regularly. The program provides bonuses of US\$62 for monthly attendance and for completing the school year, US\$62 monthly sanctions for inadequate attendance, and a US\$200 bonus for completing high school or receiving a General Educational Development (GED) credential. An evaluation of the LEAP program reported that three years after the random assignment of young mothers to either a control or a treatment group, 48.4 percent of LEAP teens

dropped out compared with 53.5 percent of control group teens, but this difference was not statistically significant. The study also showed that 50 percent of treatment group members completed grade 11 compared with 45.4 percent of control group members, which was not a statistically significant difference. Lastly, the study demonstrated that 34 percent of LEAP teens completed high school or earned a GED compared with 31.9 percent of control group students.¹¹

Improving school quality. The United States's *First Things First* program is predicated on the importance of training teachers to create supportive and engaged schools and classrooms. The program's goal is to produce respectful and productive student-teacher relationships through intensive, high-quality teaching that combines high expectations of students with continued support. The program creates high, clear, and fair academic and behavioral standards by establishing small learning communities. The program also includes a family advocacy component and ongoing student performance assessments. Evaluations of the program have shown that it led to reduced suspensions and increased attendance, parent participation, and reading achievement.¹² The *Skills, Opportunity, and Recognition* (SOAR) program is another example of a U.S. program that combines teacher and parent training to increase children's engagement with their schools and to prevent early school leaving. The program, based on the theory that social bonds can reduce antisocial behavior and delinquency, instructs teachers on proactive school management, interactive teaching, and cooperative learning. An evaluation of the program that was carried out using a nonrandomized controlled trial found significant reductions in sexual risk behavior among students who participated in the program. Those in the full intervention group reported having significantly fewer sexual partners than those in the control group, and females in the treatment group had a significantly reduced likelihood of both becoming pregnant and giving birth by the age of 21.¹³

Introducing second chance programs. An evaluation of a program in Chile that enabled pregnant teens and adolescent mothers to attend school showed that mothers who participated in the program were more likely to enter the labor market than a control group with similar characteristics.¹⁴ In Trinidad and Tobago, participants in the *Corcorite Learning Center*, which provides two-year remedial education for young people aged 12 to 15 who have not passed the common high school entrance exam and face a series of psychological, family, and behavioral problems, have high rates of passing the entrance exam as well as of finding jobs or places in further education.¹⁵

Combined approaches. Studies of the *Quantum Opportunities Program* in the United States, which provides financial incentives to young people to participate in school as well as mentoring, academic support, after-school activities, and life skills development, have shown that program participants were more likely to graduate, had higher educational expectations, were more likely to attend post-secondary schools, and became teen parents less often than those in the control group.¹⁶ In the United States, an experimental study of the *Career Academy* program, which combines academic and technical curricula based on specific career paths and establishes partnerships with local employers to provide work-based learning opportunities, showed that participants were less likely to drop out of school, had better attendance, and earned more credits than those in the control group.¹⁷ The *Futures Sponsor-A-Scholar Program* in Philadelphia, PA (United States) provides students from public high schools with long-term mentoring (during high school and for one year after graduation), academic support, help with college application process, and financial support for college. Evaluations of the program have found significant positive effects on high school test scores and college attendance. Evaluations of the U.S. program *Project GRAD*—a comprehensive dropout prevention program that combines college preparation and scholarships, academic support, case management, family strengthening, and school/classroom environment—showed gains in college attendance, as well as decreases in discipline referrals and gains in math and reading test scores for participating students, as compared to those in control schools.¹⁸ An initial evaluation of the United Kingdom's *Aimhigher* program, which tries to increase the entry of underprivileged youth into higher education by targeting underprivileged 13–19 year-olds and increasing their awareness and understanding of benefits of higher education through a Web portal, mentoring, and visits to universities, showed that the program had a positive effect on promotion rates and test performance, but mixed results on intentions to go on to higher education.¹⁹

Endnotes

1. World Bank. 2005. *Expanding Opportunities and Building Competencies for Young People: A New Agenda for Secondary Education*. Directions in Development Series. Washington, D.C.
2. Barrera-Osorio, F., L. Linden, and M. Urquiola. 2007. "The Evidence of User Fee Reduction on Enrollment: Evidence from a Quasi Experiment." Unpublished paper. World Bank and Columbia University. Available at: [http://columbia.edu/%7Emsu2101/BarreraLindenUrquiola\(2007\).pdf](http://columbia.edu/%7Emsu2101/BarreraLindenUrquiola(2007).pdf).
3. U.S. Surgeon General. 2001. *Youth Violence: A Report of the Surgeon General*. Washington, D.C.: U.S. Department of Health and Human Services.
4. Farrington, D.P., and B.C. Welsh. 1999. "Delinquency Prevention Using Family-Based Interventions." *Children and Society* 13(4): 287–303.
5. World Bank. 2006. *World Development Report 2007: Development and the Next Generation*. New York: The World Bank and Oxford University Press.
6. Guarcello, L., S. Lyon, and F.C. Rosati. 2006. "Promoting School Enrolment, Attendance and Retention among Disadvantaged Children in Yemen: The Potential of Conditional Cash Transfers." Research for Understanding Children's Work (UCW), a joint ILO, World Bank and UNICEF project. Available at: http://www.ucw-project.org/pdf/publications/Yemen_education_19dec2006.pdf.
7. Attanasio, O., E. Battistin, E. Fitzsimmons, A. Mesnard, and M. Vera-Hernandez, 2005. "How Effective are Conditional Cash Transfers? Evidence from Colombia." Institute for Fiscal Studies, Briefing Note No. 54
8. Ahmed, A., A. Kudat, and R. Colasan. 2006. "Evaluating the Conditional Cash Transfer Program in Turkey." Third International Conference on Conditional Cash Transfers. International Food Policy Research Institute.
9. Ahmed, Kudat, and Colasan 2006.
10. Blum, Robert W. 2006. "Policy and Program Recommendations in Adolescent Sexual and Reproductive Health for Latin America and the Caribbean." Policy paper prepared for the World Bank's "Youth at Risk in the Latin America and Caribbean Region: Building a Policy Toolkit." Department of Population, Family, and Reproductive Health. Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD.
11. American Youth Policy Forum. 1994. "Preparing Teenage Mothers on Welfare for School, Parenthood, and Work: Lessons from New Chance and LEAP." Forum Brief. Available at: <http://www.aypf.org/forumbriefs/1994/fb091994.htm>. See also: U.S. Department of Education. 2006. "Financial Incentives for Teen Parents to Stay in School." What Works Clearinghouse (WWC) Intervention Report, Institute of Education Sciences. Available at: <http://ies.ed.gov/ncee/wwc/reports/dropout/fitpss/info.asp>.
12. Blum 2006.
13. Arends-Kuening, Mary, Andrew Ferro, and Deborah Levison. 2006. "Youth at Risk in the Latin American and Caribbean Region—Possible Policies/Interventions for a "Top 10" List—FOCUS: Early School-leaving." Policy paper prepared for the World Bank's "Youth at Risk in the Latin America and Caribbean Region: Building a Policy Toolkit." Department of Agricultural and Consumer Economics, University of Illinois at Urbana-Champaign; and Humphrey Institute of Public Affairs, University of Minnesota.
14. Guerra, N.G. 2006. "Youth at Risk in Latin America and the Caribbean: Preventing Violence and Crime Policy Recommendations for the World Bank Toolkit." Policy paper prepared for the World Bank "Youth at Risk in the Latin America and Caribbean Region: Building a Policy Toolkit." University of California at Riverside, Department of Psychology, Riverside, CA.
15. Hammond, C., J. Smink, and S. Drew. 2007. "Dropout Risk Factors and Exemplary Programs, A Technical Report." National Dropout Prevention Center Network, College of Health, Education, and Human Development, Clemson University, Clemson, SC; and Communities in Schools, Alexandria, VA.
16. Hammond, Smink, and Drew 2007.
17. World Bank. 2007. "Conditional Cash Transfers: The Next Generation, A Case Study of Mexico's Oportunidades Program" *Youth Development Notes* 2(3). Human Development Network. Children and Youth Unit. World Bank, Washington, D.C.
18. Hammond, Smink, and Drew 2007.
19. di Gropello, Emanuella, ed.. 2006. *Meeting the Challenges of Secondary Education in Latin America and East Asia*. Washington, D.C.: World Bank.

Moving Forward: Factors for Success

- ***Adjust teacher training, staffing, and school environment to increase student connectedness*** with school.
- ***Provide information on schooling options and opportunities*** to those who have left school (for example, through NGOs) or who engage in behavior or face constraints that may lead them to leave school early.
- Offer ***financial incentives*** to poor young people and their families.
- Offer a ***relevant curriculum*** that is closely linked to the realities of the workplace by combining academic and vocational curricula as well as teaching life skills.
- ***Involve families and communities*** in monitoring both student and teacher performance.
- ***Train teachers in innovative and nonformal teaching methods and programs.***
- Offer ***second-chance programs*** that can get early leavers back in school.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Increased educational attainment • Increased likelihood of continuing education and/or training • Increased employability and likelihood of entering formal labor market • Improved sexual and reproductive health outcomes • Delay in marriage and childbearing for females
Secondary Effects	<ul style="list-style-type: none"> • Reduced criminal and violent behavior and incarceration rates • Reduced alcohol and substance abuse • Decrease in the total number of babies born and improved health of children • Increased civic participation
Responsible Agency/Actor	Ministry of Education or the private sector
Targeted Risk Group	Types I, II, III
Target Age Group	12–18 years of age
Examples of Cost per Beneficiary	Mexico <i>Oportunidades</i> : Maximum household monthly transfer with children in high school: US\$170 (<i>Source</i> : World Bank 2007)
Necessary Initial Conditions	<ul style="list-style-type: none"> • Completion of primary education • Existence of quality secondary schools and school supplies • Financing and targeting mechanisms to provide financial incentives to poor young people and their families • Supply of teachers trained to teach the secondary school curricula • Elimination of regulations that would keep pregnant teens out of school • Family and community involvement
Specific Examples & Levels of Effectiveness (Strong Evidence or Emerging Evidence)	<ul style="list-style-type: none"> • Mexico: <i>Oportunidades</i>—Strong evidence (www.oportunidades.gob.mx) • Brazil: <i>Bolsa Escola</i>—Strong evidence • Colombia: <i>Familias en Acción</i>—Strong evidence (http://www.accionsocial.gov.co) • United States: <i>Quantum Opportunities Program</i>—Strong evidence (www.oicofamerica.org/onlprog.html) • United States: Philadelphia’s <i>Futures Sponsor-a-Scholar</i> program—Strong evidence (http://philadelphiafutures.org/sas_high_school) • United States: SOAR—Strong evidence (http://depts.washington.edu/sdrg) • United States: <i>Career Academies</i>—Strong evidence (http://casn.berkeley.edu) • United States: Project GRAD—Strong evidence (www.projectgrad.org) • United States (Ohio): <i>Learning, Earning, and Parenting</i> (LEAP) program—Emerging evidence • United Kingdom: <i>Aimhigher</i>—Strong evidence • Turkey: <i>Social Risk Management</i> project—Emerging evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Cost-sharing and public-private partnerships to finance expansion and improvement of secondary schools • Sufficient financing to fund a 100 percent increase in the number of secondary schools (in most LAC countries) and supply-side incentives

CORE POLICY # 3

Use Students as a Captive Audience in Schools to Give Them Key Risk Prevention Messages and to Identify At-risk Youth Who Need Remedial Support

Schools—which are one of the strongest protective factors in the lives of young people—can deliver both traditional education curricula and prevention programs specifically targeted toward preventing risky behavior. School-based prevention programs can be either universal (in other words, serve all young people within the school) or they can target at-risk youth to try to prevent them from engaging in risky behavior in the future.¹ School-based interventions that have been recognized to be successful in reducing risky behavior include the following: (i) universal curriculum-based HIV and sex education to inform young people about reproductive health and reduce risky sexual behavior; (ii) life skills² training at the secondary level that helps young people to develop self-management and social skills and gives them information related specifically to gateway drug use, including tobacco, alcohol, and marijuana; (iii) violence prevention programs; and (iv) screening services to identify students who have vision, hearing, learning, substance abuse, HIV/AIDS, and other health problems, which should ideally be accompanied by a referral system (for example to specialized programs either run by the government or nonprofit organizations) to address the problem or provide academic enrichment.³

How Do School-based Interventions Prevent Risky Youth Behavior?

Schools have several advantages as a place for delivering risk prevention programs, including the following: (i) a group of caring adults whom young people trust and who typically are positive role models for them, which is particularly important when dealing with sensitive topics; (ii) the ability to reach many young people at once, especially before young people develop negative attitudes, values, and practices; (iii) the preassigned responsibility for imparting skills and knowledge that will help young people to make better decisions and, ultimately, positively influence their behavior; (iv) a structured and safe environment, which is conducive to teaching young people about their bodies and safe health behavior as well as for providing them with the necessary health services without having to face obstacles such as cost, access, and transportation; and (v) the ability of education professionals to identify students who may be particularly at risk and offer them referral services to address the problem or provide them with remedial education to prevent them from dropping out of school. In particular, providing life skills training within schools is critical for preventing at-risk youth from dropping out, preparing them for further education and/or job training, and increasing their overall employability. In essence, schools are one of the primary protective factors for young people because of their dual function as provider of hard skills and knowledge via traditional educational curricula and of soft skills, such as life skills, and the sense of connectedness that they offer young people.

Research Findings: Providing the Evidence Base

HIV and Sex Education. School-based sex education and HIV prevention programs can help increase young people's knowledge of HIV/AIDS and, if implemented correctly and carried out in conjunction with other activities, may also help to change and/or reduce their risky sexual behavior. An evaluation of Thailand's *Teens on Smart Sex*, a curriculum-based, teacher-led program focusing on sexual initiation and the use of condoms, found that program participants had higher levels of knowledge on HIV/AIDS and more positive attitudes toward condom use, particularly among females, than youth in the control group. The program also had a positive impact on teachers' knowledge and experience in teaching about HIV, sexuality, and gender.⁴ Evaluations of the United States' *Skills, Opportunity, and Recognition* (SOAR) program (formerly known as the

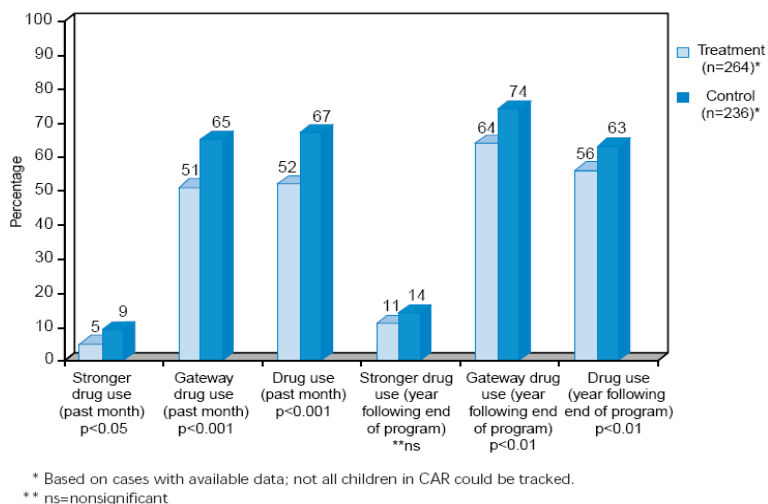
Seattle Social Development Project), a model program based on the idea that positive social bonds can reduce antisocial behavior and delinquency and which includes teacher and parent training, found that program participants reported having significantly fewer sexual partners than the control group, and females in the treatment group had a significantly reduced likelihood both of becoming pregnant and of giving birth by the age of 21. Using a prospective study design with comparison schools, an evaluation of Mexico's *Planeando tu Vida (Planning Your Life)*, a curriculum-based, teacher-led program that focuses on sexual initiation and contraceptive use, found that, at the end of the intervention, sexually active young people who participated in the intervention were more likely to use some form of contraception than sexually active students who had not participated in the program or those who had attended a traditional family life education course.⁵ An evaluation of Jamaica's *Grade 7 Project* found that participants were significantly more knowledgeable about pregnancy prevention and condom use and had a more mature attitude to sexual activity than nonparticipants. However, the study showed no significant differences between participants and nonparticipants in the age of their initiation of sexual intercourse and in whether they used contraception during their first sexual intercourse.⁶ In Chile, the school-based sex education intervention *Adolescence: Time of Choices* has been found to have increased the use of contraceptives and reduced the incidence of teen pregnancy among young people who participated in the program.⁷ A study in the U.S. state of Massachusetts showed that adolescents in schools where condoms were available were better informed about how to use condoms, were more likely to have been given instructions on how to use condoms, and were less likely to report having ever had sexual intercourse or at least to having had recent sexual intercourse than students in other schools. The same study found that sexually active students in schools where condoms were available were twice as likely to report having used a condom during their most recent sexual encounters, were more likely to use condoms to prevent pregnancy, and were less likely to use other forms of contraceptives than students in other schools.⁸

Life Skills. South Africa's *Life Skills* program, a curriculum-based and teacher-led program, was found effective in reducing the frequency of sexual intercourse among participating students.⁹ An evaluation of the model *Life Skills Training (LST)* program in the United States, a three-year, classroom-based tobacco, alcohol, and drug abuse prevention program that teaches young people drug resistance skills, personal self-management skills, and general social skills, showed that LST students had significantly lower tobacco, alcohol, and marijuana use (50–75 percent), lower multiple drug use (up to 66 percent), and lower pack-a-day smoking (by 25 percent) than students in control groups and had decreased their use of inhalants, narcotics, and hallucinogens.¹⁰ In contrast, a meta-analysis of the U.S. school-based *Drug Abuse Resistance Education (D.A.R.E.)* program, created in 1983 by the Los Angeles Police Department and the Los Angeles Unified School District as a substance-abuse prevention program for grades K-12, which included 17 hour-long weekly lessons taught by police officers, showed that while the program did work to increase knowledge about substance abuse, the effect of the program on attitudes toward drugs, attitudes toward the police, and self-esteem were modest; furthermore, studies have found that the program's short-term effects on substance abuse by fifth and sixth graders were small. These findings suggest that the D.A.R.E. program might benefit from using more interactive strategies and emphasizing social and general competencies, instead of a traditional, didactic approach.¹¹

Violence Prevention. Though relatively few school-based violence prevention programs have been rigorously evaluated, the results of the few studies that have been published are encouraging. Studies of the *PeaceBuilders* program in the United States, which targets all students and uses techniques such as role playing and group and individual rewards to teach violence prevention, found decreases in self-reported and teacher-reported aggressive behavior by participants, as well as decreases in the number of disciplinary incidents and suspensions after the program was implemented. The program was also shown to have a higher impact on at-risk young people.¹² An evaluation of the *Second Step Violence Prevention* program, a classroom-based curriculum targeted toward all students that has been implemented both in the United States and Canada, and that teaches such skills as empathy, problem solving, and decision making, found that it led to a moderate decrease in physically aggressive behavior and an increase in pro-social behavior among schoolchildren.¹³ An evaluation of CASASTART (Striving Together to Achieve Rewarding Tomorrows) (formerly the *Children at*

Risk [CAR] program), a school-based substance abuse and delinquency prevention program in the United States that works with high-risk young people and their families, showed that, one year after completing the program, participants were significantly less likely to have used drugs in the previous month, were significantly less likely to be using drugs one year after the end of the program, were significantly less likely to report selling drugs at any time in their lives, and were significantly less likely to have committed a violent crime one year after finishing the program than those in the control group (see figure).¹⁴

Changes in Drug Use by CAR Participants and Control Group in Five U.S. Cities



Source: U.S. Department of Justice/Office of Justice Programs/National Institute of Justice, November 1999.

The U.S.’s *Check & Connect* program, which targets students K–12 in both urban and suburban areas, focuses on increasing school engagement through monitoring of disengagement warning signs, interventions individualized to student needs, relationship building, development of problem-solving skills, and the encouragement of participation in extracurricular activities. “Checking” involves following student engagement indicators, particularly attendance, daily or weekly. “Connecting” includes two levels of student-focused interventions: (i) a basic intervention for all students that includes feedback on their progress and training in cognitive-behavioral problem-solving; and (ii) intensive interventions for those students showing high-risk indicators, which can include tutoring, home-school meetings, or referrals to community resources. Four longitudinal studies using experimental and quasi-experimental designs have been carried out on the program and they have shown that compared to students in control and comparison groups, students served by *Check & Connect* showed significant decreases in truancy, absenteeism, and dropout rates, and increases in school completion.¹⁵

Moving Forward: Factors for Success

- **Target programs according to the ages, experiences, and cultures** of the group of young people at hand.
- **Aim to change social context** (how families and communities function) as well as the attitudes, skills, and behavior of young people to create an environment of support and growth in which young people can develop in positive ways.
- **Start interventions as early as possible.**
- **Train teachers in specific risk-prevention curricula** (violence prevention, sexual education, and HIV prevention) and in screening techniques.
- Create a team of **screening experts** who serve schools.

- **Link knowledge and skills imparted by school-based prevention programs to the rest of the curriculum** and teach them in a logical sequence.
- **Ensure that teaching is interactive** and encourages the active participation of all students, ideally in a small group setting.
- **Balance teaching of knowledge, skills, and facts with peer pressure resistance skills** to achieve greater program effectiveness.
- Foster a **nonjudgmental and trusting environment** in schools.

Endnotes

1. Juvenile Justice Evaluation Center (JJEC) (www.jrsa.org). (Note: The JJEC was discontinued in 2007, but publications are still available at <http://www.jrsa.org/pubs/juv-justice/index.html>.)
2. Although not universally defined, life skills, or soft skills, are generally classified into three categories: (i) *self-concept skills* (self-control, self-esteem, and coping strategies); (ii) *cognitive skills* (decision making, problem solving, and critical thinking; and (iii) *social context skills* (communication; health and self care; social interactions including cooperation, teamwork, and leadership; occupational skills including punctuality, appropriate dress, and job interview techniques; and environmental functionality skills including use of environmental resources, citizenship rights, and use of community social services). (Source: Pan American Health Organization.)
3. Cunningham, W., L. McGinnis, R. G. Berdu, and C. Tesliuc. 2007. "The Promise of Youth: Policy for Youth at Risk in Latin America and the Caribbean." Unpublished paper. World Bank, Washington, D.C.
4. Ross, David A., Bruce Dick, and Jane Ferguson, eds. 2006. *Preventing HIV/AIDS in Young People: A Systematic Review of the Evidence From Developing Countries*. UNAIDS Inter-agency Task Team on Young People. Geneva, Switzerland: WHO.
5. Ross, Dick, and Ferguson 2006.
6. Blum, Robert W. 2006. "Policy and Program Recommendations in Adolescent Sexual and Reproductive Health for Latin America and the Caribbean." Policy paper prepared for the World Bank's "Youth at Risk in the Latin America and Caribbean Region: Building a Policy Toolkit." Department of Population, Family, and Reproductive Health. Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD.
7. Blum 2006.
8. World Bank. 2006. *World Development Report 2007: Development and the Next Generation*. New York: World Bank and Oxford University Press.
9. Advocate for Youth. 2002. *Issues at a Glance* (November). Washington, DC. Available at: http://www.advocatesforyouth.org/PUBLICATIONS/freepubs_type.htm. <<http://www.advocatesforyouth.org/publications/iag/youthfriendly.pdf>>.
10. World Bank 2006.
11. Blum 2006.
12. Hammond, C., J. Smink, and S. Drew. 2007. "Dropout Risk Factors and Exemplary Programs, A Technical Report." National Dropout Prevention Center Network, College of Health, Education, and Human Development, Clemson University, Clemson, SC; and Communities in Schools, Alexandria, VA.
13. National Institute of Justice Update. 1994. "The D.A.R.E. Program: A Review of Prevalence, User Satisfaction, and Effectiveness." U.S. Department of Justice, Office of Justice Programs, National Institute of Justice. Washington, D.C.
14. Vazsonyi, A., and L. Belliston. 2004. "Evaluation of a School-Based, Universal Violence Prevention Program: Low-, Medium, and High-Risk Children." *Youth Violence and Juvenile Justice* 2(2): 185–206.
15. UNESCO FRESH Tools for Effective School Health. Available at: www.unesco.org/education/fresh.
16. Promising Practices Network of Children and Families. 1999. www.promisingpractices.net; U.S. Department of Justice/Office of Justice Programs/National Institute of Justice, November.
17. Hammond, C., J. Smink, and S. Drew. 2007.
18. Mangrulkar, L, C. Whitman, and M. Posner. 2001. "Life Skills Approach to Child and Adolescent Healthy Human Development." Pan American Health Organization. Available at: <http://www.paho.org/English/HPP/HPF/ADOL/Lifeskills.pdf>.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Overall knowledge of sexual health issues, including pregnancy and contraceptives • Increased use of condoms • Increased use of contraceptives • Reduction in HIV transmission and reduction in STDs (sexually transmitted diseases) • Delay in sexual initiation • Fewer unintended pregnancies • Less criminal and violent behavior • Less alcohol and substance abuse • Greater employability
Secondary Effects	<ul style="list-style-type: none"> • Fewer abortions • Promotion of gender equity • Self-efficacy
Responsible Agency/Actor	Ministries of Education, Health, Community Development, or Justice and national training institutes
Targeted Risk Group	Types I and II: Those who are sexually active and at risk for initiating sexual intercourse and other sexual behavior and/or engaging in substance abuse and/or violence
Target Age Group	5–18
Examples of Cost per Beneficiary	<ul style="list-style-type: none"> • United States: <i>Life Skills Training (LST)</i>: Approximately US\$7 per student/per year (curriculum materials averaged over 3-year period; does not include the cost of training, which is a minimum of US\$2,000/day for 1–2 days)^{a/} • United States: <i>CASASTART/CAR</i>: \$3,000 per year/per child and family ^{b/}
Necessary Initial Conditions	<ul style="list-style-type: none"> • Curriculum based on needs and realities of target group • Teachers appropriately trained in risk-prevention curricula • Partnerships with families and communities • Political/governmental support for teaching sexual education and issues of drug use and violence in schools
Specific Examples & Levels of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • Thailand: <i>Teens on Smart Sex</i>—Strong evidence • South Africa: <i>Life Skills</i>—Strong evidence • United States: <i>PeaceBuilders</i>—Strong evidence (http://www.peacebuilders.com) • United States: <i>Second Step</i>—Emerging evidence (http://www.cfchildren.org) • United States: <i>CASASTART/CAR</i>—Strong evidence (http://www.casacolumbia.org/absolutenm/articlefiles/203-casastart.pdf) • United States: <i>Life Skills Training</i>—Strong evidence (http://www.lifeskillstraining.com) • United States: <i>SOAR</i>—Strong evidence (http://depts.washington.edu/sdrg/) • United States: <i>Check & Connect</i>—Strong evidence (http://ici.umn.edu/checkandconnect) • Mexico: <i>Planeando Tu Vida</i> (Planning Your Life)—Emerging evidence • Jamaica: <i>Grade 7 Project</i>—Emerging evidence • Chile: <i>Adolescence Time of Choices</i>—Emerging evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Appropriate implementation of the curriculum • Involvement of family and community necessary to increase chances of changing behavior • Sexual education in schools requires a political consensus

Sources:

a. University of Colorado at Boulder, Blueprints for Violence Prevention (<http://www.colorado.edu/cspv/blueprints>).

b. <http://www.casacolumbia.org/absolutenm/articlefiles/203-casastart.pdf>.

CORE POLICY # 4

Make Reproductive Health Services Meet the Specific Needs of Young People, Especially Those from Poor, Underserved Communities

There is growing recognition that young people—particularly those most at risk—need quality reproductive health care now more than ever. This recognition has been prompted by social changes that have occurred worldwide in recent decades—most notably a longer period of nonmarital sexual activity, coupled with an HIV pandemic that disproportionately affects young people. However, many young people tend not to use existing reproductive health services, whether because of certain laws and/or policies in their respective countries that do not allow them access to services, operational barriers (inconvenient hours, lack of transportation, and the high costs of services), a lack of information about their existence, an unwelcoming attitude on the part of service providers, fear about a lack of confidentiality, or cultural and gender barriers (such as it not being customary for women to be in charge of their reproductive health or contraception being against religious beliefs). This has brought about the realization among policy makers that health services need to be specifically tailored toward young people.

Youth-friendly reproductive health services provide a comfortable and appropriate setting for young people and provide them with services that meet their specific needs. In doing so, these services can attract a youth clientele and ensure that they return for follow-up and repeat visits. The basic components of a youth-friendly reproductive health service include specially trained providers, privacy, confidentiality, and accessibility. These services for young people can be provided in health facilities (hospitals, clinics, or health centers), through private providers, in social or community settings (clubs, organizations), in entertainment and recreational venues, in commercial outlets, at the workplace, or in schools.

Services are typically divided into two categories: (i) prenatal, postpartum, and abortion services and (ii) prevention and health promotion services. A typical youth-friendly package of services might include information and counseling on sexuality, safe sex, and reproductive health; provision of contraceptives and advice on other protective methods; sexually transmitted infection (STI) diagnosis and management; HIV counseling (and referrals for testing and care); pregnancy testing and antenatal and postnatal care; counseling on sexual violence and abuse (and referral for any needed services); and post-abortion care counseling and contraception.¹

Helping young people to make better reproductive health-related choices should involve the following: (i) providing them with the knowledge to make informed decisions about their behavior, as well as the skills to negotiate in favor of safe behavior with their peers and partners (via either talks or meetings in clinics or mass media techniques, such as behavior change communication—BCC);² (ii) creating an environment in which they can practice healthy behavior, while at the same time making risky behavior costly and limiting the opportunities for engaging in it; and (iii) increasing and broadening access to reproductive health services, treatment, and rehabilitation for young people who have made poor health decisions leading to consequences such as unwanted pregnancies and drug addiction.

Several types of intervention have been shown to be particularly effective in increasing young people's use of reproductive health services in a wide range of developing country settings. These include the following: (i) training service providers and other clinic/pharmaceutical staff in youth-friendly practices; (ii) making clinics and pharmacies more accessible and acceptable to young people (for example, by providing services in mobile

units to visit poor and rural areas); and (iii) using community-based outreach and information campaigns to generate both demand and support for reproductive health services among young people.

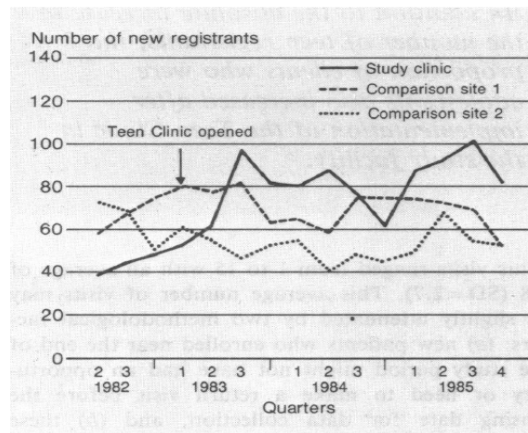
How Do Youth-Friendly Reproductive Health Services Prevent Risky Youth Behavior?

The existence of youth-friendly reproductive health services (both information and products) does not provide a guarantee that young people will not engage in risky sexual behavior. However, there are two ways in which they increase the likelihood that young people will use these services and ultimately make better and more informed choices about their reproductive health. First, if service providers are caring adults who are specially trained to work with young people, who listen to them and treat them with respect, who allow sufficient time for client/provider interaction, and who honor their clients' privacy and confidentiality, then they will boost the confidence and self-esteem of young people, which in turn will make it more likely that young people will make healthier and safer reproductive choices. Second, if these services are private, comfortable, affordable, and accessible to young people both geographically (provided in convenient locations or mobile units) and time-wise (open during convenient hours such as after school), then there will be an increased likelihood that young people will seek out these services and ultimately decreases their chances of suffering negative health outcomes.

Research Findings: Providing the Evidence Base

In the United States, a public health facility established a *Teen Clinic* to serve a low-income community that was at high risk for teenage pregnancy. The program included free services, expanded hours of operation, discussions between teens on safe sex practices and sexuality, and outreach activities to publicize the special services. An evaluation showed that new patient registration increased by 82 percent over the enrollment rate before the program began. This increase compared favorably with two neighboring public health department facilities that had no specialized teen programs. These facilities experienced either a small increase (4 percent) or modest decrease (17 percent) during the same time periods³ (see figure).

Enrollment of Young People in Family Planning Clinics, Chicago, 1982–1985



Source: Herz, Olson, and Reis 1988.

One U.S. study evaluated an adolescent protocol that was established in six nonmetropolitan family planning clinics. The protocol included one-on-one counseling, special staff training, trained teen counselors, and involvement of parents and male partners. The study found that there was greater continuation of contraceptive use and lower pregnancy rates among young women in the experimental group than among those in the control group.⁴ Mexico's *Educational Program for Adolescent Mothers* (PREA) is a hospital-based program in which participants attend postpartum and one or more subsequent family planning information and counseling sessions. An evaluation of the program found that participants breast-fed longer and had

higher rates of contraceptive use than those in the control group.⁵ A hospital-based program in Brazil for post-partum and post-abortion adolescents offered outpatient services during times specifically designated for young people and included counseling, education, and provision of contraception. An evaluation found that 50 percent of the young women hospital patients who had received services or educational talks from the program returned to the outpatient clinic for follow-up appointments. Also, the ratio of abortions to births in one participating hospital declined from 18 percent to 13 percent after five years of project operation.⁶ South Africa's *Youth Information Centre Pilot Project* involves young people in the program design, monitoring, and management, and offers contraceptive services, STD treatment, counseling, and pregnancy tests. Although this project has not yet been rigorously evaluated, there is evidence of increased condom use among clients of the project.⁷ A study of Madagascar's *TOP Réseau* network of franchised youth clinics showed that the program contributed to removing barriers to condom use and motivated sexually experienced young people to use condoms.⁸ In Mexico, the *Commercial Market Strategies* (CMS) project developed a network of youth-friendly pharmacies to provide reproductive health information and contraceptives to youth in Guanajuato. An assessment of the network indicated that it improved the quality of reproductive health services available to youth in participating retail pharmacies. The trained pharmacy staff demonstrated more knowledge about contraceptives and STIs and treated youth in a friendly and nonjudgmental manner, as compared to a group of pharmacies not in the network. Accordingly, the project was replicated in other cities in Mexico.⁹

Moving Forward: Factors for Success

- At the predesign stage of any project, *clinics need to make a careful assessment of health trends and of the needs of their specific target populations* to offer most relevant services.
- Providers need to *ensure that their staff members are specially trained to work with—and have respect for—young people; honor the privacy and confidentiality of the clients; make time for client and provider interaction; and make peer counseling available.*
- Health facilities need to *set aside separate space and special times for serving young people; ensure that their hours and location are convenient to young people; and ensure that they have adequate space, sufficient privacy, and comfortable surroundings.*
- The program's design should include the following measures:
 - *Involve young people in designing the program and incorporate their feedback on an ongoing basis* to ensure the relevance of the program and, thus, improve reproductive health outcomes.
 - Ensure that *drop-in clients are welcomed*, that *appointments can be set up rapidly*, that there is *no overcrowding* and that *waiting lines are short*, that *fees are affordable*, that publicity and recruitment informs and reassures young people that their *visits are confidential*, and that *referral services are offered.*
 - *Adjust services where necessary in recognition of the heterogeneity* of the youth population.
 - Set up *partnerships with existing youth agencies and link the program's services with other social services offered to young people* to reach the greatest possible number of young people.
 - *Involve families and communities* in reinforcing healthy youth behavior.
 - *Add reproductive health services* onto existing youth activities and venues.

Endnotes

1. Senderowitz, Judith. 1999. "Making Reproductive Health Services Youth Friendly." Research, Program, and Policy Series. FOCUS on Young Adults, Washington, D.C. Available at: <http://www.pathfind.org/focus.htm>.
2. Behavior Change Communication (BCC) is a communication technique that combines commercial marketing techniques to advertise products and services with messages that promote knowledge and reinforce healthy kinds of behavior.
3. Herz, E.J., L.M. Olson, and J.S. Reis. 1988. "Family Planning for Teens: Strategies for Improving Outreach and Service Delivery in Public Health Settings." *Public Health Reports* 103(4): 422–430.
4. Winter, L., and L.C. Breckenmaker. 1991. "Tailoring Family Planning Services to the Special Needs of Adolescents." *Family Planning Perspectives* 23(1): 24–30.
5. Martin, A., P. Schenkel, R. Vernon, et. al. 1992. "A Sustainable Educational Program for Postpartum Adolescent Mothers, Mexico." Paper presented at the 19th annual NCIH International Health Conference, 14–17 June, Arlington, VA.
6. Shepard, B.L., J. Garcia-Nunez, J T. Miller, et. al. 1989. "Adolescent Program Approaches in Latin America and the Caribbean: An Overview of Implementation and Evaluation Issues." Discussion draft prepared for the International Conference in Adolescent Fertility in Latin America and the Caribbean, November, Oaxaca, Mexico (*Note: It is unclear whether a control group was used in the evaluation of the hospital-based program in Brazil.*)
7. Trangsrud, R., 1998. *Adolescent Reproductive Health in East and Southern Africa: Building Experience, Four Case Studies*: A report prepared for the Regional Adolescent Reproductive Health Network, USAID, REDSO/ESA. Nairobi, Kenya: Family Care International.
8. Population Services International (PSI). 2004. "Franchised Youth Clinics Motivate Behavior Change in Madagascar." PSI Research Brief No. 4, August 2004. Available at: <http://www.psi.org/resources/pubs/rb4.pdf>.
9. Wolfe, Kelly. 2005. "Youth Friendly Pharmacies and Partnerships: The CMS-CELSAM Experience." Private Sector Partnerships-One project. Abt Associates Inc, Bethesda, MD.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Reduced incidence of HIV • Reduced incidence of STIs • Lower pregnancy rates • Fewer unsafe abortions • Delayed age of sexual initiation • Increased use of condoms among sexually active young people
Secondary Effects	<ul style="list-style-type: none"> • Increased confidence • Increased self-esteem • Increased self-efficacy
Responsible Agency/Actor	Ministries of Health, Education, and Social Services, medical & pharmaceutical community, nongovernmental organizations (NGOs)
Targeted Risk Group	Types I, II, & III
Target Age Group	10–24 years of age
Examples of Cost Elements per Beneficiary	Not readily available
Necessary Initial Conditions	<ul style="list-style-type: none"> • Adequate training for service providers • Facilities that are accessible and acceptable to young people • Change in community norms and acceptance of the need to treat STIs and HIV, provide contraceptives, and disseminate information on important health issues • Provision of information to young people, parents, and other adults through the education sector and the media
Specific Examples and Levels of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • United States: <i>Peer Providers of Reproductive Health Services</i>—Emerging evidence • Mexico: <i>Adolescent Program for Adolescent Mothers (PREA)</i>—Emerging evidence • South Africa: <i>Youth Information Centre Project</i>—Emerging evidence • Madagascar: <i>TOP Réseau network</i>—Emerging evidence • Mexico: the <i>Commercial Market Strategies project (CMS)</i>—Strong evidence
Issues to Consider for Replication & Sustainability	<ul style="list-style-type: none"> • Need for policy support and networking to establish youth-friendly services • Need for public education campaigns to gain support for youth-friendly services • Need to institutionalize youth-friendly services within Ministries of Health and NGOs • Need to use behavior change communication (BCC) to inform young people of youth-friendly health services and increase their use • Need to take account of existing legal, regulatory, and socio-cultural constraints to developing programs around a sensitive topic

CORE POLICY # 5

Use National and Local Media to Expose Young People to Social Marketing Messages and Reduce Their Exposure to Negative Behaviors

Young people are particularly susceptible to messages delivered by the media. Interventions that capitalize on this knowledge and that deliver positive social marketing messages through radio, television, print, and other media have been shown to be effective in the following areas: (i) reducing sexually risky behavior through HIV prevention and positive reproductive health messages (particularly if combined with increased availability of condoms); (ii) reducing tobacco consumption; and (iii) reducing violent behavior, particularly against women.¹

Social marketing campaigns aim to change negative behaviors into positive ones by influencing the knowledge and attitudes of young people. Social marketing and mass media techniques can reach a large number of young people, particularly at-risk youth, who are typically not enrolled in school and cannot take advantage of school-based programs. However, while the use of mass media can greatly increase young people's knowledge and awareness, there is no guarantee that it will change their behavior. To maximize its success, media messages need to direct young people to interventions that provide specific services to at-risk youth.

How Do Mass Media and Social Marketing Prevent Risky Youth Behavior?

Social marketing is defined as the application of commercial marketing technologies to the analysis, planning, execution, and evaluation of programs designed to influence the voluntary behavior of target audiences to improve their personal welfare and that of society as a whole.²

Social marketing campaigns use mass media, as well as specialized communication techniques such as behavior change communication (BCC)³ and interpersonal communication (IPC).⁴ All of these techniques can provide young people with the necessary knowledge and skills to protect themselves, increase their self-efficacy, and ultimately prevent them from engaging in risky behavior. The knowledge and skills that they acquire also increase their self-esteem and self-confidence, which reduces the chances of them engaging in risky behavior. As an example, condom social marketing (CSM) programs have been successful in increasing both condom use and knowledge of safe sex practices among their beneficiaries, thereby decreasing the likelihood of early and unwanted pregnancies and increasing the chances that young people will stay in school, increase their employability, and either enter the labor market or pursue tertiary education. Programs that have used a mix of media techniques have also been seen to have a significant positive effect on HIV knowledge and prevention skills among young people.

National mass media campaigns can also change negative social norms (in some societies) such as domestic violence and corporal punishment in school, as well as negative gender norms, which often contribute to gender-based and sexual violence. Changing these social norms can reduce risky behavior among young people because the negative behavior of their parents, families, and fellow community members can be risk factors for young people and predictors of whether or not they will engage in negative and risky behavior themselves. These campaigns can also be useful for teaching effective parenting skills to the families of young people and showing them how to serve as positive role models.

Research Findings: Providing the Evidence Base

South Africa’s *loveLife* program is a national HIV prevention program for young people that includes a multimedia education and awareness campaign, a national adolescent-friendly clinic initiative, youth centers, community-level outreach, and a teen hotline. A national youth survey of the program showed that there was a strong correlation between exposure to *loveLife* and increased abstinence, deliberate delay in initiating sexual activity, and increased condom use. Participation in *loveLife* programs was also statistically associated with lower odds of being infected with HIV.⁵ Studies of Population Services International’s (PSI) *100% Jenne* social marketing program in Cameroon showed that the program contributed to substantial increases in condom use, including consistent use with regular partners among young people of both sexes. Among males, it also contributed to increasing consistent use of condoms with casual partners. While condom use increased with both regular and casual partners, levels of use were higher with casual partners. However, the program had no effect on levels of sexual activity or on the number of sexual partners⁶ (see figures). Findings from an evaluation of Paraguay’s *Con S de Sexo*, a radio program hosted by adolescent peer educators, suggest that the project increased knowledge of selected reproductive health issues among adolescents, increased the proportion of adolescents who subscribe to safe sex practices, and most likely contributed to the significant increase in the proportion of adolescents reporting having used a condom in their first sexual encounter.⁷ An evaluation of an entertainment-education approach in Tanzania, a long running radio drama (*Twer Na Wakati*) that aired on Radio Tanzania, was conducted between 1993–97. The evaluation, in which part of the country did not receive the radio drama for the first two years of the program, showed that listeners in areas receiving the broadcast reported being more committed to using family planning methods and adopting sexual and reproductive health practices to prevent HIV infection. There was also a 153 percent increase in condom distribution in the areas that received the broadcasts (compared with a 16 percent increase in the control area) and a 33 percent increase in new clients at family planning clinics.⁸

Cameroon: Changes in Attitudes and Behavior Among Young Men

Percent of unmarried men ages 15–24 who:

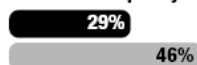
Are confident they know correct condom use



Are not shy to buy condoms



Discussed STIs/AIDS with others in the past year



Have ever used condoms



Used a condom in last sex with regular partner



Low exposure to PSI Program
 High exposure to PSI Program*

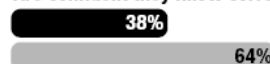
Cameroon: Changes in Attitudes and Behavior Among Young Women

Percent of unmarried women ages 15–24 who:

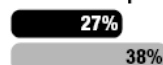
Want to wait to have children



Are confident they know correct condom use



Discussed STIs/AIDS with others in the past year



Are not shy to buy condoms in nearby shop



Bought condoms in the past year



Low exposure to PSI Program
 High exposure to PSI Program*

Florida’s *Truth Campaign*, an anti-tobacco, youth-driven media campaign, was able to achieve a brand awareness of 92 percent (in other words, 92 percent of teens surveyed were aware of the existence of the campaign). It also led to a 15 percent rise in the number of adolescents who agreed with certain negative statements about smoking, a 19.4 percent decline in smoking among middle adolescents (14–16 years old for

girls and 15–17 years old for boys), and an 8 percent decline among late adolescents (16–18 years old for girls and 17–18 years old for boys).⁹ A carefully designed and controlled study of a communication, information, and educational (CIE) strategy in Colombia carried out in three cities found significant changes in behavior (for example, a 10 percent reduction in the number of people hitting a child with a hard object) and changes in attitudes and norms (a 6 percent reduction in the acceptance of physical punishment as a way to educate children). A massive communication strategy supporting the CIE strategy was devised, and its messages were broadcast on national television.¹⁰

Moving Forward: Factors for Success

- Messages should *provide a range of viable alternatives to negative behavior*.
- Information must be reinforced by *repeated exposure and continuous, sustained interventions* to increase the likelihood of changing behavior.
- Campaigns should take into account the *ability of the target group to absorb the messages*, given differences in education and skill levels.
- *Campaigns should target young adolescents*, because information about risky behavior has a stronger and more lasting impact if delivered earlier in life, before attitudes and beliefs are shaped.
- Media *messages must be linked to real issues related to families, schools, and young people's lives*.
- *Market segmentation and message targeting* are crucial, because young people are a heterogeneous group.
- Mass media *interventions should be linked to counselors, youth centers, hotlines, and youth-friendly reproductive health services*.
- Behavior change communication *strategies should include personalized communication, emotionally compelling messages, and a role model component*, and should embed their messages in existing cultural norms and expectations.
- *Young people should be included in the design, production, and dissemination of the messages* to ensure that the messages resonate with young people, are transmitted in language that they use, and reflect the realities of their lives.

Endnotes

1. World Bank. 2007. *The Promise of Youth: Policy for Youth at Risk in Latin America and the Caribbean*. Washington, D.C.: World Bank.
2. <http://www.social-marketing.com>.
3. BCC combines commercial marketing techniques to advertise products and services with messages that promote knowledge and reinforce healthy kinds of behavior (<http://www.aidsmark.org>).
4. IPC is a communication approach that takes place between a trained agent and a member or several members of a specific target population. The goal of IPC interactions is to change behavior by addressing the underlying causes of risk within the target population and to increase skills and self-efficacy among high-risk groups (<http://www.aidsmark.org>).
5. Kaiser Family Foundation, <http://www.kff.org/about/lovelife.cfm>.
6. Plautz, A. and D. Meekers. 2007. "Evaluation of the Reach and Impact of the 100% *Jeune* Youth Social Marketing Program in Cameroon: Findings from Three Cross-Sectional Surveys." *Reproductive Health* 4(1), February.
7. Population Services International (PSI). 2002. "Adolescent Health Project Makes Waves in Paraguay." *Social Marketing and Communications for Health Profile*, PSI, January.
8. Pan-American Health Organization (PAHO). 2005. "Youth: Choices and Change, Promoting Healthy Behaviors in Adolescents." Scientific and Technical Publication No. 594. Pan-American Health Organization, Washington, D.C.
9. PAHO 2005.
10. Guerra, N., and R. Guerrero. 2006. "Most Effective Policies and Interventions in Youth Violence and Crime Prevention." Draft prepared for the World Bank, Washington D.C., October.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Increased knowledge about sexual and reproductive health issues • Reduction in early childbearing, HIV/AIDS, and STIs • Higher rates of contraceptive and condom use • Decrease in unwanted pregnancies • Reduction in alcohol, tobacco, and substance abuse • Reduction in violent and criminal behavior
Secondary Effects	<ul style="list-style-type: none"> • Increased confidence and self-esteem from acquired skills and knowledge • Increased self-efficacy
Responsible Agency/Actor	Ministries of Education, Health, Social Development, or Communications
Targeted Risk Group	Types I, II, and III
Targeted Age Group	0–18, plus families and teachers
Examples of Cost per Beneficiary	Not available
Necessary Initial Conditions	<ul style="list-style-type: none"> • Identification of the behavior and of the appropriate young people to be targeted • Link with other programs and resources to make sure the messages can be turned into action • Widespread access to media technology (radio, television, and so forth)
Specific Examples & Levels of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • South Africa: <i>loveLife</i>—Emerging evidence • Cameroon: <i>100% Jenne</i>—Emerging evidence • Paraguay: <i>Con S de Sexo/ Arte y Parte</i>—Emerging evidence • United States (Florida): <i>Truth Campaign</i>—Strong evidence
Issues to Consider for Replication and Sustainability	Social marketing and mass media campaigns cannot <i>guarantee</i> behavior change, particularly on their own. They need to be accompanied by community or group-based interventions, individual youth interventions, and access to products and services, to create long-lasting change.

CORE POLICY # 6

Promote Effective Parenting as the Cornerstone of Policies and Programs for At-risk Youth

Parental behavior, the family environment, and the extent to which young people feel connected to their parents (or to caregivers who fill a parent's role) can be either one of the strongest protective factors in the lives of young people or one of the strongest risk factors. Evidence shows that investing in family-based parenting training that promotes positive, healthy, protective parent-child interactions can reduce domestic violence, the extent to which young people associate with delinquent peers, alcohol and substance abuse, school dropouts, and arrests. Therefore, parenting training is one of the most cost-effective ways to prevent risky behavior among young people.¹

Effective parenting typically includes four components: warmth, structure, autonomy support, and development support. *Warmth* is the degree to which a parent successfully communicates to the adolescent that he/she is loved and accepted. *Structure* is the degree to which parents have expectations and set rules for the adolescent's behavior. *Autonomy support* is the degree to which parents accept and encourage the adolescent's individuality. *Development support* is the degree to which parents foster and enhance the adolescent's underlying developmental capacity for emotional and logical thinking.²

Parenting training can either be a separate intervention or a component of a comprehensive, multiservice prevention program targeted to at-risk youth. The most common types of parenting training programs include home visitation, which targets families with infants ages 0–3 years, and marital and family therapy, which target families of older children who are already exhibiting delinquent behavior. In home visitation programs, which are often included in early child development (ECD) programs (see Core Policy #1), a nurse or another professional goes to the home of an at-risk mother to provide her with training, counseling, and monitoring. The main goal of these programs is to promote healthy child development by changing parents' attitudes, knowledge, and and/or behavior. Other goals include preventing child abuse and neglect and improving parents' lives by providing them with job placement assistance and encouragement to continue their education or delay pregnancy. Although these programs can differ in terms of the starting age of the participants and the duration and intensity of the services provided, evidence shows that the earlier these programs are offered and the longer their duration, the greater the benefits that they yield. Marital and family therapy programs can also vary in design and content, but most programs aim to empower parents with the skills and resources needed to raise teenagers and empower young people to cope with family, peer, school, and neighborhood problems. These programs focus on changing maladaptive or dysfunctional patterns of family interaction and communication, including negative parenting behavior, which is one of the primary risk factors for youth violence.

How Does Effective Parenting Prevent Risky Youth Behavior?

Feeling connected to their parents, as well as receiving appropriate types and amounts of discipline and moral guidance, help create an environment in which children and young people can develop in positive ways. Parental support is also perhaps the single most important key to ensuring that adolescents pass through the different stages of physical and emotional development in a safe and healthy way. Parenting training can help parents play a positive role in their children's development by providing them with knowledge about their children's health, nutritional, and developmental needs, as well as how to interpret infant and young child behavior.³ Furthermore, a child's feeling of being connected to their parents, which can be described as a young person's desire to meet his or her parents' expectations and not to disappoint them, has also been shown to strongly influence whether or not young people decide to engage in negative kinds of behavior.

This relationship is created and fostered primarily by parental guidance. Evidence from studies of at-risk youth in the Caribbean, Brazil, Honduras, Mexico, and Chile suggests that many of the risk factors connected with low self-esteem and feelings of rage in young people can be traced back to conditions at home such as maternal emotional abandonment, the absence of parental nurturing, unskilled parents, sexual abuse, and being part of an aggressive family.⁴

Research indicates that children who feel connected to their parents are protected from risks such as emotional distress, suicidal thoughts and attempts, drug and alcohol abuse, violent behavior, and early sexual activity.⁵ Studies also show a positive relationship between parents demanding certain standards of behavior from their children and adjustments in the children's behavior. They also show a positive relationship between parental responsiveness (to their children's behavior and to developments in their lives) and adolescents' psychosocial development.⁶ For example, if children believe that their parents trust them, this is associated with lower prevalence of sexual activity, intentions to have sex, and reports of sexually transmitted infections (STIs); higher rates of consistent condom use; and lower use of tobacco, alcohol, and marijuana.⁷ Responsive and interactive parenting can also offset many of the adverse consequences of childhood malnutrition on cognitive development.⁸ Furthermore, effective parenting has been positively associated with self-control, conflict resolution, and peer resistance in adolescents and inversely associated with the use of tobacco, alcohol, and drugs, anger, alienation, aggression, delinquency, and misconduct.⁹ Conversely, low parental monitoring has been directly related to increased risky behavior, including cigarette smoking and alcohol consumption, substance abuse, sexual involvement and intercourse, unsafe sexual practices, teen pregnancy, STIs, and violent and delinquent behavior.

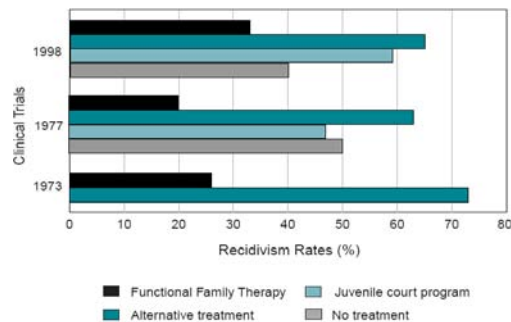
Research Findings: Providing the Evidence Base

The *Nurse-Family Partnership* is one of the most successful nurse home visitation programs in the United States. It trains parents in how to provide responsible and competent care and increases their self-sufficiency by advising them in areas such as family planning, education, and employment. Studies have shown that this program has resulted in a 79 percent reduction in child abuse and neglect, a 56 percent decline in children running away from home, and reductions of 56 percent in arrests of children and alcohol consumption by children. It has also had a positive impact on mothers, with a 31 percent drop in subsequent births, a 44 percent decline in maternal behavioral problems, and a 9 percent decline in maternal arrests, as well as an increase in the average spacing between children of more than two years.¹⁰ Australia's *Triple P-Positive Parenting Program*, a behavioral family intervention designed to improve parenting skills and behavior, has also been effective in reducing child behavioral problems, improving parenting skills and competence, and reducing conflicts over parenting between parents.¹¹ The Montreal Longitudinal Study, also called the *Preventive Treatment Program* (PTP), was designed to reduce antisocial behavior in boys from low-income families by combining parenting training and individual school-based social skills training. Evaluations found that the program had positive effects on academic achievement, avoidance of gang involvement, reduced drug and alcohol abuse, and reduced delinquency among program participants.¹² The *Mother-Child Education Program* in Turkey, which provided early enrichment for young children and training and support for mothers, yielded positive effects for children and mothers both in the short term (cognitive gains for children) and in the long term (greater educational attainment and reduced delinquency among children and the empowerment of mothers within families).¹³

The United States' *Incredible Years Series* (IYS) program includes a comprehensive, developmentally based curriculum for parents, teachers, and children designed to prevent, reduce, and treat behavior and emotional problems in children. Evaluations of the program have revealed an increase in positive parenting skills (such as greater use of praise and reduced use of criticism), an increase in parents' use of effective limit-setting, a reduction in parental depression and an increase in parental self-confidence, an increase in positive family communication and problem-solving, and fewer conduct problems in children's interactions with parents.¹⁴ Evaluations of the United States' *Guiding Good Choices* program (formerly known as the *Preparing for the Drug-Free Years Program*), which uses a multimedia approach to strengthen parenting techniques, showed that there

have been improvements in the general child management skills manifested by mothers and fathers, increases in the amount of affection between parents and children, and greater self-efficacy on the part of mothers.¹⁵ Evaluations of the United States' *Strengthening Families Program for Parents and Youth 10–14 (SFP)* (formerly the Iowa Strengthening Families Program), a universal (designed for all sixth grade students and their families) family-based intervention, showed that the program had led to better child management practices by parents, including monitoring, discipline, and standard setting; better parent-child communication; more involvement by children in their families' activities and decisions; and increases in the amount of affection between parents and children. Two years after the program ended, adolescents who had participated in the program had lower rates of alcohol use, using alcohol without their parents' permission, and being intoxicated than nonparticipants.¹⁶

Recidivism Rates for Functional Family Therapy (FFT) and Other Treatment Options, 1973–88



Source: Alexander and Parsons, 1973; Klein, Alexander, and Parsons, 1977; Hansson, 1998.

Two different kinds of family therapy have been shown to have positive effects on young people. *Functional Family Therapy (FFT)* programs based in the United States are aimed at the families of youth ages 11–18 who are at risk of or already displaying problems with delinquency, violence, substance abuse, or conduct disorder. The programs consist of 8 to 15 sessions either in the family's home or in clinics and are organized in three phases: (i) engagement and motivation (develop alliances, reduce negativity and resistance, improve communication, minimize hopelessness, develop family focus, increase motivation for change); (ii) behavior change (develop and implement individualized change plans, change present delinquent behavior, build relational skills); and (iii) generalization (maintain/generalize change, prevent relapses, provide community resources necessary to support change). Multiple clinical trials of FFT have showed that it has succeeded in reducing the proportion of young people who re-offended (60 percent were arrested a second time compared with 93 percent of young people in the control groups) and in reducing the frequency of offending by up to 2.5 years.¹⁷ The figure shows the effectiveness of FFT on recidivism rates compared with alternative treatments, juvenile court programs, and no treatment. The second kind of family therapy is known as *Multi-Systemic Therapy (MST)*, an intensive family- and community-based treatment program, which posits that youth antisocial behaviors are multidetermined and linked with characteristics of the individual youth and his or her family, peer group, school, and community contexts. As such, MST interventions aim to attenuate risk factors by building youth and family strengths (protective factors) on a highly individualized and comprehensive basis. Evaluations in the United States have shown that MST has had significant positive effects on behavioral problems, family relations, and self-reported offenses immediately after treatment. Seriously delinquent young people who participated in MST had slightly more than half as many arrests as those in control groups, spent an average of 73 fewer days incarcerated, and were less aggressive with their peers 59 weeks after being referred to the program.¹⁸

Moving Forward: Factors for Success

- ***Start as early as possible*** (train parents even before children are born).
- ***Train parents and caretakers in positive discipline methods*** in addition to standard health and nutrition practices.
- ***Encourage weekly family meetings*** to change internal family dynamics and communication patterns tailored to the types of risks the family faces, and the development stage of the young people and parents who are targeted.
- ***Take into account the social context*** in which parenting occurs to increase likelihood of changing behavior.
- ***Make frequent and consistent home visits*** because too few visits will prevent a relationship from forming between the home visitor and the parent and will result in poor implementation of the program's curriculum.
- ***Operate programs year-round*** instead of only during the academic year to minimize the number of families who drop out of the program.
- ***Involve parents in as many program activities as possible***, while remaining cognizant of parents' time constraints and schedules.
- ***Hire staff with the personality and skills*** to establish positive relationships with families, the ***organizational skills*** to deliver the home visiting curriculum, the ***problem-solving skills*** to respond to any issues that families may bring up in the moment, and the ***cognitive skills*** to learn and implement the program curriculum.
- ***Provide high-quality training to home visiting staff*** to ensure the proper delivery of the curriculum, and constant support to prevent and/or reduce staff turnover.
- ***Set up partnerships with other community services***, such as health services, high-quality child care, and jobs to ensure that home visitation programs have the greatest possible impact.

Endnotes

1. World Bank, 2007. "The Promise of Youth: Policy for Youth at Risk in Latin America and the Caribbean." Washington, D.C.
2. Pan American Health Organization. 2005. "Youth: Choices and Change. Promoting Healthy Behavior in Adolescents." Scientific and Technical Publication No. 594. Pan American Health Organization, Washington, D.C.
3. World Bank. 2006. *World Development Report 2007: Development and the Next Generation*. New York: World Bank and Oxford University Press.
4. Cunningham, Wendy, and Maria Correia. 2003. *Caribbean Youth Development: Issues and Policy Directions*. Washington, D.C.: World Bank.
5. Blum, R.W., and P. Rinehart. 1997. *Reducing the Risk: Connections that Make a Difference in the Lives of Youth*. Division of General Pediatrics and Adolescent Health. University of Minnesota, Minneapolis, MN.
6. Pan-American Health Organization (PAHO). 2005. "Youth: Choices and Change, Promoting Healthy Behaviors in Adolescents." Scientific and Technical Publication No. 594. PAHO, Washington, D.C.
7. PAHO 2005..
8. World Bank. 2006. *World Development Report 2007: Development and the Next Generation*. New York: World Bank and Oxford University Press.
9. PAHO 2005.
10. Gomby, D., P. Culross, and R. Behrman. 1999. "Home Visiting: Recent Program Evaluations—Analysis and Recommendations." *The Future of Children* 9(1), Spring/Summer.
11. Child Trends—Social Science Research for those Serving Children and Youth. "Guide to Effective Programs for Children and Youth." Available at: <http://www.childtrends.org/Lifecourse/programs/TripleP-PositiveParentingProgram.htm>.
12. U.S. Surgeon General, 2001, Report on Youth Violence; University of Colorado at Boulder, Blueprints for Violence Prevention, <http://www.colorado.edu/cspv/blueprints>; U.S. Department of Justice, December 2000, Juvenile Justice Bulletin/Office of Juvenile Justice and Delinquency Prevention/Office of Justice Programs.
13. Kagitsibasi, C., D. Sunar., and S. Bekman. 2001. "Long-term Effect of Early Intervention: Turkish Low-Income Mothers and Children." *Applied Development Psychology* 22: 333–361.
14. University of Colorado at Boulder, Blueprints for Violence Prevention: <http://www.colorado.edu/cspv/blueprints>.
15. University of Colorado at Boulder, Blueprints for Violence Prevention: <http://www.colorado.edu/cspv/blueprints>.
16. University of Colorado at Boulder, Blueprints for Violence Prevention: <http://www.colorado.edu/cspv/blueprints>.
17. <http://www.fftinc.com>.
18. U.S. Surgeon General. 2001. Report on Youth Violence; University of Colorado at Boulder, Blueprints for Violence Prevention, <http://www.colorado.edu/cspv/blueprints>; U.S. Department of Justice, December 2000, Juvenile Justice Bulletin/Office of Juvenile Justice and Delinquency Prevention/Office of Justice Programs.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Improved parenting skills • Increased self-efficacy among parents • Improved parent-child relationships • Increased paternal involvement in child care • Less child abuse and neglect • Fewer births or a greater gap in time between first and second child • Increased gender equity
Secondary Outcomes	<ul style="list-style-type: none"> • Reduced alcohol and substance abuse by young people • Reduced criminal and violent behavior by young people
Responsible Agency/Sector	Ministries of Education, Health, Justice, or Social Welfare, and NGOs
Targeted Risk Group	Types I-III
Targeted Age Group	Parents of infants to young adults (0–18)
Examples of Costs per Beneficiary	<ul style="list-style-type: none"> • Nurse-Family Partnership (home visitation): US\$2,800 per family per year once the nurses are completely trained and working at full capacity ^{a/} • Multi-Systemic Therapy (MST): US\$4,500 per youth/per year ^{a/} • Functional Family Therapy (FFT): 90-day costs range between US\$1,600–US\$5,000 for an average of 12 home visits per family ^{a/}
Necessary Initial Conditions	<ul style="list-style-type: none"> • Existence of support systems and training programs for parents that include life skills, family planning advice, and child rearing skills • Availability of trained nurses and health practitioners who know how to conduct effective home visits • Community acceptance of the importance of parenting training to improve children’s behavior
Specific Examples & Levels of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • Australia/United States: <i>Triple-P-Positive Parenting</i>—Strong evidence (http://www.triplep-america.com) • Montreal, Canada: <i>Longitudinal Study/Preventive Treatment Program</i>—Strong evidence • Turkey: <i>Mother-Child Education Program</i>—Strong evidence • United States: <i>Incredible Years Series</i>—Strong evidence • United States: <i>Guiding Good Choices</i>—Strong evidence • United States: <i>Strengthening Families Program for Parents and Youth 10–14</i>—Strong evidence (http://www.strengtheningfamilies.org) • United States: <i>Nurse-Family Partnership</i>—Strong evidence (http://www.nursefamilypartnership.org) • United States: <i>Functional Family Therapy (FFT)</i>—Strong evidence (http://www.fftinc.com) • United States: <i>Multi-Systemic Therapy (MST)</i>—Strong evidence (http://www.msts services.com or www.mstinstitute.org)
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Social and community context must be taken into account in addition to individual and family factors • Success of the program largely depends on the dynamic between the program practitioner and the parent

Sources:

a. University of Colorado at Boulder, Blueprints for Violence Prevention (www.colorado.edu/cspv/blueprints)

Note: Costs per beneficiary were computed primarily in the U.S. and would most likely be reduced in middle-income countries.

PROMISING APPROACH # 1

Invest in Education Equivalency Degree Programs for Over-age Young People Who Want to Complete Their Formal Education

Education equivalency programs (also referred to as second chance education programs) can help address the demand and supply-side constraints that have led many young people worldwide to discontinue their education before acquiring basic skills needed to succeed in work and life.¹ The primary goal of equivalency programs is to expand access to secondary education and training opportunities, but they also offer training in a mixture of basic and technical skills. These skills allow at-risk youth either to complete their formal education or enter the labor market, thereby facilitating their (re)integration into society. Educational equivalency degrees are based on the assumption that a certified degree shows employers that the potential employee has both the secondary school skills and the stamina to complete such a course. This increases the young person's chance of gaining employment, as well as giving him or her access to tertiary education and, thus, higher future earnings.²

Equivalency programs differ from traditional education programs in several ways: their target group (school dropouts, as opposed to all children); a flexible and innovative structure; lower-cost teaching methods; and specially designed, innovative teaching materials. Education equivalency programs have to vary to suit the local context in terms of their management structure (private versus public), the teachers' roles (certified teachers as opposed to community volunteers), the program's content (similar to or different from formal secondary school curriculum), accreditation type (same or different exams as formal schools) and the use of technology. For equivalency programs to be most effective, they must be accessible to all school dropouts (nonselective), effective (they should increase students' educational attainment), and equivalent (graduates should be provided with the same, or similar, qualifications as graduates of formal education programs).

How Do Education Equivalency Degree Programs Reduce Risky Youth Behavior?

Research has shown that the number of years of education and/or training attained by a young person is a significant predictor of his or her future employment. In the case of young people who leave school early, they are likely to be highly vulnerable to economic and social change because of their limited amount of schooling.³ Second chance programs can have a positive impact on at-risk youth both directly (by increasing their schooling that was cut short when they dropped out, which increases their chances of acquiring employment and receiving higher wages) and indirectly (by providing them with information and skills to make good decisions, giving them better prospects for a successful life, and consequently reducing their chances of engaging in risky behavior). Studies also show that second chance education can provide many intangible benefits to young people.⁴ Such benefits include improved social and interaction skills; increased confidence and self-esteem that gives participants a sense of control over their lives and the ability to seek out new opportunities; and a sense of connectedness with their peers, teachers, and schools, which has been proven to be one of the most important protective factors for young people. Therefore, helping young people who have left school early to increase their educational attainment and/or skills so they can enter the labor market and mainstream society can help dissuade them from future risky behavior or minimize current risky behavior.

Research Findings: Providing the Evidence Base

Evidence shows that, while equivalency programs can be more cost-effective than traditional programs (due to their lower recurrent and fixed costs), their impact on school performance (test scores, completion rates, and numbers of students continuing in education) and on employment and wages is mixed. An evaluation of Colombia's *Tutorial Learning System (SAT)* program showed that on average SAT students scored higher on the national exam than students in formal schools within the same municipalities.⁵ Meanwhile, in Indonesia's *Open Junior Secondary Schools* program, 93 percent of participants who took the national exam passed, and there was no significant difference in terms of academic performance between students from the program and those from traditional schools.⁶ However, only 10 percent of participants in the Philippines' *Non-formal Education Project* passed the nationally equivalent exam over the span of two years, though 99 percent of those who passed continued their education or found employment.⁷

In Mexico's *Telesecundaria* program, which offers year-round curricula via television to rural junior secondary schools, almost 75 percent of the students who enter at grade 7 successfully complete grade 9. However, figures from 1994 showed that only 21 percent of *Telesecundaria* students continued on to high school compared with 85 percent of grade 9 students in urban areas. It is estimated that another 15 percent of *Telesecundaria* students pursue technical careers. The table below shows that *Telesecundaria* students are substantially more likely than other groups to pass a final grade 9 examination that is set and administered by the central government and certified by the Ministry of Education. These exams certify successful completion of junior secondary school and are eligibility criteria for entering senior high school. However, the regular and *Telesecundaria* students do not take the same examination, although both exams are based on national standards and both must be certified by the central government.⁸

**The Effectiveness of Mexico's *Telesecundaria* Program:
Examination Pass Rates by Type of School**

Type of School	Exam Pass Rates (%)
Traditional	74
Telesecundaria	93
Technical	72
Secondary for Workers	68
Total Secondary Population	76

Source: Basic Statistics of the National Education System. CYCLE 1995–1996, Ministry of Public Education, Mexico.

An evaluation of the European Union's *Second Chance Schools* pilot project showed that it had a 94 percent success rate in getting some 4,000 young people who lack basic skills and qualifications back into school.⁹ Denmark's *Youth Unemployment Program* aims to increase the employment possibilities available to unemployed, low-educated young people and to motivate them to return to school. An evaluation of the program showed that it has had small but positive short-term effects on employment.¹⁰ However, a nationwide evaluation of the U.S. program *JOBSTART Demonstration*, which targets school dropouts with low literacy skills, showed that employment rates among participants were not consistently above rates for the control group and that the program's effects on earnings were either insignificant or negative. The evaluation also found that the program was not cost-effective. Nevertheless, an evaluation of *JOBSTART* in San Jose, California, a subset of the national *JOBSTART* program in the United States, demonstrated that the program had resulted in significant earnings gains for participants.¹¹ Results of evaluations of the *General Educational Development (GED)* program in the United States have shown that GED certification has little or no impact on wages for those who do not go on to receive post-secondary schooling. However, the fact that GED certification makes post-

secondary opportunities available in the first place can be considered an indirect (positive) impact of the program.¹²

Moving Forward: Factors for Success

- Graduates of equivalency programs should be provided with *similar qualifications as graduates of formal education programs* (in other words, a certificate of completion).
- It is vital to know about the *needs of the target group* and the circumstances in which they operate, including *why they dropped out of formal education system* in the first place.
- *Programs should build partnerships among NGOs and private providers, the formal education system, and potential employers* of students to ensure that graduates are able to continue their education or get a job.
- Instructors and facilitators should be specifically trained in *innovative teaching methods* as well as in the special needs and learning styles of the target group.
- The programs should provide classes on *a flexible schedule* (nights and weekends) to accommodate the different circumstances of the participants.
- The *programs should be simply designed and the curricula should be practical and integrated* (and include life skills and vocational training).
- *Formal education teaching methods should also be used* so that students who go back to formal education system will have a less difficult time integrating and adapting to the formal system.
- There should be *substantial personal interaction between students and instructors*.
- The *program should be perceived to be of high quality and comparable to formal education* by participants, instructors, and community members.
- *Programs should emphasize social support and emotional connectedness* of students by involving parents, especially of the younger participants in the program, and by keeping a group of students with the same teacher over the years.

Endnotes

1. Although there are many youth who never attended school and could benefit from various types of nonformal education, this note focuses on the needs of school dropouts.
2. World Bank. 2007. *The Promise of Youth: Policy for Youth at Risk in Latin America and the Caribbean*. Washington, D.C.: World Bank.
3. Business Council of Australia. 2003. "The Cost of Dropping Out: The Economic Impact of Early School Leaving." Business Council of Australia, Melbourne. <http://www.bca.com.au>.
4. Saunders, J., M. Jones, K. Bowman, P. Loveder, and L. Brooks. 2003. "Indigenous People in Vocational Education and Training: A Statistical Review of Progress." National Centre for Vocational Education Research, Leabrook. Available at: <http://www.ncver.edu.au/research/commercial/op298.pdf>; and Wyn, J., H. Stokes, and D. Tyler. 2004. "Stepping Stones: TAFE and ACE Program Development for Early School Leavers." National Centre for Vocational Education Research, Leabrook. Available at: <http://www.ncver.edu.au/research/proj/nr0015.pdf>.
5. di Grapello, Emanuela, ed. 2006. *Meeting the Challenges of Secondary Education in Latin America and East Asia: Improving Efficiency and Resource Mobilization*. Directions in Development: Human Development. Washington, D.C.: World Bank.
6. di Grapello 2006.
7. di Grapello 2006.
8. Calderon, J. 1998. "Telesecundaria: Using TV to Bring Education to Rural Mexico." *Education and Technology Technical Notes* 3(2). World Bank, Washington, D.C.
9. European Commission. 2001. "Second Chance Schools: The Results of a European Pilot Project." Directorate-General for Education and Culture, European Commission.
10. Betcherman, G., M. Godfrey, S. Puerto, F. Rother, and A. Stavreska. 2007. "Global Inventory of Interventions to Support Young Workers, Synthesis Report." Preliminary draft. World Bank, Washington, D.C.
10. Betcherman and others 2007.
11. Arends-Kuenning, M., Andrea Ferro, and D. Levison. 2006. "Youth at Risk in the Latin American and Caribbean Region: Focus on Early School-Leaving." Policy paper prepared for the World Bank's "Youth at Risk in the Latin America and Caribbean Region: Building a Policy Toolkit." Department of Agricultural and Consumer Economics, University of Illinois at Urbana-Champaign and Humphrey Institute of Public Affairs, University of Minnesota.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Return of dropouts to formal education system • Acquisition of basic education/literacy skills • Employability, entry into labor market • Increase in earnings • Social reintegration
Secondary Effects	Self confidence, self-esteem, better social interaction skills
Responsible Agency/Actor	Ministries of Education or Labor, public and private training institutes, NGOs, private sector
Targeted Risk Group	Type III—students who have dropped out before completing secondary schooling
Target Age Group	15 and older
Examples of Cost per Beneficiary	Mexico <i>Telesecundaria</i> : Approximately US\$550 per student per year ^a
Necessary Initial Conditions	<ul style="list-style-type: none"> • Full acceptance by formal education sector, private sector, prospective students, and community members • Detailed knowledge of target population and local context • Established partnerships with formal education sector and prospective employers • Well-trained facilitators/teachers in innovative education methods and in working with target group • Marketing of courses both to target group and to prospective employers
Specific Examples & Levels of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • Mexico: <i>Telesecundaria</i>—Emerging evidence • Colombia: <i>Tutorial Learning System (SAT)</i>—Emerging evidence (http://www.sat.edu.co) • Philippines: <i>Non-formal Education Project</i>—Emerging evidence • Indonesia: <i>Open Junior Secondary School Program</i>—Emerging evidence • Denmark: <i>Youth Unemployment Program</i>—Emerging evidence • United States: <i>General Educational Development (GED)</i>—Emerging evidence (http://www.acenet.edu/AM/Template.cfm?Section=GED'S)
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Equivalency programs should not aim to replace formal education. • If employers undervalue equivalency degrees, this may discourage young people from pursuing them, which reinforces the need to advertise the benefits of the program both to potential participants and to employers. • School dropouts are a heterogeneous group, so it is important to target accurately.

Source: a. Calderoni 1998.

PROMISING APPROACH # 2

Invest in Job Training Programs that Include a Mixture of Technical Skills, Life Skills, and Internships

Many young people around the world have insufficient and inadequate skills to compete in the formal labor market. This is because of difficulties in accessing secondary education and job training opportunities, as well as because of secondary school curricula that are not relevant to the labor market. Globalization and the accompanying advances in technology, which have significantly increased the demand for skilled labor, have made young people without skills or basic education particularly vulnerable and virtually unemployable.

One way to counter this problem is to enable young people to increase their educational attainment and learn skills after they have left the formal school system. These kinds of interventions have taken two forms—skills training and comprehensive multiservice training. Skills training programs consist of vocational training, apprenticeships, or second chance/education equivalency programs (see Promising Approach # 1) that aim to build the technical skills of young people. Comprehensive multiservice training programs go beyond technical training to focus on developing the young person’s skills as a worker by providing him or her with a wide range of support, including general skills training, life skills¹ (see Promising Approach # 8), job search and placement assistance (see Promising Approach # 7), and self-employment services. Although skills training programs are the most prevalent, the comprehensive multiservice training programs have had the most success so far, particularly in developing countries. This approach has been less successful in developed countries, which makes it evident that each country’s specific circumstances, including its institutions, policies, and overall macroeconomic conditions, should be reflected in the design and implementation of job training programs.

How Do Comprehensive Job Training Programs Reduce Risky Youth Behavior?

Entering the labor force is one of the most important transitions that a young person will make, but it is a transition for which many young people, particularly the most disadvantaged, are not prepared. Young people who spend long periods of time looking for a job or who have difficulty keeping a job are more likely to be poor, and there is some evidence that being unemployed during their youth will affect their employability later in life. Young people who have difficulty finding and keeping jobs are also thought to be more prone to engage in risky behavior, such as crime and violence and substance use.

Traditionally, standard skills training programs have been provided based on the assumption that young people struggle to find and keep good jobs because they lack marketable technical skills. However, recent evidence suggests that poor technical skills are only one of many barriers that young people face in their search for employment. It is now clear that a range of different kinds of support is needed to teach young people how to behave in the workplace and become active members of society. Thus, a combination of technical, life skills, practical training, job search assistance, and general social support can give at-risk youth the tools that they need to move from being socially excluded to participating fully in society. Furthermore, providing these kinds of support not only helps young people to find employment but also increases their self-esteem, confidence, and sense of control over their lives and their futures and provides them with the information and skills to cope with work and family life. All of these outcomes lower the probability that these young people will engage in risky behavior.

Training programs that teach life skills may not always be able to guarantee the employment of participating young people because much depends on the prevailing macroeconomic conditions of the country in which

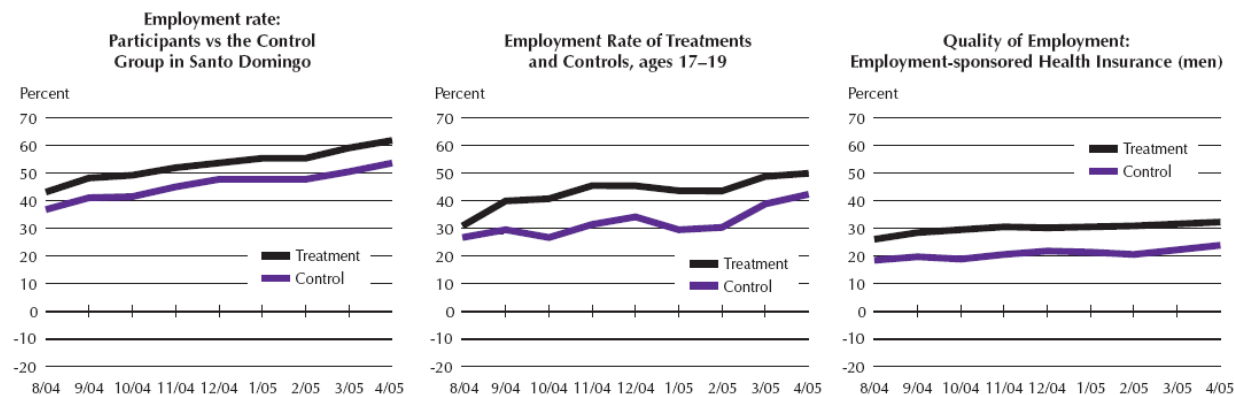
the program is being implemented. Nevertheless, the life skills that young people are taught serve as protective factors in their lives and, thus, increase the probability that they will be employed in the future.

Research Findings: Providing the Evidence Base

Comprehensive training programs for young people have shown promising results in terms of increased youth employment, particularly in developing countries. Much of the evidence for this finding has come from evaluations of *Jóvenes* programs, which were first introduced in Chile and have because been replicated in several Latin America and Caribbean countries. This type of program targets disadvantaged young people and offers a package of classroom training, work experience, life skills, job search assistance, and counseling.² Evaluations of these *Jóvenes* programs have found evidence that participants have a greater chance of finding employment and higher earnings than those in control groups. In Argentina, for instance, the probability of adult female participants finding employment increased by 10 percent, while in Chile the program increased this probability by 21 percent, with even more significant results for young people under the age of 21 and women. Similarly, participants' earnings increased by about 10 percent more than nonparticipants in Argentina and the Dominican Republic, with particularly favorable results for young males and females, and by about 26 percent in Chile, with best results for the youngest participants.³ A preliminary impact evaluation of the Dominican Republic's *Juventud y Empleo* program, which provides training and internships to disadvantaged young people, showed that wages earned by participants were 10 percent higher and that the types of jobs they acquired were of better quality than those of nonparticipants, measured, for example, by the receipt of such benefits as employer-sponsored health insurance (see figure).⁴ Although no net impact evaluations of the *Entra 21* program have yet been carried out, studies in several of the 18 countries in Latin America and the Caribbean where it operates have shown that the program, which offers people ages 16–29 an integrated package of technical training, life skills, job seeking skills, and internships with local employers, had a positive “gross” impact on the employability of its participants. Estimated job placement rates ranged from 68 percent in Peru to 41 percent in Paraguay, average monthly wages were at least as high as the minimum wage, and most participants were able to attain a job in the formal sector with at least one benefit, such as paid vacations, monthly bonus, or health insurance.⁵

Skills training programs in East Asia have also yielded promising results. Samoa's *Opportunity for Vulnerable Poor Youth* program, which provides informal and vocational training to unemployed young people to increase their earnings opportunities as well as their self-esteem, has been found to have increased beneficiaries' employability. China's *Labor Preparation* program, which provides vocational education and training to new labor force entrants, and the Philippines' *Working Youth Center* have yielded similarly positive results in terms of employability.⁶

Findings from Dominican Republic *Juventud y Empleo* Program Impact Evaluation



Source: Card and others 2006.

Results from evaluations of comprehensive programs in OECD countries have been mixed. In Canada, the *Employability Improvement Program* had a substantial impact on annual earnings of participants compared to nonparticipants due to an increase in the number of weeks worked. Meanwhile in the United Kingdom, studies have found that young unemployed men are about 20 percent more likely than nonparticipants to find jobs as a result of the *New Deal for Young People* program. However, a recent meta-analysis of eight U.S. programs found that they have had only a very moderate and often negative impact on the chances of young people finding work. One exception is the U.S. program *Job Corps*, which has had a positive impact on participants but has not been cost-effective.⁷

Moving Forward: Factors for Success

- ***Create partnerships with the private sector*** to ensure that the skills being taught are needed by employers and will be relevant when participants try to enter the labor market. Demand-driven skills also encourage competition between job training providers, which increases the probability that the services will be of better quality. Set up internships to provide on-the-job training for participants.
- ***Offer an integrated package*** of technical skills, life skills, job search assistance, and on-the-job experience to give at-risk young people the greatest possible chance of finding employment.
- Implement ***high-quality targeting mechanisms*** to ensure that only the most disadvantaged youth are included and to avoid attracting students who are already enrolled in formal education.
- Ensure that the ***training is suitable and practical for both urban and rural areas, as well as for both young males and females.***
- Offer ***flexible schedules and accelerated programs.***
- ***Work across sectors and ministries*** (such as education, labor, youth, and planning).

Endnotes

1. Although not universally defined, life skills, or soft skills, are generally classified into three categories: (i) social and interpersonal skills (communication, refusal skills, assertiveness, and empathy); (ii) cognitive skills (decision making, critical thinking, problem solving, and self-evaluation); and (iii) emotional coping skills (stress management, self-control, self-esteem, and coping strategies).
2. Ibarra, Pablo, and David Rosas. 2006. "IDB's Job Training Operations: Thematic Report of Impact Evaluations." Draft, October. Inter American Development Bank, Washington D.C.; Jaramillo, Miguel. 2006. "Youth at Risk in Latin America and the Caribbean: Supporting Youth Facing Labor Market Risks." Policy paper prepared for the World Bank's "Youth at Risk in the Latin America and Caribbean Region: Building a Policy Toolkit." Group for the Analysis of Development (GRADE), Lima, Peru; Diaz, J., and M. Jaramillo. 2006. "Evaluation of the Peruvian Youth Labor Training Program PROJoven." Draft Working Paper. GRADE, Lima, Peru. Note that despite higher returns for females, participation rates are still lower than for males in most programs. To encourage greater participation from poor females, policy makers should consider providing child care.
3. Aedo, Cristian, and Sergio Nunez, 2001. "The Impact of Training Policies in Latin America and the Caribbean: The Case of Programa Joven." ILADES and Georgetown University, May; Aedo, Cristian, and Pizarro Marcelo. 2004. "Rentabilidad Economica del programa de capacitacion laboral de jovenes Chile Joven." Unpublished paper; Elias, Victor, F. Ruiz-Nunez, R. Cossa, and D. Bravo. 2004. "An Econometric Cost-benefit Analysis of Argentina's Youth Training Program." Research Network Working Paper #R-482, Inter-American Development Bank, Washington, D.C.; Card, D., Pablo Ibarra, Ferdinando Regalia, David Rosas, and Yuri Soares. 2006. "Labor Market Impacts of Youth Training in the Dominican Republic: Evidence from a Randomized Program." Inter-American Development Bank, Washington, D.C.; Nopo, Hugo, M. Robles, and Jaime Saavedra. 2002. "Una Medicion del Impacto del Programa Capacitacion Laboral Juvenil PROJoven." Documento de Trabajo 36, GRADE, Peru; Diaz and Jaramillo 2006.
4. Card and others 2006.
5. Pezzullo, Susana. 2005. "Project Effectiveness and Impact: Youth Employability and Job Placement." International Youth Foundation, Baltimore.
6. Stavreska, A. 2006. "Interventions to Support Young Workers in South, East Asia, and the Pacific: Regional Report for the Youth Employment Inventory." Unpublished paper, October. World Bank, Washington D.C. Note: It is unclear whether a control group was used in the evaluation of the Samoa's *Opportunity for Vulnerable Poor Youth* program.
7. Betcherman, G., M. Godfrey, S. Puerto, F. Rother, and A. Stavreska. 2007. "Global Inventory of Interventions to Support Young Workers, Synthesis Report." World Bank, Washington, D.C.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Employment • Higher earnings • Increased employability
Secondary Effects	<ul style="list-style-type: none"> • Increased self-esteem • Increased self-confidence • Higher educational attainment • Social inclusion
Responsible Agency/Actor	National training institutes, NGOs, private firms
Targeted Risk Group	Type III
Target Age Group	14–24
Examples of Cost Elements per Beneficiary	<ul style="list-style-type: none"> • Latin America and the Caribbean: <i>Jóvenes</i> programs, ranging from US\$700–US\$2,000 per beneficiary ^a • United Kingdom: <i>New Deal</i>—US\$1,000 per beneficiary (2005 dollars) ^a • United States: <i>JobCorps</i>—approximately US\$17,000 ^a
Necessary Initial Conditions	<ul style="list-style-type: none"> • A high-quality targeting system that can reach the most disadvantaged young people • Partnerships with private firms for identifying demand for skills and for providing internships • Partnerships with technical training providers to decide upon target group, program design, and implementation
Specific Examples & Level of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • <i>Chile Joven</i> (Chile)—Strong evidence • <i>Programa Joven</i> (Argentina)—Strong evidence • <i>ProJoven</i> (Peru)—Strong evidence • Canada: <i>Employability Improvement Program</i>—Emerging evidence • United Kingdom: <i>New Deal for Young People</i>—Emerging evidence • United States: <i>JobCorps</i>—Emerging evidence • <i>Entra 21</i> (LAC)—Emerging evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Programs need to take into account the prevailing economic conditions in a particular country, especially labor demand. • Because these programs might attract students away from formal education, they must be carefully targeted to those most in need.

Source: a. Betcherman and others 2007.

PROMISING APPROACH # 3

Provide Financial Incentives to Young People to Promote Good Decision Making

The behaviors of young people are usually guided by a range of factors, including their family environment and upbringing, their education, their culture, and societal norms. In addition, young people often make cost-benefit calculations when deciding whether or not to engage in a risky behavior. It is assumed that if the benefits of making a positive decision are increased then young people will have an incentive to choose positive behavior over risky behavior. In recent years, governments in several developing countries have taken steps to affect this cost-benefit calculation, mainly by increasing the monetary value to young people of staying in school. The best-known way governments affect the cost-benefit calculation is through conditional cash transfer (CCT) programs, which give cash grants to parents or young people themselves *on the condition* that they attend school on a regular basis. Other incentives that governments have given young people to stay in school include establishing individual learning accounts (ILAs) and providing targeted financial assistance for tertiary education (a combination of loans and grants).¹

CCT programs can include both an education and health component. The education component includes a cash grant targeted to children of primary school age and/or, in countries with higher educational attainment, to adolescents of secondary school age. The cash is granted on a per-student basis and is conditional on the young person enrolling and attending school for at least 80–85 percent of the school day and generally covers direct costs (such as school fees, supplies, and transportation costs) and/or the opportunity costs incurred by families when they lose income as a result of sending their children to school. The health and nutrition grants are usually targeted to preschool children and pregnant and lactating women and are usually granted to families (not individuals) on the condition that household members make regular basic and reproductive health visits.²

Individual Learning Accounts (ILAs) aim to encourage families and individuals to save up to cover education expenses while simultaneously providing vouchers to individuals interested in pursuing further education. The amount to which each individual is entitled in an ILA depends on the amount that he or she has saved and on the particular kind of education or training that he or she is interested in pursuing.³

The limited evidence available suggests that CCTs may have an even greater impact on young people (those age 12 and over) than on children (under the age of 12) and may have positive effects in areas beyond education, such as employment and risky behavior.⁴ Thus, CCTs seem to be not only one of the most promising interventions for encouraging young people to complete secondary school but also effective in discouraging a wide range of negative behaviors. Most CCT programs have not existed long enough for full assessments of their effectiveness in reducing long-term poverty and risky youth behavior to have been carried out. Nevertheless, there is enough information to suggest that the concept of cash transfers is a promising approach for promoting positive decision making among young people.

How Do Financial Incentives Encourage Good Decision Making and Less Risky Youth Behavior?

There are two main ways in which cash incentives can encourage young people to make good decisions. First, CCTs and financial incentives such as ILAs encourage young people to enroll and *stay* in school—which has been proven to be one of the strongest protective factors in the lives of young people. Evidence shows the greater the number of years of schooling, the more positive the sexual and reproductive health outcomes. Better academic performance is also consistently associated with a reported lower likelihood of ever having had sexual intercourse, and education is also associated with decreased pregnancy rates. Commitment to

school has also shown to be one of the few protective factors that has reduced the effects of exposure to specific risks for violence.⁵ Conversely, school failure and dropout have been proven to be risk factors for youth violence and delinquency.⁶ Some evidence also exists that CCT programs can mitigate the role of poverty in encouraging risky behavior. For example, those young people who are most affected by economic setbacks are less likely to drop out if they are receiving CCTs. Evaluations of the effects Mexico's CCT program *Oportunidades* on three household-level economic shocks showed that transfers largely or fully mitigated the risk that young people would leave school in response to an economic shock and that CCT programs acted as a safety net for the schooling of children from poor families.⁷

Second, young people make cost-benefit calculations about their actions and are likely to choose actions with benefits. The benefits can include various psychological gains, such as peer acceptance and expectations, as well as monetary benefits. Thus, by increasing one part of this package, the whole value of the package can be affected. This is particularly important for affecting young people's behavior because they are more likely than adults to underestimate the costs of their behavior, to over-value the psychological benefits, and to respond to financial incentives because of their own budget constraints. Cash incentives have repeatedly been shown to be successful in affecting young people's attendance at secondary school, so it can be assumed that they follow the same decision-making process in the case of other kinds of behavior as well.

Research Findings: Providing the Evidence Base

Impact evaluations of Mexico's CCT program, *Oportunidades*, have shown that it has had a positive impact on youth enrollment (particularly during the transition between primary and middle school), total years of schooling, dropout rates, timely grade advancement, the amount of time that younger children spend working, and the probability of older adolescents finding employment. The most significant effects were seen on the dropout rates and the school reentry rates of older children. The program has also helped to reduce alcohol consumption, smoking, and the number of sexual partners, but it had no impact on the age of first sexual experience, probability of using contraceptives, prevalence of STDs, or number of pregnancies among young women (see figure).⁸ Although not yet evaluated, a new component called *Jóvenes con Oportunidades* was added in 2003 to extend these benefits beyond graduation to provide young people with additional incentives to complete secondary school. The program opens an account for each young person in the last year of lower secondary school (grade 9) and deposits points (equal to pesos) for each subsequent year until the young person completes grade 12. Upon graduation (which must be done before the age of 22), students can choose between waiting two years to obtain the accumulated account balances (with interest) to use as they wish, or having immediate access to the funds if they use the funds to (i) attend college, (ii) purchase health insurance, (iii) get a loan to start a business, or (iv) apply for public housing.⁹

Summary of Impacts on Youth of Mexico's *Oportunidades* Program (Selected Indicators)

Area of Impact	Rural Medium Term (1997–2003)b Compared to controls	Urban Short Term Impact(2002–2004)a Compared to controls
Education		
• Schooling	↑ about one year (boys 15–18 post-program, slightly less for girls)	↑ 0.25 years (boys 12–14); ↑ 0.15 to 0.17 years (girls 12–14); ↑ 0.28 years (boys 15–18) ↑ 0.15 to 0.19 years (girls 15–18)
• Progression	↑ 13.5 %-points (girls 15–21) ↑ 16 %-points (boys 15–21)	↑ 0.1 to 0.15 grades completed (boys 6–17) ↑ 0.08 to 0.1 grades completed (girls 6–17)
• Enrollment		↑ 8 %-points after 1 year (boys 15–18) ↑ 9 to 12 %-points (boys 6–17) ↑ 12.6 to 14.4 %-points (girls 6–17)
Work		
• Premature Entry to Labor Market	↓ 10 %-points (boys 15–16)	↓ 7 %-points after 1 year (boys 12–14) ↓ 13 %-points after 2 years (boys 12–14) ↓ 10 %-points in first year (girls 15–18)
• Employment (excluding domestic)	↑ 6 %-points (boys 19–21) ↑ 5 %-points (girls 19–21)	NA NA
Health		
• Days ill past 30 days	NA	Male & Female (ages 6–15) ↓ 0.269 days
• # of hospitalizations	NA	↓ 0.094
• Days unable to perform normal activities past 30 days	↓ 0.058 days	↓ 0.250 days
Risky Behavior		
• Ever smoked	Male & Female (age 15–21) ↓ 15.4 %-points	↓ 4.4 %-points (M/F 15–21) ↓ 1.6 %-points (M/F 10–14)
• Ever drank	↓ 11.4 %-points	↓ 0.7 %-points (M/F 10–14), no impact (M/F 15–21)
• # alcoholic drinks previous week	↓ 0.155 drinks	↓ 0.147 drinks (M/F 15–21)
• # of sexual partners	↓ 1.0	NA
• Age first sexual activity	No impact on age	↓ 0.055 years (M/F 15–21)
• Pregnancy/STDs	No impact on age	NA

Sources: a. Behrman, J.R., Gallardo-García, J., Parker, S.W., Todd, P.E., Vélez, V. 2006. Parker, S.W., Todd, P.E., Wolpin, K.I. 2006. Gutiérrez, J. P., Gertler, P., Hernández, M., Bertozzi, S. 2004. b. Behrman, J.R., Parker, S.W., Todd, P.E. 2005. 2006. Gutiérrez, J.P., Gertler, P., Hernández, M., Bertozzi, S. 2004.

Evidence from evaluations of Colombia's *Familias en Acción* CCT program showed that the program substantially increased the school attendance of youth ages 12 to 17 by 10.1 percent in rural areas and 5.2 percent in urban areas.¹⁰ Brazil's *Bolsa Escola* CCT program reduced dropout rates by 7.8 percent, but repetition rates increased by 0.8 percent because the cash transfers kept in school those children and young people who would have otherwise dropped out.¹¹ Preliminary studies of Turkey's CCT program, the *Social Risk Management Project*, showed an increase in the net primary enrollment rate from 82.6 to 89.7 percent and in the net secondary school enrollment rate from 65.4 to 73.6 percent, but further studies should be conducted on the net impact on beneficiaries.¹² A study of Pakistan's *Female School Stipend Program* in Punjab, which provides a stipend to girls on the condition that they enroll in a government girls' school and attend at least 80 percent of classes, showed that over a two-year period there was an absolute increase of six girl students per school and a relative increase in enrollment of 9 percent.¹³ The Bangladesh *Female Secondary School Assistance Project* was designed to improve the quality of, and increase girls' access to, secondary education in rural areas by providing stipends and tuition for girls. An impact evaluation showed that this program substantially increased girls' enrollment in secondary school (from 1.1 million in 1991 to 3.9 million in 2005), with an increasing number of girls coming from disadvantaged or remote areas (the proportion of beneficiaries from the poorest two quintiles increased from 30 to 35 percent between 2000 and 2005). Furthermore, as a result of the program, female enrollment as a percentage of total enrollment increased from 33 percent in 1991 to 48 percent in 1997 and about 56 percent in 2005. The Secondary School Certificate (SSC) pass rates for program participants also increased from 39 percent in 2001 to 58 percent in 2006. The program also had some indirect benefits, including delays in the age of marriage, more females being employed with higher incomes, and more confident mothers who are involved in their children's education.¹⁴ A quasi-experimental study of the Jamaica *Program of Advancement through Health and Education (PATH)*, a social safety net initiative that began in 2001, found that participants' school attendance increased by approximately 0.5 days per month, which represents a statistically significant increase of about three percent over the baseline level.¹⁵

The *Learning, Earning, and Parenting (LEAP)* program in the U.S. state of Ohio is a mandatory statewide program that provides financial incentives, in addition to case management services, transportation, and child

care assistance, to encourage young mothers on welfare to enroll in school and attend regularly. The program provides bonuses of US\$62 for monthly attendance and for completing the school year, US\$62 monthly sanctions for inadequate attendance, and a US\$200 bonus for completing high school or receiving a GED diploma. An evaluation of the *LEAP* program reported that three years after the random assignment of young mothers to either a control or a treatment group, 48.4 percent of *LEAP* teens dropped out compared with 53.5 percent of control group teens, but this difference was not statistically significant. The study also showed that 50 percent of treatment group members completed grade 11 compared with 45.4 percent of control group members, which was not a statistically significant difference. Lastly, the study demonstrated that 34 percent of *LEAP* teens completed high school or earned a GED compared with 31.9 percent of control group students.¹⁶ The *Cal-Learn* program in the U.S. state of California, designed to assist teen parents receiving benefits from the *California Work Opportunity and Responsibility to Kids (CalWORKS)* to attend and graduate from high school or its equivalent, includes three major components: (i) bonuses and sanctions to encourage school attendance and good grades; (ii) intensive case management to help teens to access education, health, and social services; and (iii) payments to cover childcare, transportation, and education expenses. The program is voluntary, except for pregnant/parenting teens who are receiving *CalWORKS* benefits and are under the age of 19 and have not graduated from high school or its equivalent. The program increases or decreases family support (US\$50 or US\$100) based on a student's course grades and provides a US\$500 award for high school completion or receipt of the GED. An evaluation of the *Cal-Learn* program reported that 44.7 percent of *Cal-Learn* students age 18 or over dropped out compared with 52.3 percent of control group students. Also, 29.1 percent of participating students age 18 and older received a high school diploma or GED compared with 24.2 percent of similarly aged control group members.¹⁷

Moving Forward: Factors for Success

- ***High-quality targeting*** is needed to ensure the participation of most at-risk youth.
- ***The value of the transfer should generally be less than a young person's potential earnings but should increase with age to take into account the increased opportunity costs*** to families of sending older children to school and the greater availability of risky opportunities.
- ***Transfers should be higher in situations where children and youth are most at risk: for girls,*** situations involving sexual health, early school leaving, and early marriage; and ***for boys,*** violent behavior and early school leaving in some countries.
- ***Programs ideally should be implemented when young people are moving up from one level of school to another and when young people are going from one developmental stage to the next*** because these are the times when the probability of making risky decisions is the greatest.
- ***CCT programs need to be accompanied by increased resources for schools, health centers, and other complementary services,*** because young peoples' lack of access to these services will undermine the CCT program and reduce the quality of these services for the whole youth population.
- ***Financial programs related to one kind of behavior need to be linked to social assistance programs*** that address a range of different kinds of behavior.
- ***The education and health sectors should fully monitor compliance with program conditionalities*** (when transfers are conditional).
- ***Social workers and family workers*** should be used to ensure compliance with the program.
- ***Institutional arrangements among relevant ministries, particularly education, health, and welfare, should be clearly defined and adhered to.***

Endnotes

1. World Bank, 2007a. "The Promise of Youth: Policy for Youth at Risk in Latin America and the Caribbean." Unpublished report. World Bank, Washington, D.C.
2. de la Brière, B., and L. Rawlings. 2006. "Examining Conditional Cash Transfer Programs: A Role for Increased Social Exclusion?" Social Protection Discussion Paper No. 0603. World Bank, Washington, D.C.
3. World Bank 2007a.
4. World Bank. 2007b. "Conditional Cash Transfers: The Next Generation: A Case Study of Mexico's *Oportunidades* Program." *Youth Development Notes* 2(3), Human Development Network, Children and Youth Unit, World Bank, Washington D.C.
5. U.S. Surgeon General. 2001. *Youth Violence: A Report of the Surgeon General*. Washington, D.C.: U.S. Department of Health and Human Services.
6. Farrington, D.P., and B.C. Welsh. 1999. "Delinquency Prevention using Family-based Interventions." University of Colorado at Boulder, Blueprints for Violence Prevention. Available at: <http://www.colorado.edu/cspv/blueprints>.
7. Arends-Kuenning, Mary, Andrew Ferro, and Deborah Levison. 2006. "Youth at Risk in the Latin American and Caribbean Region—Possible Policies/Interventions for a "Top 10" List—FOCUS: Early School-leaving." Policy paper prepared for the World Bank's "Youth at Risk in the Latin America and Caribbean Region: Building a Policy Toolkit." Department of Agricultural and Consumer Economics, University of Illinois at Urbana-Champaign; and Humphrey Institute of Public Affairs, University of Minnesota.
8. World Bank. 2007b.
9. World Bank. 2007b.
10. Attanasio, O., E. Battistin, E. Fitzsimons, A. Mesnard, and M. Vera-Hernandez. 2005. "How Effective Are Conditional Cash Transfers? Evidence from Colombia." Briefing Note No. 54. Institute for Fiscal Studies, London, UK.
11. DeJanvry, A., F. Finan, E. Sadoulet, and R. Vakis. 2006. "Can Conditional Cash Transfers Serve as Safety Nets to Keep Children out of School and out of the Labor Market?" *Journal of Development Economics* 79(2): 349–373.
12. Ahmed, A., A. Kudat, and R. Colasan. 2006. "Evaluating the Conditional Cash Transfer Program in Turkey." Third International Conference on Conditional Cash Transfers, Istanbul, Turkey – June 26–30.
13. Chaudhury, N., and D. Parajuli. 2006. "Conditional Cash Transfers and Female Schooling: The Impact of the Female School Stipend Program on Public School Enrollments in Punjab, Pakistan." Policy Research Working Paper 4102. World Bank, Washington, D.C.
14. World Bank. Fact Sheet on Bangladesh Female Secondary School Assistance Project I and II. <http://go.worldbank.org/RRBXNQ0NX0>.
15. Levy, D., and J. Ohls. 2007. "Evaluation of Jamaica's PATH Program: Final Report." MPR Reference No. 8966-090. Mathematica Policy Research, Inc., Washington, D.C.
16. American Youth Policy Forum. 1994. "Preparing Teenage Mothers on Welfare for School, Parenthood, and Work: Lessons from New Chance and LEAP." Forum Brief. Available at: <http://www.aypf.org/forumbriefs/1994/fb091994.htm>. See also: U.S. Department of Education. 2006. "Financial Incentives for Teen Parents to Stay in School." What Works Clearinghouse (WWC) Intervention Report, Institute of Education Sciences. Available at: <http://ies.ed.gov/ncee/wwc/reports/dropout/fitpss/info.asp>.
17. American Youth Policy Forum 1994; U.S. Department of Education 2006.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Poverty alleviation • Increased school enrollment and attendance • Increased educational knowledge and skills, leading to lower likelihood of unemployment • Less risky sex and violence • Delay in pregnancy and marriage in young females
Secondary Effects	<ul style="list-style-type: none"> • Less premature entry into the labor market • Greater probability of finding quality employment • Reduction in alcohol consumption and smoking
Responsible Agency/Actor	Ministries of Social Welfare/Social Assistance, Education, or Health
Targeted Risk Group	Types I and II
Target Age Group	0–18
Examples of Cost per Beneficiary	<ul style="list-style-type: none"> • Brazil: <i>Bolsa Escola</i>—US\$137 per family per year ^a (cash transfer only) • United States (Ohio): <i>Learning, Earning, and Parenting (LEAP)</i>—average of US\$2,256 (in 2005 dollars) per program group member ^b This also includes program costs such as administration, case management, and so forth.
Necessary Initial Conditions	<ul style="list-style-type: none"> • Targeting system in place to identify poorest, at-risk youth and families • Enough schools and school supplies to meet increased demand for education CCTs, similar for health services
Specific Examples & Level of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • Mexico: <i>Oportunidades and Jóvenes con Oportunidades</i>—Strong evidence (http://www.oportunidades.gob.mx) • Brazil: <i>Bolsa Escola</i>—Strong evidence (http://www.mds.gov.br/programas/transferecia-de-renda) • Colombia: <i>Familias en Acción</i>—Strong evidence • Turkey: <i>Social Risk Management Project</i>—Emerging evidence • Pakistan: <i>Female School Stipend Program</i> in Punjab—Emerging evidence • Bangladesh: <i>Female Secondary School Assistance Project</i>—Strong evidence • Jamaica: <i>Social safety net initiative, the Programme of Advancement Through Health and Education (PATH)</i>—Strong evidence • United States (Ohio): <i>Learning, Earning, and Parenting (LEAP)</i>—Emerging evidence • United States (California): <i>Cal-Learn</i>—Emerging evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Urban/rural, male/female, and age differences and how they affect the design of transfer packages • How the quality of participating schools will be affected (due to congestion or by adding marginal students) • Choice of cash transfer recipient/user of cash transfer (young person or parents) • Importance of conditionality versus cash transfer: does income alone encourage school attendance, or is conditionality always needed? • How to deal with noncompliance in an encouraging, motivating way

Sources:

a. Arends-Kuenning, Ferro, and Levison 2006.

b. U.S. Department of Education 2006.

PROMISING APPROACH # 4

Offer Activities for Youth in Youth-friendly Spaces within Existing Public Buildings

Many schools and community-based organizations around the world have created programs to form youth-friendly spaces—also referred to as out-of-school time (OST) or after-school programs. These programs offer safe places in which young people can enjoy supervised and productive activities, enhance their academic achievement, and develop positive relationships with adults and their peers.¹ While OST programs vary, they all share the primary goal of preventing and/or greatly reducing the likelihood of young people engaging in risky or unproductive behavior. Additional goals of OST programs include reintroducing participants to learning, helping them to continue their education or to find employment, connecting them with their communities, strengthening families and communities, fostering youth leadership, and helping them to acquire life skills. OST programs can take many forms, but the most effective programs usually consist of a mixture of academic, cultural, and recreational activities to both teach and engage young people. Sponsors of OST programs include schools, community-based organizations (CBOs), faith-based organizations, youth-serving organizations, local governments, and volunteer groups. Although the costs of this kind of program vary, using existing infrastructure, such as schools, helps to keep costs low.

How Do Youth-friendly Spaces Reduce Risky Youth Behavior?

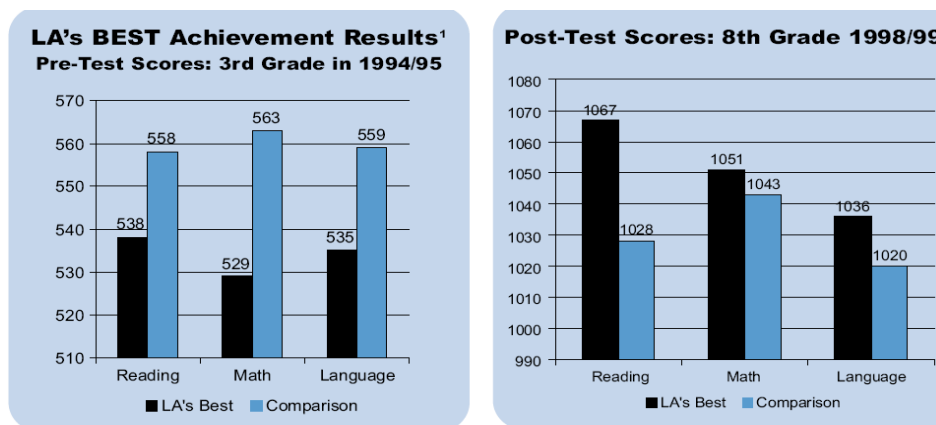
OST programs add productive time to a young person's day, not only by giving him or her chances to learn new skills but also by reducing the chances that he or she will engage in negative and/or risky behavior, which might have occurred had the young person been inactive or unsupervised. These programs are based on two ideas. First, they attempt to mimic or improve upon the environment created by school by providing structured activities that are led by caring adults. This kind of environment and adult support are both thought to reduce all kinds of risky behavior by young people, ranging from a greater propensity to remain in school, to safer sexual practices, to less violent behavior. Furthermore, they increase positive self-image and self-esteem, promote positive social development, and improve interpersonal skills among young people. All of this lessens the likelihood of young people engaging in risky behavior.² Second, research in the United States has shown that most risky behavior by young people takes place during the after-school hours, typically between 3 and 5 p.m. When young people are provided with structured activities in a supervised environment, they are less likely to have the time to engage in activities that can be harmful to themselves or others. In addition to these benefits, many programs focus on encouraging specific kinds of positive behavior, such as academic activities, homework support, and problem solving. These programs may have an even greater impact on academic achievement and school attendance than a program that, for example, focuses on sports.

Research Findings: Providing the Evidence Base

Research has demonstrated that young people who are not supervised during after school hours are much more likely to use alcohol, drugs, and tobacco; engage in criminal and other risky behavior; do poorly in school; and drop out of school than those who have participated in after-school programs that provide constructive activities supervised by caring and responsible adults.³ Although very few rigorous evaluations of the impact of after-school programs have been carried out to date, particularly in developing countries, the available evidence does show that these programs have had some success in reducing risky behavior among young people and increasing their employability. Brazil's *Open Schools/Abrindo Espaços* program, which provides a combination of academic, athletic, cultural, and work-related activities for young people after school and on weekends, was able to achieve a 60 percent reduction in community violence, as well as

reduced rates of sexual aggression, suicide, substance abuse, theft, and armed robbery, in the participating state of Pernambuco.⁴ In Macedonia, spending time in community-based, youth-friendly spaces (*Babylon Youth Centers*) that provide nonformal education activities, including life skills training, contributed to the reduction of violent behavior among young people, making them more employable than those who participated less or not at all in those programs, as well as more active citizens.⁴ The *Boys and Girls Clubs* program in the United States, one of the longest-running after-school programs in the country, offers academic assistance, cultural enrichment, drug and alcohol prevention, life skills training, mentoring, parent and community involvement, and sports and recreation. Evaluations found that this program has reduced delinquent behavior, increased academic achievement and career aspirations, and improved attitudes toward school among participating young people.⁶ New York City's *Beacons* program, which is made up of community centers located in public school buildings, offers activities such as recreation, adult education, free after-school childcare, leadership development, parent support groups and counseling, social services, and educational enrichment. An evaluation has shown that young people who participated in *Beacon* sites that provided higher-quality youth development activities were significantly less likely to report that they had cut classes, hit others to hurt them, deliberately damaged other people's property, stolen money or other property, and/or been in a fight.⁷ An evaluation of LA's *BEST*, an after-school program that provides a safe environment, educational enrichment programs, and recreational activities primarily to minority students and young people from low-income families, showed how a cohort of LA's *BEST* students began third grade scoring below their peers in the comparison group but completed eighth grade scoring higher than their peers (see figures).

Test Results of LA's BEST Participants and Non-participants in Third and Eighth Grades



Source: American Youth Policy Forum 2003.

In designing these programs, it is important to remember the potentially adverse impact that at-risk youth can have on each other's behavior. This was a lesson learned by the *21st Century Community Learning Centers* program in the United States, which included as participants over 1,000 children and young people mostly from low-income and high-risk backgrounds. An evaluation of the program showed that young people who participated in the program demonstrated higher rates of risky behavior, school suspensions, and disciplinary actions than those who did not participate in the program. The evaluation found that these negative results were due to the fact that the program included only at-risk young people. If programs are open to all young people, then this makes it impossible for the participants to define themselves collectively as "deviants" and acting out on the basis of that identity. Another factor in the program's failure was not providing enough structured activities that offered opportunities to learn skills and interact with adults in a positive setting, instead of simply providing a space for young people to hang out. The program also lacked properly trained staff who could act as mentors and could appropriately monitor the program's participants.⁸ Active supervision by adults who can monitor behavior and serve as mentors is key.

Moving Forward: Factors for Success

- *Involve young people in the design, organization, and implementation* of events, especially recruitment.
- Provide fun but *highly structured activities, always supervised* by a caring adult.
- Hire *high-quality teaching staff* who are truly committed and trained to work with at-risk youth and who use interactive, youth-led, and relevant teaching methods.
- *Partner with CBOs, juvenile justice agencies, law enforcement, and youth groups* for making referrals and sharing information.
- *Involve family and community members* in program activities to strengthen family and community life, which can lead to improved outcomes for at-risk youth.
- *Create a strong partnership with faculty and staff of nearby schools* and coordinate the curriculum of the after-school program with the curriculum taught during the day.
- To avoid deviant peer contagion, *open the program up to all young people*—not just at-risk youth—because a group made up only of at-risk youth can come to define its collective identity in terms of deviance and continue behaving in accordance with that identity.
- Try to *avoid including younger children in the same group or class as older at-risk youth*, because those who are younger are more susceptible to engaging in risky behavior.
- Ensure that *programs targeted toward older children have a different focus and different methodologies than those geared toward younger children*.

Endnotes

1. American Youth Policy Forum. 2006. "Helping Youth Succeed Through Out-of-School Time Programs." American Youth Policy Forum, Washington, D.C.
2. American Youth Policy Forum 2006.
3. American Youth Policy Forum 2006.
4. World Bank. 2007a. "The Promise of Youth: Policy for Youth at Risk in Latin America and the Caribbean." Unpublished report. World Bank, Washington, D.C.
5. World Bank. 2007b. Implementation Completion Report (ICR), Macedonia Children and Youth Development Project. World Bank, Washington, D.C.
6. Arbreton, A., J. Sheldon, and C. Herrera. 2005. "Beyond Safe Havens: A Synthesis of 20 Years of Research on the Boys & Girls Clubs." Public/Private Ventures, Philadelphia, PA.
7. American Youth Policy Forum. 2003. "Finding Fortune in Thirteen Out-of-School Time Programs, A Compendium of Education Programs and Practices." American Youth Policy Forum, Washington, D.C.
8. Dodge, K.A., T.J. Dishion, and J.E. Lansford. 2006. "Deviant Peer Influences in Intervention and Public Policy for Youth." *Social Policy Report* 10(1). Society for Research in Child Development, Ann Arbor, MI.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Stronger self-image • Increased self-esteem • Positive social development • Improved interpersonal relationships • Greater involvement of families and communities in the education of at-risk youth • Less risky behavior
Secondary Effects	<ul style="list-style-type: none"> • Greater engagement in learning • Increased school attendance • Increased academic achievement • Better student behavior • Acquisition or augmentation of skills
Responsible Agency/Actor	Schools, CBOs, faith-based organizations, youth-serving organizations, local governments, or volunteer groups
Targeted Risk Group	Types I, II, and III
Target Age Group	12–18
Examples of Cost per Beneficiary	United States: Between US\$10 and US\$32 per youth/per day, excluding the cost of space (2005) ^a
Necessary Initial Conditions	<ul style="list-style-type: none"> • Partnership and coordination with faculty and staff of local schools • Partnership with CBOs, juvenile justice agencies, law enforcement, and youth groups (recruitment) • High-quality staff
Specific Examples & Level of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • United States: <i>Boys and Girls Clubs</i>—Strong evidence (http://www.bgca.org/) • United States (New York City): <i>Beacons Program</i>—Strong evidence (http://www.nyc.gov/html/dycd/html/services-afterschool-beacon.html) • United States: Los Angeles' <i>BEST (Better Educated Students for Tomorrow)</i>—Strong evidence (http://www.lasbest.org) • Brazil: <i>Abrindo Espaços/Open Schools</i>—Emerging evidence • Macedonia: <i>Babylon Youth Centers</i>—Emerging evidence
Issues to Consider for Replication and Sustainability	Preventing the potential influence of risky behavior among at-risk youth requires opening the program to young people of all risk types, backgrounds, and needs.

Source: a. Public/Private Ventures 2005.

PROMISING APPROACH # 5

Invest in Youth Service Programs or Public Sector Internships

The principle of youth service views young people as assets or resources. Youth service can be defined as “an organized period of substantial engagement, where young people are contributing to their local, national, or world community, in exchange for minimal or no monetary contribution to the participant.”¹ It reverses the norm in which public services are typically provided *to* young people, by offering them instead the opportunity to play an active role in community and national development while learning new skills, increasing their employability, and contributing to their overall personal development.

Youth service programs can be either formal or informal. Formal service typically requires a young person to make a voluntary commitment of time and effort to an organization that is contributing to the development of their local, national, or world community.² Informal service involves the same kind of voluntary contribution to a worthy cause and is often the result of an ethic of service to others that has been passed down to the young person through families, schools, civic organizations, or popular culture. The more formal types of service are usually run by governments, employers, nonprofit organizations, and other civil society groups. Research shows that these more organized forms of service produce the greatest benefits to both participants and society.³ Some examples of youth services include providing basic health services in public health clinics, building sustainable housing, literacy tutoring, protecting the environment, and building small-scale infrastructure. The key features of a successful youth service program are structured, organized activities and sustained participation by each young person.

How Do Youth Service Programs Reduce Risky Youth Behavior?

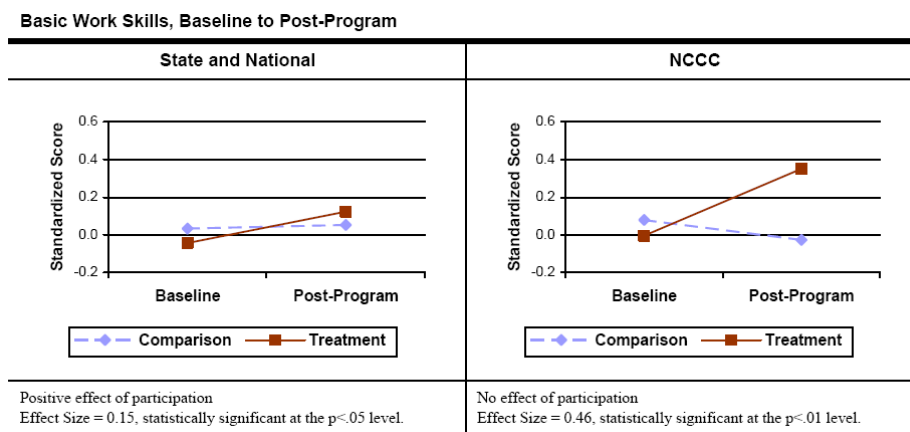
Participating in youth service programs can reduce risky behavior among young people in four key ways. First, it provides them with practical, marketable, and transferable skills and knowledge, which makes them more employable and facilitates their transition into the job market, further training, or higher education. Second, constructive, structured, and supervised activities can reintegrate at-risk youth into their communities and diminish their feelings of social exclusion, which reduces the likelihood of them engaging in risky behavior. Research shows that young people who volunteer are 50 percent less likely to abuse drugs and alcohol, to engage in delinquent behavior, or to drop out of school.⁴ Third, making a positive contribution to their communities and countries increases young people’s self-esteem, confidence, and sense of empowerment, which in turn reduces the chances of them engaging in a range of risky behavior. Fourth, being involved in youth service teaches young people to trust other people, find ways to bridge differences, and develop mutual understanding, all of which increase their social capital and their sense of their own citizenship. It also creates more stable and harmonious communities, which are important protective factors for young people.⁵

Research Findings: Providing the Evidence Base

The U.S. *Job Corps* program offers vocational training, academic construction, and social services for young people ages 16 to 24, most of whom are high school dropouts. Participants in the program have demonstrated measurable improvements in everyday literacy and numeracy skills and have more General Educational Development (GED) certificates than nonparticipants. They also have significantly less involvement in crime, with arrest rates 16 percent below those of similar young people who did not participate in the program.⁶ Participants in the U.S. *AmeriCorps* program⁷ provide a year of full-time service (1,700 hours per year) in areas such as education, public safety, human services, and the environment in

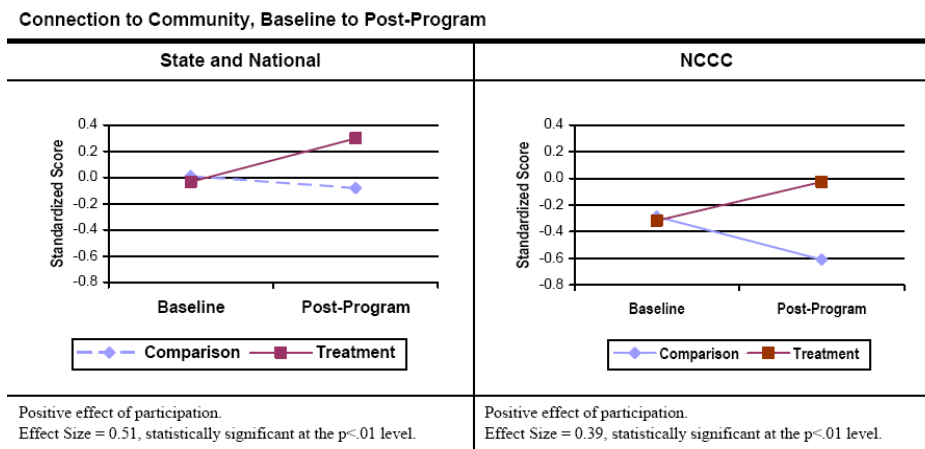
exchange for an *AmeriCorps* Education Award of up to US\$4,700 that can be used for either higher education, vocational training, or to repay students loans. A 15-year longitudinal study of the program showed that at-risk participants were much more likely to have worked for pay (after graduating from the program), had worked more hours, were less likely to have been arrested, had acquired more basic work skills, were more involved in civic life, were more connected to their communities, and were more likely to choose a career in public service than their peers in a control group (see figures).⁸ Jamaica's *National Youth Service* program, which combines residence-based training in job and life skills with an internship for unemployed secondary school graduates, was also successful in helping 60 percent of its participants either to find permanent employment or to continue their studies, compared with only 34 percent of similar young people in a control group.⁹ In Argentina, initial research suggests that including "service-learning" (a teaching and learning strategy that integrates community service with instruction and reflection to enrich the learning experience) in primary and secondary school curricula may reduce grade repetition and dropout rates.¹⁰

Impact of AmeriCorps Program on Basic Work Skills of Participants



Source: Jastrzab and others 2007.

Impact of AmeriCorps Program on Participants' Connection to their Communities



Source: Jastrzab and others 2007.

Evaluations of the United States' *Job Corps* have found that it has had a positive and statistically significant impact on the earnings of its participants (a 12 percent gain on average) three years after finishing the program. *Youth Service Canada*, which was designed to help young people acquire real work experience, learn

or enhance their transferable job-related skills, develop qualities such as self-esteem and leadership, and contribute to their community, was found to have had no statistically significant effect on participants' annual earnings, weekly wages, number of hours worked per week, or annual social assistance benefits. However, the program was deemed beneficial by its participants in the area of personal development, including increased self-confidence and knowing how to find a job. Furthermore, there was a statistically significant increase in the amount of time that participants spent in school and in training after finishing the program.¹¹

Moving Forward: Factors for Success

- **Ensure that program lasts long enough and that program activities are designed and structured in a way that they make an impact on both the lives of young people** (by teaching them useful and marketable skills) **and on the communities in which they are working** (by ensuring activities carried out meet community's priority needs).
- **Teach skills that will be in demand** once participants have graduated from program.
- Ensure that **youth service programs are aligned with national and community development goals**.
- **Identify future education, training, or employment opportunities for the participants** after they graduate from the program and ensure that these opportunities are realized.
- **Form interorganizational and public-private partnerships** to ensure that programs are implemented effectively and are sustainable.
- **Select sites for youth service programs based on the greatest need**, the potential for expansion, and the community's willingness to participate.
- **Provide incentives** such as health insurance and social services to encourage all young people to participate.

Endnotes

1. Sherraden, M. 2001. "Youth Service as Strong Policy." Working Paper 01-12. Center for Social Development. Washington University, St. Louis, MO.
2. Sherraden 2001.
3. Perry, J. 2003. *Civic Service: What Difference Does it Make?* Armonk, New York: M.E. Sharpe.
4. Alessi, B. 2004. "Service as a Strategy for Children and Youth." *Innovations in Civic Participation*, Washington, D.C.
5. Alessi 2004.
6. Betcherman, G., K. Olivas, and A. Dar. 2004. "Impacts of Active Labor Market Programs: New Evidence from Evaluations with Particular Attention to Developing and Transition Countries." World Bank, Washington, D.C.
7. AmeriCorps is a network of three programs: AmeriCorps State and National, AmeriCorps VISTA, and AmeriCorps National Civilian Community Corps (NCCC).
8. Jastrzab, J., L. Giordano, A. Chase, J. Valente, A. Hazlett, R. LaRock, and D. James. 2007. "Serving Country and Community: A Longitudinal Study of Service in AmeriCorps, Early Findings." *Early findings* December 2004, updated April 2007. Abt Associates, Cambridge, MA.
9. <http://www.nysjamaica.org>.
10. Global Service Institute/Center for Social Development. 2004. "Youth Volunteerism and Civic Service in Latin America and the Caribbean: A Potential Strategy for Social and Economic Development." Washington University, St. Louis, MO.
11. Human Resources Development Canada. 1999. "Evaluation Reports, Summary Evaluation of Youth Service Canada." Ottawa (Ontario), Canada.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Greater employability • More employment • Greater skills development • Improved self-esteem and increased confidence • More civic engagement • More community involvement • More school completion • Better academic performance
Secondary Effects	<ul style="list-style-type: none"> • Less violent behavior among young people • Greater likelihood of going back to school and/or onto training
Responsible Agency/Actor	National, state, or local governments; NGOs; public-private partnerships
Targeted Risk Group	Types I, II, and III
Target Age Group	14–24
Examples of Cost per Beneficiary	<ul style="list-style-type: none"> • Israel: <i>National Youth Service</i>—US\$9,000 overall per volunteer per year ^a • United States—Average US\$10,000 per participant/per year ^b (cost per beneficiary would most likely be reduced in middle-income countries)
Necessary Initial Conditions	<ul style="list-style-type: none"> • Pre-identification of programs that are in line with either national or community development goals • Partnerships with institutions necessary for the program to be implemented • Mechanisms to identify and reach out to young people who will benefit most from participating in the program
Specific Examples & Level of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • United States: <i>JobCorps</i>—Strong evidence (http://www.jobcorps.dol.gov) • United States: <i>AmeriCorps</i>—Strong evidence (http://www.americorps.org) • Canada: <i>Youth Service Canada</i>—Strong evidence (http://youth.hrhc-drhc.gc.ca) • Jamaica’s <i>National Youth Service Program</i>—Emerging evidence (http://www.nysjamaica.org)
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Ensure that the program is in line with national or community development goals • Make certain that the skills being developed through the program are in demand in the labor market and in society

Sources:

a. Bar-Tura, M., and N. Fleischer. 2004. “Civic Service in Israel.” *Nonprofit and Voluntary Sector Quarterly* 33(4) (Supplement).

b. Jastrzab, J., J. Blomquist, J. Masker, and L. Orr. 1997. “Youth Corps: Promising Strategies for Young People and their Communities.” *Studies in Workforce Development and Income Security*, No. 1-98, February. Abt Associates, Cambridge, MA.

PROMISING APPROACH # 6

Establish Programs in which Caring Adults Mentor At-risk Youth

Mentoring programs consist of assigning a caring adult to provide support and guidance to a young person in his or her personal and academic life. Mentoring programs can either be free-standing interventions or be included in youth development programs. Programs can provide one-to-one, community-based mentoring (the most common type); group mentoring in which one mentor is assigned to work with several young people; team mentoring where more than one person works with the same young person; computer online mentoring; peer mentoring in which older adolescents mentor younger children; and site-based programs where the mentor and child/youth meet in a designated place, such as a school, hospital, or community center. The mentors are usually volunteers recruited from businesses, schools, and other community settings.¹

Mentoring programs have become an increasingly popular intervention for preventing or reducing risky behavior among young people because of their simplicity, relatively low costs, and promising results in many risk areas—including crime and violence, substance abuse, and early school leaving. Although different mentoring programs can have a range of different goals, they are all based on the concept that a structured and sustained relationship with a caring adult will be a protective factor for at-risk youth and make it less likely that they will engage in risky behavior.

However, there is clear evidence that simply pairing an adult with an at-risk young person is not sufficient and that the key to an effective mentoring relationship is the development of trust between the mentor and the young person being mentored, which normally takes at least one year. Keeping the adult-youth relationship strong and positive is essential because, without this element, the programs can have a detrimental effect on young people (for example losing trust in adults). Although mentoring programs have been shown to have various social and academic benefits when implemented properly—particularly for young people who are most at risk—additional research is needed to determine the key factors in a successful mentoring relationship, as well as the long-term effects of mentoring on the participants.

How Do Mentoring Programs Reduce Risky Youth Behavior?

Appropriately implemented mentoring programs that include steady, frequent meetings between mentors and young people with regular monitoring of the meetings by program staff can be strong protective factors for at-risk youth, particularly for those who are most disadvantaged or have few positive adult influences in their homes. The primary contribution that mentoring programs can make to reducing risky behavior among young people is the sense of connectedness that is created over time between the adult mentor and the young person being mentored. This sense of being connected to a caring adult can make a young person wish to meet the expectations of that adult and not to disappoint him or her. This has the dual effect of reducing the likelihood that young people will engage in risky behavior and improving youth outcomes such as educational attainment. Being exposed to and spending time with adults whom they trust and respect and who do not engage in risky behavior also decreases the likelihood that young people will choose to engage in violent behavior or risky sex. This is because the mentoring relationship increases the chances that they will want to emulate the positive behavior of their adult mentors.

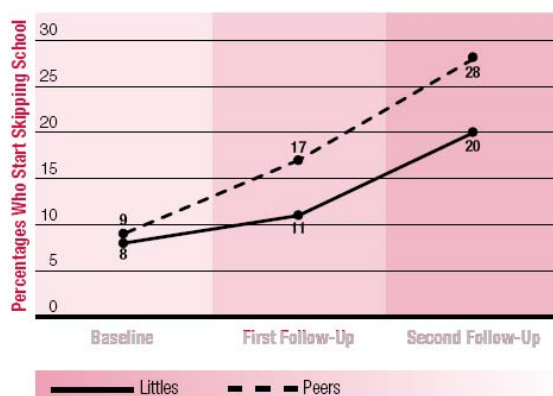
Research Findings: Providing the Evidence Base

Although mentoring programs have shown to be successful and cost-effective in preventing and/or reducing risky behavior among young people, some claims of their success have gone beyond what can be scientifically

documented. Mentoring programs should not be viewed as a magic bullet to ensuring positive youth development because, ultimately, their success depends on the connection formed between two people, which cannot be predicted by any scientific formula and which takes time to develop.

An impact evaluation carried out of the *Big Brothers/Big Sisters* program in the United States found that after spending 18 months with their mentors, the Little Brothers and Little Sisters (called “Littles” for short) were—in comparison to those in the control group—46 percent less likely to begin using illegal drugs, 27 percent less likely to begin using alcohol, 52 percent less likely to skip school, 37 percent less likely to skip a class, more confident of their performance in schoolwork, one-third less likely to hit someone, and got along better with their families. The Little Brother and Sisters met with their Big Brothers or Sisters about three times a month for an average of almost 12 months, with each meeting lasting about four hours.² An impact evaluation of *Big Brothers Big Sisters’ School-Based Mentoring (SBM)* program (different from their community-based programs) showed that Littles were less likely to have started skipping school, in comparison to their peers. As shown in the figure, at the beginning of the program, 8 percent of the Littles and 9 percent of their peers had skipped school. By the end of the first year, 11 percent of the Littles who had never skipped school before the program reported having done so, in comparison to 17 percent of their peers. At the 15-month point, 20 percent of the Littles and 28 percent of their peers had started to skip school. Littles were also slightly more confident that they would go to and finish college.³

Impact of the U.S. Big Brothers/Big Sisters School-Based Mentoring Program on Starting to Skip School over 15 Months



Source: Herrera and others 2007.

Evaluations of Israel’s *Perach Mentoring Project*, which has now been replicated in over 15 countries worldwide, showed that young people who participated in the program experienced lower dropout rates, were more motivated to learn, experienced significant cognitive improvements, had better attitudes toward school and homework, and read more in their free time. One factor that contributed to the success of the program was the inclusion of incentives for mentors, consisting of the payment of 50 percent of tuition fees and/or academic credits and travel expenses (either to community center or activity location).⁴

Moving Forward: Factors for Success

- **Screen potential mentors** to determine the adult’s suitability for the difficult and time-consuming task of mentoring, to ensure the safety of the young participants, and to protect the reputation of the program. The matching process should focus on the mentors’ behavior rather than on characteristics

such as age, race, or gender. The families of the young people to be mentored should also be involved in selecting potential mentors.

- ***Provide orientation and training*** to ensure that young people and their mentors share a common understanding of their respective roles, to help mentors to develop realistic expectations of what they can accomplish, and to bridge any differences they may have with the young people they are mentoring.
- ***Ensure that program staff support and supervise*** the mentor-young person relationship to make sure that pairs meet regularly over a substantial period of time, their activities are structured (for example, have an objective and time limits), and they develop positive relationships.
- ***Ensure that the mentor has a steady and frequent presence in the young person's life.*** Evidence has shown that the longer a match lasted, the more positive effects the mentors had on the young people they mentored. Conversely, matches that lasted less than three months had harmful effects on the young people involved (such as lack of trust in adults, less respect for authority, and worse performance in school).
- ***Ensure that mentors respect young people's views*** and that they encourage the development of mutual trust and respect instead of taking on an authoritative role. Mentors should pay attention to young people's need for fun. They should also get to know the families of the young people whom they are mentoring, without becoming overly involved or attached.
- ***Start the mentoring process as early as possible.*** The younger the person being mentored, the greater the impact that the mentoring will have, especially on his or her social behavior.

Endnotes

1. Foster, L. 2001. "Effectiveness of Mentor Programs, Review of the Literature from 1995–2000." California Research Bureau, Sacramento CA.
2. Tierny, J., J. Grossman Baldwin, and N. Resch, 2000. "Making a Difference: An Impact Study of Big Brothers/Big Sisters." Public/Private Ventures, Philadelphia, PA.
3. Herrera, C., J. Baldwin Grossman, T. Kauh, A. Feldman, J. McMaken, and L. Jocovy. 2007. "Making a Difference in Schools: The Big Brothers Big Sisters School-Based Mentoring Impact Study." Public/Private Ventures, Philadelphia, PA.
4. Hirshnik, M. 2004. "Perach Mentoring Project: Its Contribution to Mentees and Mentors." The Unit for Research and Evaluation in Teaching and Education. Beit-Berl College, Israel.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Increased motivation to learn • Improved attitude toward school • Improved outlook toward future
Secondary Effects	<ul style="list-style-type: none"> • Improved academic performance • Greater employability • Improved relationships with friends and parents • Lower school dropout rate • Less drug and alcohol abuse • Less criminal and violent behavior • Less antisocial behavior
Responsible Agency/Actor	NGOs, schools, local governments, private sector
Targeted Risk Group	Types I, II, or III
Target Age Group	8–18
Cost Elements (Cost per Beneficiary)	United States: A study of 52 mentoring programs found the median cost of one-on-one programs to be US\$1,000 per year per youth, and the median annual cost of a group program to be \$US400 per youth ^a
Necessary Initial Conditions	<ul style="list-style-type: none"> • Appropriate program infrastructure, including trained staff to screen potential mentors, orientation, training, and ongoing support and supervision of mentors and mentees • Targeting mechanisms to enlist those young people who are most at risk • Outreach program to identify potential volunteer mentors
Specific Examples & Levels of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • United States: <i>Big Brothers/Big Sisters of America</i>—Strong evidence (http://www.bbbs.org) • Israel (and international): <i>Perach Mentoring Project</i>—Emerging evidence (http://www.perach.org.il)
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Success depends largely on unpredictable factors, such as the chemistry between a mentor and a young person and any unforeseen circumstances in the mentor or young person’s lives that prevent the relationship from continuing (such as relocation). • The program’s effectiveness may not become apparent immediately, given that building trust within a relationship takes time. • At the local level, programs will need to be adapted to take into account community needs.

Source: a. J. Baldwin Grossman, ed. 1999. “Contemporary Issues in Mentoring.” Public/Private Ventures, Philadelphia, PA.

PROMISING APPROACH # 7

Provide Targeted Employment Services to At-risk Youth

Employment services exist to address the issue of imperfect information in the labor market, which is one cause of unemployment. Although employment services are typically designed to benefit adults, if they are implemented in the right economic conditions and incorporate youth-specific components, they can help young people to enter the labor market and/or reduce the amount of time they are unemployed. This is particularly useful because young people often have more difficulty than adults in finding jobs that pay adequate wages, not only because they have lower skill levels, but also because they tend to have less knowledge about the labor market.

Employment services catering to young people can include job search and placement assistance, counseling (especially during spells of unemployment), labor intermediation services (keeping a register of job vacancies and matching each vacancy to potential applicants), labor information systems (up-to-date data on the labor market and information on the sectors with the greatest demand for labor), help with interviews at employment offices, job clubs, and labor exchanges.¹

In essence, employment services serve a “brokerage” function by matching available jobs with job seekers.² Employment services can be provided in isolation, but they are most successful when they are included in an integrated package that also includes career guidance, education (formal and nonformal), skills training, and help to access social services such as childcare or transport that make it easier for young people to find and keep a job.³ Traditionally, employment services have been provided exclusively by public agencies, but recently public-private partnerships (PPP) have become more common. In PPPs, public employment services usually target the disadvantaged and long-term unemployed, while private agencies focus on employed, skilled, and white-collar workers.

A critical issue is the need to ensure that at-risk youth are able to access these employment services programs. This can be difficult because most at-risk youth live in either marginal urban or rural areas with little or no access to transportation, while most programs are offered in more central locations. One criticism of employment services programs has been that they create a deadweight loss, because those who benefit from the programs are typically more qualified and connected to begin with and therefore more likely to become employed. Therefore, all programs should be rigorously and carefully targeted to youth facing the most employment-related challenges to minimize such losses and to ensure that the program is efficient and cost-effective.⁴

How Do Employment Services Reduce Risky Youth Behavior?

At-risk youth typically have less information about available jobs and job training opportunities and a more limited network of contacts than young people whose parents, peers, schools, and day-to-day lives are more integrated with the labor market. Therefore, employment services programs help to level the playing field between at-risk youth and those with more advantages. By providing at-risk youth with information on job opportunities and preparing them for employment, employment services programs can increase their employability and improve their employment prospects. In turn, employment provides a structured, productive, and constructive outlet for at-risk youth, which increases their self-esteem and self-worth, thereby reducing the chances that they will engage in other risky kinds of behavior. Furthermore, employment reduces the amount of free time youth have during the day, which also reduces the likelihood that they will engage in risky and unproductive behavior.

Research Findings: Providing the Evidence Base

Although international studies have found that employment services tend to be one of the most successful of all active labor market programs—primarily in terms of cost-effectiveness—the evidence on how effective these programs are in improving young people’s lives is scarce and mixed. The mixed evidence may be because these programs are highly dependent on prevailing economic conditions, as well as on the quality of their design and implementation.⁵ An evaluation of the United Kingdom’s *Restart* program, which offers job search assistance, found a positive impact on male participants, who had a 6 percent lower unemployment rate than those in the control group (no long-term effects were observed for women). A major component of the *Restart* program is that it threatens to withdraw any welfare benefits for which participants may qualify if they do not comply with the program’s rules, a factor which might be responsible for the positive evaluation results, because participants have a greater incentive to stay in the program and comply.⁶ The United Kingdom’s *New Deal for the Young Unemployed* program targets youth ages 18–24 who have been unemployed and claiming jobseeker’s allowances for six or more months. The program combines initial job search assistance followed by subsidized options including wage subsidies to employers, temporary government jobs, and full-time education and training. Recent evaluations of *New Deal* showed that young men are about 20 percent more likely (per each one of the three stages of the program) than nonparticipants to find jobs as a result of the program. Results for young women were not as clear due to limitations in the sample size.⁷ It was also found that the job search element of the program is more cost-effective than the other active labor market components because it does not include a subsidy.

Studies of programs in other OECD and developing countries have also found that these programs have had a mixed impact on youth employment and wage levels. The *Severely Employment Disadvantaged Option* of the *Job Development/Job Entry* program in Canada, which provides counseling and assessment services as well as training to disadvantaged young people, had a positive impact on the employment and earnings of participants in the short run but had no impact on their longer-term labor market outcomes.⁸ An evaluation of Portugal’s *Programa Inserção para a Juventude (InserJovem)*, which targets long-term unemployed young people and offers them job search assistance and short basic skills courses, indicated that there was no (statistically) significant reduction in the average duration of unemployment for participants, with no gains in wage levels. A 2001 evaluation of the Argentine program *Support for the Job Search* showed that the program motivated participants and offered them useful labor market information, which translated into them carrying out more serious job searches. Yet, learning better job search techniques did not translate into a greater chance of finding a job, which was the ultimate objective of the program. These results should be interpreted with caution, however, because the sample was small and Argentina was in a recession at the time of the evaluation.⁹

Moving Forward: Factors for Success

- ***A favorable macroeconomic context*** will help the program, including a healthy labor market where the demand for labor is high, low structural unemployment, a dynamic private sector, and the availability of public funds for the program.
- ***Combine employment services with other employment interventions***, such as educational opportunities, and with access to transportation and child care options.
- ***Ensure that employment services centers are accessible to the most disadvantaged youth.***

Endnotes

1. Jaramillo, M. 2006. "Youth at Risk in Latin America and the Caribbean: Supporting Youth Facing Labor Market Risks." Policy Note. Group for the Analysis of Development (GRADE). Lima, Peru; Betcherman, G., K. Olivas, and A. Dar. 2004. "Impacts of Active Labor Market Programs: New Evidence from Evaluations with Particular Attention to Developing and Transition Countries." World Bank, Washington, D.C.
2. Jaramillo 2006.
3. Ryan, P. 2006. "Youth at Risk in Developed Economies: Unemployment, Inactivity, and Joblessness." Policy Note. World Bank, Washington D.C., October.
4. Dorenbos, R., D. Tanzer, and I. Vossen. 2002. "Active Labor Market Policies for Youth Employment in Asia and the Pacific: Traditional Approaches and Innovative Programs." Division of Labor and Education, Netherlands Economic Institute (NEI), Rotterdam, January.
5. Betcherman, G., M. Godfrey, S. Puerto, F. Rother, and A. Stavreska. 2007. "Global Inventory of Interventions to Support Young Workers, Synthesis Report." World Bank, Washington, D.C.
6. Betcherman and others 2007.
7. Betcherman, G., K. Olivas, and A. Dar. 2004. "Impact of Active Labor Market Programs: New Evidence from Evaluations with Particular Attention to Developing and Transition Countries." Social Protection Discussion Paper Series # 0402. World Bank, Washington, D.C.
8. Government of Canada. 2000. "Evaluating the Effectiveness of Employment-Related Programs and Services for Youth." Department of Human Resources and Social Development. Ottawa, Ontario, Canada.
9. Jaramillo, M. 2006. "Youth at Risk in Latin America and the Caribbean: Supporting Youth Facing Labor Market Risks." Policy Note. Group for the Analysis of Development (GRADE), Lima, Peru.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Greater employment, and lower duration of unemployment spells • Higher earnings, better career paths
Secondary Effects	<ul style="list-style-type: none"> • Greater employability • Increased knowledge of job market
Responsible Agency/Actor	<ul style="list-style-type: none"> • Ministry of Labor, private employment agencies, job training programs
Targeted Risk Group	Types I, II, and III
Target Age Group	15–24
Examples of Cost per Beneficiary	Peru: Approximately US\$50–70 per individual placed in a job ^a
Necessary Initial Conditions	<ul style="list-style-type: none"> • Dynamic labor market (high demand for labor and low rate of structural unemployment) • Widespread availability and use of information technology • Effective targeting and/or outreach mechanisms to reach most at-risk youth • A private sector that is willing to participate in the program • Minimal mismatch between the skills that young people learn in the education system and the demands of the labor market
Specific Examples & Levels of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • United Kingdom: <i>Restart</i>—Emerging evidence • United Kingdom: <i>New Deal for the Young Unemployed</i>—Emerging evidence • Argentina: <i>Support for the Job Search</i>—Emerging evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Effectiveness largely depends on the health of the labor market, that is, a high demand for labor, low structural employment, a dynamic private sector, and the availability of public funds. • Programs are most effective when delivered in combination with other employment and employment-related interventions. • Programs may not be as successful in countries with large informal sectors, where employers may prefer to hire through informal channels.

Source: a. Jaramillo 2006.

Incorporate Life Skills into All Interventions Targeted to At-risk Youth

There is an increasing amount of evidence that incorporating a life skills component into at-risk youth interventions can make the program dramatically more effective and, as a result, greatly improve youth outcomes. The life skills approach seeks to help young people to develop the kind of skills that will incline them to engage in positive behavior, enable them to deal effectively with everyday life, and help them to make a healthy transition into adulthood. The ultimate goal of life skills development is to help at-risk youth to (re)connect with their communities, to continue their education, and to enter the economic mainstream, thereby preventing or reducing youth unemployment, underemployment, and early school leaving.

Although not uniformly defined, life skills (sometimes known as soft skills) fall into three basic categories: (i) social or interpersonal skills (communication, negotiation/refusal skills, assertiveness, cooperation, and empathy); (ii) cognitive skills (problem solving, understanding sequences, decision making, critical thinking, and self-evaluation); and (iii) emotional coping skills (managing stress, feelings, and moods).¹

Life skills training can be provided either as a program on its own or as a component of a program designed to achieve other youth development goals, such as job training or violence prevention. A formal life skills development curriculum can be taught through schools, job training institutions, or a “learning by doing” approach—for example, as part of community development projects or youth leadership training programs.² Providers of life skills training programs ideally should be capable of acting as facilitators; should respect young people; and should have warm, supportive, and enthusiastic personalities. To ensure that these programs are as effective as possible, they should apply life skills to issues that are relevant to the young person’s social circumstances and stage of development (for example, developing a sexual identity and how to deal with peer pressure).

How Do Life Skills Reduce Risky Youth Behavior?

Many at-risk youth—especially those who are neither in school or work—do not possess the necessary social and emotional skills and information to be integrated into society. Most children acquire these skills during childhood, but at-risk children often have not received the necessary information or had appropriate role models to be able to do so. It is the absence of these key life-coping skills that often leads young people to be socially excluded and to make them unemployable, and this, in turn, increases the likelihood that they will engage in risky behavior.

Life skills programs bridge this gap in two ways. First, they teach young people about social norms so that they are more attuned to the kind of social behavior that is expected of them when they participate in mainstream society. In the process, these programs teach young people the necessary social skills, including how to dress, how to manage anger, how to carry themselves, how to meet people, and other forms of social behavior, which are often taken for granted. Second, these programs teach young people the specific skills that are needed to be a responsible adult, including how to manage money, how to access social services, and about citizens’ rights.

Teaching young people life skills equips them with the knowledge and wisdom to make good decisions about their lives, thereby reducing the likelihood that they will engage in risky behavior. It also gives them confidence as well as the necessary knowledge to stay in school, find and keep a job, and find support in dealing with risky behavior or consequences that they may be facing. Life skills should also be taught in

schools to prepare young people who are in school for further education, future employment, and their citizenship, thereby decreasing the probability that they will engage in risky behavior.³ While teaching life skills widens the economic opportunities available to all young people, this is particularly the case for those who leave school early as they typically face more constraints than those who complete secondary education.

Research Findings: Providing the Evidence Base

Evaluations of life skills programs from around the world have found that knowledge of life skills can be a protective factor during adolescence by delaying the onset of drug use, preventing risky sexual behavior, promoting anger management, improving academic performance, and enhancing social judgment.⁴ Researchers in the United States have found that young people who were given life skills training before the end of high school tend to be more productive and more connected to institutions (such as schools or places of employment) and make smoother transitions into a job or higher education compared with young people who left secondary school without these skills. The same research shows that young people with access to life skills training have a higher probability of having positive developmental outcomes as young adults, including finding and keeping a job.⁵ Although life skills training programs have become one of the most common interventions for at-risk youth around the world, they are also one of the least rigorously evaluated, particularly in developing countries. Also, because life skills training is often a component of broader youth interventions, it is difficult to isolate the specific effect of life skills training from the effects of the other components of those programs.⁶ Nevertheless, the evidence so far shows that life skills training has not only had a positive impact on the employability and educational outcomes of at-risk youth but has also reduced the likelihood that they will engage in violent behavior or substance abuse.

An evaluation of the U.S. *Quantum Opportunities Program (QOP)*, a multicomponent intervention program for disadvantaged teens that includes life skills training, tutoring, mentoring, community service, and financial incentives, showed that program beneficiaries were more likely than the control group to graduate from high school with a diploma (see table), had higher academic and functional skills and higher educational expectations, were more likely to attend post-secondary schools, and were likely to become teen parents less often.⁷

Quantum Opportunities Program (QOP): Short-Term Impact on High School Completion

Outcome	QOP-Group Mean (percentage)	Control-Group Mean (percentage)	Impact (percentage points)
Earned diploma	46	40	7*
Earned diploma or GED certificate	54	49	5
Earned diploma or GED certificate or attending high school	68	66	3
Earned diploma or GED certificate or attending high school or a GED class	79	72	7**

SOURCE: Telephone survey and transcripts.

NOTE: Each impact was derived by subtracting the control-group mean from the QOP-group mean prior to rounding those means; thus, an impact might not equal the difference between the rounded means that are displayed. The evaluation sample had 580 QOP enrollees and 489 controls.

* Estimate significantly different from zero at the 90% confidence level, two-tailed test

** Estimate significantly different from zero at the 95% confidence level, two-tailed test

*** Estimate significantly different from zero at the 99% confidence level, two-tailed test

Source: Maxfield, Schirm, and Rodriguez-Planas 2003.

A study of graduates of the U.S. program *YouthBuild*, which helps young people to develop life skills and employability skills, showed that participating in the program was highly correlated with positive employment and education outcomes and that program graduates were also much less likely to be involved in drug and alcohol abuse and criminal activities than they were before entering the program.⁸ The inclusion of life skills training is one of the distinguishing features of the *Jóvenes* job training programs that have been implemented

in several Latin America and Caribbean countries. Evidence from across these programs shows that participants' employment probability and earnings both increase as a result of their participation.⁹ While it is not possible to isolate the effect attributable to the life skills components of the *Jóvenes* programs, interviews with program participants in several countries indicate that they believe that the life skills component—which normally comprises about 20 percent of the total training time of the program—was a key factor in their post-program success, not only for their employment but for larger life issues as well.

Canada's *Employability Training Program*, which combined job training with life skills training, substantially increased the annual earnings of participants by increasing the number of hours during which they were employed. In the United Kingdom, young unemployed men who participate in the *New Deal for Young People* program, which combines job training with life skills training, are about 20 percent more likely to find jobs than their peers who do not participate.¹⁰ An evaluation carried out six years after the completion of the U.S. *Life Skills Training (LST)* program, which teaches general self-management skills, social skills, and information and skills specifically related to drug use, showed that participants had significantly lower tobacco, alcohol, and marijuana use (50 to 75 percent); lower multiple drug use (up to 66 percent); lower pack-a-day smoking (by 25 percent); and less use of inhalants, narcotics, and hallucinogens than those in control groups.¹¹ Evaluations of the U.S. *PATHS (Promoting Alternative Thinking Strategies)* program, which teaches skills such as self-control, positive peer relations, and interpersonal problem-solving skills, has been shown to improve outcomes for the young people in the program compared with those in a control group in the following areas: more self-control, greater understanding and recognition of emotions, increased ability to tolerate frustration, greater knowledge and use of effective conflict resolution strategies, improved thinking and planning skills, fewer anxiety/depressive symptoms, and fewer conduct problems.¹²

Moving Forward: Factors for Success

- ***Introduce life skills programming as early as possible***, ideally in early adolescence (12–14 years of age for girls and 13–15 years of age for boys).
- ***Build cooperation across sectors and programs***, particularly in health, employment, and violence prevention, and harmonize the contents of life skills modules across providers.
- ***Include young people in designing and implementing*** the program and its activities.
- ***Forge a partnership with the private sector*** for providing life skills training.
- Employ program ***staff who are skilled in group process and interactive teaching methods***, are ***respectful of adolescents***, and are perceived to be ***role models by adolescents*** (ideally the staff member should be the same person from the beginning to the end of the process).
- ***Introduce life skills in a formal manner within the regular school curriculum*** (ideally targeted in schools with greater numbers of disadvantaged youth) and link schools with NGOs in providing life skills training so that young people who are in school can learn life skills in a community setting and young people who are out of school can also benefit from curricula developed for schools.
- ***Teach life skills using positive reinforcement and hands-on pedagogy***, not a paternalistic approach.
- ***Provide ongoing training*** to participants, ideally for at least one year.

Endnotes

1. Pan American Health Organization. 2001. "Life Skills Approach to Child and Adolescent Human Development." Adolescent Health and Development Unit, Division of Health Promotion and Protection, Pan American Health Organization, Washington, D.C.
2. Hahn, A., T. Leavitt, and S. Lanspery. 2006. "Toward a Toolkit Brief: The Importance of Life Skills Training to Assist Vulnerable Groups of Youth in the Latin America and Caribbean Region." October.
3. Hahn, Leavitt, and Lanspery 2006.
4. Mangrulkar, L., C. Whitman, and M. Posner. 2001. "Life Skills Approach to Child and Adolescent Healthy Human Development." Adolescent Health and Development Unit, Division of Health Promotion and Protection, Pan American Health Organization, Washington, D.C. September.
5. Hahn, Leavitt, and Lanspery 2006.
6. Hahn, Leavitt, and Lanspery 2006.
7. Maxfield, M., A. Schirm, and N. Rodriguez-Planas. 2003. "The Quantum Opportunity Program Demonstration: Implementation and Short-Term Impacts." Mathematica Policy Research, Inc., Princeton, NJ, August; National Dropout Prevention Center/Network and Communities in Schools. 2007. "Dropout Risk Factors and Exemplary Programs, A Technical Report." 2007 National Dropout Prevention Center, Clemson University, Clemson SC, and Communities In Schools, Inc., Alexandria, VA.
8. Maxfield and others 2003; National Dropout Prevention Center/Network and Communities in Schools 2007.
9. Betcherman, G., M. Godfrey, S. Puerto, and A. Stavreska. 2007. "Global Inventory of Interventions to Support Young Workers: Synthesis Report." World Bank, Washington, D.C.
10. Betcherman and others 2007
11. University of Colorado at Boulder, Blueprints for Violence Prevention: www.colorado.edu/cspv/blueprints/model/programs/LST.html.
12. University of Colorado at Boulder, Blueprints for Violence Prevention: www.colorado.edu/cspv/blueprints/model/programs/LST.html.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Increased employability and academic performance • Greater social integration and improved social skills • Increased self-esteem and resilience • Improved behavioral and cognitive skills • Improved decision-making skills • Greater social and emotional competence, self-efficacy, and self-control • Increased confidence, character development, and moral reasoning • Increased pro-social behavior such as volunteering, civic engagement, and adopting democratic values
Secondary Effects	<ul style="list-style-type: none"> • Increased educational attainment • Delayed onset of alcohol and substance use • Prevention of risky sexual behavior • Less likelihood of engaging in violent behavior
Responsible Agency/Actor	Ministries of Education, Labor, or Health; NGOs; private sector
Targeted Risk Group	Types I, II, and III
Target Age Group	12–24
Examples of Cost per Beneficiary	United States: Approximately US\$7 per student, per year (curriculum materials averaged over three-year period; this does not include cost of training or the staff providing the life skills training) ^a
Necessary Initial Conditions	<ul style="list-style-type: none"> • Advocacy to build support for life skills training in health and education sectors • Promotion of private sector involvement in life skills training • Marketing and dissemination of the life skills approach • Availability of trained professionals who can teach life skills • Existence of strong programs to which a life skills component can be added
Specific Examples & Levels of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • United States: <i>Life Skills Training</i>—Strong evidence (http://www.lifeskillstraining.com) • United States: <i>Quantum Opportunities Program (QOP)</i>—Strong evidence (http://www.oicofamerica.org/onlprog.html) • United States: <i>YouthBuild</i>—Strong evidence (http://www.youthbuild.org) • LAC: <i>Jóvenes</i> programs—Strong evidence • United States: <i>PATHS (Promoting Alternative Thinking Strategies)</i>—Strong evidence (http://www.prevention.psu.edu/projects/PATHS.html/; www.channing-bete.com/prevention-programs) • Canada: <i>Employability Training Program</i>—Emerging evidence • United Kingdom: <i>New Deal for Young People</i>—Emerging evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • It is important to find ways to evaluate the true impact of life skills programs to inform and improve design and implementation of future programs. • To have greatest impact on the lives of at-risk youth, life skills training should be accompanied by strategies aimed at improving the entire context in which a young person lives (poverty, education, employment). • Careful targeting is needed to ensure that those young people who are most at-risk are those who are benefitting from life skills programs. • The development of strong quality assurance mechanisms for service providers is advisable.

Source: a. University of Colorado at Boulder, Blueprints for Violence Prevention: www.colorado.edu/cspv/blueprints/model/programs/LST.html.

PROMISING APPROACH # 9

Support Pilot Self-employment Programs

Self-employment is often the only available employment option for young people in areas with low labor demand. This is the case despite the inherent risks and difficulties involved in creating a successful business because of the major constraints that exist to finding employment in these areas, especially for at-risk youth.¹ In the best-case scenario, programs to support youth self-employment—or entrepreneurship—can help a young person start a successful business. However, if starting a business is not a realistic option, the experience and skills that young people gain during their entrepreneurship training may help to increase their employability and employment prospects, as well as their confidence and self-image. Self-employment training programs can also help at-risk youth by putting them in contact with potential employers and other entrepreneurs, who they would otherwise not have had the opportunity to meet.²

Self-employment assistance programs—also known as micro-enterprise development or entrepreneurship programs—may provide financial assistance (credits, allowances, or grants), and/or they may provide other technical services, such as training in business skills, counseling, other financial services, and help to develop a business plan.³

Entrepreneurship training can be delivered in a variety of settings, including through formal education (as part of the curriculum), job training institutions, business incubation centers, small and medium enterprises (SME) development agencies, industry organizations, and so forth. Training can be provided to all comers or be targeted to particular groups, such as the newly or long-term unemployed. In some cases, financial assistance can be provided to students to support their participation in the program in the form of an initial lump sum payment or of periodic allowances. Often, potential beneficiaries have to undergo an assessment before they can enter the program to determine the likelihood of success they would have in starting a business.⁴

How Do Self-employment Programs Reduce Risky Youth Behavior?

The primary way in which self-employment or entrepreneurship programs can reduce risky behavior among young people is by providing them with skills and work experience, which increases their employability and, as a result, their chances of acquiring future employment. Entrepreneurial skills may also contribute to making young people become more motivated, active citizens and, consequently, minimize their feelings of social exclusion, which often lead young people to engage in risky behavior. Acquiring entrepreneurial skills may also have the benefit of increasing self-esteem and improving self-image, which have both been proven to be protective factors against risky behavior related to sex and violence.

Research Findings: Providing the Evidence Base

Despite the widespread implementation of self-employment programs across the world, evidence on the impact of these programs—in particular on young people—remains scarce. However, what evidence does exist shows that self-employment programs can significantly increase the probability of young participants finding a job, at least in the short term, but the cost effectiveness and the longer-term effects of self-employment programs still need to be tested.⁵

Impact estimates carried out with experimental data four months after the end of Peru's *Young Micro Entrepreneurs' Qualification Program* showed an increase of 7.8 percent in the probability of participants having an operational business and an 8 percent increase in their average income (in comparison to not having

participated in the program). Estimates from quasi-experimental data also showed an increase of almost 40 percent in the probability of the business operating for more than one year and an increase in earnings by 40 percent (in comparison to not having participated in the program).⁶ In Bulgaria, the country's *Self-employment Program* increased the probability of being employed by at least 50 percent compared with nonparticipants, with even greater effects on young female participants. (Varying effects in terms of magnitude may result from several characteristics of the evaluation design, including timing of the survey, type of control group used, and so forth.) However, the costs of the program per placement, per participant, exceeded those of training and subsidized employment programs.⁷ Though the *Commonwealth Youth Credit Initiative* in India has not yet been rigorously evaluated, studies of this small enterprise scheme for unemployed young people involving micro-credit, training, and enterprise development showed that, after a three-year pilot program, 82 percent of participants were successfully operating micro-enterprises on a self-sustainable basis, and females accounted for over 75 percent of all beneficiaries of the program.⁸ Tracer studies of the *Non-Formal Education and Training for Youth (Self)* employment program in the Palestinian Territories, which prepared participants for both self-employment and private sector employment inside and outside the Palestinian Territories, showed that one-third of the graduates were employed one year after completing the program. However, there was no control group with whom to compare outcomes so there is no way to know if this is more or less employment than would have been achieved in the absence of the program.⁹ An impact evaluation of *Project Baobab* in Kenya, which targets low-income young females in rural areas and offers start-up loans and training in entrepreneurial and life skills, showed that, within a four-year period, approximately 50 percent of the grantees were running businesses with good-to-marginal success while about 20 percent of the businesses were no longer in operation, either because the business had failed or because the participant had dropped out of school.¹⁰

Moving Forward: Factors for Success

- ***Provide self-employment assistance in combination with other services***, such as frequent mentoring visits, business counseling, and appropriate financial aid.
- ***Include outreach activities*** (either through mass media or youth outreach workers) to encourage young people most at-risk to participate because, on average, this group of young people tends to suffer from feelings of social exclusion, lower education and skill levels, more fragile family and community networks, and low self-esteem and confidence, and so they are more likely to believe that self-employment is not an option for them.
- ***Create strong partnerships with the business community*** so that business leaders can serve as mentors as well as a support network.

Endnotes

1. World Bank. 2007. "The Promise of Youth: Youth Policy for Youth at Risk in Latin America and the Caribbean." Chief Economist Office, Latin America and Caribbean Region. World Bank, Washington, D.C.
2. Dorenbos, R., D. Tanzer, and A. Vossen. 2002. "Active Labour Market Policies for Youth Employment in Asia and the Pacific: Traditional Approaches and Innovative Programmes." Prepared for ILO/Japan Tripartite Regional Meeting on Youth Employment in Asia and the Pacific. Department of Labour and Education, Netherlands Enterprise Institute (NEI).
3. Betcherman, G., K. Olivas, and A. Dar. 2004. "Impact of Active Labor Market Programs: New Evidence from Evaluations with Particular Attention to Developing and Transition Countries." Social Protection Discussion Paper Series 0402. World Bank, Washington, D.C.
4. Betcherman, Olivas, and Dar 2004.
5. Puerto, O. 2007. "Learning from International Experiences: The Youth Employment Inventory." Background paper for Sierra Leone Economic and Sector Work. World Bank, Washington, D.C.
6. Jaramillo, M., 2006. "Youth at Risk in Latin America and the Caribbean: Supporting Youth Facing Labor Market Risks." Policy Note. Group for the Analysis of Development (GRADE), Lima, Peru.
7. Puerto 2007.
8. Betcherman, G., M. Godfrey, S. Puerto, F. Rother, and A. Stavreska. 2007. "Global Inventory of Interventions to Support Young Workers, Synthesis Report." World Bank, Washington D.C.; www.thecommonwealth.org and www.icecd.org.
9. Johanssen, A., F. Tibitanzl, and I. Kaush, eds. 2006. "Cornerstones of Youth Employment Promotion in Development Cooperation." Discourse 007. Division of Development Education, and Information, Federal Ministry for Economic Cooperation and Development, Bonn, Germany.
10. Puerto 2007.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Greater employment • Higher wages/earnings • Increased employability
Secondary Effects	Increased self-confidence and self-esteem, leading to less risky nonemployment related behavior
Responsible Agency/Actor	Ministry of Labor, local governments, community-based organizations
Targeted Risk Group	Types II or III
Target Age Group	15–24
Examples of Costs per Beneficiary	<ul style="list-style-type: none"> • Bulgaria: <i>Self-employment Program</i>—US\$465 (see source) • Peru: <i>Young Micro Entrepreneurs' Qualification Program (Calificación de Jóvenes Creadores de Microempresas)</i>—US\$536^a
Necessary Initial Conditions	<ul style="list-style-type: none"> • Market demand for the goods and services that small firms produce • Financial markets with accessible lending opportunities • An entrepreneurial spirit among young people • Partnerships between programs and the business community for mentoring and networking purposes
Specific Examples & Levels of Effectiveness (Strong Evidence and Emerging Evidence)	<ul style="list-style-type: none"> • Peru: <i>Young Micro-Entrepreneurs' Qualification Program</i>—Emerging evidence • India: <i>The Commonwealth Youth Credit Initiative</i>—Emerging evidence (http://www.icecd.org) • Bulgaria: <i>Self-employment Program</i>—Emerging evidence • Palestinian Territories: <i>Non-formal Education and Training for Youth</i> (self-) employment program—Emerging evidence • Kenya: <i>Project Baobab</i>—Emerging evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Enterprises begun by young people <i>generally</i> tend to be less successful and have higher failure rates than those begun by older people. Therefore, government policies to encourage young people to enter self-employment are likely to attract a lot of interest but may require a comparatively high investment of resources for uncertain returns. • Special outreach and information campaigns may be required to reach at-risk youth, who may be less willing than others to become self-employed due to feelings of social exclusion, a lack of education and training, and fragile family and community support systems. • Programs can have high dropout rates and businesses can have high failure rates if beneficiaries are not carefully selected from the beginning. • To improve self-employment interventions and to be able to scale them up, labor market information systems must be created to enable young entrepreneurs to communicate with each other and see how many new businesses they have created.

Source: a. Puerto 2007.

GENERAL POLICY # 1

Invest in Safe Neighborhood Programs by Ensuring a Strong Police Presence and Fostering Good Police-Community Relations

Safe neighborhood programs are a holistic approach to improving high-violence communities. If successful, these initiatives can reduce youth crime and violence and increase community security by focusing on three objectives. The first objective is to implement problem-solving policing, in which citizens are involved in identifying community problems via participative diagnostics to help police focus on preventing rather than just reacting to crime and violence. Problem-solving policing is further characterized by community policing (see below), targeted police patrols in high-risk areas, and investments in local law enforcement to enhance both the presence and reputation of the police. A second objective of safe neighborhood programs is to offer an array of supervised activities for young people, including second-chance education, after-school programs, job and life skills workshops, and sports leagues. Third, safe neighborhood programs aim to strengthen much-needed basic services and infrastructure such as education, health, and water. Improvements to services and infrastructure also include community projects that increase security, such as improving street lighting, ensuring safe routes to school, removing graffiti, planting community gardens, and upgrading parks.

How Do Safe Neighborhood Programs Prevent Risky Youth Behavior?

Safe neighborhood programs can modify the environments in which young people act and interact in ways that are likely to prevent them from engaging in risky behavior. The programs work through many different channels to reduce youth crime and violence. For example, community policing, which aims to make policing more responsive and accountable to local communities, can create bonds of trust and reliance between communities and the police, increase crime reporting, reduce police abuses, revitalize existing police forces, and increase the public's perception of the safety of their environment. This more accountable police force can reduce the prevalence of firearms, drug trafficking, gang activity, and other forms of youth crime and violence that flourish in environments where authority is lacking, mistrusted, and/or corruptible.

Other safe neighborhood programs use prevention initiatives to address the underlying causes of risky behavior. Offering supervised activities for at-risk youth is one approach. While helping young people in school and in life generally, recreational activities are also healthy alternatives to crime and violence. Research in the United States shows that most risky behavior among young people occurs between the hours of 3 p.m. and 5 p.m. and that providing activities with an academic focus that are also fun can significantly affect a range of important skills and kinds of behavior, which then reduces the likelihood of young people engaging in crime and violence.¹ Another approach to preventing youth crime is to strengthen local services and infrastructure, and particularly important for this approach is the availability and maintenance of common and public spaces. Besides adding to a neighborhood's visible assets and increasing security, making incremental improvements encourages community participation, intersectoral collaboration, and civic spirit. Also, studies have shown that social cohesion can reduce violence even after controlling for poverty.² Finally, such projects create opportunities for young people to perform community service and gives them an incentive not to do anything to damage the community that they have helped to build.

Research Findings: Providing the Evidence Base

In the United States, the *Buffalo Weed and Seed Initiative* is a safe neighborhood program that is based on four components: law enforcement; community policing; prevention, intervention, and treatment of violence; and

neighborhood restoration. The *Weed* portion of the program is multi-agency and integrates federal, state, and local law enforcement agencies in combating crime, drug use, and gang activity in high-crime neighborhoods. The goal is to “weed” out crime and then to “seed” the targeted sites with a wide range of programs, including safe havens that offer young people educational, employment, health, social, and cultural activities. After only four years, the program was shown to have been a significant factor in reducing youth murder rates by 33 percent and youth crime rates by 41 percent in the area. Importantly, the neighborhood residents who launched the initiative through a local steering committee continue to be highly involved and committed.³

The *Birmingham Safer Neighbourhood Programme* in England operates in eight high-crime and deprived areas of the city. The program relies on a community problem-solving approach called “Audit to Action.” After a steering committee conducts a comprehensive audit of crime and safety problems in the area, action groups are formed to develop and implement solutions. As a result, community members collaborate with police officers in training sessions and mapping crime patterns; engage in community policing efforts; and provide a range of family, recreational, and educational activities aimed at at-risk youth. After two years, the program reduced youth crime by an average of 29 percent and crime in general by 14 percent.⁴

In the Dominican Republic, the *Mi Barrio Seguro (My Safe Neighborhood)* program is targeted to Santo Domingo’s highest crime and drug-trafficking areas. Because it takes a comprehensive approach to community upgrading, it requires intensive cross-sectoral coordination led by the Ministry of Interior in collaboration with the Ministries of Education, Health, Youth, and Social Protection; the police; and, most importantly, community leaders. The program consists of increased police presence, infrastructure improvements (for example, road entries/exits and public recreational areas), more community policing, neighborhood security improvements (for example, streetlights), new classrooms, literacy programs, and cultural and athletic workshops for young people run by neighborhood organizations. An initial evaluation showed that there had been a 68 percent reduction in homicides in the pilot neighborhoods after only six months of implementation. The program also generated an improved opinion of the police force in 12 high-violence neighborhoods, which contributed to a further expansion of the program to other neighborhoods and cities.⁵

Stay Alive is a safe neighborhood program in the most violent slum areas of Belo Horizonte, Brazil. The program uses scanning, crime mapping, and analysis and assessment of priorities. A local Community Forum organizes monthly meetings to discuss crime-related problems and coordinate strategies with the police. While the program trains both the police and some community members in activities aimed at crime and violence prevention, military police are assigned to patrol hotspots. For young people, the program offers social support, as well as educational, leisure, and sports components, including workshops on violence, drugs, sex, STDs, arts performance, and computers. After 30 months, it was shown that the program had led to a 47 percent decrease in youth homicides, a 65 percent decrease in attempted homicides, and a 46 percent reduction in instances of bakery robberies (that is, people breaking in to steal food) in the targeted slums (this was during a period when there was an 11 percent increase in violent crime in the typically nonviolent areas of the city). In addition, the Community Forum has diminished residents’ fears of crime and has mobilized the community to solve local problems. Because of these successes, the government has expanded the *Stay Alive* program to four other clusters of violent slums in Belo Horizonte.⁶

Moving Forward: Factors for Success

- Successful safe neighborhood programs include three key factors: problem-solving, community-based policing initiatives with supervised youth activities, and improved public services and local infrastructure.
- A committed core of neighborhood residents must directly participate in the program by identifying problems, recommending solutions, and implementing actions.

- Steering committees or local groups are good forums for community involvement and give local people a role in developing policies while maintaining a working relationship with law enforcement officials.
- Safe neighborhood programs must be viewed as long-term interventions. They must therefore set benchmarks to ensure that their objectives are being met and be prepared to develop and redevelop strategies over time. The impact of behavioral changes must also be carefully monitored (such as the frequency of youth crime and violence incidents in the targeted zones both before and during the implementation of the program).
- For community policing, full-time community foot patrol officers must be assigned to work closely with residents. These officers must become acquainted with the residents, regularly attend community meetings, and prioritize resident-identified problems. It is important for officers to be open-minded, unbiased, and sensitive to the concerns and problems of others.
- To promote community-based programs for reaching at-risk youth, it is important to use existing public spaces such as schools or other community centers (building special youth centers is not cost-effective).
- Strong collaboration among the relevant sector ministries at the local level is imperative.

Endnotes

1. U.S. Department of Justice. 1999. *Report to Congress on Juvenile Violence Research*. Washington, D.C.
2. Sampson, R., S. Raudenbush, and F. Earls. 1997. "Neighborhoods and Violent Crime: A Multi-Level Study of Collective Efficacy." *Science* 277: 918–924.
3. U.S. Department of Justice. 2004. "Weed and Seed Best Practices: Evaluation-Based Series, Volume 2." U.S. Department of Justice, Office of Justice Programs, Washington, D.C.
4. International Centre for the Prevention of Crime. 2005. *Urban Crime Prevention and Youth at Risk: Compendium of Promising Strategies from Around the World*. Montréal, Québec, Canada: International Centre for the Prevention of Crime.
5. World Bank and United Nations Office on Drugs and Crime (UNODC). 2007. *Crime, Violence, and Development: Trends, Costs, and Policy Options in the Caribbean*. Report No. 37820. Joint report by World Bank and UNODC.
6. International Centre for the Prevention of Crime 2005.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Greater citizen trust in local law enforcement, leading to an increased willingness by residents to report crimes and rely on official sanctions rather than street justice, resulting in reductions in general levels of conflict and aggression in the community as well as in specific criminal acts. • Targeted police patrols in areas with high rates of youth crime and violence must increase consequences and reduce crime. • Supervised activities for young people must serve as alternatives to crime and violence. • More and better basic services, public order, and overall security.
Secondary Effects	Increased social capital and possible increases in business development within the community
Responsible Agency	Ministry of National Security, Ministries of Health, Education and Public Works; local governments; local communities
Targeted Risk Group	Types I and II
Targeted Age Group	12–24
Cost Elements	Initial investments in such programs can lead to significant community savings in costs of crime (the £600,000 investment in the <i>Birmingham Safe Neighbourhood Programme</i> led to an estimated £6,406,840 in savings after only one year of operation as a result of lower crime rates). ^a
Necessary Initial Conditions	<ul style="list-style-type: none"> • Communities must feel able to trust in the honesty and fairness of the local police force. In communities where perceptions of police favoritism are high, it is not advisable to have the same police officers working the same shifts but rather to rotate shifts and responsibilities. At the same time, the program should find ways to increase public support for and trust in the police. • A confidential system for the public to lodge complaints against the police for corruption or misuse of power is necessary. • Community involvement is also critical, which can be fomented through existing community organizations or by establishing a steering committee.
Specific Examples	<ul style="list-style-type: none"> • United States: <i>Buffalo Weed and Seed Initiative</i> • England: <i>Birmingham Safer Neighbourhood Programme</i> • Dominican Republic: <i>Mi Barrio Seguro</i> • Brazil: <i>Stay Alive</i>
Level of Effectiveness (Strong Evidence or Emerging Evidence)	Strong evidence, if the program attends to local concerns, incorporates the three key principles (problem-solving, community-based policing initiatives with supervised youth activities, and improved community infrastructure) and is well implemented
Issues to Consider for Replication and Sustainability	It can be difficult to introduce community policing and citizen complaints into a hierarchical police culture.

Source: a. International Center for the Prevention of Crime 2005.

GENERAL POLICY # 2

Reduce the Availability and Use of Firearms

Policies and programs that reduce the availability and use of firearms can reduce youth violence, particularly among youth at risk. Legislative action and tactics to reduce supply are the most effective ways in which policy makers can achieve this. Specific legislative actions that can prevent the use of firearms include the following: (i) increasing sentences for crimes committed with a firearm as well as for carrying or selling illegal firearms; (ii) regulating the design of firearms (for example, by banning the importation and private ownership of easily concealed handguns or assault weapons and/or requiring the safe and secure storage of firearms with penalties for owners who do not comply); (iii) regulating firearm transactions (for example, by introducing strict dealer licensing requirements, compulsory licenses for all firearms, and/or mandatory background checks and waiting periods for firearm purchases); and (iv) banning the carrying of firearms altogether. Targeted enforcement interventions that disrupt illegal firearm sales (also known as secondary market transfers) are a second way to reduce the availability and use of firearms by youth at risk. Tactics such as increasing enforcement patrols in high-crime neighborhoods and using undercover police officers to pose as potential gun buyers have been the most successful interventions; gun buy-back programs have not. While the effects of firearm legislation have been mixed, combining laws with supply-side tactics appears to be very promising. A critical starting point for any firearm strategy is establishing a coordinated national, state, and local data collection system for tracking firearm-related injuries and deaths.

How Does Reducing the Availability and Use of Firearms Prevent Risky Youth Behavior?

Reducing the availability and use of firearms can reduce the intensity of youth violence. Increases in youth crime and violence are correlated with rises in lethal crime and violence committed with firearms.¹ The number of firearms in circulation has a direct effect on the ability of those at high risk of violence to obtain guns through theft or voluntary transfers in secondary markets. Therefore, passing restrictive firearms legislation and intervening to limit the supply of firearms reduces the number of deaths and injuries caused by guns. While legislative actions can deter firearm trafficking and general gun use via sentence enhancements, targeted enforcement interventions can actually reduce the quantity of firearms in circulation by regulating the design and transaction of firearms and imposing gun bans.

Research Findings: Providing the Evidence Base

There are three ways to influence the availability of firearms: legislation, tactics to reduce supply, or a combination of both. Here are some examples of the effectiveness of each of the three methods.

Legislative Efforts. International evidence regarding the impact of firearm legislation on youth crime and violence is mixed.² In Canada, for example, the 1977 Criminal Law Amendment Act introduced regulations for the design and transaction of firearms as well as increasing sentences for crimes committed with firearms. A long-term study attributed a 55 percent reduction in homicides and a 25 percent decrease in firearm crimes to these policies.³ Similarly, in 1996 the Australian government passed a law that prohibited military-style weapons, increased import controls on other firearms, and restricted handgun access, and these laws have been credited with a 50 percent decline in firearm-related deaths over the past 10 years. Likewise, a 1977 restrictive licensing law effectively banned the private ownership of handguns in Washington, D.C. With rigorous police enforcement, the policy led to an immediate 25 percent decline in firearm-related deaths.⁵ However, firearms laws have not yielded positive results in all countries. In England, the 1997 Firearms Amendment introduced a handgun ban as well as firearm transaction regulations. Because then, firearm crime rates have continued to increase, and firearm injuries have more than doubled. The 1972 Irish Gun Law,

which prohibited and confiscated all firearms, and Jamaica's banning of firearms and the introduction of mandatory life sentences for possession of firearm crimes, have also failed to reduce violent crime and murder rates.⁶

While different types of firearm legislation have produced mixed results, bans on carrying firearms can be effective, especially in places where homicides are largely perpetrated by and against young people. Colombia is the quintessential example. In the 1990s, policy makers in Cali and Bogotá banned the carrying of guns during periods that were known to have higher homicide rates (such as weekends after paydays, holidays, and election days). Importantly, the legislation was reinforced by awareness campaigns, and the police were trained to administer the new procedures. As a result, homicide rates fell by 14 percent and 13 percent in Cali and Bogotá, respectively, during periods when the ban was in effect.⁷

Supply-side Tactics. Programs that introduce aggressive police patrols in high-crime neighborhoods and attack secondary firearms markets have been successful in reducing the availability of firearms and violence among young people. In the United States, Boston's *Operation Ceasefire* targeted law enforcement resources with the aim of reducing the supply of firearms to gangs and was a major factor in a large subsequent drop in youth homicide rates.⁸ Similarly, New York's *Firearms Investigation Unit* has successfully reduced the flow of guns by identifying gun traffickers by means of undercover gun buys by police officers. Meanwhile, *Operation Gun Stop*, which offers US\$1,000 for anonymous tips that lead to the arrest of a person in possession of an illegal firearm, has removed thousands more guns and criminals from the streets of New York.⁹ *Operation Trident* in England is another example of a successful supply-side program. Targeting young, high-risk Londoners, the program employs 300 police officers who proactively pursue gunmen, drug dealers linked to gun crime, and gun suppliers. The program leads to hundreds of arrests and firearm seizures each year and has reduced youth homicide rates.¹⁰

Combined Approaches. Legislative action combined with supply-side tactics appears to be the most promising approach. In Brazil, the 2003 *Disarmament Statute* increased sentences for illegally owning a firearm, strengthened firearm transaction regulations, and imposed bans on carrying firearms. The legislation was followed by increased policing to attack firearms markets and enforce the ban. Within one year, the national firearm homicide rate declined by 8.2 percent, the first drop in 13 years.¹¹ *The Kansas City Gun Experiment* in the United States is another example of the combined approach. After a firearm ban was passed, intensive police patrols targeted an 80-block hotspot area where the homicide rate was 20 times the national average. Patrol officers found and seized guns by making routine vehicle stops and frisking individuals. The 29-week experiment produced a 49 percent decline in gun crime and a 67 percent reduction in homicide in the area.¹²

Moving Forward: Factors for Success

- ***The creation of a National Firearm Injury Surveillance System*** is an important starting point for any strategy to reduce firearms. This system is vital for monitoring the impact of firearms legislation and supply-side interventions (in other words, the frequency of youth crime and violence committed with firearms in targeted zones), as well as to make any necessary policy changes during the implementation of the intervention.
- ***Combining legislative action and supply-side interventions*** is the most promising approach for reducing firearm-related violence.
- To be successful, ***firearm bans must include awareness campaigns*** to explain, promote, and garner public support for the ban. Another essential element is to ***provide training for the police in implementing the new procedures***, if necessary.
- ***Effective firearm regulation requires cooperation among all levels of government***, law enforcement agencies, business, the media, and citizens to prevent crime, promote public health, and ensure the safety of individuals.

- ***Bans on carrying firearms can be useful in preventing homicide*** in violent regions of the world, but the effectiveness of the approach is unclear in less violent cities.
- ***The success of supply-side interventions greatly depends on the ability of the police to develop a close partnership with community members*** as well as robust intelligence-based policing, proactive crime prevention, and better detection. Offering rewards for information leading to the arrest of individuals who carry or possess illegal firearms is another sound strategy.
- ***Supply-side and legislative firearm interventions are only as strong as the ability of the police to enforce them.*** Police awareness of the legislative framework and methodology training in enforcement strategies are therefore imperative.

Endnotes

1. Cook, Philip, and Jens Ludwig. 2006. "Aiming for Evidence-Based Gun Policy." *Journal of Policy Analysis and Management* 25(3): 691–735.
2. The evaluations of the different firearm laws discussed in this section do not consider their specific impact on young people. However, because the majority of firearm crime and violence occurs among and against youth at risk, the general trends are also indicative of the effects on young people.
3. Canada Firearms Centre. 1996. "A Statistical Analysis of the Impacts of the 1977 Firearms Control Legislation." Evaluation Document, Program Evaluation Section. Canada Firearms Centre, Ottawa, ON, Canada.
4. Chapman, S., P. Alpers, K. Agho, and M. Jones, 2006. "Australia's 1996 Gun Law Reforms: Faster Falls in Firearm Deaths, Firearm Suicides, and a Decade Without Mass Shootings." School of Public Health, University of Sydney.
5. Loftin, C. D. McDowall, B. Wiersema, and T. Cottey. 1991. "Effects of Restrictive Licensing of Handguns on Homicide and Suicide in the District of Columbia." *New England Journal of Medicine* 325: 1625–1630.
6. For England, Ireland, and Jamaica, see Mauser, Gary. 2004. "An International Survey of Gun Laws and Violent Crime." Presented to the Annual Meeting of the American Society of Criminology, Nashville, Tennessee.
7. Villaveces, Andres. 2000. "Effect of a Ban on Carrying Firearms on Homicide Rates in Two Colombian Cities." *Journal of the American Medical Association* 283: 1205–1209.
8. Cook and Ludwig 2006.
9. Almo, Cari, and Megan Golden. 2004. "Reducing Gun Violence: An Overview of New York City's Strategies." Vera Institute of Justice, New York, NY.
10. See the Metropolitan Police Website for Operation Trident, <http://www.stoptheguns.org/>.
11. Instituto Sou da Paz. 2006. "Brazil: Changing a History of Violence." Instituto Sou da Paz, São Paulo, Brazil.
12. U.S. Department of Justice. 1999. *Promising Strategies to Reduce Gun Violence*. Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice, Washington, D.C.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Reduce the prevalence and lethality of youth violence
Secondary Effects	<ul style="list-style-type: none"> • Enhance standards of living in communities subjected to high rates of firearm violence • Change social norms about firearm use • Reduce suicide rates • Lower health care and emergency costs
Responsible Agency/Sector	Ministry of National Security, Attorney General, local police, and governing agencies
Targeted Risk Group	Types I, II, and III
Targeted Age Group	12–24
Cost Elements	
Necessary Initial Conditions	<ul style="list-style-type: none"> • Awareness of gun violence problem • Development of a National Firearm Injury Surveillance System • Trust in police • Identification of sources of illegal weapons • Control of secondary firearms markets
Specific Examples	<ul style="list-style-type: none"> • Australia, Canada, and Washington, D.C.: General firearms legislation • Gun carrying bans: Cali and Bogotá, Colombia • Supply-side tactics: <i>Operation Ceasefire</i>, <i>New York Firearms Investigation Unit</i>, <i>Operation Gun Stop</i>, <i>Operation Trident</i> • Combined approach: Brazil and Kansas City Gun Experiment
Level of Effectiveness (Strong Evidence or Emerging Evidence)	<ul style="list-style-type: none"> • Legislative efforts – <ul style="list-style-type: none"> - Sentence increases and transaction regulations—emerging evidence - Firearm carrying bans—Strong evidence in certain environments • Supply-side tactics—Strong evidence • Combined approaches—Strong evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Program design must consider the specific circumstances governing firearms at the country, regional, and community level, including legal guidelines and public perceptions. • Social marketing campaigns and an increase in legitimate police presence in communities can reduce public support for gun carrying and use. • Youth at risk tend to see guns as a badge of honor linked to their masculinity, which means that interventions are required to help young men to find other ways to develop and assert their gender identity.

GENERAL POLICY # 3

Increase Prices and Reduce the Availability and Use of Alcohol and Tobacco

Policies that reduce young people's access to alcohol and tobacco can reduce crime, violence, injuries, and death. There are several effective strategies for achieving this. First and foremost, increasing alcohol and tobacco taxes is a straightforward way to lower consumption of both products among young people. The tax rate must be based on empirical facts, be kept as simple as possible, and be enforceable. In some places, smaller units are produced (such as 5 or 10 cigarettes per package in the case of tobacco) to reduce the effects of price increase. These practices should be prohibited. Second, policy makers can intervene by enforcing sales restrictions, including controls on hours of operation, density, and location of sales outlets. Imposing a minimum age for purchasing tobacco and alcohol can also be effective, but sometimes difficult to monitor and enforce. A partial solution is to limit the licensing only to large stores (such as supermarkets), which are more likely to comply with the restrictions, and to avoid licensing of small kiosks and shops to sell these products. Finally, prohibitions on using alcohol at community and sporting events or in public areas, such as parks and streets, are other restrictions that can be introduced.

A key factor in the success of the restrictive approach is the credible threat of sanctions. Ensuring that merchants in violation of regulations receive appropriate sanctions can reduce future violations. These sanctions can include both administrative and criminal penalties (on the individual salesperson and the retail establishment). The most effective sanctions include progressive penalties, which can include warnings, fines, firing of individuals, closing establishments, and imprisonment of violators. Tax increases and sales restrictions should be implemented at the same time to have the maximum possible impact on youth alcohol and tobacco consumption.

How Does Increasing Prices and Reducing the Availability of Alcohol and Tobacco Prevent Risky Youth Behavior?

Alcohol has consistently been identified as a contributing factor to a host of negative outcomes including the three leading causes of death for young people in the world—homicide, suicide, and motor vehicle crashes. In addition to precipitating crime, violence, and injury, alcohol use is linked to depression, poor academic performance, the acquisition of STIs, and gang involvement, among others. Similarly, the negative effects of tobacco use include general health problems and, more importantly, a propensity to experiment with illegal drugs. For young people, whose brains are still developing, the danger involved in abusing either substance is of particular concern. As a result, policies that limit young people's access to alcohol and tobacco can have a positive impact on their behavior and outcomes.

One of the most important policy determinants of young people's smoking and alcohol use is price. Young people, and particularly poor young people, typically have very little money to spend. Consequently, prices have a disproportionately strong impact on their consumption decisions compared with adults. Even more significant, economically disadvantaged people who are inherently more prone to engage in risky behavior are even more sensitive to price. Thus, as cigarette prices increase, young people are less likely to take up smoking, and those who have begun smoking are more likely to quit. The same is true for alcohol consumption. Importantly, research has shown that alcohol tax increases have a bigger impact on heavy drinking among teenagers than occasional drinking, which is a positive outcome as heavy drinking is more closely linked to violent and other risky behavior. In addition, the increased revenue from higher alcohol and tobacco price increases can be invested in enforcing the sales restrictions as well as other alcohol and tobacco

prevention strategies (such as treatment centers, public health campaigns, and/or restricting the advertising and promotion of such products to youth).

Research Findings: Providing the Evidence Base

There are two main ways to curb the consumption of tobacco and alcohol among young people—price increases and sales restrictions. Here are some examples of the effectiveness of each method.

Price Increases. International evidence verifies the impact of alcohol and tobacco prices on risky behavior among young people. In the United States, it was estimated that a 10 percent increase on the tax for alcohol-containing beverages in 1995 reduced binge drinking episodes among youth by 8 percent per month.¹ While price changes explained most of the observed increases and decreases of binge drinking patterns for high school seniors between 1975 and 2003, a 10 percent alcohol tax also is believed to have reduced homicides and other violent crimes among American college students by four percent.² Other studies from the United States estimated that a 10 percent increase in alcohol prices reduced youth fatality rates by as much as 17 percent³ and that a beer tax increase of \$0.20 per six-pack reduced gonorrhea rates by 8.9 percent and syphilis rates by 32.7 percent.⁴ In Australia's Northern Territory, increases in alcohol taxes and tax coverage in 1992 resulted in a 22 percent reduction in per capita consumption, as well as significant reductions in hazardous drinking patterns, illnesses, and deaths among young people.⁵ Malaysia and the Philippines have had similar experiences.⁶ Regarding tobacco prices, studies have shown that a 10 percent tax on a pack of cigarettes decreases demand by about 4 percent in the United States and between 6 and 10 percent in China.⁷ Analysis of tax increases on tobacco in Canada, South Africa, the United Kingdom, and a number of other countries also verifies that increasing taxes can reduce youth consumption.⁸

Sales Restrictions. A number of countries have successfully affected youth behavior by restricting alcohol sales. In Diadema, a violent suburb of São Paulo, Brazil, a municipal law forced bars to close at 11 p.m., and violators became subject to progressive penalties (from warnings to fines to license revocation). While controversial at first, the alcohol restrictions now enjoy widespread public support and are credited with having brought about a 55 percent reduction in homicides and a 26 percent reduction in violence against women.⁹ In Cali, Colombia, a semi-dry law in the mid-1990s closed bars and nightclubs at 1 a.m. on weekdays and at 2 a.m. on Fridays and Saturdays. An evaluation of this policy showed that homicide rates declined by 30 percent over a six-year period.¹⁰ Across Scandinavia, sizeable reductions in hazardous alcohol consumption and alcohol-related traffic fatalities resulted after retail outlets were prohibited from selling alcohol for one day during the weekend.¹¹ An indigenous community in Australia achieved long-term reductions in a wide range of alcohol-related problems when the local Aboriginal Council limited sales of alcohol on Thursday paydays.¹² Other studies in locales and populations as diverse as Greenland, Micronesia, and the former Soviet Union have demonstrated the dramatic reductions in mortality, injuries, and crime that can be achieved when alcohol becomes less available in a society.¹³

Moving Forward: Factors for Success

- ***Increased taxes and sales restrictions must be implemented jointly*** to maximize impact.
- ***The optimal level at which to set alcohol and tobacco taxes must be based on empirical facts*** and will widely differ from country to country.
- ***Alcohol taxes must be kept as simple as possible*** to make them efficient and effective to administer (specific rates defined in terms of alcoholic content and adjusted periodically for inflation are considered best practice from many international economic studies).
- ***Regulation and taxation are complementary***, and more efforts should be made to enforce regulations that aim to reduce the social costs of alcohol and tobacco consumption.
- ***Sales restriction laws must be bolstered by strong enforcement and credible sanctions*** (administrative and criminal) on consumers, salespeople, and retail establishments.

- ***Policy makers should consider using a percentage of increased tax revenues to train and increase the number of enforcement bodies***, especially during the early phases of tax increases and/or sales restrictions.
- ***An alcohol and tobacco surveillance system will be an important tool for monitoring the impact of alcohol and tobacco policies*** (including the frequency of youth crime, violence, and injury related to alcohol use; consumption sales and trends among young people; and the effectiveness of sanctions on violating merchants). Data from the system can also be used to make any necessary policy changes during the implementation of the intervention.

Endnotes

1. Sloan, F., B. Reilly, and C. Schenzler. 1995. "Effects of Tort Liability and Insurance on Heavy Drinking and Drinking and Driving." *Journal of Law and Economics* 38(1): 49–77.
2. Grossman, M., and S. Markowitz. 2001. "Alcohol Regulation and Violence on College Campuses." In M. Grossman and C. Hsieh, eds., *Economic Analysis of Substance Use and Abuse: The Experience of Developed Countries and Lessons for Developing Countries*. Cheltenham, United Kingdom: Edwin Elgar.
3. Chaloupka, Frank. 2002. "The Effects of Price on Alcohol Use, Abuse and Consequences." Prepared for the National Academy of Sciences' Committee on Developing a Strategy to Reduce and Prevent Underage Drinking's Workshop on Underage Drinking: Issues and Approaches, October 10–11, 2002, Washington, D.C.
4. Chesson, H., P. Harrison, and W. Kessler. 2000. "Sex Under the Influence: The Effect of Alcohol Policy on Sexually Transmitted Disease Rates in the United States." *Journal of Law and Economics* 43(1): 215–238.
5. Chikritzhs, T., T. Stockwell, and D. Hendrie. 1999. "The Public Health, Safety and Economic Benefits of the Northern Territory's Living with Alcohol Program, 1992/3 to 1995/6." National Drug Research Institute, Curtin University of Technology and Lewin-Fordham Group, Perth, Western Australia.
6. Center for Social and Health Outcomes Research and Evaluation. 2006. "Alcohol Taxation in the Western Pacific Region." Paper prepared for the World Health Organization Regional Office for the Western Pacific. Center for Social and Health Outcomes Research and Evaluation, University of Pennsylvania, Philadelphia, PA.
7. World Bank. 1999. *Curbing the Epidemic: Governments and the Economics of Tobacco Control*. Washington, D.C.: World Bank.
8. World Bank 1999.
9. Ramirez, Anthony. 2007. "Reducing Alcohol and Other Drug-Related Youth Violence Through an Environmental Approach." Draft. Pacific Institute for Research and Evaluation. Pan American Health Organization.
10. Concha-Eastman, A., V. Espitia, R. Espinosa, and R. Guerrero. 2002. "La epidemiología de los homicidios en Cali, 1993–1998: seis años de un modelo poblacional." *Pan American Journal of Public Health* 12(4): 230–239.
11. Norstrom, T. and O. Skog. 2005. "Saturday Opening of Alcohol Retail Shops in Sweden: An Experiment in Two Phases." *Addiction* 100: 767–776.
12. World Health Organization. 2002. "A Summary of Alcohol in Developing Societies: A Public Health Approach." World Health Organization, Geneva, Switzerland.
13. World Health Organization 2002.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Reductions in alcohol-related youth crime, violence, injury, and death
Secondary Effects	<ul style="list-style-type: none"> • Fewer suicides • Better academic performance among youth at risk • Enhanced productive human capital • Lower health system costs • Lower judicial system and rehabilitation costs
Responsible Agency/ Sector	Ministries of Health, Justice, or Finance; law enforcement agencies
Targeted Risk Group	Types I and II
Targeted Age Group	12–24
Cost Elements	According to the World Health Organization, the estimated per capita cost of implementing tax increases and restrictive sales enforcement, in addition to alcohol and tobacco advertising bans, is between US\$0.05 and US\$0.50.
Necessary Initial Conditions	<ul style="list-style-type: none"> • Institutional tax collecting capabilities • Enforcement bodies • Legislative support
Specific Examples	<ul style="list-style-type: none"> • Australia, Malaysia, the Philippines, and the United States: Price increases for alcohol • Canada, China, South Africa, the United Kingdom, and the United States: Price increases for tobacco • Australia, Brazil, Colombia, former Soviet Union, Greenland, Micronesia, and Scandinavia: Sales restrictions
Level of Effectiveness (Strong Evidence or Emerging Evidence)	<ul style="list-style-type: none"> • Price increases—Strong evidence • Sales restrictions—Strong evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Careful analysis is needed to impose appropriate alcohol and tobacco tax rates. • Sales restrictions are only as good as the ability to enforce sanctions. • Reducing the consumption of alcohol and tobacco can have unintended consequences (such as encouraging home-brewed alcohol or solvent use). • Tax increases can have a regressive impact on incidence if they are accompanied by a rise in the already high level of unrecorded (and therefore untaxed) consumption.

GENERAL POLICY # 4

Increase Access to Contraception through Condom Social Marketing and Enable the Widespread Provision of Emergency Contraception

There is a great need to increase young people's knowledge of and access to contraception. This is because recent changes in social norms worldwide have made sexual activity more risky for young people (both in terms of unwanted pregnancies and contraction of STDs). These changes include longer periods of nonmarital sexual activity and the HIV pandemic, both of which disproportionately affect young people.

One of the most effective interventions for increasing knowledge of and access to contraception is condom social marketing (CSM), which helps prevent both STDs and unwanted pregnancies. CSM involves the distribution of condoms (often packaged in ways that make them attractive to young people) through retail outlets, government services (such as health clinics and schools), and community-based organizations at subsidized prices or, in some cases, free of charge. This distribution strategy is complemented by safe sex information campaigns in the mass media and strategic targeting to particularly vulnerable parts of the youth population. Successful CSM programs have also used curriculum-based health and sex education programs in schools to encourage safe sex practices and condom use (see Core Policy #3).

It is also important that youth have access to a backup of emergency contraception (EC) to prevent unwanted pregnancies when other methods, such as condoms, fail.¹ Policy makers should make EC widely available and accessible to young women by the following methods: (i) registering at least one EC product for sale within the country; (ii) permitting the sale of EC without a doctor's prescription; (iii) enacting laws that recognize adolescents' right to use EC; (iv) allowing women to acquire advance supplies from local distributors; and (v) incorporating EC into government-regulated family planning services and protocols. Clearly, the use of EC should not replace routine contraception, preferably through condom use, and youth need to be informed both about the availability of EC and about its proper use. Some ways to achieve this are to set up EC telephone hotlines, train pharmacists to answer questions about EC, and ensure that the instructions in the packets of EC are well-designed and clearly written. Above all, this approach requires strong political support to change the regulatory environment and social attitudes.

How Does Increasing Access to Contraception Prevent Risky Youth Behavior?

Programs and policies that increase access to contraception make it easier for young people to engage in safe and healthy behavior and to minimize the consequences of risky sexual behavior. In many developing countries, condoms are often available only in pharmacies and health clinics, and the public thinks of them as only appropriate for use by and with commercial sex workers.² A further dibecauseptive to using condoms is their high price, which is a particular barrier for poor young people who are the group most likely to engage in unprotected sex. CSM can help the most disadvantaged young people by increasing their knowledge of safe sex and their access to and use of condoms, thus decreasing the spread of sexually transmitted infections and the incidence of unwanted pregnancies. The destigmatization of condoms that has occurred in many countries illustrates how CSM can help populations to overcome social and cultural resistance to the effective prevention of STDs as well as unplanned pregnancies.

Whereas CSM promotes good decision making, policies that enable the provision of EC can mitigate the adverse effects of poor decisions that have already been made. Unplanned pregnancies put an immense social burden on unmarried young women, especially in countries where families do not support out-of-wedlock

births. Young mothers commonly leave school, have difficulty entering the labor market, and tend to be poorer adults and engage in other risky kinds of behavior more often than young women who delay motherhood. Their children also have greater developmental problems and have a higher propensity for becoming at-risk youth than do the children of adult women. In those places where EC is not provided as part of reproductive health services, an estimated 20 million unsafe and illegal abortions occur each year.³ As a result, allowing the provision of EC can significantly reduce the social and health risks associated with unplanned pregnancy. If taken within 72 hours after unprotected sex, EC safely and effectively reduces the risk of pregnancy by as much as 90 percent. In addition to ensuring quicker use and, therefore, greater efficacy, making EC widely available makes it possible for friends to share their supplies, which avoids the embarrassment involved in obtaining supplies from family doctors or clinics. Moreover, and contrary to popular belief, international evidence confirms that making EC accessible does not increase the incidence of unprotected sex.⁴

Research Findings: Providing the Evidence Base

There are two main ways to curb the spread of sexually transmitted infections and reduce the incidence of unwanted pregnancies—CSM and providing EC. Here are some examples of the effectiveness of each method.

Condom Social Marketing. *DKT do Brazil* is a CSM campaign that has been helping to make condoms more available to low-income Brazilians for more than 15 years. Its main strategy is to sell condoms to wholesalers and retailers for a small fee, which results in a final price to the consumer of between US\$0.20 and US\$0.35 per condom, which is a fraction of the price of commercial brands. With the revenues that it collects, *DKT* finances campaigns to raise awareness about HIV/AIDS and safe sex. Combined with other macro-level efforts, such as lobbying for reduced import duties on condoms, the initiative has led to dramatic growth in the Brazilian condom market, from less than 50 million in 1991 to more than 300 million in 2002. In 2006 alone, the program sold 76.4 million male condoms and 90,961 female condoms.⁵ The Brazilian government has spearheaded other similar efforts. The Ministries of Health and Education launched a controversial pilot program in 2003 to distribute condoms in schools. While this particular initiative has not been evaluated, it has been expanded to over 200 municipalities and is a key part of Brazil's successful strategy of curbing the spread of AIDS.⁶

Cameroon's *Horizon Jeunes* is another example of CSM that has had a positive impact on risky behavior. Targeted toward young urban people between the ages of 12 and 22 both in and out of school, this national social marketing campaign promotes two main messages—delay the initiation of sex, and, if you choose to have sex, use condoms. “Edutainment Events” are among the innovative methods that the program uses to deliver CSM messages. These consist of presentations during football matches, town meeting discussions, short films at popular video clubs, awareness sessions at dance clubs, and radio programs. These efforts are bolstered by peer educators who distribute campaign-sponsored condoms to local young people. Evaluations have shown that *Horizon Jeunes* has increased young people's knowledge of reproductive health and has changed their behavior, especially that of young women, who have increased their condom use by nearly 20 percent.⁷

Emergency Contraception. Numerous countries have explicitly approved of EC as a contraceptive method, including many that have highly restrictive abortion laws (such as Argentina, Brazil, Colombia, El Salvador, Kenya, Pakistan, Thailand, and Venezuela). These policies have prevented countless unintended pregnancies and abortions worldwide. In the United States, for instance, allowing the distribution of EC accounted for the nearly 45 percent decrease in abortions between 1994 and 2000, and 51,000 abortions were averted in 2000 alone as a result of EC.⁸ In France, more than 1 million women used EC on a nonprescription basis in the first three years after the legislation was approved, and around 70,000 women per month used it in 2002.⁹ French policy makers also authorized school nurses to dispense EC, which has been shown to have led to a 25 percent decline because 2002 in the number of adolescent girls having abortions.¹⁰ And in New Zealand, a

law allowing EC to be sold over the counter has led to a 15 percent increase in pharmacy sales of EC pills and a correlated decrease in abortion among young women.¹¹

Moving Forward: Factors for Success

- ***CSM promotional activities must incorporate as many actors as possible***, including the mass media, community-based organizations, health and education practitioners, and peer educators.
- ***The government must be an active partner in CSM*** and include it in its own programs, especially to bring condoms to the entire population even if this means subsidizing the costs for poor consumers.
- ***Both market and consumer research are fundamentally important inputs into the design of CSM campaigns***, for example, to assess the preexisting availability of condoms; discover the attitudes, habits, needs, and wants of different groups; explore the different family planning methods used in different local contexts; and use relevant and up-to-date information to adjust how the program is being implemented.
- ***CSM messages should be targeted first to younger rather than older youths***, as information about safe sex has a stronger and more lasting impact if delivered before the initiation of sexual activity. The messages should also discuss a range of options for addressing real problems faced by young people, as well as be reinforced by repeating the messages as often and through as many means as possible.
- ***The success of CSM should not just be measured in terms of how many condoms are sold***. The impact of the strategy within the wider social and reproductive health context must also be considered (in other words, the extent of any changes in awareness, recognition, and acceptance of risk; how and by how much behavior has changed; and how many people have been exposed to the program).
- Policy makers should, at a minimum, ***register one EC product for sale within the country, make EC available over the counter, and recognize adolescents' right to use EC***.
- Local and national authorities need to find innovative and inventive ways to ***inform women about the availability and proper use of EC***.
- ***EC initiatives should be integrated*** into government-regulated family planning services and protocols.
- ***A national surveillance system should be incorporated into the Ministry of Health to monitor the impact of behavioral changes resulting from CSM or EC programs*** (such as the extent of people's knowledge of safe sex practices; their awareness of EC; and the incidence of condom and EC use, unplanned pregnancies, legal and illegal abortions, and STDs among young people), as well as to make any necessary policy changes during the program's implementation.

Endnotes

1. YouthNet. "Expanding Contraceptive Options and Access for Youth." YouthLens Fact Sheet on Reproductive Health and HIV/AIDS. No. 12. Available at: <http://www.youth-policy.com/index.cfm?page=ECP>.
2. UNAIDS. 2000. "Condom Social Marketing: Selected Case Studies." UNAIDS Best Practice Collection, Joint United Nations Program on HIV/AIDS, Geneva, Switzerland.
3. World Health Organization. 2004. "Unsafe Abortion: Global and Regional Estimates of the Incidence of Unsafe Abortion and Associated Mortality in 2000." World Health Organization, Geneva, Switzerland.
4. Marston, C., H. Meltzer, and A. Majeed. 2005. "Impact on Contraceptive Practice of Making Emergency Hormonal Contraception Available Over the Counter in Great Britain: Repeated Cross Sectional Surveys." *British Medical Journal* 331: 271; and Belzer, M., K. Sanchez, J. Olson, A. Jacobs, and D. Tucker. 2005. "Advance Supply of Emergency Contraception: A Randomized Trial in Adolescent Mothers." *Journal of Pediatric and Adolescent Gynecology* 18: 347–354.
5. World Bank. 2007. "The Promise of Youth: Policy for Youth at Risk in Latin America and the Caribbean." World Bank, Washington, D.C.; and DKT International—Brazil, <http://www.dktinternational.org/brazil.htm>.
6. Associated Press. 2003. "Brazil to Distribute Millions of Condoms to High School Students." August 23.
7. UNAIDS 2000.
8. Jones, R., J. Darroch, and S. Henshaw. 2002. "Contraceptive Use Among U.S. Women Having Abortions in 2000–2001." *Perspectives on Sexual and Reproductive Health* 34(6): 294–303.
9. Aubeny, E. 2002. "French Association for Contraception Emergency Contraception over the Counter." Presentation at 7th Congress of the European Society of Contraception held April 10–13, 2002, Genova, Italy.
10. Calla, Cécile. 2002. "Près de six mille jeunes filles ont obtenu la pilule du lendemain auprès de leur infirmière scolaire en 2001-2002." *Le Figaro*, December 20.
11. Managh, Cushla. 2004. "Dramatic Rise in Urgent Pill Sales." *The Dominion Post*, February 5.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Increased use of contraception, especially among sexually active young people • Lower rates of STDs • Fewer unwanted pregnancies • Fewer abortions (both safe and unsafe)
Secondary Effects	The benefits to society of promoting healthy sexual behavior include reduced expenditure on curative care; lower infectious disease prevalence; and spillover effects on welfare, security, and economic growth.
Responsible Agency/ Sector	Ministries of Health, Education, or Youth; medical and pharmaceutical communities; national media; NGOs
Targeted Risk Group	Types I and II
Targeted Age Group	Ages 12 and older
Cost Elements	
Necessary Initial Conditions	<ul style="list-style-type: none"> • Strong political support • Acceptance of the provision of contraceptives and the dissemination of information related to sexual behavior
Specific Examples	<ul style="list-style-type: none"> • Condom Social Marketing: <i>DKT do Brazil</i> and Cameroon's <i>Horizon Jeunes</i> • Emergency Contraception: France, the United States, and New Zealand
Level of Effectiveness (Strong Evidence or Emerging Evidence)	<ul style="list-style-type: none"> • Condom Social Marketing—Emerging evidence • Emergency Contraception—Emerging evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Collaboration among different services is vital for disseminating information about healthy sexual behavior and contraceptive options. • The contraception costs of poorer consumers must be subsidized. • Intensive training and persistent, continuous support given to community agents can overcome initial cultural reluctance to using contraception. • Contraception promotional activities must take into account the ability of the target audience to absorb the messages, and the program's content should be flexible and adaptable enough to reach all young people in widely differing situations and facing different constraints and opportunities. • Contraception campaigns can be large and nationwide or, as appropriate, small and targeted to specific locations or groups within the population. Similarly, a program can stand alone or be a component of a larger, more comprehensive program. Furthermore, the design and implementation of different marketing activities should incorporate both experienced professionals as well as individuals drawn from the general public and targeted groups.

Reduce Youth Crime and Violence by Focusing on Rehabilitation and on Providing Second Chance Opportunities for Young Offenders

Evidence shows that the most effective approach to reducing youth crime and violence is to concentrate on rehabilitation and on providing second chance opportunities for young delinquents. Another key element of this approach is the introduction of graduated, or accountability-based, sanctions for first-time and minor repeat offenders. These sanctions commonly include two components. In the first component, a community accountability board, made up of juvenile court personnel, probation officers, and/or citizen volunteers, meets with offenders to assign sanctions for their offenses and to monitor and enforce a diversion agreement (an agreement that allows an offender to avoid going to court and/or jail in return for certain commitments). The second component is the development and implementation of a graduated series of consequences if a youth fails to comply with the requirements of the community accountability board. Whereas behaving well will result in increased freedom or other rewards for the young offender, any negative behavior will result in greater restrictions. The idea behind this approach is to devise punishments that are appropriate for the crime in question, based on the gravity of the offense and an assessment of the likelihood of the young person re-offending, coupled with appropriate interventions (such as alcohol and/or drug treatment, personal/family counseling, and academic support) to reduce the risk of recidivism.

Youth courts are an innovative way to implement the graduated sanctions approach. These are courts in which young people sentence their peers for their offenses and are created by communities to handle nonviolent offenses that would otherwise end up in juvenile or adult court. Depending on which model is adopted, young people take on a variety of roles, including judge, prosecutor, defense attorney, and jurors, to question the offender, to deliberate, and to impose sentences. Graduated sanctions have also been used in drug and gun courts.

While these rehabilitative strategies attempt to make young criminals feel that they are personally and socially valued, any policy to allow second chances must be balanced against the legitimate need to deter violence. It is also important to acknowledge that these rehabilitative strategies may generate popular resistance, particularly in contexts where gangs and/or the presence of idle young excombatants are a major issue. In some contexts, rehabilitative strategies for youth can even have perverse side effects, as when gangs decide to use juveniles for the most heinous crimes because of the expectation that they will be released sooner. Ultimately, each country may experiment with various strategies depending on existing constraints, but to be successful all strategies should be grounded in a number of common prerequisites. These include adequate resources for targeted staff trainings; investments in organizational infrastructure for alternative sentencing such as community service, special education, or restorative work; and adequate separate physical facilities for housing juvenile offenders before trial and after sentencing.

How Does Strengthening the Justice System Prevent Risky Youth Behavior?

Many young people are attracted to, and experiment with, social defiance, but governments often fail to give them legally recognized second chances. In countries where criminal justice systems are underdeveloped, young people often have to wait in overcrowded and dangerous prisons for months before seeing a lawyer or a judge, having often been charged with only a petty crime. Incarceration has detrimental effects on the health, well-being, and self-image of young detainees and inmates, and premature or excessive punishment, including incarceration, can cause young people to continue to participate in criminal activity after their

release. Higher recidivism rates are also associated with harsh prison conditions as well as with incarcerating young persons alongside adults.¹ As a result, the graduated sanctions approach makes it less likely that a young criminal will reengage in criminal and violent behavior after he or she has received due process in the legal system.²

By intervening early with appropriate sanctions and support, the graduated sanctions approach can halt a juvenile's slide into criminality. These sanctions can help the offender to understand the consequences of his or her negative behavior and to learn how to avoid repeating it. In addition to preventing youth offenders from coming into contact with "hardcore" offenders, these alternative sanctions also help delinquents to avoid acquiring a juvenile court record that may further jeopardize their future. Thus, graduated sanctions can simultaneously deter crime, protect the public, and rehabilitate young offenders. Youth courts have proven to be an effective way of implementing the graduated sanctions approach. In addition to the aforementioned benefits, youth courts provide delinquents with opportunities to learn about responsible citizenship and the law as well as to develop skills in public speaking and mediation. These courts can also help communities to recover any losses they may have sustained as a result of juvenile crime, can restore confidence and pride in local young people, and allow families to reengage in a positive dialogue with their children, which can further prevent risky behavior. Another important benefit of this approach is that it can reduce court backlogs without increasing recidivism.

Research Findings: Providing the Evidence Base

Few countries have experimented with graduated sanctions, so virtually all of the different models and research are based on experiences in the United States, where *Community Accountability Boards* (CABs) are a popular way of implementing this approach. Under this system, prosecuting offices send first- and second-time youth offenders to CABs. Typically, delinquents, accompanied by a guardian, stand before a board for one hour to discuss the diversion process (the process that enables the offender to avoid going to court and/or jail) as well as the reasons why the youth committed the offense and impact of that offense on the community. After the CAB formulates a diversion agreement, a juvenile case manager is appointed to monitor the offender's compliance. As a successful model from Thurston County, Washington, demonstrates, such programs, in addition to cutting recidivism rates in half, can save taxpayers an estimated US\$2,775 of justice system costs per participant.³

Youth courts are quickly becoming the most popular method for delivering the graduated sanctions approach in the United States, with more than 1,200 programs currently in operation, up from only 78 in 1994. About 10 percent of all juvenile arrests are now reviewed in youth courts (or an estimated 125,000 youth offenders per year), and another 100,000 young people benefit from their participation as volunteers. Evaluations of these courts have demonstrated that the returns on investment are immediate. More than 80 percent of youth offenders have successfully completed their sentences even in programs that have only been in operation for two years.⁴ Most important, the evidence makes it clear that youth courts lower recidivism rates. A 2002 national evaluation concluded that young, first-time offenders handled by youth courts were less likely to commit another crime than those dealt with in traditional juvenile court programs.⁵ In Alaska, recidivism among youth offenders whose cases were handled by youth courts was 6 percent compared with 23 percent among those handled by the traditional justice system. In Missouri, it was 9 percent versus 27 percent, in Arizona, it was 9 percent versus 15 percent, in Texas, it was 25 percent versus 36 percent, and so on.⁶ Furthermore, many youth courts report that over 20 percent of youth offenders return as volunteers.⁷ While the United States is the only country so far to introduce youth courts, other countries, such as England and New Zealand, have now begun pilot programs.

Drug and gun courts are other American models for implementing graduated sanctions. In drug courts, which are part of the juvenile court system, a designated judge reviews selected delinquency cases and closely oversees each case in frequent status hearings that include all of the various parties involved. A team comprised of representatives from treatment, juvenile justice, social services, school, and vocational training

programs works together to determine how best to address the young person's substance abuse and related problems. The success of this strategy lies in the systematic management and ongoing supervision of the offender. Across the United States, juvenile drug courts report reductions in positive drug tests among probationers and lower rates of recidivism than among young people whose cases are handled by the traditional justice system.⁸ Juvenile gun courts operate in almost exactly the same way as drug courts, and similarly their offenders have shorter probation times and lower rates of recidivism than young offenders who go through the criminal justice system. An intensive four-year evaluation of a program in Birmingham, Alabama, revealed that there had been significantly lower recidivism rates for young people in the gun court than those in traditional courts (17 versus 40 percent). The evaluation also credited the program with contributing to a 54 percent reduction in juvenile gun charges and a 57 percent decrease in violent crime rates in the city between 1995 and 1999, following steady increases during the preceding five years.⁹

Moving Forward: Factors for Success

- ***Policies allowing for second chances must be balanced*** against the need to deter violence.
- ***Sanctions must be consistent and have graduated consequences*** for misbehavior and must recognize and reward positive behavior. Furthermore, ***youth defendants must clearly understand the sanctions*** that they face and should have no doubt that the sanctions will be enforced.
- ***Graduated sanctions must be applied flexibly*** in recognition of the fact that punishment alone does not make a young person accountable. Likewise, it is necessary to assess where each youth is in developmental terms and to build on each youth's individual strengths.
- ***As part of the sanctions approach, young people must be provided an assortment of highly structured activities***, including education and/or hands-on vocational training and skill development. Programs must also encourage the young person to develop healthy bonds with, and respect for, pro-social members of his or her family, peer group, school, and community, and should also include management training for parents of young offenders who have exhibited persistent aggressive or disobedient behavior.
- Successful implementation largely depends on strong ***community participation***.
- ***Youth courts must adapt to local needs*** in terms of where they are located (for example, in a juvenile justice building, an NGO facility, or a school) and their operational model (for example, an adult judge, a youth judge, a peer jury, or a youth tribunal).
- ***Local justice systems must budget enough resources to measure a program's outcomes*** in terms of the behavioral changes of the young participants (such as recidivism rates, the reoccurrence of alcohol and drug abuse, academic performance, and employability trends) as well as to make any necessary implementation or structural changes within each individual program.

Endnotes

1. Ryan, Liz, and Jason Ziedenberg, eds. 2007. *The Consequences Aren't Minor: The Impact of Trying Youth as Adults and Strategies for Reform*. Washington, D.C.: Campaign for Youth Justice.
2. Redding, R. 2000. "Graduated and Community-based Sanctions for Juvenile Offenders: Juvenile Justice Fact Sheet." Institute of Law, Psychiatry, & Public Policy, University of Virginia, Charlottesville, VA.
3. U.S. Department of Justice. 1999. "Focus on Accountability: Best Practices for Juvenile Court and Probation." Juvenile Accountability Incentive Block Grants Program Bulletins. U.S. Department of Justice, Washington, D.C.
4. Pearson, S., and S. Jurich. 2005. "Youth Courts: A Community Solution to Embracing At-Risk Youth." American Youth Policy Forum, Washington, D.C.
5. Pearson and Jurich 2005.
6. Butts, J., J. Buck, and M. Coggeshall. 2002. "The Impact of Teen Court on Young Offenders." The Urban Institute, Washington, D.C.
7. Pearson and Jurich 2005.
8. U.S. Department of Justice. 2006. "Drug Courts: The Second Decade." National Institute of Justice Special Report. U.S. Department of Justice, Washington, D.C.
9. Sheppard, D., and P. Kelly. 2002. "Juvenile Gun Courts: Promoting Accountability and Providing Treatment." Juvenile Accountability Incentive Block Grants Program Bulletin. U.S. Department of Justice, Washington, D.C.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Graduated sanctions, youth courts, and other evidence-based rehabilitation policies should reduce recidivism among offenders, particularly if most efforts are community-based and if there is less reliance on incarceration. • Both strategies can benefit the juvenile justice system by reducing court backlogs without increasing recidivism.
Secondary Effects	Rehabilitation programs for young people should enhance their educational and vocational skills, which will increase their participation in the labor force and enhance their understanding of their citizenship rights and obligations.
Responsible Actor/ Sector	Ministries of Education, Labor, or Justice; the Attorney General; NGOs
Targeted Risk Group	Youth at risk level III who are involved in legal disputes and/or have been remanded to the supervision of the juvenile justice system.
Targeted Age Group	Core age group of young people aged 12–24
Cost Elements	<ul style="list-style-type: none"> • The average budget for a youth court program in the United States is approximately US\$32,767 per year. • The costs of community-based rehabilitation programs average US\$8,000/year per youth in the United States, while incarceration averages over US\$50,000/year per youth. Day treatment and monitoring of delinquent youths are both also more cost-effective than mandatory sentencing. • Financial restitution by offenders to their victims, as well as any community service that they may do, can lower the overall costs of graduated sanctions programs.
Necessary Initial Conditions	<ul style="list-style-type: none"> • Institutional and public support for the local resolution of disputes through official channels as well as for the rehabilitation (as opposed to punishment) of offenders • Adequate resources to provide a range of community-based rehabilitation opportunities for less serious offenders so that only serious/violent offenders are incarcerated
Specific Examples	<ul style="list-style-type: none"> • Youth courts • Community Accountability Boards • Drug and gun courts
Level of Effectiveness (Strong Evidence or Emerging Evidence)	<ul style="list-style-type: none"> • United States: Graduated sanctions approach—Strong evidence • United States: Youth courts, Community Accountability Boards, drug and gun courts—Strong evidence • Rehabilitation programs that emphasize cognitive-behavioral techniques—Strong evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Community participation in any graduated sanctions approach is critical. • Programs must be flexible to respond to local conditions.

Promote Anti-violence Messages in All Media, Particularly Targeted to Males and Young People

Promoting anti-violence messages in the media can help to prevent youth violence by changing social norms related to the different types of violence that affect young people, including corporal punishment, interpersonal violence, domestic or gender abuse, and aggressive attitudes relating to masculinity. In addition to delivering educational messages, media campaigns can reach out to a large number of perpetrators of violence, especially youth at risk, who are typically not enrolled in school and are, therefore, beyond the reach of school-based programs. To reach all youth, successful anti-violence campaigns use as many media sources as possible, including television, radio, print, and the Internet. While such efforts can affect young people's attitudes to and knowledge of violence, there is no guarantee that media campaigns will change youth behavior. Therefore, to be successful, mass media campaigns must be accompanied by other interventions at the community level. Among the diverse strategies that have been used in different countries are thematic television shows and dramas (including soap operas) in which young actors model positive behaviors, promotional songs, behavior journalism (professionals or specialists working with the media to try to persuade the general public to behave less violently), celebrity promotional events, information and reporting hotlines, school-based activities, and traditional advertising.

How Does Promoting Anti-violence Messages in all Media Prevent Risky Youth Behavior?

Promoting anti-violence messages in the media can change social attitudes about violence as well as equip young people with conflict resolution skills. First and foremost, mass media campaigns can change negative social norms into positive ones. In families or communities where violence is tolerated or even valued, children grow up to see it as an acceptable response to a variety of circumstances. For instance, many countries view corporal punishment in schools and severe physical punishment of children as appropriate, and even required, responses to their transgressions, but research has shown that such responses increase the likelihood that those children will become aggressive and violent themselves.¹ Other social norms that can have a negative influence on young people's behavior include defining manhood as having a lot of sex with women and acting violently toward them, associating gun possession with respect, and believing that interpersonal violence is an acceptable way to resolve conflicts.² Community-wide campaigns have succeeded not only in altering public perceptions about violence but also in preventing risky behavior by young people whose actions and attitudes are greatly influenced by the behavior of their parents, families, and fellow community members.³ In addition to influencing norms, mass media campaigns can also educate young people about the dangers associated with engaging in violence and teach them skills to avoid confrontational situations.

Research Findings: Providing the Evidence Base

Numerous media campaigns have successfully influenced social attitudes and norms related to violence. One successful example is Colombia's *Let's Talk, Cali!* Using behavioral journalism, the program was featured in regular television, radio, and newspaper reports in high-violence neighborhoods in which people, including many young people, described their own decisions to reject violence and to use peaceful means to resolve conflict. The program promoted such role models in newsletters and in street radio programs that allowed young people to express their desire for peace and to discuss strategies for resolving conflicts. The program also disseminated information about parenting skills and advocated the rejection of punitive child discipline practices. An evaluation of the program has shown that it had a positive impact on the attitudes and skills of the target audience. In particular, the neighborhoods that participated in the program, which were once

known for murder and violent crime, are now seen by their own residents and those of other neighborhoods as communities in which many people avoid violence.⁴

Another example of a successful anti-violence media campaign program is in Australia. Launched in 1998 in response to increasing violence in the country, the *Freedom from Fear* program targets anti-violence messages to at-risk males through television and radio commercials, newspaper advertisements, community posters, a Web site, and a toll-free violence hotline. The hotline provides counseling, information, and referrals to help males to change their violent behavior. Whereas the first phase of the campaign focused on physical violence, later stages have concentrated on reducing domestic, sexual, and emotional abuse. An impact evaluation revealed that *Freedom from Fear* has reached 90 percent of the target population and that it has had a positive impact on male attitudes toward and knowledge of violence.⁵

Another impressive campaign is South Africa's *Soul City*. This multimedia health promotion and social change project uses "edutainment" to affect social norms, attitudes, and practices about violence. Each week it reaches an estimated 16 million people, including 80 percent of all young people between the ages of 16 and 24, through popular television dramas and radio broadcasts as well as through the distribution of millions of informational booklets distributed in local newspapers. Focusing on a specific theme every year, *Soul City* has so far promoted anti-violence messages related to domestic abuse, abusive relationships, and interpersonal conflict. Evaluations of the program have consistently shown that viewers and readers are now more aware of health risks and healthy choices, including those related to violence.⁶

In addition to influencing social norms, promoting anti-violence messages in the media can also disseminate information about skills for avoiding violence. One such example comes from the United States. The *Squash It!* campaign was designed to prevent youth violence by suggesting some skills and attitudes to help young people to walk away from confrontation and by making such nonviolent actions socially acceptable. The campaign employed a subtle, nonintrusive approach to reach young persons by incorporating the use of *Squash-It!* in many popular television programs. Logos, posters, and hand signals depicting the catchphrase were also used on local television and radio stations, as well as in advertisements. One evaluation has shown that the program had some significant successes. For example, 72 percent of African-American teenagers (the group at highest risk of violence) were aware of the campaign and 60 percent had used the phrase to disengage themselves from potentially violent situations.⁷

Moving Forward: Factors for Success

- ***Messages must come from many sources***, and they must be consistent, be linked to real issues, give viable alternatives to violence, and be repeated over a long period of time.
- ***Anti-violence campaigns*** targeted to young people ***must start early***, before children have had a chance to develop stable attitudes and beliefs.
- ***Campaigns must take into account the ability of young people to absorb the messages***, given their varied levels of education and skills.
- ***Mass media interventions must be complemented by additional resources***, such as counselors, telephone hotlines, discussion groups, and other community activities, because individuals who not only receive messages through the media but also participate in educational sessions are more likely to change their behavior.
- ***Anti-violence messages must be combined and coordinated with other prevention efforts and social policies***, such as firearms control, media violence regulations, drug enforcement activities, parenting courses, and youth development initiatives, among others.
- ***Distribution of items*** such as clothing, pens, and stickers printed ***with the relevant message*** can be helpful in places where the population has little exposure to the media.
- ***It is crucial to monitor the impact that campaign messages have on behavior***, for example, by keeping track of incidents of violence among young people, the frequency of corporal punishment,

the spread of violence prevention skills, changes in social attitudes toward violence and masculinity, and perceptions of security in targeted areas. These indicators can also be used to adjust how the program is being implemented if necessary.

Endnotes

1. Widom, C. 1989. "Does Violence Beget Violence? A Critical Examination of the Literature." *Psychological Bulletin*, 106(1): 3–28.
2. Moser, C., and J. Holland. 1997. "Urban Poverty and Violence in Jamaica." *Latin American and Caribbean Studies: Viewpoints*. World Bank, Washington, D.C.
3. U.S. Department of Health and Human Services. 2001. "Youth Violence: A Report of the Surgeon General." Washington, D.C.
4. Muñoz, E., M. Gutiérrez, and R. Guerrero. 2004. "Evaluación del impacto de una Estrategia de Información, Educación y Comunicación para la Prevención de la Violencia." Ministerio de la Protección Social de Colombia. Universidad del Valle, Instituto CISALVA, Cali, Colombia.
5. Gibbons, L., and D. Paterson. 2000. "Freedom from Fear Campaign against Domestic Violence: An Innovative Approach to Reducing Crime." Paper presented at the Conference "Reducing Criminality: Partnerships and Best Practice" in Perth, July 31 to August 1.
6. Muirhead, D., L. Kumaranayake, and C. Watts. 2001. "Economically Evaluating the 4th Soul City Series: Costs and Impact on HIV/AIDS and Violence against Women." Institute for Health and Development Communication, Johannesburg and the London School of Hygiene and Tropical Medicine. See also Soul City Institute: <http://www.soulcity.org.za/>.
7. Harvard School of Public Health Center for Health Communication. 1999. "The 'Squash It' Campaign to Prevent Youth Violence." Harvard University, Cambridge, MA.

Key Implementation Considerations	
Anticipated Outcomes	<ul style="list-style-type: none"> • Reduced youth and community violence • Reduced possession of firearms • Reduced public support for violence as an effective and necessary strategy for social relationships • Move toward pro-social and peaceful conflict resolution within community life
Secondary Effects	<ul style="list-style-type: none"> • Safer neighborhoods and communities • Increase in peaceful resolution of conflicts between young people • Safer school environments • Increased citizen participation and improved community life
Responsible Actor/Sector	Federal agency responsible for public service messages, Ministries of Education or Communications, mass media, law enforcement agencies, community-based organizations
Targeted Risk Group	Types I, II, and III
Targeted Age Group	<ul style="list-style-type: none"> • 0–18 • Adults within the community
Cost Elements	
Necessary Initial Conditions	<ul style="list-style-type: none"> • Existence of mass media outlets (print, radio, TV) • Youth access to media information • Political will to discuss violence issues at the national or at least the community level • Commitment from the local and national media to examine how violence is promoted through programming and advertisements and to developing alternate programming to promote peaceful conflict resolution and social relations • Cooperation between government ministries to create public campaigns
Specific Examples	<ul style="list-style-type: none"> • <i>Let's Talk Cali!</i> (Colombia) • <i>Freedom from Fear</i> (Australia) • <i>Soul City</i> (South Africa) • <i>Squash It!</i> (United States)
Level of Effectiveness	Strong evidence
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Anti-violence programs will be most effective if combined and coordinated with other prevention efforts and social policies. They must also address real issues related to families, schools, and young people, should be sustained over time, and should provide young people with viable alternatives to lives of violence and crime. • A long-term anti-violence campaign will require the support of all sectors of the government (municipal, provincial, and federal) and of the media.

Provide Birth Certificates for Undocumented Young People

For a range of economic, legislative, political, administrative, geographic, and cultural reasons, many births in developing countries go unregistered. Providing birth certificates to undocumented young people can help them to avoid feeling socially excluded and can protect them from a series of related negative outcomes. In these countries, policy makers must overcome the various obstacles that families face when acquiring birth certificates by strengthening civil registry institutions and processes. While there is no direct evidence that the lack of birth registries leads to risky behavior by young people, they may be an important element in reducing feelings of exclusion and hostility and, thus, antisocial behavior among at-risk youth.

Some effective strategies for registering all undocumented people include the following: (i) raising awareness of birth registration as a child's right and gaining the commitment of all stakeholders to this goal; (ii) ensuring coordination among relevant government ministries and institutions at all levels; (iii) creating the necessary infrastructure to reach the entire population; (iv) providing birth registration as part of the delivery of public services, especially health care, education, and anti-poverty programs; and (v) building the capacity of the existing birth registry system. At the outset, policy makers should garner the necessary political support for legislation on birth registration that reflects local realities. Another early move that policy makers should make is to offer birth registration and certificates free of charge. To be successful, registration initiatives must be innovative, flexible, involve all levels of society, and combine different strategies. Also, if universal registration is to be achieved, special efforts must also be made to reach the most vulnerable children, whose families tend to face the greatest barriers to registering their children's births.

How Does Providing Birth Certificates to Undocumented Young People Prevent Risky Youth Behavior?

A birth certificate is a permanent, legal, and visible recognition by the state of a child's existence as a member of society. It is also the prerequisite for obtaining any other legal documents. When citizens can prove their identity, they become entitled to basic services and rights that underpin their ability to keep healthy, receive an education, stay safe, and earn a living. Conversely, the lack of an established identity is often the first step in a lifetime of "invisibility." Because undocumented citizens do not exist in the eyes of the government, they cannot access social services or exercise citizenship rights. While denying children access to education limits their development and employment opportunities in the long term, denying them access to health services and immunizations can have grave and even fatal effects much earlier.

As undocumented children get older, their lack of a legal identity makes it difficult for them to enter the formal labor market and can expose them to illegal labor practices, harassment by police officers, and unfair judicial processes. In some instances, it may also make them more likely to be married or conscripted as a minor. Moreover, having no legal identity makes it almost impossible to access credit, open a savings account, get a passport, inherit property, or vote in elections, not to mention exercise other basic rights that are available to documented citizens. Being denied just one of these options limits the number of opportunities that will be available to these children throughout their lifetimes.

Unequal access to basic social services is both a consequence and a cause of exclusion. This is particularly true for children because it sets them on a dead-end trajectory of low productivity and earnings potential from which it is difficult to escape. While unregistered children are predominantly from poor, marginalized, or displaced families in places where there are no functioning birth registration systems, most undocumented children grow up to be undocumented adults who tend to be excluded from the formal labor market and

from participating in society in general. Furthermore, social invisibility, coupled with stark inequalities of opportunity, can prevent young people from developing a positive sense of who they are and of what they can achieve. Consequently, they may be tempted to engage in antisocial behavior as an outlet for their resentment against the society that is excluding them. Therefore, the most fundamental way to ensure that young people start off in life with the same opportunities is to make sure that they all receive birth certificates that give them legal identities and full citizenship rights.

Research Findings: Providing the Evidence

There is a plethora of international experience regarding ways to strengthen civil registry systems. While the most effective way of doing this varies in terms of each country's national characteristics and the specific weaknesses in their systems, this section highlights some of the successful approaches that have been adopted by different countries around the world.

Raising Awareness and Gaining Stakeholder Commitment. In India, a birth registration campaign was launched in the 1990s, which has now developed into a well-established program that operates in 15 different languages. The campaign uses television and radio spots, posters, stickers, billboard messages, and documentary films to transmit messages about the importance and benefits of registration.¹ In Madagascar, a national movement to promote birth certificates and ID cards carried out a massive door-to-door campaign to inform parents, authorities, and children of their unalienable citizenship rights and to promote mass registration sessions.² In Bangladesh, the government has held a national Birth Registration Day to highlight the importance of registering and to advertise the fact that registration is free.³ Similarly, the Philippine government has designated each February as “civil registration month.”⁴

Ensuring Coordination. In Argentina, an Inter-Institutional Committee was established to coordinate the work of the national and provincial bodies concerned with birth registration, which included the Ministry of Health and the National Institute of Statistics and Census.⁵ In Jordan, coverage of registration has been significantly increased by automating and decentralizing the registration system so that documents and vital statistics can be issued and shared by any field office and across different agencies.⁶ And in Bangladesh, the Election Commission makes its database available to local government institutions to facilitate birth registration processes.⁷

Reaching the Entire Population. The Brazilian government sends boats into the maze of the Amazon's waterways as mobile one-stop providers of services (including birth registration) that would otherwise be beyond the reach of some 1.5 million Brazilians.⁸ Chile dispatches three state-of-the-art vans and a marine unit, all equipped with computers and satellite links to the central registry, to remote areas and islands to register undocumented children.⁹ While most countries have less sophisticated equipment than Chile, more than 30, including Colombia, Ecuador, and Iran, have been using traveling registrars to search for unregistered children and issue birth certificates for more than a decade.¹⁰ Many countries have also adopted special strategies to establish communication with and gain the trust of undocumented minority groups. For example, Peru employs indigenous registrars in the Amazon region, Thailand has established a minorities registration service, Panama allows self-governing indigenous groups to register their own community members, and the Philippines uses special registration forms and procedures that conform with the Islamic customs of different groups.¹¹

Integrating Birth Registration with Other Services. In Ghana, community-based surveillance systems in districts where guinea worm is endemic have the additional advantage of making it possible to carry out universal birth registration as well as detect guinea worm cases.¹² In Chile, *Programa Puente*, a component of the umbrella poverty alleviation program, *Chile Solidario*, provides families with personal support to help them to resolve any registration problems.¹³ The *Vitamin A Nutrition Campaign* in India also promotes birth registration.¹⁴ In Bangladesh, birth registration has become interlinked with immunization services and with primary- and secondary-school enrollment processes.¹⁵ Uganda's revitalized registration system, which

registered an impressive one million children in its first year of operation, issues free birth certificates with health messages printed on the back.¹⁶ In numerous other countries, teachers are responsible for registering children who do not already have birth certificates.¹⁷

Capacity Building. Many countries, including Argentina, Colombia, Egypt, Panama, Jordan, and Thailand, have increased the skills of registrars by giving them additional training, providing them with handbooks, and increasing their supervision.¹⁸ To cite one exemplary model, the Philippines has carried out a series of initiatives to train and motivate local registrars, including a biannual national convention and an ordinance that makes civil registrars career employees and gives awards for the best performers. These measures have been given credit for the large increase in birth registration in recent years.¹⁹

Moving Forward: Factors for Success

- ***Political will is needed*** to implement change in the interest of undocumented children.
- Before devising a strategy, ***the under-documentation problem must be diagnosed*** using relevant data derived from existing or new surveys, censuses, and other initiatives.
- ***Impact evaluations are needed*** to rigorously assess the effect of documentation programs on specific outcomes, including educational achievement, health, and employment of those who had been undocumented and have now been registered.
- The program should ensure that ***all levels of society are persuaded of the importance of documenting all citizens*** to stimulate informed demand from the population for birth registration services.
- ***Messages encouraging people to seek birth registration services*** should be appropriate in form and content and should also be provided in minority languages.
- ***Compulsory registration should be introduced carefully and gradually***, allowing time to build the necessary capacity at the registrar level, and should be flexible enough to allow for late registration.
- The extent to which ***ministries and institutions concerned with civil registration coordinate and cooperate*** at all levels is an important element of the success of any birth registration system.
- Whether a national registry system is centralized or decentralized, it is essential that it sets up as many ***local registry offices*** as possible to ensure that the whole country is covered.
- ***Health services should not be burdened with the task of record keeping or issuing birth certificates***; responsibility for this task should be given to local registration offices.
- ***Policy makers need to be convinced that birth registration is necessary*** and that it can be cost-effective in terms of providing a ready source of important population data, thus reducing the need for expensive ad hoc surveys.
- ***The government must make a commitment*** to continuing to invest in the birth registration system so that it does not become obsolete and unsustainable.

Endnotes

1. Gonzalez-Diaz, Violeta. 1998. "Civil Registration and Vital Statistics Systems. Report on a Mission to India, Vietnam and Thailand." United Nations Statistics Division, United Nations, New York, NY.
2. UNICEF. 2004. "For Every Child, a Birth Certificate." Press Center, June 4th. United Nations, New York, NY.
3. UNICEF. 2007. "Birth Registration Day Helps Ensure Basic Human Rights in Bangladesh." News Center, July 10th. United Nations, New York, NY.
4. Philippine National Statistics Office: <http://nsolaunion.sflu.com/press/civilreg.htm>.
5. Giusti, A., G. Alvarez, D. Fridman, and S. Triano. 2001. "The Importance of Birth Registration in the Production of Reliable Statistics: Interinstitutional Coordination and Improvement of Vital Statistics in Argentina." National Institute of Statistics and Census (INDEC), Buenos Aires, Argentina.
6. UNICEF Innocenti Research Center. 2002. "Birth Registration: Right from the Start." *Innocenti Digest* February 24th. United Nations, New York, NY.
7. UNICEF. 2007. "Bangladesh Declares First Ever National Birth Registration Day." Press Center, July 3rd. United Nations, New York, NY.
8. Inter-American Development Bank (IDB). 2006. "Hidden in Plain Sight: Undocumented Citizens in Latin America." *Ideas for Development in the Americas (IDEA)*, Volume 8. IDB, Washington, D.C.
9. IDB 2006.
10. Dow, Unity. 1998. "Birth Registration: the 'First' Right." In *The Progress of Nations*. New York: UNICEF.
11. UNICEF Innocenti Research Center 2002.
12. UNICEF Ghana. 2000. "Annual Report." Accra, Ghana.
13. IDB 2006.
14. UNICEF Innocenti Research Center, 2002.
15. UNICEF 2007.
16. Government of Uganda/UNICEF. 2000. Government of Uganda-UNICEF 2001–2005 Country Program: Birth and Death Registration. Uganda.
17. UNICEF Peru. 2000. "Annual Report." Lima, Peru.
18. UNICEF Innocenti Research Center 2002.
19. UNICEF Innocenti Research Center 2002.

Key Implementation Considerations	
Anticipated Outcomes	Fewer people excluded from accessing basic social services and rights
Secondary Effects	<ul style="list-style-type: none"> • Improved health and education of population • Less discrimination and neglect of “invisible” groups • More social participation and citizen activity • Less deviant behavior by excluded groups
Responsible Agency/Actor	National Institute of Statistics and Census, Ministries of Health or Education
Targeted Risk Group	Universal, but focused on marginalized children and young people
Targeted Age Group	0–18
Cost Elements	Widely differs according to country and strategy employed: US\$2.12 per child in Madagascar; US\$0.20 per child in Bangladesh
Necessary Initial Conditions	<ul style="list-style-type: none"> • Political will to make birth registration a priority • Existence of local registry offices that geographically cover most of the country
Specific Examples	<ul style="list-style-type: none"> • Bangladesh, India, Madagascar, and the Philippines: Raising awareness and gaining stakeholder commitment • Argentina, Bangladesh, and Jordan: Ensuring coordination • Brazil, Chile, Panama, Peru, the Philippines, and Thailand: Reaching the entire population • Bangladesh, Chile, Ghana, India, Peru, and Uganda: Integrating birth registration with other services • The Philippines: Capacity building
Level of Effectiveness	Emerging evidence—no formal evaluations to date of the impact of birth registration on risky behavior
Issues to Consider for Replication and Sustainability	<ul style="list-style-type: none"> • Demand for birth registry and birth certificates can be met by increasing administrative coordination and promoting top-down, bottom-up approaches that involve actors from all levels, especially at the grassroots and community levels. • Variety, flexibility, and innovation are critical to reducing the numbers of undocumented people. • Resources can be maximized by integrating birth registration with other services such as education or immunization programs. • Short-term campaigns to register children may be valuable, but the overall aim must be to establish a permanent and sustainable birth registration system; ongoing investments are therefore imperative.

MOVING FROM WISH LIST TO ACTION # 1

Assigning and Coordinating Institutional Responsibilities

Given the multidimensional and cross-sectoral nature of youth interventions, it follows that the implementation of any such program is likely to need to be coordinated by government ministries across several different sectors. Each actor's contribution to the youth portfolio can be maximized by assigning institutional responsibilities according to the expertise of each player or, in other words, according to his or her comparative advantage. This will ensure that programs are implemented efficiently and that they have the greatest possible impact.

Designing and implementing youth development projects often involves many actors, including the central government, local governments, nongovernmental organizations (NGOs), private sector organizations, families and communities, and even young people themselves. Each has a specific role to play based on the skills and the resources that they possess in the context of youth policy. Sweden has set a good example of how youth policy can be coherently conceived and implemented by many actors. Because the 1980s, Sweden has developed a coherent national framework for youth that is incorporated into national policy planning as well as implementation mechanisms to put this framework into practice.¹

How to Develop and Implement a National Youth Policy: The Case of Sweden

Sweden's successful youth policy is characterized by the following:

- ***A high level of integration into national planning and implementation at all levels.*** Swedish youth policy is well integrated into national policy planning and budgeting processes. All sectors that affect young people are expected to help achieve Sweden's youth policy objectives.
- ***Well-developed capacity.*** The institutions that monitor the living conditions of young people are well equipped to work together in terms of capacity. Most of the responsibility for monitoring the living conditions of young people in Sweden rests with municipalities. A special agency, the Swedish National Board for Youth Affairs, supports municipalities in developing their youth policies and monitors progress toward the achievement of the objectives of national youth policy. The Board encourages young people to influence and participate in its discussions.

Source: Forum 21—European Journal on Youth Policy. Available at: <http://www.coe.int/youth/forum21>.

There are two stages involved in assigning responsibilities based on comparative advantage. The first stage is to identify the comparative advantage of each actor by evaluating each actor's resources, knowledge, and ability. The second part of the process is to match the aspects of the project with the specific abilities of each actor or agency. Thereafter, the difficult task of collaborating begins.

The Central Government

The central government makes policy at the macro level. It is in charge of entire policy sectors consisting of a collection of diverse bureaucracies, courts, public and private interest groups, local providers, clients, and individual actors, and its responsibility spans from the national to the local level.²

The central government not only sets national policy agenda and makes the rules but also has the influence, budget, and authority to require that the rules are carried out. Being a centralized governing body has some intrinsic advantages: (i) control over the country's purse strings, which means that the government can provide the necessary resources and incentives for the program to operate; (ii) technical expertise, not only in policy making and law making but also in collecting and monitoring of all types of data and in program evaluation methods; and (iii) overarching policy making, specifically in this case, setting the broad priorities for youth development. Of course, making policy differs from implementing it at the local level, where the central government has less direct leverage.

Given the national government's comparative advantage in all things broad and country based, its role in youth development should accordingly focus on the following main areas:

- **Developing overarching strategies that set forth priorities for youth advancement across the country.** The role of the central government should be to **place the youth agenda within the country's broader social and economic framework** and to ensure that initiatives are not duplicated. While local needs will determine specific policies and programs at the subnational level, some needs and rights cut across all geographic and socioeconomic segments of society. Given the central government's comparative advantage in overarching policy making, it is best positioned to take the lead in designing and passing these types of policies into law.
- **Providing the necessary budgetary resources** to the local governments and other actors to implement these policies. Because the central government controls the country's purse strings, it is in a unique position to use and allocate these resources to finance programs implemented by other actors and to provide incentives for cross-sectoral collaboration.
- **Collecting and managing the data needed to monitor the progress the implementation of the youth agenda and to evaluate the impact of youth programs.** Again, because the central government controls the purse strings, it should be responsible for the costly but necessary activity of data collection and analysis. Furthermore, by ensuring that information collected from around the country is both comparable and of good quality, the national statistics office can provide program managers with valuable information for targeting programs to the poorest and/or most at risk.
- **Designing the strategy for spending on youth programs,** including the reallocation of resources away from ineffective or cost-ineffective programs to those that have proven to be successful and cost effective.

Local Governments

Local governments have the advantage of (i) receiving continuous feedback that informs them of the unmet needs in their communities, (ii) knowing which organization can best meet those needs, (iii) having sufficient information about both constituents' needs and the capacity and strengths of local organizations to bring them together, and (iii) having a direct line of communication to central government agencies.

Local governments are well placed to provide public services to young people and to develop close working relationships with other local organizations that provide services to at-risk youth. Their specific responsibilities should include the following:

- **Serving as an intermediary between the national government and the agencies that are implementing youth programs at the local level.** Whereas central governments treat young people as a homogenous population, local governments are better able to distinguish among the various challenges that face their young constituents and can communicate these to the central government. They can also describe and explain central government initiatives to the local implementing organizations and to young people themselves.

- **Developing locally appropriate youth investment strategies** that are consistent with national priorities but are tailored to local needs. While the national government is best positioned to consider overall rights and needs, conditions differ from region to region in any country, to the extent that each locality should have its own specific strategy for youth development. Local governments are in the best position to identify and design these strategies at the local level because of their knowledge of local needs and conditions.

An example from the Latin America and Caribbean Region (LAC) shows how key services, in this case crime prevention, can be managed more effectively at the municipal level than at other levels. The Inter-American Development Bank has made loans to the Colombian cities of Cali, Medellin, and Bogota to finance public safety and violence protection programs. These loans are guaranteed by the national government but will be paid back by the cities. In addition to the responsibility of repaying the loan, the cities are responsible for designing and implementing the programs.³

Other Actors

Four nongovernmental groups play a significant role in implementing programs targeted to at-risk youth—the private sector, local NGOs, communities, and families. Each plays its own unique role in aiding at-risk youth and helping them achieve better outcomes in life.

The private sector is important because of its wealth of resources and the opportunities that it can provide to local young people. Specifically, it plays the following key roles:

- **Providing financing for activities that complement governmental programs.** The business community benefits from a productive labor force and a peaceful environment, and therefore it is in the interests of private companies to invest in their local communities. Supplementing the meager resources that governments can make available for youth programs makes good business sense for companies as an investment in the livelihoods and human capital of the communities from which they draw their employees.
- **Serving as a role model for young people.** The business community can provide young people, particularly those who are most at risk, with experiences and mentoring to help them to integrate into adult society. This may take the form of mentoring those who have no positive role models or of internships, training programs, and other employment opportunities.

NGOs are, perhaps, the key players in youth development across the world. One of their advantages lies in the fact that they are usually locally based and small so they know and regularly interact with local authorities. Because they have day-to-day contact with the young people whom they are serving, they are often more knowledgeable than any other player about who needs what type of service. These advantages suggest the following roles:

- **Providing inputs to and feedback on the government’s strategic youth development plan.** The agencies that implement programs are in the best position to assess whether the strategies developed by the national government are actually working, in terms of addressing the issues facing young people in their communities and attracting their intended beneficiaries.
- **Acting as primary implementing agency for youth development programs.** Given the close links that NGOs have with at-risk youth, their location in the heart of communities, and their hands-on approach, these organizations are best placed to design and implement programs by and for young people. While these youth programs are supported by the central and local governments, NGOs are the key players for implementing them at the grassroots level.

Families and communities are the starting point for all positive youth development in that they play a key role in creating a safe and positive environment within which young people can grow and prosper. They can do this simply by being present in the lives of local young people and, whenever possible, participating in youth programs to strengthen their positive effects. Young people are affected and influenced first and foremost by their families and communities, which means that these actors have the unique ability to contribute to the youth agenda in the following ways:

- **Giving feedback to governments and NGOs** both on the distinctive needs of the young people in their area and on the quality of services provided. While NGOs are aware of the broad status of the young people in their communities, families are aware of the deeper challenges that those young people face. Thus, feedback from parents, caregivers, and the community is a vital input into the design of youth strategies and programs at the national level.
- **Encouraging young people to take advantage of the programs and services that are available to them.** Parents and caregivers have a strong influence on young people and thus are in a good position to encourage them to participate in youth development programs and to take advantage of every opportunity that is available to them.

Young People

Young people themselves can play a crucial role in identifying the risks that many of their peers face as well as in helping to develop, implement, monitor, and evaluate effective strategies and programs at all levels. It is still rare for young people to be highly involved in decision making **at any level**, but it has been established that including young people in this process has numerous benefits. Young people understand the challenges that their generation faces better than anyone else. Furthermore, they alone can truly assess whether a program will actually benefit its intended beneficiary group. These advantages point to two principal roles for young people in the youth portfolio:

- **Participating in the design of programs and strategies.** Because young people understand the reasons why they or some of their peers engage in risky behavior and the kinds of interventions that are most likely to persuade them to behave differently, their input into the design phase of any youth strategy or program is essential and greatly increases the likelihood of it succeeding.
- **Implementing programs.** Young people have a role to play in implementing programs and in the case of some programs may even be the best placed actors to do so, particularly those young people who have themselves already faced and overcome the challenges being faced by the program's beneficiaries.

None of the actors identified above can design a youth strategy or program on their own. Instead, each must work in partnership with the others, making the contribution that it is best suited to make and accepting and supporting the contributions of others. While collaborating with others is more demanding than running a program alone, it has the potential to have a greater impact and to be more cost effective and sustainable in the long run.

Endnotes

1. World Bank. 2006. *World Development Report 2007: Development and the Next Generation*. World Bank, Washington, D.C.
2. Berman, Paul. 1978. "The Study of Macro-and Micro-Implementation." *Public Policy* 26(2): 157–84.
3. Guerrero Velazco, Rodrigo. 2000. "Violence Control at the Municipal Level." Technical Note 8. Inter-American Development Bank, Washington, D.C.

MOVING FROM WISH LIST TO ACTION # 2

Taking Resources away from Ineffective Programs and Reallocating Them to Programs that Work

Because of the scarcity of public resources, it is often not realistic to expand the youth portfolio by increasing spending. The only alternative is to ensure that the money that is already allocated to the portfolio is spent more efficiently. This means that policy makers need to allocate spending to those programs and activities that have been proven to be effective in achieving their intended goals and to be having the greatest impact per dollar. This is called allocative efficiency.

Recent research has found that, in practice, many of the most popular programs targeted to at-risk youth in countries across the world have either failed to improve the lives of these young people or, even worse, have led them to engage in even riskier kinds of behavior. Nevertheless, many of these programs continue to exist simply because they seem to show that politicians are taking action to solve some of the problems for which at-risk youth are held responsible, notably crime and violence.

Therefore, policy makers should consider scaling back or eliminating several common strategies from their youth-at-risk portfolios and reallocating these resources to the effective programs discussed in other sections of this toolkit. Six ineffective approaches are listed below.

Get Tough Programs

In the get tough approach, when young people are accused of committing acts of crime and violence, they are treated as adults in the judicial system and, once convicted, are thus incarcerated in adult, rather than juvenile, prisons. The rationale behind this approach is to get tough on crime and to take juvenile offenders off the streets and put them behind bars for longer periods of time. At face value, this may seem like a good strategy for fighting crime and violence, especially among young people. However, a series of evaluations in the United States has shown that young people placed in adult correctional institutions are eight times more likely to commit suicide, five times more likely to be sexually assaulted, twice as likely to be beaten by staff, and 50 percent more likely to be attacked with a weapon than those in juvenile prison facilities.^{1, 2, 3, 4}

Research also shows that even when young people are put in juvenile prisons, their incarceration is highly correlated with future criminal behavior. In fact, given the way in which most correctional centers are set up, young people in prison learn more about criminal behavior than about how to reform and change their lives.^{5, 6} Furthermore, research has shown that juvenile confinement reduces the chance that troubled young people will successfully make the transition into adulthood. They achieve less academically and are employed more sporadically than their peers who were sentenced to programs focused on drug treatment, individual counseling, or community service.⁷

There are more effective and less costly alternatives to the get tough approach, such as targeted individual rehabilitation or local community services for young people. These have been shown to reduce re-arrests, reduce imprisonment, and increase the likelihood that young people will pay restitution, complete community service, and successfully complete probation,⁸ thus allowing them to begin to make a successful transition into adulthood.

Boot Camps

This type of program is a widely used alternative to youth incarceration that is often mislabeled as a “rehabilitation” program. Instead of being sent to prison, young people who have committed a crime are sent to these boot camp programs, which aim to teach discipline through rigorous physical activity. So far, no boot camp has been proven to have had a statistically positive impact on either youth behavior or recidivism.⁹

Zero Tolerance/Shock

These programs aim to “shock” students into not wanting to pursue a life of crime and/or drugs by exposing them to the stories of prison inmates and other trained officials about how hard life is in prison and the negative effects of drugs. No program of this kind has yet been proven to be effective in achieving this aim. In fact, research has shown that these programs have had either neutral or negative effects on youth behavior and outcomes.¹⁰ In addition, both the boot camp and zero tolerance models suffer from the effects of deviant peer influences; in other words, vulnerable young people are likely to become more delinquent through their association with other young criminals.¹¹

Gun Buy-back Programs

Gun buy-back programs are very popular in many countries in the developing world, but research from the United States has found that they are costly and ineffectual.¹² These programs are thought to fail for two reasons. First, they rarely reach their target audience, often attracting guns from those who are not a threat to public safety (for example, guns are turned in by people who have kept them safely in the home and have not used them in any kind of criminal activity).¹³ Second, these programs may inadvertently give gun offenders a way to obtain cash to purchase more expensive and more lethal weapons.

Firearms training and legal requirements for gun ownership and registration have not significantly reduced firearm-related crime either. If policy makers want to focus on weapons, then one promising policy is to reduce the availability and use of guns (as in the United States and Colombia), which has been proven to be effective in the context of violence perpetrated by and against young people¹⁴ (see General Policy # 2).

Repeating School Grades

When students are not performing up to the necessary standard in school, education policy makers can choose to require them to repeat a grade—in other words, not promote them to the succeeding grade with the rest of their classmates. Studies of this nonpromotion strategy have yielded negative effects on student achievement, attendance, behavior, and attitudes toward school. In some cases, this approach can actually increase risky youth behavior.^{15, 16, 17} However, promoting an underachieving child has also been shown to be problematic. The only effective alternative seems to provide remedial support to teach students the material that they have missed or failed to assimilate to ensure they do not fall further behind academically (see Promising Approach #1).

Abstinence-only Programs

Abstinence-only programs attempt to dictate people’s sexual behavior by offering abstinence as the only alternative to preventing HIV, other STIs, and pregnancy among adolescents. While it is clearly one option for preventing these social ills, research from OECD countries has demonstrated that abstinence-only programs have had no lasting impact on the sexual activity or risks taken by young people.^{18, 19} In fact, studies have found that, when those young people who pledge themselves to remain abstinent do engage in sexual activity, they are less likely to use contraception than those who have not made an abstinence pledge.^{20, 21}

Building Youth Centers versus Using Existing Spaces

One of the most popular policies for helping youth at risk in recent years has been the construction of youth centers. However, this activity is very costly and, according to existing research, has little to no effect on reducing risky behavior among young people. It appears that programming matters more than infrastructure in terms of having a positive effect on young people. In particular, research has shown that youth activities supervised by caring adults can have a positive impact on young people's development across a range of important skills and kinds of behavior. Furthermore, the high cost of constructing youth centers has led researchers in Mexico to conclude that youth centers are less cost effective than other community-based programs for reaching youth at risk.²² A better investment would be to spend these resources on training adults to provide supervised activities for young people in existing buildings such as schools or community centers (see Promising Note # 4).

Eliminating these ineffective programs can be difficult for several reasons. For example, they are often supported by the local community or by particular interest groups. Also, some approaches (such as the get tough programs) often give politicians a reputation for being problem solvers, because these kinds of programs appear on the surface to be a cheap way to fix a complex problem. However, it appears necessary to take resources away from these ineffective programs and to reallocate them to the effective programs discussed in other sections of this toolkit to decrease risky youth behavior and to increase the efficiency of public expenditure on young people.

Endnotes

1. WHO. 2002. *World Report on Violence and Health*. Geneva: World Health Organization.
2. U.S. Surgeon General. 2001. "Youth Violence: A Report of the Surgeon General." U.S. Department of Health and Human Services, Washington, D.C.
3. Bishop, D. 2000. "Juvenile Offenders in the Adult Criminal Justice System." In M. Tonry, ed., *Youth Violence. Crime and Justice: A Review of Research* (Vol. 27, pp. 81–168). Chicago: University of Chicago Press.
4. Bishop, D., and C. Frazier. 2000. "The Consequences of Waiver." In J. Fagan and F. E. Zimring, eds., *The Changing Borders of Juvenile Justice: Transfer of Adolescents to the Criminal Court* (pp. 227–276). Chicago: University of Chicago Press.
5. Tyler, Jasmine L., Jason Ziedenberg, and Eric Loetke. 2006. *Cost Effective Corrections: The Fiscal Architecture of Rational Juvenile Justice Systems*. Washington, D.C.: The Justice Policy Institute.
6. Benda, B. B., and C. L. Tollet. 1999. "A Study of Recidivism of Serious and Persistent Offenders Among Adolescents." *Journal of Criminal Justice* 27(2): 111–126.
7. Homan, Barry, and Jason Ziedenberg. Forthcoming. *The Dangers of Detention: The Impact of Incarcerating Youth in Detention and Other Secure Congregate Facilities*. Baltimore, MD: Annie E. Casey Foundation.
8. Tyler, Ziedenberg, and Loetke 2006.
9. Results of extensive surveys on youth boot camps show that these types of programs must have myriad factors in place to attain cost savings and/or reduce recidivism. None of the programs that have been evaluated contains all of these program elements. Thus, while the impact results are not encouraging, it is possible that, if the model is implemented in its entirety, it may have a positive impact.
10. U.S. Surgeon General 2001.
11. Dodge, Kenneth A., Thomas J. Dishion, and Jennifer E. Lansford. 2006. Deviant Peer Influences in Intervention and Public Policy for Youth. *Social Policy Report* 20(1).
12. Tyler, Ziedenberg, and Loetke 2006.
13. More evidence needs to be gathered on the effectiveness of such programs in the specific context of post-conflict contexts and demobilization projects.
14. Villaveces A, P. Cummings, V. E. Espitia, T. D. Koepsell, B. McKnight, and A. Kelleman. 2000. "Effect of a Ban on Carrying Firearms on Homicide Rates in Two Colombian Cities." *Journal of the American Medical Association* 283(9): 1205–1209.
15. U.S. Surgeon General 2001.
16. World Bank. 2006a. *World Development Indicators 2006*. Washington, D.C.: World Bank.
17. World Bank. 2006b. "Crime, Violence, and Economic Development in Brazil: Elements for Effective Public Policy." World Bank, Washington D.C.
18. World Bank. 2006c. *World Development Report 2007: Development and the Next Generation*. New York, NY: World Bank and Oxford University Press.
19. Kirby, D. 2001 "Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy." National Campaign to Prevent Teen Pregnancy. Washington, D.C.
20. Bruckner, Hannah, and Peter Bearman. 2005. "After the Promise: The STD Consequences of Adolescent Virginity Pledges." *Journal of Adolescent Health* 36(4): 271–278.
21. Fortenberry, J. Dennis. 2005. "The Limits of Abstinence-Only in Preventing Sexually Transmitted Infections." *Journal of Adolescent Health* 36(4): 269–270.
22. Townsend J. W., E. Díaz de May, Y. Sepúlveda, Y. Santos de Garza, and S. Rosenhouse. 1987. "Sex Education and Family Planning Services for Young Adults: Alternative Urban Strategies in Mexico." *Studies in Family Planning* 18(2): 103–8.

The Importance of Evaluating Youth Interventions

“...the dearth of rigorously evaluated youth-oriented programs and policies can undermine (their) credibility...”

World Development Report 2007

As noted in the World Bank’s 2007 *World Development Report*,¹ very little is known about the quality or impact of youth interventions because very few programs have been carefully evaluated. As a result, program officials, policy makers, and the community in general have only limited information about how best to implement programs for at-risk youth, about which program features are the most effective, and even which programs yield the greatest benefits. Therefore, in practice, most youth programs are selected and designed on the basis of anecdotal evidence, interviews with potential participants, and the program designer’s personal predilection. Yet, for youth programs to succeed and yield lessons for policy makers and other stakeholders, they must be carefully planned, well implemented, and rigorously evaluated, and the lessons learned from those evaluations must be widely disseminated.

Rigorous, well-controlled evaluations can be expensive. Program officials, especially those managing small projects on limited budgets, may be reluctant to spend their scarce resources on evaluating the program rather than on providing more essential services or more training or compensation to their underpaid and dedicated staff. Unfortunately, failing to invest in evaluation can be shortsighted and self-defeating because it means that lessons cannot be learned or applied to ongoing or other programs. Without evaluations, it is impossible to understand the full impact of our interventions on those whom they are designed to serve. We must be able to understand two things: (i) are we doing the right thing, and (ii) are we doing it well?

The terms “monitoring” and “evaluation” are often used jointly and are abbreviated as M&E. However, they are quite different. Monitoring can be thought of as measuring the process of an intervention, while evaluation involves assessing its impact. Both are essential to the success of a program. Ideally, both monitoring and evaluation should be carried out as an integral part of the program from the outset rather than as an afterthought or a way to showcase its success. In fact, it is extremely difficult to evaluate a program if the evaluation begins only as the program is coming to an end. While such ex post evaluations can be used to inform the design of future programs, their conclusions come too late to be used to modify and improve the program that has just ended.

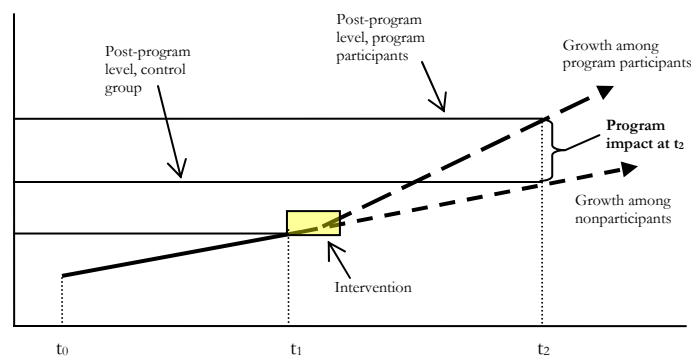
The goal of impact evaluation is to understand what consequences the intervention has had on the program’s participants. It presumes that the program was implemented as intended—for instance, that employees have performed the tasks for which they were hired and the services were delivered as expected. However, this may not always be the case. If there are any problems in the program’s implementation, then this will confound the impact evaluation. If an evaluation finds that a program had no positive results, this may be because the program was ineffective or because it was poorly implemented. This is the purpose of process evaluation, or monitoring.

Process evaluations should be carried out during each phase of the program’s implementation to assess whether the program is actually carrying out its intended activities. Problems inevitably arise and activities are rarely implemented exactly as planned. The job of the evaluators is to understand what has happened in the program in practice, and clearly it is better to obtain this information during the course of implementation rather than relying solely on program documents after the fact.

What Is an Impact Evaluation and What Does It Measure?

Impact evaluations assess any changes in the well-being of individuals, households, communities, or firms that can be attributed to a particular project, program, or policy. In addition to increasing the accountability of policy makers and program managers, impact evaluations yield lessons that policy makers can then use to improve ongoing programs and ultimately to allocate funds more effectively among programs. The key question that impact evaluations seek to answer is what would have happened to those participating in the intervention if they had not participated in the program. Because it is not possible to observe the same group experiencing both the presence and the absence of an intervention, the key challenge is to develop a counterfactual—in other words, a group of people who are as similar as possible in both observable and unobservable dimensions to those who participated in the intervention. Comparing the outcomes experienced by the participating group with those experienced by the control group makes it possible to establish definitive causality (in other words, to attribute any observed changes in welfare to the existence of the program) while removing any potentially confounding factors. As depicted in figure 1, the program's impact equals the difference between the observed outcome and an estimate of the outcome had no program been available.

Figure 1. A Program's Impact—Levels of and Changes in Outcomes



Those in the control (or comparison) group should be as similar as possible to those in the participating group in every respect except that they do not participate in the program. It is important to plan for this in the evaluation, ideally by randomly assigning the eligible population to either the treatment and control groups (for example, by lottery) or by using some rule to select people to be in those two groups as long as this rule does not also affect the goods or services delivered by the program.² With clear and thorough planning, it should be possible to avoid any ethical concerns about denying program participation to any given group of people. In cases where the program will offer its services to different groups of participants sequentially, those who participate later can be used as a control group for the earlier participants, providing that the order in which the services are offered is random.

It is common to compare outcomes for the same individuals both before and after they have participated in the intervention, but this can often produce misleading results. This method produces a “counterfeit counterfactual”—in other words, one that does not accurately reflect what would have happened to the individual during the same time period in the absence of the program. This can yield an incorrect estimate of the program's impact and may cause analysts to come to erroneous conclusions.

How Do We Identify Relevant Outcomes and Indicators?

Ultimately, any program should improve the lives of the young people who participate in it, whether by reducing their risky behavior, improving their academic achievement and progress, or helping them to obtain and retain career jobs in growth industries. The outcomes and indicators to be evaluated should be chosen based on the specific goals and activities of the program in question. Outcomes are observable characteristics of the program's beneficiaries and, whether they materialize in the short or the long term, they should be associated with measurable indicators. In devising an evaluation strategy, program planners should bear in mind the difference between outcomes and outputs. Outputs are the goods and services provided by the program to the beneficiaries, whereas outcomes are the changes observed in those beneficiaries as a result of the program. For instance, one measure of the output of a training program is the number of young people who actually receive the training, while one of the direct outcomes is any changes in the employment status of those young people. Program planners need to keep in mind both direct and indirect anticipated outcomes when deciding which indicators to measure. For example, a program that increases the likelihood of employment and income among youth may also have an effect on the participants' risk behavior. Also, they should be open to the possibility that the program may produce some completely unexpected outcomes. For example, in an evaluation of a program that aimed to reduce dropout rates by providing students with uniforms, Duflo et al. (2006) found that the program also—unexpectedly—reduced pregnancy rates among the program's participants.³

Youth interventions are often difficult to evaluate as they are generally diffuse in nature and scope and have outcomes that cover several different sectors,⁴ making it difficult to isolate the impact of each individual component. Difficult as this is, it is essential to do so because information on each component of a youth intervention helps policy makers to identify the optimal combination of youth investments. Comprehensive interventions may be preferable to narrow sectoral ones, but we can't always be sure which components in what combination are necessary to achieve the desired outcomes.

Similarly, interventions aimed at children and young people can have consequences that only materialize well into the future or are not directly related to the intervention itself. For example, high-quality early childhood development immediately improves children's health, nutrition, and education but can also reduce delinquency, teen pregnancy, and incarceration and increase employment status and earnings among those children in their later youth and adulthood. This one intervention yields benefits in at least four different areas—health, education, crime and justice, and labor—during the participants' lifetimes.

Young people are often more difficult to study than adults. They are an unusually mobile group, moving from one place to another without warning and making use of many different services from various organizations and localities. Therefore, program planners need to make some provision for tracking individuals in the evaluation sample. Also, interviewing minors raises both logistical and ethical concerns. Because minors cannot be expected to give informed consent to participate, they should not be interviewed without the consent of their parents; however, this must be balanced by the need to maintain and protect their privacy. These challenges must be addressed, for example, by sharing the questionnaire (but not the answers) with parents to obtain consent for a private interview with the young person. These steps ensure that the evaluation is carried out in an ethical way and that the program's outcomes are adequately measured.

What Are the Elements of a Good Evaluation?

Good evaluations of youth development programs should at minimum include the following features:

- a description of the intervention, including its planned activities, methods of delivery, duration, and expected outcomes
- clearly defined goals and indicators that directly reflect those goals (outcome indicators)
- clearly defined indicators of how well the program is being implemented (process indicators)

- a baseline survey of the population being studied, both treatment and comparison (control) groups, which ideally should be conducted before individuals are assigned to each group
- the identification of a comparison group that is as similar as possible to the treated group in all key observable characteristics (random assignment is preferable but is not always possible)
- periodic follow-up surveys both to monitor process and to evaluate outcomes
- a careful accounting of all the program's costs (which is often overlooked but is essential to understanding whether the program is successful in economic terms as well as in strictly outcome terms)

In sum, impact evaluations are essential for testing the effectiveness of interventions that are designed to improve the lives of young people by establishing whether or not there is a causal link between the intervention and its anticipated outcomes. By providing critical feedback on which interventions work and which do not, impact evaluations can improve the design and outcomes of all future youth programs.

Endnotes

1. World Bank. *World Development Report 2007: Development and the Next Generation, 2007*. Washington, D.C.: World Bank.
2. Proper evaluation requires that the process of assignment to either treatment or control group does not also affect the intervention that is provided to the treatment group; this is the requirement of *unconfoundedness*.
3. Duflo, Esther, Pascaline Dupas, Michael Kremer, and Samuel Simezi. 2006. "Education and HIV/AIDS Prevention: Evidence from a Randomized Evaluation in Western Kenya." Background paper for the *World Development Report 2007*. World Bank, Washington, D.C.
4. World Bank. 2007. "Evaluating Youth Interventions." *Youth Development Notes* 2(5).

MOVING FROM WISH LIST TO ACTION # 4

Selecting Programs Based on Cost-Effectiveness and Cost-Benefit Analysis

How do we know if it is worthwhile to spend scarce tax resources on a particular strategy or program? How can we choose between alternatives? Is any intervention always better than none? Much of the work discussed in this toolkit is conducted by agencies acting in the public trust. These agencies have an obligation to measure the returns to alternative investments, to understand the returns to the expenditure of public funds, and to invest public resources as effectively and efficiently as possible. In principle, a policy is worth adopting when its benefits exceed its costs, and it is preferable to others when it produces the greatest net benefit, for a given expenditure. But how do we measure costs and benefits? How do we account for the fact that costs and benefits accrue to different groups, or at different times? This note will discuss two related tools used to measure the social returns to investments: cost-effectiveness (CE) and cost-benefit (CB) analysis. The main difference between them is that CE analysis usually denominates benefits in physical units, whereas CB denominates benefits in money equivalent terms.

The first thing to know is whether the policy is **effective**: that is, does it produce a positive outcome? This isn't as easy or obvious as it sounds. Many programs are undertaken without any evidence of effectiveness. For example, it is common to conduct evaluations on the basis of program outputs, rather than outcomes. But one condom distributed does not translate into one condom used, or into one less case of HIV. A program can train a hundred young people in alternative conflict resolution methods, but that doesn't in itself guarantee a decline in youth violence. It is important that the CE or CB analysis be conducted in terms of outcomes—for example, the number of HIV infections prevented, or the number of young people employed, relative to the number there would have been in the absence of the intervention. Ideally, this information would come from a well-controlled impact evaluation study (see From Wishlist to Action # 3).

The next task is to measure program **costs**. This is essential for both CE and CB analysis. In principle, it's a matter of measuring quantities of inputs (Q), prices of inputs (P), and multiplying to get the total ($C=Q*P$). But the devil is in the details. First, there is the distinction between *financial* costs and *economic* costs. *Financial* costs are simply the amount of money that is spent on inputs. This assumes that any input for which the project does not actually pay has a cost of zero. But there's a problem with that assumption. Volunteer time, for example, can have many uses. It can produce program outputs, or it can be used for entirely different purposes unrelated to the program. The *economic* cost of free inputs is the value of the best alternative use of those inputs: this is known as the *opportunity* cost of the inputs. Strictly financial accounting of costs ignores the true value of these ostensibly free goods.

Second, there is the distinction between *average* and *marginal* costs. *Average* costs are the total expenditure divided by the number of things produced (or outcomes achieved). *Marginal* costs are the amount of money you'd have to spend to produce one more unit of output, or achieve one more target outcome. This can be approximated by the total cost of producing n outputs minus the total cost of producing $n-1$ outputs. This matters partly because of the related distinction between *fixed* and *variable* costs. *Fixed* costs are the expenditures incurred before you can produce even the first unit of output: buildings, licenses and fees, and so on. These fixed expenditures are things you need only spend money on once; after that, you can produce n units of output without having to spend money on them again (until you run out of physical capacity). *Variable* costs are the costs of actually producing the outputs, once the fixed costs have been incurred. These include staff, electricity, and disposable or consumable items (such as condoms, syringes, or office supplies). Average costs are computed using the sum of fixed and variable costs; marginal costs are usually computed using variable costs only. Average costs usually decline as the volume of output increases; marginal costs may

be going up or down, and are a better indicator of how much a program would have to spend if it wants to expand output.

Third, it is important to consider the cost of the money that is used to provide these benefits—the *cost of public funds*. Say the program is funded through general taxes, on income or on goods. Income taxes have a direct impact on the welfare of the population, and goods taxes increase the costs of production, part of which decreases the returns to producers and part of which is passed on to consumers. It is also essential to understand the opportunity cost of these funds. What would be the best alternative use of the money? The computation of total costs must consider these effects: what is the direct cost to the population, what are the indirect costs in terms of changes in the prices of goods and services, and what are the consequences for economic growth.

Finally, one must consider how to *discount* future costs (as well as benefits). If the program will continue to produce services over time, it is important to understand today what the costs will be over the life of the program. Higher discount rates will reduce the present value of future costs and benefits. At a discount rate of zero, the present value of the total cost of a 30-year program that spends \$100 per year is \$3,000; at a discount rate of three percent, the present value is about \$2,000, and at a discount rate of six percent it is about \$1,000. It is important that as future costs are discounted, so are future benefits. The present value of the benefits of a program that only begins to produce results in later years is lower, other things being equal, than a program that produces results more quickly. Whatever discount rate is used, it is important to consider both long-term and short-term costs and benefits. Programs that appear effective in the short term may have long-term negative consequences, such as the *mano dura* strategies that promote youth incarceration, reduce crime in the short term but ultimately lead to greater recidivism and more serious crime in the longer term.

Once we have estimates of costs, we can estimate the program's **cost-effectiveness**; that is, the volume of outputs per dollar spent on the program. The effects are measured in physical units. Ideally, they are the intended goals that the program, for example the number of HIV cases averted. In practice, the measures used are often proxies for these goals, often in terms of program outputs, such as the number of young people who receive training, or the number of condoms distributed.¹ It can be argued that any program that is cost-effective is worth undertaking. But because we have a responsibility to use public resources efficiently, we must be able to compare the cost-effectiveness of a range of plausible alternative uses of the resources. If we are trying to decide among different ways of producing the same type of output, we can compute cost-effectiveness ratios and choose the one that produces the greatest outcome per dollar spent.

However, CE is limited in that it denominates the benefits of an intervention in unit terms. This does not allow us to understand whether the value of the benefits exceeds the cost of producing them. It may be that even though the program benefits many people, the net value of the benefit is small—and even smaller than the cost of the program. This is the role of CB analysis. It is important to understand that even though a program is cost-effective, it may not be cost-beneficial.

CB analysis is also useful to compare interventions in unrelated areas that might advance the ultimate goals more effectively. This kind of analysis can help policy makers both choose a potential policy direction and evaluate an already implemented program in comparison with others. For instance, improved welfare can be obtained through investments in clean water that yields better health; it can also be obtained by increasing school enrollments. Which is preferable? CB analysis involves measuring otherwise noncomparable outcomes in similar terms—that is, the value of the flow of benefits to program recipients and others.

In addition, CB analysis permits the comparison of programs whose benefits and costs accrue to different people. How can we compare improvements in well-being across households? For example, both greater access to clean water and expanded access to primary health care are beneficial. But they will probably improve the health of different households differently, depending on their status and composition, and even of different household members. One advantage of understanding the costs and benefits accruing to different

groups in the economy is to see who can be expected to gain (and therefore support the policy) and who may lose (and thus oppose it).

Decisions on the general direction of policy or investment are often taken for political rather than economic reasons. Cost-effectiveness analysis can be used when the outputs or general direction of investment have already been decided, and when the outcomes are clearly defined and measurable—for instance, when the goal is “increased enrollment,” and the analysis is geared to finding the best of a similar set of tools that can achieve that goal. Cost-benefit analysis can be used to compare the relative value, in money terms, of the costs of achieving a specific, measured increase in enrollment and the value of that increased enrollment to the individual beneficiaries and to society. A total net increase in enrollment can be described in money terms—as a function of the increased wages that beneficiaries might command, the decrease in risk behaviors that education confers, and so forth. Yet even when the general direction of policy has been decided, it is still useful to understand the net social benefit of the policy decision; it may even be negative.

Determining the value of the benefit delivered to participants is often difficult and contentious. In the case where the good or service has a market price, the task seems simple. As with costs, the task is to compute the product of the value of the benefit (V) and the number of people who receive it (N) to get the total benefit ($B=V*N$). In many cases, such as education and skills training, but also health care investments, direct benefits can be estimated in terms of increased wages and the greater likelihood of employment. In principle, one should adjust for the possibility that an increase in the supply of skilled workers may reduce their wages in the labor market, which in turn reduces the number of people interested in receiving the training. There are many examples of subsidies that reduce prices sufficiently to discourage domestic production and encourage wasteful consumption.

There are many cases where the market price is not available, or is not a good indicator of the social value of the benefit. For example, the market for the good or service may not function well, or may not even exist. There is no private market—and hence no external valuation—for reductions in social exclusion or abuse, or improved self-esteem. Items may also have significant *externalities*: that is, the benefits accrue to those who don’t pay for them directly, such as clean air and water, or crime reduction. The direct benefits accrue to those whose houses and businesses are not burgled; but others benefit through improved feelings of personal safety; all of these can lead to changes in property values, investments, and growth.² These longer-term and less tangible impacts are difficult to measure directly.

Where market prices don’t exist or are poor indicators of value, it may be possible to estimate value using other methods. *Hedonic pricing* infers values for attributes that make up a composite good or service. To take the crime reduction example mentioned above, even though there is no market for crime, changes in crime do lead to changes in property values. Neighborhood crime rates can be thought of as an attribute of the house, just as neighborhood schools or parks. The value of crime reduction is obtained by comparing the prices of properties that are similar in every way, but differ in crime rates. *Contingent valuation* (CV) methods ask people what they would be willing to pay to achieve or avoid a certain outcome, or what compensation they would require to put up with it. CV methods are common in environmental economics, but are tricky to implement. They require carefully-tested questionnaires and sensitivity analysis, because the answers obtained can change depending on the wording or order of questions. “How much would you pay to save the whales?” elicits a very different response from “How much would I have to pay you so that you wouldn’t object to having all the whales killed?”

Unfortunately, there are few robust studies of the cost-effectiveness or cost-benefit of youth investments. Most focus on education and nutrition interventions, and some evidence exists on the benefits of youth employment programs and on crime prevention, although here the evidence is primarily U.S.-based. Here we present a few examples of interventions with robust evaluations and good CB analyses:³

De-worming in Rural Primary Schools in Kenya. This study was designed to identify cost-effective interventions to improve schooling outcomes at the primary level. The study randomized the timing of the introduction of de-worming treatment across 75 schools. The treatment significantly reduced disease prevalence, and increased school attendance by about seven percent. The study estimated that discounted benefits are over US\$30 per treated child, primarily from gains in lifetime income. This implies that the benefits are more than 60 times greater than costs, based on an estimated cost of US\$0.49 per treated pupil.

Scholarships for Poor Secondary School Students in Urban Colombia. This program provided vouchers for children from poor families to attend private secondary schools in selected urban areas in which public schools were already enrolled to full capacity. The vouchers were randomly assigned to students by lottery. After three years, lottery winners had completed more schooling (due to reduced repetition rates), and scored higher on standardized tests than students who had not received the vouchers. Depending on the discount rate used, the benefits of the program are estimated to be 1.4 to 3.8 times program costs.

A Youth Training Program (Programa Joven) in Argentina. This program provided intensive skills training to poor unemployed youth, male and female, with limited education and without work experience. The program reimbursed participants for their transportation expenses, provided a stipend for women with children under five, medical checkups, books, materials, work clothing, and an eight-week internship in a firm. The program yielded significantly improved earnings for male youth (16–20) and female adults (21–35), and improved the probability of finding employment among female adults. For these two groups, the present value of benefits exceeds costs after 9–12 years. However, for all participants, or if a higher discount rate and longer time horizon are used, the present value of costs exceeds the benefits.

Studies of youth crime interventions strongly support the contention that both prevention and rehabilitation are much more efficient and effective than incarceration; but even among the more successful categories of intervention there are many programs that did not yield positive benefits.⁴ Similarly, a recent review conducted by the World Bank of 289 youth employment interventions found that only 10 contained sufficient information to conclude that they had a positive impact and were cost-effective.⁵

Perhaps most important, both of these studies found that evaluations that were conducted using weaker methods were more likely to find favorable results. Rigorous impact evaluation and strict cost-benefit standards lead us—correctly—to reject false or weakly founded claims of program success. This should not be an excuse for inaction, but a strong motivation for further research.

Endnotes and Further Reading

1. It is extremely important to acknowledge the limitations of such proxies. The hypothesized link between the proxy, or “proximate cause,” and the intended outcome must be clearly stated. One condom distributed does not mean that one condom is used.
2. Note that changes in property values partly reflect these other changes, so including all of them is likely to be double-counting. These changes in property values are useful for *hedonic* valuation methods.
3. Knowles, J.C., and J.R. Behrman. 2005. “The Economic Returns to Investing in Youth in Developing Countries: A Review of the Literature.” Health, Nutrition, and Population Discussion Paper. World Bank, Washington, D.C., January.
4. Aos, S., R. Lieb, J. Mayfield, M. Miller, and A. Pennucci. 2004. “Benefits and Costs of Prevention and Early Intervention Programs for Youth.” Washington State Institute for Public Policy, Olympia, WA.
5. Betcherman, G., M. Godfrey, S. Puerto, F. Rother, and A. Stavreska. 2007. “A Review of Interventions to Support Young Workers: Findings of the Youth Employment Inventory.” SP Discussion Paper Number 0715. World Bank, Washington, D.C., October.

References on the returns to youth investments

1. Knowles, J.C., and J.R. Behrman. 2003. “Assessing the Economic Returns to Investing in Youth in Developing Countries.” Health, Nutrition and Population Discussion Paper. World Bank, Washington, D.C., March.
2. Knowles, J.C., and J.R. Behrman. 2004. “A Practical Guide to Economic Analysis of Youth Projects.” Health, Nutrition and Population Discussion Paper. World Bank, Washington, D.C., November.

References on cost-benefit and cost-effectiveness analysis

1. Campbell, H.F., and R.P.C. Brown. 2003. *Benefit-Cost Analysis: Financial and Economic Appraisal using Spreadsheets*. Cambridge: Cambridge University Press.
2. Gramlich, E. 1997. *A Guide to Benefit-Cost Analysis*, 2nd edition. Long Grove, IL: Waveland Press.
3. Layard, R., and S. Glaister. 1994. *Cost-Benefit Analysis*, 2nd edition. Cambridge: Cambridge University Press.

MOVING FROM WISH LIST TO ACTION # 5

Benchmarking Progress for Youth at Risk against International Data Sources

One of the keys to creating and refining a country's comprehensive youth policy portfolio is to understand and monitor the status of today's youth as it currently exists and as it changes over time. Table 1 presents a set of youth indicators currently available to help policy makers and program administrators better understand, monitor, evaluate, and respond to the challenges facing at-risk youth.¹ This list is by no means exhaustive, and several additional indicators could be worth gathering depending on the specific objectives of a given country's youth policy or programming.

Table 1 includes information derived from internationally recognized multilateral sources on various sectors (such as health, education, and employment) and risk behaviors (such as substance abuse, crime, and violence), as well as environmental factors that affect youth. The table is categorized by (i) sector/risk area, (ii) specific available indicator, and (iii) data availability, specified by region, country, and time period.

Table 1. Youth Indicators

Sector	Available Youth Relevant Indicators	Regions	Countries (#)	Time Periods	Source/Remarks
Health	– Adolescent fertility rate (thousands) ²	All	174	2000–05	UNICEF ChildInfo
	– Births by age group of mother, ³ 15–19 and 20–24 (thousands)	All		1995–2050	DESA, WPP: 2004 Revision and WPP: 2003 Revision
	– Age-specific fertility rates ⁴ , 15-19 and 20-24	All		1995–2050	Ibid.
	– HIV prevalence among youth, by gender (15–24) (%)	All	112	2001	UNFPA SOWP 2003
	– HIV prevalence among pregnant women (15–24) (%)	No data available	No data available		MDG target 18
	– HIV prevalence among pregnant women (15–24) in major urban areas (%)	Africa	19	1999–2002	UNDP HDR 2003 MDG target 18
	– HIV prevalence among pregnant women (15–24) outside major urban areas (%)	Africa	9	1999–2002	UNDP HDR 2003 MDG target 18
	– Median HIV prevalence among pregnant women (15–24) in countries with adult prevalence over 1% (%)	Mainly Africa	30	2002 2001 2000 1999 1995	UNICEF SOWC 2004 MDG target 18 All different years
	– Median HIV prevalence among pregnant women (15–24) in capital cities in countries with adult prevalence over 1% (%)	Africa and Cambodia	13	2002 2001 2000 1999	UNICEF SOWC 2004 MDG target 18
	– Median HIV prevalence among pregnant women (15–24) in other urban areas in countries with adult prevalence over 1% (%)	Africa and Cambodia	17	2002 2001 2000 1999 (all different)	UNICEF SOWC 2004 MDG target 18
	– Median HIV prevalence among pregnant women (15–24) in rural areas in countries with adult prevalence over 1%	Africa and Cambodia	20	2002 2001 2000 1999 (all different)	UNICEF SOWC 2004 MDG target 18
	– % of pop. 15–24 with comprehensive correct knowledge of HIV/AIDS, Females G	Developing countries	38	1996–2000	UNICEF SOWC 2004 MDG target 19
	– % of pop 15–24 that knows that condoms can prevent HIV, Females G	Developing + CIS countries	68	Developing + CIS countries	UNICEF SOWC 2004 MDG target 19

Sector	Available Youth Relevant Indicators	Regions	Countries (#)	Time Periods	Source/Remarks
Health	- % of pop 15–24 that knows that condoms can prevent HIV, Males	Developing countries	16	1996–2000	UNICEF SOWC 2004 MDG target 19
	- % of pop 15–24 that knows healthy looking person can have HIV, Females G	Developing countries	78	1996–2000	UNICEF SOWC 2004 MDG target 19
	- % of pop 15–24 that knows a healthy looking person can have HIV, Males	Developing countries	35	1996–2000	UNICEF SOWC 2004 MDG Target 19
Sector	Available Youth Relevant Indicators	Regions	Countries (#)	Time Periods	Source/Remarks
Education	Secondary education:				
	- Gross enrollment ratio in secondary education, ⁵ male (%)	all	178	1998–2000 1997–2000	UNFPA SOWP 2003 UNICEF SOWC 2004
	- Gross enrollment ratio in secondary education, female (%)	all	178	1998–2000 1997–2000	UNFPA SOWP 2003 UNICEF SOWC 2005
	- Net enrollment ratio in secondary education, ⁶ total (%)	all	131	2000–2001 1999–2000 1998–1999 1990–1991	UNDP HDR 2003
	- Net enrollment ratio in secondary education, female (%)	all	122	2000–2001 1999–2000 1998–1999	UNDP HDR 2004
	- Literacy rates among 15–24, by gender (%) G	all	133	2001 1990	UNDP HDR 2003 MDG target 8
	- Ratio of girls to boys in secondary education (ratio) G	all	173	2000–2001 1999–2000 1998–1999	UNDP HDR 2003 MDG Indicator 9 All different years
	- Net enrollment ratio of girls to boys in secondary education (ratio) G	all	122	2000–2001 1999–2000 1998–1999	UNDP HDR 2003
	- Gross enrollment ratio of girls to boys in secondary education (%) G	all	177	1997–2000	UNICEF SOWC 2004
	- Ratio of female to male enrollment in primary and secondary school (%) G	all	127	2000 1990	World Bank WDR 2004
	- Ratio of literate females to males 15–24 (ratio) G	Almost all	133	2001 1990	UNDP HDR 2003 MDG Indicator 10 133 countries for both years
	- Ratio of literate females to males 15–24 (%) G	Almost all	131	2001	UNDP HDR 2003 MDG target 10
	- Ratio of adult literacy rates of females to males, total 15+yr (%) G	all	149	2001 2000	UNDP HDR 2003 UNICEF SOWC 2004
	- Pupil teacher ratio in secondary education (ratio)	all		1998–2004	UNESCO statistical database
	Tertiary education:				
	- Gross enrollment ratio in tertiary education, female (%)	all	122	2000–2001 1999–2000 1998–1999	UNDP HDR 2003
	- Ratio of girls to boys in tertiary education (ratio) G	all	141	2000–2001 1999–2000 1998–1999	UNDP HDR 2003 MDG target 9 All different years
	- Gross enrollment ratio of girls to boys in tertiary education (ratio) G	all	129	2000–2001 1999–2000 1998–1999	UNDP HDR 2003
	- Tertiary students in science, math, and engineering (%)	all	101	1994–1997	UNDP HDR 2003
	- Pupil teacher ratio in tertiary ⁷ education (ratio)				UNESCO statistical database
- Education Index ⁸	All	175	2001	UNDP HDR 2003	

Sector	Available Youth Relevant Indicators	Regions	Countries (#)	Time Periods	Source/Remarks
Employment	- Economically active population, by level of education and age group (thousands)	most	69	various	ILO LABORSTA database
	- Youth labor force participation rate ⁹ (%)	all		1993 and 2003	ILO GET
	- Youth labor force growth ¹⁰	all		2003–2015	ILO GET
	- Youth employment-to-population ratio ¹¹	all			ILO GET
	- The ratio of youth-to-adult unemployment ratio	all			ILO GET
	- Unemployment rate among 15–24, total and by gender	All	85	1989, 1990 2001, 2002	UNDP HDR 2003 MDG target 45
- Youth unemployment female rate as a percentage of male rate, 15–24 (%) G	Mainly developed countries	30	2001	UNDP HDR 2003	
Risk Area	Available Youth Relevant Indicators	Regions	Countries (#)	Time Periods	Source/Remarks
Substance Abuse	- Lifetime prevalence rates of cannabis abuse among youth (%)	Mainly developed countries	49	1990–1997	UNODC 1999 All different age ranges and reporting year
	- Lifetime prevalence rates of "ecstasy" abuse among youth (%)	Mainly developed countries	36	1990–1997	Ibid.
	- Lifetime prevalence rates of cocaine abuse among youth (%)	Mainly developed countries	36	1990–1997	Ibid.
	- Lifetime prevalence rates of heroin abuse among youth (%)	Mainly developed countries	25	1990–1997	Ibid.
	- Lifetime prevalence rates of inhalant abuse among youth, 1990–97 (%)	Mainly developed countries	41	1990–1997	Ibid.
Risk Area	Available Youth Relevant Indicators	Regions	Countries (#)	Time Periods	Source/Remarks
Crime and Violence	- Total juvenile (<18 yr) suspects, by gender G (count and rate per 100,000 inhabitants)	Mainly developed countries	40	2002 2001	UNODC 8th Survey of Crime Trends
	- Total juveniles prosecuted, by gender G (count and rate per 100,000 inhabitants)	Mainly developed countries	30	2002 2001	UNODC 8th Survey of Crime Trends
	- Total juveniles convicted, by gender G (count and rate per 100,000 inhabitants)	Mainly developed countries	34	2002 2001	Ibid.
	- Total convicted juveniles admitted to prison, by gender G (count and rate per 100,000 inhabitants)	Mainly developed countries	43	2002 2001	Ibid.
	- Juveniles placed on release/parole on given day (count and rate per 100,000 inhabitants)	Mainly Europe	18	2002 2001	Ibid.
	- Juveniles placed on probation on given day (count and rate per 100,000 inhabitants)	Mainly Europe	17	2002 2001	Ibid.
	- Total number of staff in juvenile prisons (count and rate per 100,000 inhabitants)	Mainly Europe, and some East Asia	28	2002 2001	Ibid.

Source: Authors

Notes: DESA = United Nations Department of Economic and Social Affairs ; WPP = World Population Prospect; UNFPA = United Nations Population; SOWP = Fund State of the World Population; MDG = Millennium Development Goal; UNDP = United Nations Development Program HDR = Human Development Report; ILO LABORSTA = International Labor Organization database on labor statistics; ILO GET = International Labor Organization Global Employment Trends; UNODC = United Nations Office on Drugs and Crime; G = Gender disaggregated variable

Endnotes

1. *World Bank (2006). Development and the Next Generation. Washington, D.C.*, using statistics generated from household and labor surveys; *World Bank (2004). Youth in Numbers: Latin America and the Caribbean, Washington, D.C.* using statistics available from existing recognized data sources; *World Bank (2007). The Youth Well-Being Index. Washington, DC.*, developed for Brazil and the United States; *CEPAL, La Juventud en Latinoamerica: Tendencias y Urgencias, 2004*; and the UN System.
2. The adolescent fertility rate is calculated by the births per 1,000 women ages 15–19.
3. Number of births over a given period classified by age group of mother. The data refers to five-year periods running from July 1 to June 30 of the initial and final years.
4. The age-specific fertility rates are calculated by dividing the number of births to women in a particular age group by the number of women in that age group. The data refer to five-year periods running from July 1 to June 30 of the initial and final years.
5. Gross enrollment ratio is the total number of pupils enrolled in secondary education, regardless of age, expressed as a percentage of the official secondary school age population.
6. Net enrollment ratio is the official secondary school age population expressed as a percentage of the total population in that age group.
7. The pupil teacher ratio is measured by the average number of pupils (students) per teacher at a specific level of education in a given school year, based on headcounts for both pupils and teachers.
8. The Education Index is part of the Human Development Index and is based on the adult literacy rate and the combined primary, secondary, and tertiary gross enrollment ratio.
9. The youth labor force participation rate is measured by the proportion of an economy's youth population that is economically active. The labor force is the sum of the number of persons employed and the number unemployed.
10. The youth labor force growth is calculated as the total youth labor force in 2015 minus the total youth labor force in 2003.
11. The youth employment-to-population ratio is measured by the proportion of an economy's working-age population that is employed.