### University of Nebraska - Lincoln

## DigitalCommons@University of Nebraska - Lincoln

Faculty Publications, Department of Psychology

Psychology, Department of

January 1993

# Preventive Interventions in Early Adolescence: Developmental and **Contextual Challenges**

Bonnie L. Barber The Pennsylvania State University

Lisa J. Crockett University of Nebraska-Lincoln, ecrockett1@unl.edu

Follow this and additional works at: https://digitalcommons.unl.edu/psychfacpub



Part of the Psychiatry and Psychology Commons

Barber, Bonnie L. and Crockett, Lisa J., "Preventive Interventions in Early Adolescence: Developmental and Contextual Challenges" (1993). Faculty Publications, Department of Psychology. 249. https://digitalcommons.unl.edu/psychfacpub/249

This Article is brought to you for free and open access by the Psychology, Department of at DigitalCommons@University of Nebraska - Lincoln. It has been accepted for inclusion in Faculty Publications, Department of Psychology by an authorized administrator of DigitalCommons@University of Nebraska - Lincoln. Published in *Early Adolescence: Perspectives on Research, Policy, and Intervention.* Edited by Richard M. Lerner. Lawrence Erlbaum Associates Publishers: Hillsdale, NJ, & London, 1993. Pp. 311–314.

Copyright © 1993 Lawrence Erlbaum Associates, Inc. Used by permission.

# Preventive Interventions in Early Adolescence: Developmental and Contextual Challenges

Bonnie L. Barber Lisa J. Crockett *The Pennsylvania State University* 

Adolescence today is broadly perceived as a more difficult and dangerous period than in previous decades. Those holding this view point to increases in teenage pregnancy and childbearing, sexually transmitted diseases, alcohol abuse, drug addiction, juvenile arrests, depression, and suicide as indicators of changing conditions. Although uncommon in childhood, these problems increase in early adolescence, and they can lead to greater likelihood of negative developmental trajectories. Because young adolescents are at the age when these issues are surfacing, they are a particularly important target group for interventions designed to prevent or delay the onset of negative behavior patterns (Crockett & Petersen, in press). Preventive interventions targeting older youth often start too late, after the onset of the behavior they are designed to prevent. Early adolescence is a good time to intervene, before behavior patterns solidify, increasing the risks of more serious problems.

The goal of this section is to integrate existing research on early adolescent development with the available literature on preventive interventions. The chapters present a discussion of a variety of problems in early adolescence: teenage pregnancy, early childbearing, HIV infection, substance abuse, and depression. In focusing on issues for designing preventive interventions, the authors discuss what content and style of program would be expected to be most effective with young adolescents. Each author had a different amount of prevention research to draw upon. For some of the content areas, there has been a longer history of research and prevention, whereas others are relatively new to

prevention efforts. The effectiveness of programs already in place is considered. Suggestions are offered when prevention efforts have not yet been implemented (or have not been evaluated). Rather than attempting a comprehensive review of the prevention literature, the following chapters illustrate several content areas useful for the understanding of the connections between research and application.

Common approaches discussed across most or all of the problem areas include the provision of information, enhancing interpersonal skills, providing increased access to relevant resources, and improving social support. In addition, the chapters recommend that for a program to be successful, it should promote competence that will generalize beyond the specific problem. Multifaceted interventions (i.e., those combining several approaches targeting different dimensions of the problem) appear to be more successful in altering behavior than unidimensional efforts (Perry & Jessor, 1985; Rolf, 1985). For this reason, a number of investigators advocate community-wide interventions that have an impact at multiple levels of the environment.

Key themes highlighted by the chapters include the need to design developmentally appropriate interventions, and the requirement for sensitivity to the cultural setting in which adolescents are growing up. Specifically, the unique characteristics of the early adolescent period should be considered in program planning, as should the competencies and limitations of the targeted individuals. In addition, sensitivity to diversity is crucial, as each racial, ethnic, and cultural group may present particular needs. Sensitivity to community norms and values is also crucial because community support is critical both for mounting a viable intervention program and for maintaining its effectiveness. Programs that undermine community values will meet with strong resistance. Furthermore, in some cases, community agencies such as schools, local media, and service organizations may play active roles in intervention delivery, making community commitment essential.

These issues are first illustrated in the chapter on adolescent pregnancy prevention. Crockett and Chopak emphasize the need to tailor programs to the individual characteristics of adolescents, especially their cognitive and emotional level, as these are influenced by the cultural setting. During early adolescence there is an opportunity to use developmentally appropriate methods to delay the onset of sexual behavior and to instill positive attitudes toward contraception. The authors also highlight the importance of motivation as well as ability in delaying the onset of risk behavior and in using effective contraception. They also stress the importance of recruiting community support for programming.

The chapter on Hispanic adolescent sexuality and childbearing describes the importance of both subgroup diversity and shared cultural values as these affect adolescent childbearing among Hispanics. Fennelly elaborates on the contradictions of the contexts in which young Hispanic adolescents develop. Family and peer group attitudes are conflicting, leading to the need for preventive interventions sensitive to the divergent pressures facing these adolescents.

D'Augelli and Bingham discuss the need for AIDS programs that reflect multiple prevention strategies and multiple levels of prevention based on the salient contexts of adolescence (family, school, community). As in the first two chapters in this section, D'Augelli and Bingham point out that preventing the initiation of risk behavior is preferable to trying to change it once it is established. To reduce the risk of HIV infection, preventive efforts must be focused on both sexual behavior and drug use. Personal skills are highlighted as crucial in prevention efforts, as are the social networks of peers, family, and community.

Individual differences and contextual influences are also important in the etiology of drug use. Swisher's chapter discusses how intrapersonal, interpersonal, and contextual influences converge to affect beliefs about the rewards and risks of substance abuse. Presenting a model that describes these three levels of influence, Swisher suggests that one prevention strategy may be to intervene directly with beliefs and perceptions that are related to substance use. He points out that interventions using simultaneous combinations of individual, interpersonal, and extrapersonal domains have more lasting effects on levels of substance use than those targeting a single domain.

The importance of developmentally appropriate programs is further illustrated in the Kennedy chapter on early adolescent depression. As with other chapters in this section, the importance of the interaction between the young adolescent and the setting is emphasized. Depression is viewed as resulting from a mismatch between the challenges of the early adolescent period and the coping resources of individuals. Prevention efforts then, are geared toward facilitating the mastery of agerelated tasks.

By design, the chapters in this section each focus on a single problem. A number of these problems covary, however, and have common antecedents (Dryfoos, 1990). Although research has documented the interrelationships among adolescent problems, only recently have interventions begun to target multiple problems. In this new stage of prevention research and practice, it may be possible to intervene at multiple levels to effect several problems simultaneously.

### REFERENCES

- Crockett, L. J., & Petersen, A. C. (in press). Adolescent development: Health risks and opportunities for health promotion. In S. G. Millstein, A. C. Petersen, & E. O. Nightingale (Eds.), Adolescent health promotion. New York: Oxford University Press.
- Dryfoos, J. G. (1990). Adolescents at risk: Prevalence & prevention. New York: Oxford University Press.
- Perry, C. L., & Jessor, R. (1985). The concept of health promotion and the prevention of adolescent drug abuse. Health Education Quarterly, 12, 169-184.
- Rolf, J. E. (1985). Evolving adaptive theories and methods for prevention research with children. Journal of Consulting and Clinical Psychology, 53, 631-646.