

AMCHP Annual Conference, 2010

Moving Ahead Together:

Celebrating the Legacy, Shaping the Future of Maternal and Child Health

Ten Years and Counting:

Youth Development MCH-Academic Partnerships in ACTION

March 6-10, 2010

RICHARD KREIPE: This presentation is entitled Ten Years and Counting: Youth Development MCH-Academic Partnerships In ACTION. Its session ID is #i4, which is a workshop session and it's eligible for continuing education. Immediately following the conference a link to the CDC Training and Continuing Education online system will be posted on the MCHP website. In order to receive continuing education you must complete the online CDC CE form by April 12th. Be sure to keep track of the sessions you attend throughout the conference as you'll be asked to enter this on the online system. Further CE information can be found on page 10 of your program. Also, individual (inaudible) session evaluations will be distributed at the close of the session there in the back in the yellow. Please return the completed evaluation to the MCHP staff person in this session or to the registration desk. In addition a full conference evaluation will be posted online. A link to the survey will be emailed to all attendees after the conference. MCHP will use these evaluations to help further conferences and your input is greatly appreciated. I'm going to ask everyone to turn off their cell phones or turn it to the silent mode.

It's now my pleasure to introduce our speakers. Kristine Mesler serves as New York State's adolescent health coordinator and the program manager for Act for Youth for the past seven years. During that time she has worked with the Center of Excellence, which is made up of Cornell University Family Life Development Center and the Cooperative Extension of New York City, University of Rochester's Division of Adolescent Medicine, where I'm from, and the New York State Center for School Safety to assess the needs of youth serving organizations, develop training agendas and inform the center on emerging policy issues impacting adolescent health in New York State. She's a director of the Child/Youth Development in New York State with the support of MCH colleagues at the New York State Department of Health and the Center of Excellence. She is redesigning the delivery of adolescent health programming in communities to be more sensitive to the cultural and developmental needs of the target population. Kris brings 30 plus years of Maternal Child Health experience to this position.

Dr. Jane Powers has been involved in the application of research and knowledge specifically around promoting the health and wellbeing of adolescents and preventing risk behaviors including violent sexual risk behavior and abuse. She is currently the co-PI and project director for the Assets Coming Together Act for Youth Center of Excellence based at Cornell University. This supports the implementation of positive youth development strategies throughout communities in New York State and youth serving programs funded by the New York State Department of Health that promote adolescent health and wellbeing. The activities include evaluating the implementation

and impact of the Act for Youth Initiative. Developing tools and processes for programs to assess the extent to which they have implemented and integrated youth development principles and practices incorporating youth views on adolescent sexual health and policy, integrating youth/adult partnerships and to organization and community decision making and engaging youth as evaluation partners and finally, evaluating service learning programs in school based and community settings. I'm an adolescent medicine specialist and the director of the University of Rochester LEAH Program, Leadership, Education and Adolescent Health Program and it's really been my pleasure to work with Jane and Kris all these many years.

Since you've come to the last session of the last day and physically also the last room, I want to start this by saying what needs to happen over the next hour and a half for you to feel like it's worth your while being here or are you in the wrong place? What kinds of things? We have our agenda but we can be pretty flexible. Again, one of the issues of working with youth is you need to be flexible. So, what were you hoping to get out of being here?

UNKNOWN SPEAKER: (Inaudible)

RICHARD KREIPE: In what state?

UNKNOWN SPEAKER: Oklahoma.

RICHARD KREIPE: I was born in Bartlesville. I'm going to put PYD, positive youth development because it kind of frames it

a little bit more. We'll have a lot of evidence and data. Other things? Yes, ma'am?

UNKNOWN SPEAKER: (Inaudible)

RICHARD KREIPE: So, we can have some practical application. I want this to be fairly interactive. This is like church with sitting in the back. I want to make sure we can involve people as much as possible. So, this is dedicated to Yuri Bromfenbrenner (phonetic), who is the man who coined the term, "human ecology", basically developed the School of Human Ecology at the College of Human Ecology and the Family Life Development Center at Cornell and I still remember reading, "Two Words of Childhood", in my psych 101 class in college and he died a few years ago but I think his spirit lives on in everything that we do. So, the learning objectives for today is to identify key components for successful statewide youth development initiative to describe how academic partners can assist their state MCH to implement MCH policies and to frame positive youth development as a powerful MCH preventive strategy. So, what we'll start with is some of the issues around the national initiative to improve adolescent health that kind of a framework. Also, talk about youth development as positive public health policy, protective factors, core principles, essential structures and then kind of talk a little bit more about the New York State experience that you all mentioned and then kind of finish up with some lessons learned but I really want to make sure we leave enough time and as the moderator I get to pull the hook to make sure we get a chance to ask questions and to talk about how things might or might not be implementable in your

particular state or region or territories. So, Amy Werner is a developmental psychologist who has written a lot about the whole issue of resilience and talks about the concept of overcoming the odds. So, resilience is the ability to spring back in the face of adversity. We know that the odds against you are increased by poverty, having a single education, low maternal education, family instability, health problems and that these have a cumulative risk of negative factors but it's actually not just cumulative, it's exponential, so that each time you add a new factor the risk of not doing well increases but not everybody who has a lot of risks and have a lot of odds against them necessarily end up having problems and that's the concept of resilience. So, you can have positive outcomes despite adversity. And, what we know happens for kids who are resilient is they have a close relationship with an adult role model or caregiver. They have an easy temperament. Again that's pretty much intrinsic. So, we can't necessarily change a person's temperament but they have lots of friends and interests and they also have good language and reasoning skills, especially pro-social friends and interests, not necessarily being in a gang but good language and reasoning skills. These are kind of the elements of kids who are resilient and we can see that a lot of things we cannot change probably other than having a close relationship with an adult role model or caregiver and that becomes an important part of youth development is the role that adults can play.

So, positive youth development is considered an intentional, deliberate process of providing support, relationships, experiences, resources and opportunities that promote positive outcomes to young people. I think one of the things that we sometimes hear as

well is you know youth development is kind of a philosophy. It's pretty soft and it's just kind of a feel good kind of a way of doing things but it's not. Real youth development is very intentional, deliberate and we focus on process. Those are the things we really have to be paying attention to, to do effective youth development programming and Karen Pittman for the Forum for Youth Investment has written a lot about these issues and they coined the term the 5C's, so that when we are actually providing kids with more in the way of youth development we increase their capacity to function as an adult, their confidence and ability to do that, the competence to do it, we also help build character and connection. And, the issue of connection is probably one of the most important things. Not just connection with their peers but connection with other kinds of pro-social factors in their lives.

I had the pleasure a few years ago of co-editing with Gus Burkhead (phonetic) who is the head of the Center for Community Health at the time and Susan Kline this supplement to the Journal of Public Health Management and Practice is online. You have full access to all of the articles in this and we're talking about improving public health for youth development. So, it's really basically saying I was on sabbatical at the time, so I actually could kind of put this all together but it wasn't my initial plan for sabbatical but it turned out to be a great way to do what I really wanted to do and not what I said I was going to do. So, this website has full access to all of the articles and I think the piece that we really said is this is really pretty neat stuff that is happening in New York State and we need to get this out there in the literature to kind of get some ideas about how things work. In that article Mike Resnick and Debra Burnot (phonetic).

A lot of people know Mike Resnick from the work he's doing at the University of Minnesota with teen pregnancy. He also is kind of the driving force behind the Ad Health database, etcetera and he found that the key protective factors, connectedness to parents and family. These are things that are key protective factors when you have odds against you. So, we're going to stop talking about risk factors and let's talk about protective factors. Connectedness to other adults in organizations, connectedness to school and if you have one thing that you want to be working on it's especially connectedness to school that's the piece that seems to hold up as the strongest. The more to reach a kid feels connected to a school the more likely they'll have more protective overall feeling having more protective facets. Spirituality, not necessarily religion, spirituality, optimism and a sense of possibilities and the key point about this is that these are evident across multiple high risk behaviors and threats to health and wellbeing and also social groups of youth around the world. Some people are mentioning the workshop that Bob Blum gave about the issue of community and he's done a lot of the research, international research coming out of the Lombard School of Public Health at Hopkins and it's just amazing, no matter what culture you go into kids who do well, kids who have these kinds of factors have protection against high risk behaviors.

So, the other point that they made is youth development really goes beyond reduction of risks and problems. The universal goal is developing competent, capable young people by the use of evidence based approaches, promotion of healthy development. It's a deliberate evidence based process as we mentioned and it's got a dual strategy of risk

reduction and promotion of protective factors that an intentional youth development approach holds the greatest promises to public health policy. Some of you are familiar with this. This is the Improving the Health of Adolescents and Young Adults was a companion document to Healthy People 2010 focusing specifically on issues related to adolescents and apparently it's the most widely requested document that the CDC has ever put out and it's available online as well, all the various pieces. But, make sure you don't click print because it's like 285 pages. So, checkout the executive summary before you go through the entire document.

Another key element with respect to youth development is that we started the middle here, "Core Supports and Opportunities". This is the work of Karen Pittman, "What's Health Got to Do With It" and what she basically says is if we can really develop these supports and opportunities in a youth development kind of a way, you can cut through that next string of delinquency and violence, dropouts and literacy, etcetera and then you get out to the outer ring where kids are engaged civically, where they have physical health, their vocation of readiness and success and social and emotional health is well and education. So, the issue of health in the World Health Organization concept of not (inaudible) disease but not really the opposite of disease and deformity.

I'm going to turn things over now to Jane talking about the 40 developmental assets that are kind of at the basis of how do we know some kids are having positive youth development? So these are some measures that actually can JANE Powers: (Her first few sentences she did not use the microphone.) ...our partnership that we've had

now for ten years. I'm based at Cornell University. Cornell is a land grant University for the State of New York meaning our mandate is to bring knowledge to the field, to link the University. There's just such great stuff going at the University and frequently it just remains there and so our mission is really to take that knowledge and to bring it out to people. Rich based at the University of Rochester in the Division of Adolescent Medicine, I mean he's our clinical partner here. Our medical school for Cornell is based in New York City, which is four and a half hours from Ithaca, New York and so it's just been great to have that clinical/medical partnership with Rochester. And then, Kris, who is our funder at the New York state department of health, I mean the sky is the limit really is the way I feel when I'm working with these folks. So, it's really a fantastic partnership.

With that said I also want to say I've been heartened to hear a theme throughout this conference about the importance of guiding our actions based on science, based on evidence and that's just wonderful and I am going to now share with you a little bit of the knowledge base in youth development. I mean Amy Werner has done seminal work in the field of really helping us see that in spite of growing up in tremendous adversity that there are young people who overcome it and why is that and how can you identify those things in people's lives that made a difference? Another body of seminal research has come from the Search Institute. How many of you have heard of Search and are familiar with the asset framework? The Search Institute has been doing research and education around children and adolescent issues for 40 years and they developed this asset framework out of just sort of talking to people, practitioners and researchers looking at

the research. How is it that young people thrive? How is it they become healthy, competent, caring adults that have the 5C's that Rich referred to? So they came up with this asset framework and then they created a checklist, an asset checklist in which they then did research and saw how many young people across the country have these assets and the assets are building blocks basically and they're divided into two categories: external and internal. The external ones are all the things that parents and peers and schools and programs can do to support young people and there are four categories and 20 external and 20 internal and there's a lot of information about this on the Search Institute's website that goes into much more detail about the kinds of external assets that young people need in their lives and they cover the categories of support and empowerment, boundaries and expectations and constructive use of time. Then there are also the maternal assets. These are values, characteristics, internal competencies that young people have and the more assets young people have the better they do. There's a strong body of evidence that the Search Institute has conducted. I mean this is a sample of like 100,000, 6th to 12th graders and when you see these different health risk behaviors, problem alcohol, violence, illicit drug use, sexual activity, young people who have few assets at zero to 10 versus the young people who have 31 to 41, a lot, we see a pattern across risk behaviors in which those with few assets engage in more risk behaviors. Those with more assets are less likely to engage in risk behaviors. We see this also if we're going to look at pro-social, positive health behaviors. We're looking at exhibiting leadership, being in good health, value and diversity, being successful in school, those with few assets versus those with the highest number of assets. Again, the pattern is those with the fewer assets have less

success in the positive behavior than those with the greater number of assets. This has been repeated over and over in all kinds of communities. They've written tons of books about this and I would really encourage you to go to their website to learn more about the asset framework. It's really foundational to youth development. The fundamental piece that we need to be doing is the more caring adults in young people's lives the better and that every one of us can be an asset building. It's a message that resonates very well with communities. Everyone has a role to play here. It's not just the youth service professionals but all of us in our neighborhoods and in our everyday lives can be asset buildings and there's tremendous interest at the community level and we've done a lot of work in New York State in helping communities use the Search Institute materials.

Here is just another study that was conducted some researchers in Vermont who looked at the YRBS data. They did a condensed asset checklist of six assets and here we're looking at the seven indicators of risk behaviors and I believe they come out of the 2010... So, these are all the risk indicators: alcohol use, ever had sex, marijuana use, up to plans suicide and those with the fewest number of assets had the highest incidence of these risk behaviors. So, it's with the most number of assets had the fewest incidence of these risk behaviors. This is also repeated if we look at positive health behaviors including wearing a safety belt, aerobic exercise, wearing a bike helmet that those with more assets are more likely to engage in the positive health behaviors.

I just want to say a couple more things about Search in that these assets are both protective factors. They protect against risk behaviors, their enhancement to positive healthy behaviors and then they protect the resiliency factors as well. So, assets are good. We all want young people to have as many of these as possible and in fact if we look at how many across what is the typical number on the average number of assets that any individual has, young person has across neighborhoods is about 20 and we want to move those asset numbers up.

Another source of data, which comes from the National Research Council and the Institute of Medicine, which are again really solid, scientific sources of evidence, this book was published in 2002 by the National Academy of Press. A lot of scientific heavyweights on this one. They synthesized, examined all the data that were out there in youth development to really say, hey what kind of impact is it having? What are the essential elements of programs? And, they looked at sort of the most rigorous program evaluation findings and so, okay what are the themes? What are the crosscutting themes of features of these programs that make it effective, achieve the results that we want to and one of those, the first one was that programs that had physical and psychological safety that seemed self-evident but it's not always the case. That there were appropriate structures for young people, that there is not a free-for-all of activities but that it's structured in a way that young people can make choices and that there are structured activities. Supportive relationships – key. We see that in the resiliency research with Amy Werner. We see that in the Search Institute. This is a very fundamental part of youth development about the role the caring adults can play in the

lives of young people. And so that's a huge push. Opportunities to belong and contribute, mattering, having a voice, positive social norms particularly because in environments where many of these young people come from that isn't exhibited. So that pro-social behavior is modeled within these programs that there is again support for mattering for making a difference, opportunities to develop skills and then the integration of family, school and community efforts. So programs that have these features will have more and better outcomes. In fact in New York state our office of Children and Family Services, I just found out, actually holds their programs accountable. When they fund programs they want to see evidence that they are achieving these features and that's what they want to fund. So, here's an example of how the research guides the practice.

RICHARD KREIPE: I think an important point there is a lot of times people think, "Well, we have a rec center and let kids play basketball," and that's youth development. That's not youth development. I tell a story when I was growing up in Philadelphia. They opened up a rec center and I wanted to play basketball and I wasn't very good and I got threatened and bullied and I never went back. So, I think the issue about all of those elements really have to be there. The biggest problem probably with youth development is people say we're doing youth development and they're not following these principles. So, when you talk about fidelity to a model you've really got to pay attention to these.

JANE POWERS: Right. We've done studies actually in looking at what do people think of youth development and it's just all over the board. And so that's a good segue into

my final slide before I turn it over to Kris because these six elements are what we've really focused on in our work in New York state about what is positive youth development. First of all, there has to be a focus on positive outcomes. The absence of negative behaviors is not good enough. It's a strength based approach and it's looking at positive outcomes. Youth Voice is a huge piece. Hearing the voices, engaging young people, bringing them to the table, spend a lot of time with communities and programs on this piece and the hardest part about it is actually the adults who can share power and really allow the young people to come to the table and serve and be involved in governance and be influential.

Youth development should involve all young people. It's not just targeting the at risk population. It's a universal approach. We are in it for the long-term. It's not just this tiny piece but that we should be focusing on a long-term investment, which has been really wonderful that we have support from the health department for ten years, which has allowed us to be able to have a long-term investment and commitment. It involves everybody in the community. It's not just the usual suspects of youth services that everyone should be involved, different sectors of the community whether it's justice, mental health, probation, faith, young people, families, schools that it involves the entire community and we need to collaborate in this work. Now, I'm going to turn it over to Kris, my partner from the health department.

KRISTINE MESLER: I'm going to be talking a little bit about how we apply this in New York state and I have to tell a funny aside. We may all look like we're very compatible

up here but recently I was doing an interview with my counterpart in the AIDS Institute. Act for Youth is a joint initiative between the AIDS Institute and the division of Family Health that I work in and we were doing an interview with Cornell discussing their land grant mission. I've learned a lot about land grant universities and the land grant mission is to get research out into the communities. Whenever we're doing interviews we have somebody on the phone with us from public affairs. They're in their own office. We do a conference call. So, I had somebody on from our public affairs group and I actually mentioned the word that this was a luxury and I immediately got censured because as you know today in state government we have no luxuries. So, I don't want you to think we're a love fest up here. This is the drudgery that I have to work with these two. (Laughter) In all honesty it really is the high point of my job.

I just want to talk for a minute about how we then have implemented this in New York State. In 1998, a decision was made by the statewide youth development team, which is described in their journal supplement that was referred to. To start a statewide initiative that would actually advance the principles of youth development in the communities in New York State. This is currently funded with joint funding from state funds, which is coming through the AIDS Institute and with maternal/child health block grant funding and we've maintained pretty much a 50/50 split on that funding and I'm going to talk in a few minutes about some other uses of our MCH block grant funding and how we're able to apply it to this initiative. As Jane or Rich had mentioned earlier that this is a partnership where we have an academic institution at Cornell University. We have practical, on the ground implementation with a Cornell

cooperative extension. The University of Rochester, which brings in a whole other academic viewpoint as well as a health piece to us and then the New York state center for school safety, which really gives us a direct connection with our educational partners. We have the Act for Youth website, which is one of the deliverables of Act for Youth. Act for Youth requires that the center of excellence acts as a clearinghouse of information and research on youth development and best practices for adolescents to be disseminated throughout the state. So, we have the Center of Excellence website, actforyou.net and I've referred to this a few times during the conference that we have these materials available for anyone to download and to use and there are two important features that I want to mention on this. One is the publications. There are a lot of publications on this website on a lot of very critical issues that would be relevant across the country but the thing that I'm probably most excited about is as we had reduction in funding and really have a lot of restrictions as far as travel and we've had cuts to our community based providers we've had to find a different way to do training and actual dissemination of information where Cornell and the University of Rochester will be going around the state to be doing trainings with groups of 30 in a room. We are now providing this information online and it provides an opportunity for our providers to be able to, if they have new personnel and new staff, to access these trainings online. Those are available to all of you. So, feel free. If you've got anyone in your state that really needs more information, we have how many up at this point, Jane?

JANE POWERS: Eight.

KRISTINE MESLER: We have eight trainings and I have a wish list of about 30 topics. So, one by one we're adding them and they're excellent. They're also short. They are under 15 minutes on average. So that if you have a community provider they are able to during a break be able to access it. They don't require a tremendous amount of time, which everybody these days really just has quite an issue with that. The publications are topnotch. I have to tell you that we have some. Rich's, "Adolescent Brain Development," which has been out for a number of years. We have one on intimate partner relationships and violence, which is still one of our most requested publications.

We were planning a statewide approach to youth development. Remember that all community sectors must be involved in order to create community change. An example of this is a current initiative that I'm working for where we're requiring communities to actually identify representatives from every sector of the community to be involved with either organization. In a case where you may be looking to improve adolescent sexual health outcomes in the community we know that it's everybody's responsibility: the faith based communities, the schools, the local businesses, everybody is involved. If anyone heard Gwen Wright yesterday talk about the fact that the teen pregnancy rate has hit such an all time high in Mississippi that finally the economic development people have taken notice. That's where if you bring them in sooner and get the sectors involved that's where you're going to get your biggest buck. We also learned from our experience that you need a local leader or champion and I know that you see that with any of the work you're doing in your states. You have to have somebody on the ground that is really championing this for you. It's important to be accessing all youth, not just at risk

youth or high risk youth but that we really see that youth development cuts across all sectors. Youth adult partnerships and those developments are very important to help plan and implement your programming and looking for every opportunity to further that.

Partnerships require ongoing attention and purpose. You can't just establish something and think that it's going to be self-sustaining at local youth that can be involved in promoting the local community change and a sustainable community policy change requires time and I think that's been one of the biggest lessons we've learned and I caution everybody about is don't think that this work is going to be accomplished in three years or five years. When Act for Youth was initially funded it was funded as a five-year initiative and I came in just at the end of the third year. At that time we extended it for an additional two years and then extended it another one year for a total of six years before we re-solicited applicants for the initiative. We're currently now finishing our fourth of a five-year cycle and I've actually written the proposal to extend us another five years. So, it looks like at this point we're going to have 16 years of Act for Youth, which I'm pretty excited about particularly in this environment.

Looking how to actually initiate this into your state, the first one is we really have come out with a very strong statement that within the health department we will integrate youth development principles into all programs. This requires from the time we first send out a solicitation for applications for funding, we give a brief description on what positive youth development is, some examples of how it would be incorporated into the program and then immediately refer them to the Act for Youth website. We require this then to be

incorporated into all the programming. We assure that their staff have a common language and an understanding of positive youth development. This is a continuous challenge. We are reaching the end of ten years. We are still constantly educating people on what positive youth development is. I still have people that will think like Rich said it's playing basketball or having kids volunteer. It's really that constant education.

We also provide the assistance regarding integration implementation into the programming and this is where I really do have to make the pitch. If you're working on this in your state that you look for where your support is available in your state. Now in our case, we have used MCH block grant dollars and state dollars to fund a Center of Excellence but I know Ann Marie Braugher in Colorado is doing an initiative and has also looked for getting some academic support. I am constantly volunteering Jane for another project but Jane usually will be able to connect you with a resource in your state. She has the national connections to know how is the best person in other regions of the country to connect you with and Texas is about ready to also establish an initiative.

We encourage programs to offer meaningful opportunities and roles for young people and I can give an example of that. With our pregnancy prevention funding we use a combination of funds in our community based adolescent pregnancy prevention funding where we use state dollars to match, we draw down a federal Medicaid match and then we supplement it as well with MCH block grant dollars to provide the supportive activities that we consider are positive youth development work within the program. We

expected all providers will be again integrating these principles with pure education models, mentoring, it may be a service learning program that the programs are doing but we use these different examples or are able to supplement their funding with MCH block grant dollars to get away from the traditional education involved with pregnancy prevention. We facilitate all opportunities for programs to share successful strategies. We do monthly calls with our providers where they have opportunities to talk with each other, talk about what they're doing to maybe overcome some challenges in the community and to really share their success stories. We also have best practice models within our provider communities where we actually end up using them as consultants to other programs.

The way that I'm able to sell this internally is to mention that by using positive youth development as a prevention strategy, we're working across domains. We know that it doesn't matter that you have a girl that is not pregnant, that's great that she's not pregnant but if she hasn't graduated from school you really haven't accomplished that much in that young person's life. So, I really talk about the fact that we can increase the bang for our buck by using this as a prevention strategy but we're not looking at a particular health risk but instead looking the general development of all adolescents. We also then include positive youth development outcomes into program evaluation and we actually have measures that we use with our communities to actually evaluate their success and implementation.

JANE POWERS: Can I just say that those are available and for those of you who are looking for evaluation tools contact me. We have a

lot of different ways to help in evaluating the integration of youth development into programs.

KRISTINE MESLER: Our lessons learned. We do have a document and we will make it available, Jane you want to make sure it's one of the things we do. We do an evaluation the first six years of Act for Youth and we learned some very valuable lessons in this process. First of all, within communities know who in your community you're partnering with and in our case who we're funding. We're very strategic about who we're funding within the communities to make sure that it's organizations that are not necessarily looking to keep everything to themselves. We're looking for when we contact with someone for them to subcontract funds to another organization, which only builds the strength, to make sure that it's an organization that shares a good reputation in the community for really playing well with other organizations. Define youth development upfront. Get away from the basketball games. When we first started Act for Youth I think we built more ropes courses in New York state than anywhere else in the world. I was starting to worry about liability issues if anyone got hurt on those rope courses that we built but that's what people saw youth development as was building a ropes course in your community. So, that's a lesson. The next thing is that I really caution anyone that's looking for funding to fund organizations in the community to really advance this. This doesn't cost a lot of money and I think one of the initial lessons that we learned is that we provided too much money to communities. When you're normally contracting with service providers and health and human services providers they're used to providing a discreet service. They're going to be seeing somebody in the clinic for a comprehensive well visit or for a family planning visit. Now, you're giving them something very

amorphous to be working with and it really is the human time that they need not a lot of additional funding. What happened is where they had additional funding they had to do something with it. So what we found was is that they were looking to start spending it on services and I think that's how we ended up building so many ropes courses. So, one of our first lessons was we actually reduced the size of the contracts that we were making in many of our communities, which I know sounds a little strange but our programs improved tremendously.

The connections and the leverages within the communities is essential. The number one thing is a champion in the community, getting that one key person in the community and that person who has the ability to leverage. We have a community just short of New York city that we've been working with long-term. That there is somebody they refer to as Mr. Yonkers and he knows everybody in Yonkers. He's been involved through the years with the faith based community, the school system, a community based organization, this man is into everything but he really does promote this the best within the community and I think that when you work with your community partners, I know nothing from Albany. I know Albany and I happen to be from Buffalo but if me talking about New York City is a joke so the people from New York City know I'm not going to talk about it because I just don't know the community.

Institutionalization of youth development is really key and that's where I think looking for every opportunity within both the state level and the local level to bring up youth development to really integrate it into the program and stay with it. I've been

discouraged many times but really have stayed with it and evaluation is key. If you've got questions Jane has more information on the evaluation list and persevere. It's motherhood and apple pie. To me it's a no-brainer but we're constantly having to go back and show how this is a prevention strategy.

Other essential things are leadership, common goals I've talked about, sustained commitment and I think that you have to go into this for the long haul. It's not something you're going to see major accomplishments within two years. Adaptable approaches, within our state we have a youth development team. The youth development team actually we have a large assortment of private and public organizations that are a member of this team and the stakeholders are really equal decision makers within the group, which is essential.

JANE POWERS: I just wanted to sit here and talk about this one. This is a study that our colleagues at the University of Wisconsin whom we partnered with who studied the formation of youth/adult partnerships in our communities and as I said before youth voice is a really integral piece of the youth development work that we do and youth adult partnerships is a strategy to realize the youth voice and I have five hard copies of this too to share with you and then if anybody else wants more I'll send it to you and get your address. But, I do want to say that a big part of our work is doing research on our communities and programs, learning from that and then bringing it back to the field and this is our lessons learned on forming youth/adult partnerships and how to do that with

quality and effectively and so I just want to give this to you and it's one of our many resources on our website as well.

KRISTINE MESLER: And this is something really you need your academic partners for. At a state level we're just simply not able to do this and we really do have the benefit of relying on our academic partners for this.

RICHARD KREIPE: Okay, we're almost done but we want to get a chance to talk about things. We've already mentioned the name Karen Pittman. She's one of the gurus of talking about positive youth development especially at a systems level and she with others put together this state youth policy and actually folks from New York State were instrumental in informing this and some of the points that we're talking about now that you all might be interested in at a state level is the concept of we've already mentioned before problem free is not fully prepared and what Pitman talks about I think is a very important kind of thing for us to be thinking about is we need to shift the focus away from helping individual children and youth beat the odds towards a full-fledged commitment to change those odds. That's kind of one of the things that positive youth development is all about. I mean we may not be able to change the issues around poverty, etcetera but change some of the odds that we can affect through some of the things we've already mentioned. She also points out that thinking differently is hard, acting differently is harder and acting together is harder still. One of the major challenges that we have is we still have the silos within New York State. There are certain departments that will remain nameless that really don't quite seem to get youth

development and really aren't onboard with us but we hope to continue to work on that probably working with people who do get it within those departments and then kind of having it filter up. The final point here I think is that the strategy of risk reduction and promotion of protective factors holds the greatest problem. So, it's not one or the other but kind of pulling the two things together. So, what we would like to do now is get a chance to open it up and hear what kinds of things are going on in your community.