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ABSTRACT

This document was conceived and developed to provide a better understanding of the pressures and tasks associated with adolescence, the empirically-based evidence of factors associated with drug use and other forms of problem behavior, different peer program approaches, and ways in which peer programs can be implemented. In Chapter I, "The Adolescent Society," Barbara Varenhorst discusses some of the myths and realities of being an adolescent in today's society and the tasks that must be successfully met and addressed. In Chapter II, "Influences on Adolescent Problem Behavior: Causes, Connections, and Contexts," Ardyth Norem-Hebeisen and Diane Hedin examine the conceptual and empirical evidence for variables associated with problem behavior in general and drug abuse in particular. They also develop a model for analyzing antecedents of drug abuse that may be useful in developing specific prevention programs. In Chapter III, "Types of Peer Program Approaches," Henry Resnik and Jeanne Gibbs discuss the broad goals of peer programs and present a typology for identifying different program categories. In Chapter IV, "Program Planning and Implementation," Mark Amy discusses the essential components of planning and implementing a peer program. An annotated list of resources in drug abuse prevention, prevention program planning, positive peer influence programs, peer teaching, peer counseling/facilitating/helping, and peer participation is included. (ABL)

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Adolescent Peer Pressure

Theory, Correlates, and Program Implications for Drug Abuse Prevention

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FOREWORD

The term "peer pressure" is often used to explain why young people use and abuse drugs. Although most commonly applied to young people, the concept of peer pressure is relevant to all age groups. Yet during adolescence, when major physical, social, and psychological changes are occurring, the pressures and inducements to test new behaviors, to rebel, and to identify with other people of similar ages going through similar experiences may be particularly compelling.

Generally, "peer pressure" has negative connotations. Yet peer pressure is not always negative. Young people can also influence their peers toward positive behavior. A primary purpose of this monograph is to present ways in which peer pressure can be perceived and directed in a positive way. If the term "peer pressure" connotes negativism, then we must try to change the common understanding of the term.

Although this publication focuses on constructive ways of channeling peer pressure, the ability of human service organizations and professionals in the field to direct peer values and behavior is necessarily limited. Human service organizations generally do not control the cultural variables and social norms under which peer values are created and fostered. Clearly, there is a need to communicate to young people in this country that drug use and abuse are harmful and inappropriate, and this is one of the implied missions of peer programs.

This volume has been conceived and developed to provide a better understanding of the pressures and tasks associated with adolescence, the empirically-based evidence of factors associated with drug abuse and other forms of problem behavior, different peer program approaches, and ways in which peer programs can be implemented.

In Chapter I, "The Adolescent Society," Barbara Varenhorst discusses some of the myths and realities of being an adolescent in today's society and the tasks that must be successfully met and addressed. Dr. Varenhorst analyzes some cultural, familial, and institutional frameworks against which to assess these tasks. In Chapter II, "Influences on Adolescent Problem Behavior: Causes,

Connections, and Contexts," Ardyth Norem-Hebeisen and Diane Hedin examine the conceptual and empirical evidence for variables associated with problem behavior in general and drug abuse in particular. They also develop a model for analyzing antecedents of drug abuse that may be useful in developing specific prevention programs to address the needs of adolescents.

In Chapter III, "Types of Peer Program Approaches," Henry Resnik and Jeanne Gibbs discuss the broad goals of peer programs and present a typology for identifying different program categories. This includes programs focused on: (1) positive peer influence; (2) peer teaching; (3) peer counseling/facilitating/helping; and (4) peer participation. The authors provide numerous examples of each type of program.

In Chapter IV, "Program Planning and Implementation," Mark Amy discusses the essential components of planning and implementing a peer program. Many of these considerations can be applied to other types of drug abuse prevention programs as well. Included are such aspects of planning as clarifying goals and objectives, conducting a needs assessment, involving appropriate people and organizations, setting up assessment/evaluation plans, and day-to-day management issues.

One purpose of the monograph is to provide insights and program ideas to those who are already implementing peer programs. The monograph also offers a rationale and suggestions for program planning to people who have had no involvement with peer programs but who wish to explore the possibility. Although the focus of the monograph is on preventing drug abuse, it is obvious that peer influence and pressure have implications for the full range of adolescent behaviors.

Peer pressure--in both positive and negative forms--is an important part of the learning and development of adolescents. Although structured peer programs cannot take the place of informal peer group values and interactions, programs that emphasize positive peer relationships can be an important aspect of youth development.

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I. THE ADOLESCENT SOCIETY

by Barbara Varenhorst

I am growing world.
I am reaching and touching and stretching
and testing
And finding new things, new wonderful
Things.
New frightening things.
I'm just growing, world, just now.
I'm not tall, I'm not strong, I'm not
Right.
I'm just trying to be.
I'm a person, I'm me!
Let me test, let me try, let me reach,
Let me fly!
Push me out of my nest (but not too fast).
There is much I don't know.
There are things that I want--don't
Hide me from the sight of the world.
Give me room, give me time. There
are things I'm not frightened
To try.
Let me tumble and spring, let me go
Let me be. Wait and see...
I am growing, world
Water me with the wisdom of
Your tears.

Cherie A. Millard (17)¹

How better can you begin to portray the adolescent society than by listening to the words of one who lives in that society and who is

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¹From: Konopka, G. Young Girls: A Portrait of Adolescence. Englewood Cliffs, NJ: Prentice-Hall, 1976. Copyrighted 1976.

also a part of the larger world around her? What is it like to be an adolescent in the United States in the 1980s? Is the modern adolescent a different kind of young person from those who grew up one or two generations ago? Is adolescence a distinct and "real" period of development or primarily a stage of life created by our industrialized Western society? These are questions that adults sometimes ask, particularly those who live and work with youth and who seek to provide services for them.

The answers are difficult to find. Research data are conflicting and incomplete. Interpretations of the data differ according to who is making them. Even the definitions of adolescence vary. Much of our knowledge about adolescence is based primarily on research done on populations of adolescents representing only the lowest or highest social classes in our society (Hamburg 1974); on deviant or troubled youth; basically with late adolescents; and primarily with boys. Gisela Konopka's work with young girls is the first major study done on adolescent girls to appear in the literature (1976). If Elder asks, "Where are the studies of adolescent girls?" (1975), then certainly Lipsitz is asking, "Have we forgotten the early adolescent?" In her helpful review of the research on adolescents entitled Growing Up Forgotten, Lipsitz (1977) documents very clearly the lack of studies of this particular adolescent group.

Despite these handicaps, some valuable and useful information can be sifted from the currently available research and theories dealing with adolescents. From this I have chosen to concentrate on the natural aspects of adolescence; the particular aspects of modern society that are affecting adolescents; and, finally, the principal needs that seem to have arisen out of these conditions.

The People We Call Adolescents

An adolescent is first of all a person between the ages of 12 to 22 years. Often adolescents are identified by age: early adolescence (12-15), middle (15-18), and late (18-22). Although divisions according to chronological age are convenient, they are virtually useless in explaining, describing, or understanding adolescents. Harder to classify, yet far more descriptive, are the biological, social, emotional, intellectual, and academic factors, or "ages," that young people juggle as they move from childhood to adulthood. Because these ages vary across adolescents and within an adolescent, no one method of classification, especially age, is sufficient.

One thing we do know, but frequently forget, is that adolescents are people--not categories. They are young people who are anticipating their futures, experiencing problems with relationships, and wanting and needing recognition, respect, and guidance from parents, peers, and society. They are human beings, not stereotypes or faceless groups to be classified by researchers.

Therefore, it is important to differentiate between the adolescent person and a period of life called adolescence. If we don't make this distinction, we will make serious errors in attempting to provide effective services.

If you were asked to describe adolescents, what would you say? What images immediately come to mind? What feelings surface when you think about adolescents? Do you smile--or shudder? Is the image that comes to mind a "problem"--or is it the unique things about these young people, such as their music, hairstyles, clothes, and eating habits?

How we answer these questions may illustrate the level of understanding we have of adolescents and the stereotypes and myths we carry around in our thinking and treatment of them. Many of these myths may be negative, which tends to prejudice our thinking and affect the quality of respect and recognition we give adolescents as individuals. What is more serious, such myths influence how we treat them, including how parents react to their children.

Many of the stereotypes of adolescence create a deep distrust and even dislike for young people during some critical years of their lives. Because of this, Lipsitz (1979) believes we either treat them with benign neglect or approach them with a crisis mentality. Our view of adolescents often covers a spectrum that regards them as silly children, on the one hand, or dangerous monsters, on the other. As Strommen (1974, p. 42) has said, "Some parents hold the pessimistic view that the full bloom of original sin occurs in the teen years...and, consequently, parents believe their children are always planning something bad or involved in negative activities." It is worth the time to examine some of these myths.

Common Myths About Adolescents

One of the most common myths is that adolescents are not quite normal; that they are going through a storm and stress period of life, which tends to be pathological; but that they usually grow out of it. This is the myth that makes us anticipate problems with youth. According to Lipsitz (1977, p. 7), this myth fosters an attitude that essentially says, "Be good, have fun, stay out of trouble, prepare for life, and we'll get back to you later when you are normal, we like you better, and we understand you more." Yet because adolescents are so self-critical already, any adult suggestion of pathology only intensifies their fears. They don't need further criticism or worry. They need adults who will calm them down and explain the normality of what is happening to them.

A second myth is closely related to the first one. This is the assumption that adolescence is a transitional period of life, and therefore it is a temporary and less significant or real stage of living. The label "transitional" is a type of put-down. Young people don't feel they are transitional or temporary. What they

are doing and going through is of intense importance to them. The here and now is what determines their needs, their growth, and their self-concepts.

A third myth is that adolescents are basically all alike. You can't find a more widely variable group in our society than adolescents. Parents who have had more than one child know this, and so do teachers who teach adolescents. Yet most people react as though all adolescents are the same. It is damaging and misleading to generalize to all youth the behaviors, problems, and characteristics exhibited by a few. It is especially damaging if the few are troubled adolescents whose problems and behaviors are vividly advertised by the media. This myth has been responsible for the belief that there is a generation gap between youth and adults. Some youth do have problems relating to an older generation, but many do not. The specific differences among adolescents will be discussed in more detail later in this chapter.

Another myth affects the expectations adults have of adolescents-- which, in turn, significantly affect how we treat them. This is the myth that each adolescent is growing in a uniform, continuous, scheduled growth pattern. Like the other myths, this one is untrue. Just as there are differences among adolescents, so there are great variations in the types and levels of growth happening at a particular time. Unfortunately, biological, social, emotional, and intellectual growth are not synchronized. For example, a boy who is tall for his age may not be emotionally mature. An early-maturing girl may still enjoy collecting dolls, reading children's books, and even sitting on her father's knee. Physical development often triggers adults' expectations of a corresponding social and emotional maturity. These inappropriate expectations create problems that can affect young people's futures.

Finally, there is the myth that adolescents are still children. This means that they are not capable of responsibility, decision making, serious thought or conversation, or any type of independence. This myth was evident when I was starting the Palo Alto Peer Counseling program in 1970. Many adults did not believe adolescents would be interested in or capable of being trained to help other students. When students did respond and demonstrate responsibility, many negative assumptions were destroyed.

The Significance of Adolescence

If the foregoing are myths, what then are the facts? What should be expected? What are the distinct events of adolescence?

Because of the tasks, challenges, and new experiences the adolescent encounters, adolescence is an exhilarating developmental period of tremendous significance. It can be a stressful period, both for adolescents and adults. Identifying the tasks and challenges that are natural, as opposed to those we have artificially

created, has been the work of social scientists. Each has a theory of adolescence that emphasizes particular categories of development--theories, for example, that are biological, social, intellectual, or psychological in their orientation. However, we still do not have a coherent concept of adolescence that integrates all of these categories and provides a complete understanding of what is happening at this time of life. Perhaps the most definite description we have is that adolescence is vulnerable to external events. Even the most accepted characteristic of adolescence, the onset of puberty, has been affected by the external conditions of nutrition and diet. Tanner (1962) explains that the average age of menarche in 1860 was 16½. Today, for comparable populations it is 12½.

Interestingly, the first definition of adolescence appeared in professional literature in 1904. G. Stanley Hall defined it as a period spanning the time from the changes of puberty to full adult physical growth, heavily emphasizing the storm and stress of these changes (Hamburg 1974). This theory was challenged, however, when Margaret Mead published her Coming of Age in Samoa in 1930. After studying the simple culture of the Samoans, Mead found that children were gradually introduced into assuming adult responsibilities and roles without the storm and stress that Hall claimed was part of human nature (Hamburg 1974). Mead's study ushered in the debate about the degree to which culture is responsible for the events and problems often associated with adolescence.

Many others have debated whether adolescence is a distinct period of life created by our industrialized Western society. Some say that particular events such as the instigation of compulsory education, child labor legislation, and special legal procedures for juveniles are primarily responsible for defining the adolescent period (Bakan 1971). Others believe that we invented adolescence not only to prolong childhood, but also to keep young people out of the labor force as long as possible (Office of Child Development/Hill 1973).

Usually the end of adolescence is marked by such events as getting a full-time job; establishing autonomy in relationship to parents; and entering stable, mature heterosexual relationships, which often involve marriage and child rearing. However, young people today are going to school longer, delaying or avoiding marriage, and finding it increasingly difficult to get jobs even when they are ready and desire to do so. The only specific rites of passage to adult life we provide at scheduled times are voting rights, legal ages for buying alcohol and tobacco, the right to enter into a valid legal contract, and the like. Some of these are far from being fixtures of our culture--witness the fluctuating legal drinking age.

Theories of Adolescence

Over the years some significant theories of adolescence have emerged that are helpful in understanding the tasks that must be completed for young people to become competent, independent adults. Erik Erikson is the best known theorist, but others such as Gisela Konopka, David Bakan, and John P. Hill also have useful things to say.

Erikson (1968) believes that adolescence is a time of both an identity crisis and a psychosocial moratorium. The "identity crisis" is better understood by reviewing the tasks of adolescence, which will be discussed shortly. Not until adolescence, at any rate, does a person see himself or herself as having a unique past and future. Therefore, this is a time for "re-grouping" or, as adolescents would say, "getting your act together." Doing this involves thinking about the future, beginning to solidify who one is, and establishing a more stable value system.

Supposedly, the moratorium is a time of delay granted by society to people at the end of childhood before they make adult commitments. According to Erikson, during this time adolescents experience a type of socially approved exploration and experimentation which, if blocked, can lead to a premature foreclosure of identity development.

David Bakan (1971) considers this view "idyllic," especially the notion of a moratorium. He argues that adolescents are basically excluded from adult society and are not given opportunities to explore and experiment. John P. Hill (1973) agrees. He feels that, unlike cultures in which an adolescent defines his or her selfhood by being most like adults, American adolescents have difficulty finding a prescribed niche for themselves in the adult world.

Reading what Konopka (1973) has to say about adolescents, one can't miss her feelings for them as human beings. She sees them as people who are growing and developing at a particular time, but not as pre-adults, pre-parents, or pre-workers. To her, adolescence is the age of commitment, a move towards a true interdependence of people--hence, the adolescent's characteristic struggle between dependence and independence.

When Konopka (1971) responds to the issue of the "natural" versus "cultural" condition of adolescence, she has two answers. To her, adolescence is a natural developmental period, universal because of its biological changes. But the particular forms and stresses are culturally determined. Before discussing these forms and stresses created by society, a better understanding of the natural aspects of adolescence may be useful. If we know the natural "givens," we may react more constructively to the problems we as adults may have created.

The Tasks of Adolescence

The tasks of adolescence span the entire process of moving from childhood to adulthood. Some of the tasks are more relevant to particular periods of development than others.

1. Experiencing physical sexual maturity. This is a major, basic task, and it is a universal one. For most young people the years from 12 to 16 are the most eventful years of their lives, as far as growth and development are concerned. During early adolescence this growth is second only to what happens during infancy. The development of sexual maturity is a phenomenon that belongs only to adolescence. Biologically it is a totally new experience. Its significance is due partly to the fact that it happens to everyone and partly because it carries with it changing expectations from others and from oneself. While it is happening, the young person is a fascinated spectator of the developments or lack of developments taking place, which either charm or horrify. At this time feelings emerge of realizing that one has something in common with all human beings, causing a new assessment of the world around oneself. This awakening affects relationships with peers and adults.

2. Developing one's individuality. This is the task of exploring "Who am I?" and "What do my social experiences and relationships mean to me?" As young people find answers to these questions, preferences, interests, and personalities begin to blossom. It is a time when one's self-concept is solidified and tested. This involves becoming aware of the continuity of oneself from one moment to the next, of sorting out past experiences and integrating them into an awareness of the future. It is a sensitive and fragile task, but while going through it one is preparing for another task --making a commitment to the future.

3. Forming commitments. As children move toward adulthood they need to learn how to get along with others and how to contribute to the world around them. To do this they need to explore a purpose in life, a reason for living, and a vocational choice. Young people do this by experimenting with wider circles of life, meeting various kinds of people, seeing other cultures, and participating in some aspects of the adult work world. They also need chances to experiment with their own strengths and values, and they need opportunities to participate as citizens, as members of households, and as workers and responsible people in society. We don't provide many chances to do this, or at least we don't offer them consistently. We don't because we still view adolescents as children and therefore as either irresponsible or dangerous. We need to allow youth to experiment without suffering disastrous consequences when they fail or make mistakes. We need to let them try out some paths of life without having to make irrevocable commitments. If experimentation is to be healthy, however, youth also need to be held responsible for their actions and accountable for the impact they have on other human beings. Providing for this dual kind of experimentation requires a fine line of judgment and

guidance from adults, which is often difficult to provide.

4. Separation and autonomy. This is one of the most difficult socio-emotional tasks for both youth and adults to accomplish. Withdrawing from and escaping adult benevolent protection is difficult--difficult for youth and distressing for parents. It involves the healthy and necessary move towards peers. Separation is a lifelong process, but the egg is cracked during adolescence as young people begin to move outward beyond the home and parents for their opinions, clothing styles, values, and authorities. We often misread the signals youth give about their progressive need for detachment, however, as well as their continuing need for adults to set limits. It's important not just to read the signals accurately, but to handle one's own reaction to the process of separation. Often parents experience feelings of a reduced sense of prestige and a certain amount of loss of control. This is tremendously unsettling to parents. Some react by thinking everything is up for grabs. Others react by clamping down with inappropriate controls. Others immediately give up and turn over complete freedom to their children.

When children experience unrestricted freedom, the quality of the autonomy that they have been given is questionable. Douvan and Adelson (1966, p. 37) question whether easily achieving behavioral freedom too early doesn't also interfere with a young person's ability to achieve emotional and value separation from adults. Does a kind of "cheap" autonomy stunt the ability of a young person to eventually become a truly independent adult? An example from nature may have the answer. A moth must go through the struggle of braking out of the restrictions of the cocoon in order to develop the strength to fly and survive. If the struggle is necessary for the moth, it may be necessary for youth also.

The peer group, so important to adolescents, is often viewed as the embodiment of evil. Parental distrust of their children's friends and the fears attached to what is happening when they are together is a major factor in family problems today. For many it is also a cause of delinquent behavior. Another reliable predictor of future delinquent behavior, however, is a young person's inability to function in a peer group (Lipsitz 1979). The peer group is the lifeline for adolescents--but adults are also lifelines. Adults must not set themselves up in opposition to, or in competition with, the peer group. Cutting off either of these crucial relationships can have serious consequences.

5. Outgrowing types of egocentrism. Two main types of egocentrism are typical of adolescence. One is the feeling that one is always on stage, that everyone is looking, listening, and judging. Although often painful, it is a type of self-importance that must be worked through. This kind of self-involvement is most obvious in the early adolescent's preoccupation with bodily changes and concerns about the responses he or she gets from others to his or her appearance. Several studies have found that when junior high school students are asked what they do not like about themselves,

physical characteristics are the most common response. However, this was much less true of high school students (Hamburg 1974, p. 113).

The other kind of egocentrism is a type of psychological loneliness. It is expressed by the feeling, "I am alone; no one understands me; I am unique; what happens to me doesn't happen to anyone else." Part of this may include a sense of immortality and that nothing bad will happen to oneself--"I will not die" or "fail;" "I will not become pregnant" or "addicted."

Although self-analysis is necessary and helpful in discovering who you are, it can also be destructive if there is too much preoccupation with self. The proliferation of books, materials, programs, and workshops dealing with "finding oneself" has intensified a state of egocentrism among all ages. This makes it even more difficult for adolescents to work through this natural phase of growth. We need to do more to emphasize the importance of looking outward as well as inward, and to help young people reflect on self in relation to others.

6. Re-evaluating values. All of life involves the process of learning and formulating values. But the major work on this is done during adolescence. This is so because adolescence is beginning to develop the capacity to think beyond the concrete to the abstractions of life and a wider exposure to people and experiences. During this developmental period, children gradually begin to be able to deal with cognitive challenges that make it possible to form independent moral judgments. They also use this new skill to question adult values. This questioning is often irritating and scary for adults, but it is normal and necessary for human development. Independent adults have had to go through the process of evaluating thoughts, feelings, beliefs, and ethics. For young people to do this, they need a stable set of values against which their emerging personal values can be tested. Given the inconsistency of values we as adults display in our behavior, our institutions, and our words, youth today are finding it harder to weigh values and choose the ones that will guide them.

The current societal inconsistency about values also increases the power of peer group pressure. The peer group is a natural source of information about values. As one chooses and deals with one's friends new values are learned and old ones assessed. If adult values are vague, fluid, or contradictory, young people will depend even more heavily on their equally confused, still immature peers. Perhaps some of the most severe problems we face with youth today, such as teenage pregnancy and drug abuse, are products of this confusion. Youth need guidelines if they are to establish a solid base for their personal value systems.

These developmental tasks form a framework for understanding the adolescent society. Against this framework we can talk about specific issues and concerns affecting youth in the '80s. If we know what is "normal," we can more accurately identify what is impeding

that normal growth, or what is different about today's youth from youth of the past.

But we need just a little more background information. We need specific details about the differences between the early and late adolescent, because these really are two distinct groups of youth. Most of the stereotypes of adolescence and the problems, expectations, and even the services we provide are based on a late adolescent model. Therefore, attention needs to be given to what is vividly unique about the early adolescent.

The Adolescent Who Needs Our Attention

The early adolescent is a young person roughly between the ages of 12 and 15. This is the most understudied group of people in our whole population. It is also the least understood and most ineffectively served, mainly because it tends to be viewed as unattractive and difficult to help. During the early adolescent years the most dramatic changes happen to bodies, the sharpest shifts in social adjustment take place, and a new set of confusing expectations is encountered. All this creates tremendous emotional anxiety, which requires understanding attention and constructive help. However, we often overlook or ignore the needs of young adolescents or misunderstand what is normal about them. A few examples will illustrate this point.

First, the development of sexual maturity belongs almost entirely to the early adolescent. When this occurs is a factor that critically affects the development of one's self-esteem, personal identity, and performance in school. It also affects the expectations of one's parents and teachers. Sex differences are another important factor. Studies show that in our society it is a distinct advantage for boys if they mature early but a disadvantage for girls (Hamburg 1974, p. 111).

Early-maturing boys often are given more leadership roles, are more popular, excel in athletic ability, and are seen as being more attractive by adults and peers. This even carries over to late adolescence, where studies show that early-maturing boys are more self-confident, less dependent, and able to assume more adult roles in interpersonal relations. Boys who mature late, however, show more personal and social maladjustments throughout adolescence. Significant numbers of late-maturing boys have negative self-concepts, are more rebellious towards parents, and often feel profound rejection by their peers (Hamburg 1974, p. 112).

Early-maturing girls develop feelings of being the "odd one out." Many of their female peers and most of their male classmates have not matured. They often develop submissive, indifferent social behavior and lack social poise. Research shows that these girls have little influence on their peer group and are seldom seen as being popular, admired, or leaders. Late-maturing girls, however,

are, on the average, more outgoing and assured during early adolescence. Then they become confident, poised late adolescents, many of them leaders (Jones and Mussen 1958).

It is not just the time of maturation that creates these personality characteristics and self-images. Rather, it is the reaction of peers and adults and the understanding they have of what is happening and why. One of the prime concerns of early adolescents is, "Am I normal?" Another is, "How acceptable are these changes to others?" A simple service we could provide youth would be a better understanding of the facts regarding what is going on, what is normal, and what will be happening before the process of becoming an adult is completed.

External situations and factors often make the stress of adjusting to physical maturation even more intense. One of these is the social setting of the junior high school. Theoretically, the junior high school was designed to ease the transition from a self-contained classroom with one interested, involved teacher to the larger world of the high school. In fact, however, the junior high school, and to a great extent the middle school, is just a duplication of the patterns of high school. So the transition is not eased, but intensified, because it now comes earlier in a young person's life. As it works out, the entry to junior high school occurs at the same time as the significant pubertal changes in most girls. Expectations of academic performance increase sharply at this time, even though the cognitive development of junior high students is inadequate to meet this demand. While the adolescent's social world is expanding, he or she is also faced with more complicated and demanding expectations. When all of these adjustments are superimposed on one period of life--one that is still wobbly in terms of coping skills--it is a major crossroads of development. The wonder is that so many early adolescents do so well and actually survive.

Parents often complicate these adjustments because they see going into junior high school as a rite of passage. It is at this time that they begin to treat their children differently and to hold different standards for their behavior--now they are "adolescents." Unfortunately, some parents also begin to expect problems, especially with peers and peer pressure. In some ways, of course, the expectation is realistic. As younger adolescents begin the separation process, they develop feelings of ambivalence toward their parents, and this often results in rebellious behavior. As the loyalties of young adolescents shift from their parents to their peers, outbursts are frequent, arguments are intense, and differences of opinion extreme. Rebelliousness is primarily a trait of the early adolescent, however, not adolescents as a whole.

Egocentrism reaches its peak during early adolescence, and objectivity is, by definition, inversely proportional to egocentrism. The junior high school student often is not yet able to generalize, to use symbols, or to process information with objectivity. Most

have not yet matured enough in their cognitive development to go beyond concrete approaches to learning. Because of this they are often "typed" as being difficult to teach. Their lack of objectivity and excessive involvement with themselves makes them inconsiderate of others and difficult to engage in an extensive conversation. If their level of maturity is not taken into consideration, parents and teachers may hold out unrealistic expectations of them that they are incapable of meeting. Then, when they cannot meet these expectations, they often feel inadequate, which fuels their already heightened sense of self-criticism.

Contrast these conditions with the circumstances of the high-school-age adolescent. Older adolescents have no distinctive new adjustments or changes in status to endure. Most have completed their physical growth and development. Their interpersonal relationships are more mature and constructive, and they are more highly critical in their evaluation of their peers. They are experimenting and learning new roles, but they plan and choose more thoughtfully. Having done some exploratory learning about the opposite sex, they are able to enter into more nurturing relationships based on mutual trust and an element of tenderness. When a person reaches high school, he or she usually has attained full cognitive development. This makes it possible to deal with contradictory aspects of the world, to accept some of the deficits of parents, to make moral decisions, and to consider a tentative vocational commitment. The late adolescent is able to consider others, and wants to. Finally, there is the desire and longing to take part in decision making, to shoulder responsibilities, to have a say in one's own destiny.

Adolescence is also the time, of course, when young people today encounter some of the barriers adults have created to completing the process of healthy development. Here they experience their vulnerability to some of society's external events. How have adolescents been shaped by these events, and what are the implications for the services we provide? To answer these questions, we need to examine the specifics of the events that are shaping the lives of adolescents today.

Social and Cultural Factors Affecting Adolescents

Three major changes stand out when one studies the external events affecting youth. These are the changing structure of families; the weakened tie between parents and youth and the subsequent dominance of the peer group as a prime agent of socialization; and the surrender of major developmental functions to agencies, social services, and schools. There are other factors: the increased specialization of job skills requiring higher levels of education; technological developments that have reduced the value of pre-adult labor and hence the opportunities for youth to explore adult work roles; and the omnipresence of television, which often competes with parents as a source of values and morals. As important

as these latter changes are, none affects the basic condition and growth of a young person as profoundly as the changes in family, the dominance of peer groups, and the delegation of developmental functions to agencies outside the home.

What these changes have produced has been greater behavioral freedom for youth without accountability; greater demands for social competence without systematic instruction; heavier peer pressure with less self-esteem to resist it; and more pursuit of pleasure and escape through drugs and sex without the awareness of more helpful alternatives. At the same time these changes have produced a loneliness that is different, more abnormal, and more pervasive than the kind one usually expects during adolescence. One wonders why this is so prevalent today.

Strommen's 1969 study of youth revealed five distinct "cries." These were the cries of loneliness, family trouble, prejudice, social protest, and joy (Strommen 1974). In 1979 Strommen did a less-extensive update on the data he had originally collected to see if there were any significant changes ten years later. Only two of the cries had changed. The cry of social protest was weaker, and the cry of loneliness had become more intense (Strommen 1979).

Others who have done similar research support Strommen's findings. Zimbardo (1980) speaks of this phenomenon when he calls our time the age of indifference, particularly as it relates to young people. "The Devil's strategy for our times is to trivialize human existence and to isolate us from one another while creating the delusion that the reasons are time pressures, work demands, or economic anxieties." As a result, Zimbardo believes, American youth are passively accepting a way of life that they view as empty and meaningless. This syndrome includes a constricted expression of emotions, a low threshold of boredom, and an apparent absence of joy in anything that is not immediately consumable--hence, the significance of music, drugs, alcohol, sex, and status-symbol possessions. According to Zimbardo, this condition is why cult leaders have been so successful in attracting youth. They offer simple solutions to complex problems, love-bombing affection-starved youngsters. "Cults attract a following not necessarily through political, religious, or economic ideology," Zimbardo writes, "but through offering the illusion of friendship, of non-contingent love. You exist, you are one of us, you get your fair share of our love and respect." This is the message we used to expect would come from parents.

According to Konopka, loneliness may drive a young person into delinquency, drug use, and self-destruction. Konopka (1976) found loneliness to be the common denominator in adolescent suicides. The rate of suicide for young people nearly tripled between 1955 and 1975. There is an average of 13 suicides a day, with 57 American children and teenagers attempting suicide every hour (Spencer 1979).

This deep yearning for love and relationships may also relate to the increase in teenage sexual activity and pregnancies. Nearly half of the nation's 15- to 19-year old girls have had premarital sex, according to Newsweek. Over one million teenagers become pregnant each year in the United States, and about 30,000 of these pregnancies involve girls under 15 (Gelman et al. 1980). Paula Duke, a professor in adolescent medicine at Stanford University, has some interesting observations about this sexual activity. In talking with girls who are sexually active she found that many of them do not seem to enjoy it. Girls express the desire for the closeness of being held, of having someone who cares about them and someone to care about, but the sexual act itself is not enjoyable. It would appear, then, that if a girl feels alone in a noncaring, friendless world, sex education is not going to turn the tide on sexual activity.

Who or what is to blame for these conditions and events that are having negative effects on our youth? What can be done? No one answer is available, but some partial answers can be found in looking more closely at elements of the adolescent's life.

Family Changes and Parenting

Of all the changes that have occurred in family life over the past 50 years, one thing seems most critical. This is the generally acknowledged fact that families are on their own, having surrendered most of their socialization influence to various other social institutions and informal groups. The American family has essentially shed in-laws, grandparents, cousins, aunts, and boarders. It has handed production over to offices and factories, religion to the churches, the administration of justice to the courts, formal education to the schools, and medical attention to the hospitals. It has in the process been stripped down to the bare frame of being marriage-centered and child-filled. This parceling out of responsibilities has caused some things to be done poorly and some not at all. The implications of this phenomenon are serious, especially when we know that services for youth are more successful when parents are intimately involved in the programs or services offered.

Although the changes noted above are serious, another change is even more important: the change in parenting and child-rearing styles. Research has shown that among all the factors affecting the adolescent in the context of the family such as the loss of an extended family, the reduction of economic cooperation, the cycle of divorce and remarriage, the changes in women's roles and the more equal relationships between husband and wife, the most important factor in a child's psychological development is the parenting style of the available parent (Lipsitz 1977).

Certainly Strommen's data bear this out. Strommen (1974) found that one fifth, or one out of five, of the over 7,000 youth in his

study expressed a cry of family trouble. Youth who expressed this cry were distressed over the lack of communication with parents and the lack of understanding between them and their parents. They were often chagrined about being treated "like children" and were disappointed by their parents' distrust or rejection of them and their friends. Usually, they reported, their parents communicated by nagging, criticizing their friends, expressing suspicion, and giving orders. Instead of treating them as someone they respected, their parents invaded their privacy and overcontrolled their actions. All this tends to destroy relationships.

Two out of five youth were bothered by parents' overstrictness. Those who live with overly strict parents say there is little discussion of problems--the parents communicate only by "yelling." This kind of treatment reduces young people's personal self-regard and increases their sense of guilt. It also increases their desire for personal freedom and independence.

Strommen's study also found that when parents distrust their children, this is 19 times more likely to predict family disunity than the simple fact of a divorce. Young people who don't have the trust of their parents are more susceptible to group pressures and are more likely to feel the loneliness, described earlier, that often leads to suicide.

It is easier to blame parents than to support them, of course. Over the past 10 to 20 years most social interventions have focused only on the child, leaving parents without much guidance or support. Recently, however, a movement to redirect services to parents has emerged. At the same time, parents have become more interested and involved in the problems of youth and are asking for concrete help. Consequently, many drug abuse prevention programs are beginning to focus on helping the significant adults in a young person's life to be more effective. This trend needs to continue.

Peer Group Factors

We as adults often distrust the adolescent peer group, bemoan peer pressures, and criticize the friends young people choose. Yet Hill (1973, p. 164) contends that it is negligent or extreme parenting styles that have forced adolescents into precocious or extreme loyalty and identification with a peer group. The family, in other words, pushes the adolescent out. The pull of the peer group alone is not enough. After studying youth in many different countries, Bronfenbrenner (1970) is particularly concerned about peer-group dominance and the lack of parental involvement. One of the most significant trends toward age segregation over the past 30 years, according to Bronfenbrenner, consists in a decline in the amount of time parents and children spend together. "Children," he says, "used to be brought up by their parents." In the absence of substantial adult participation in child rearing and direction

of peer relations, Bronfenbrenner believes that youth groups are actually a handicap to moral growth and development.

The tragedy of all of this is that adolescents often acknowledge their lack of competence to deal with peer groups. Among the most intense need expressed both in the Strommen study and by students in the Palo Alto Peer Counseling Program is the need to learn how to make friends and be a friend. Adolescents want opportunities that allow them to take leave of their public postures, to remove their masks, to trust, to love, and to care about themselves and others. As Strommen says, friends are to young people what bread is to the hungry and clothes to the naked.

Educational Conditions

Except for the family, the social institution of the school has the greatest influence on youth. This is where young people have opportunities for social contact with peers and adults, in addition to other kinds of learning. Yet for many adolescents, schools are not pleasant or supportive places to be. Young people in schools often experience racism and other forms of domination, severe and sometimes cruel competition and lack of understanding, and disinterested teachers and counselors. Too often schools fail to adjust their programs and services to the maturational or intellectual needs of their students. Chronological age is still the basic factor used to group and educate all students, and too few schools offer alternatives to this traditional model of education. The junior high school seems even less responsive to individual differences. According to Lipsitz (1977, p. 84) junior high schools are not only totally inadequate in meeting the social and educational needs of students, but they stress students' subordinate status and then feed them a diet of watered-down "real stuff."

Bronfenbrenner (1970, p. 162) is also concerned about the impact of the school on American youth. He feels that our educational system emphasizes subject matter to the exclusion of the development of personal qualities--values, motives, and patterns of social response, for example. According to Bronfenbrenner, "If radical changes are not introduced so that the young are exposed to modes of behavior for living in a cooperative society...it will be all children who will be culturally deprived...not of cognitive stimulation, but of their humanity."

What Youth Need the Most

Essentially, this chapter has been about the needs of adolescents. Yet certain needs are so important that they must be particularly highlighted. They are needs that adults can consider in planning and implementing programs, particularly programs aimed at the

adolescent peer group.

1. Increased respect from adults. Youth need to be seen as significant human beings who are able and eager to participate, to contribute, and to accept responsibilities as members of society. Refusing to recognize this need is a violation of their worth. It is also a violation of their chances of becoming healthy adults.

2. More time and involvement from adults. Any adult who really cares about and is interested in young people can become a very important person to them. There is no way to put a price on the help that adults provide when they voluntarily, caringly share their time with young people.

3. More constructive opportunities to experiment with life. We as adults must create more ways in which we can legitimately use the special talents and expertise of young people. They need not only to feel that they are helping to support and conduct the business of society; they also need better ways of being initiated into work roles. Even the opportunities for part-time work experience for youth appear to be increasingly limited. Creative solutions to this problem must be found.

4. More help in developing social competence. In a more complex, sophisticated world, with fewer opportunities to learn from adult models, isolated and confined to a peer group, young people need help in learning how to cope and survive. Today it is easier for youth to learn how to work with a computer than to learn how to get along with people. Do we want to pay the price that ultimately this will demand? High on the list of competencies youth need and want is learning how to be a caring person, how to reach out and help a friend who needs a friend.

5. More qualified adult youth leaders. We often assign and allow incompetent, ill-equipped adults to work with youth, giving them prime time to touch young people's lives. Again, we may be paying a high price for such neglect. Essential qualities of adults who are given the opportunity to lead and guide young people should include acceptance of youth as equals in society; knowledge and understanding of the great variety of their abilities and aspirations; the capacity to show deep respect and love for youth; and the ability to believe in youth and let them play a significant part in their programs, their decisions, and their world.

6. More opportunities for moral development. It is significant that in Strommen's (1979) update on the cries of youth, the social protest cry has become weaker in the past ten years. Society's failure to involve youth in shaping the quality of life and to guide youth in reflecting on their experiences and decisions is limiting their moral development. A moral and ethical life may seem old-fashioned, but the future quality of American society may depend on more attention being given to the moral development of adolescents.

7. Help to find the meaning of life. Examining the meaning of life is what living is all about and should be at the core of young people's activities and experiences. Konopka (1976) found in her study of girls that many of them are struggling to find a meaning in life. Although young women today are growing up in a period in which many traditional roles or myths are no longer valid, they still wonder what they should believe in and reject. This search, common to so many adolescents, often expresses itself in desperate behavior, in a hopeless shrug of the shoulder, in a drowning in alcohol, or in angry outbursts. Yet the desire to participate in the world and to have a part in their own destinies remains strong. An 18-year-old girl from a rural community expressed it in this poem:

You talk about the problems of the world
And I'm not allowed to speak cause I'm just a little girl.
But there's something I'd like to say to you,
You know,
It's my world too.
You think that you can understand more than anyone at all
But, mister you're really short when you think you're tall!
And I'm not allowed to give my opinions cause I'm not as big
as you.
Try not to forget,
It's my world too.
They talk about the young people all the time
But they don't think about others who are out of line
And some problems mean nothing to you
But while I'm living here,
It's my world too.
What I want is for the best for everyone
'Cause thinking of yourself is not good in the long run
So think about, what do you want for me and you
And while you're thinking, remember,
It's my world too!

Bobbie Prewitt²

In the end, there really is no adolescent "society." Rather, there are young people who are growing, reaching, touching, stretching, and testing--who need to be watered with the wisdom of our tears.

²From: Konopka, G. Young Girls: A Portrait of Adolescence. Englewood Cliffs, NJ: Prentice-Hall, 1976. Copyrighted 1976.

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II. INFLUENCES ON ADOLESCENT PROBLEM BEHAVIOR: CAUSES, CONNECTIONS, AND CONTEXTS

by Ardyth Norem-Hebeisen and Diane P. Hedin

Normal, healthy adolescent behavior can often be surprising or disturbing to parents and other adults. In recent years, however, powerful social factors have combined to produce a range of problem behavior among youth that is a source of even greater concern. The epidemic of youthful drug and alcohol abuse that began in the 1960s and continues into the present is an especially alarming manifestation of this trend.

The basic premise of this monograph is that peer influence can be an effective means of preventing drug abuse. Peer-group strategies are certainly not the only effective approach to drug abuse prevention, however, and peer influence is not the only factor associated with drug problems among youth. By stepping back and viewing the wider context of adolescent drug abuse and other problem behavior we can find clues to those issues that may be most important to address through peer-group strategies and programs. Without a broader view we are likely to oversimplify or misunderstand the role of peer influence in relation to other factors--and possibly, as a consequence, to build prevention programs on a weak theoretical foundation.

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Substance Abuse as a Problem Behavior

Not all alcohol and drug use is clearly problem behavior. In fact, if deviant or problem behavior is behavior that a considerable number of people view as reprehensible and beyond tolerance, then a large portion of experimental and occasional use cannot truly be viewed as deviant. For many youth experimentation with alcohol and drugs represents a push toward independence and adulthood (Mitchell 1975). While one may criticize a society that has so few constructive rites of passage to adulthood that adolescents must use smoking, drinking, and getting high to mark the transition, these behaviors in moderation do not appear to be always problematic. Several studies show that while the majority use substances occasionally, only a minority become intensively involved (NIDA/Jessor 1978; NIDA/Johnston et al. 1979). Yet the more involved minority represent a significant proportion of youth, and the impairment and loss associated with their alcohol and drug use is of considerable consequence.

A number of studies indicate that drug and alcohol use among youth ranges from apparently normal behavior to obviously dysfunctional behavior accompanied by a wide variety of other behavioral and psychological difficulties. Dysfunctional use tends to be characterized by increasing quantity and the use of increasing varieties of both legal and illegal substances. It is often characterized by onset at an earlier age, and it tends to be associated with other kinds of dysfunctional behavior as well (Hamburg et al. 1974; NIDA/Johnson et al. 1979; NIAAA 1978).

Overlapping Patterns of Problem Behavior

Alcohol and drug use are common among youth who also manifest other forms of dysfunctional behavior. Such youth are deviant in the sense that they participate in activities that are not a part of the mainstream of youth activities--activities that are considered to be contrary to social norms and consensually defined constructive behavior. Dropping out of school, truancy, running away from home, theft, teenage pregnancy, and mental health problems are examples of such problem behavior. The social costs of these behaviors are high for the individuals involved and for society as a whole.

Although today experimental drug use in the peer-group setting is often regarded as normal, not problematical, as young people use increasing quantities or varieties of both legal and illegal substances, experimental use can quickly become abuse. According to a 1978 national survey of drug use among high school seniors (NIDA/Johnston et al. 1979), by twelfth grade only about 10 percent of youth have never used any substance. About 90 percent have used alcoholic beverages once or more in the past twelve months; 65 percent have used them six or more times; and about 20 percent have used them weekly or more often. About 30 percent of young people

report using cigarettes, 50 to 60 percent report using marijuana, and 20 percent report using other substances such as hallucinogens, sedatives, stimulants, tranquilizers, and opiates (polydrug use). A significant minority of youth are regular polydrug users. For each substance, youth report varying degrees of use, but there are clear patterns of overlapping use. For example, almost all marijuana users also use alcohol. Most youth who try or use other drugs also use alcohol and marijuana. There are some exceptions to these patterns. A few (but very few) young people report tobacco use but no alcohol use; a few smoke marijuana but do not drink alcoholic beverages.

Other problem behaviors often coincide with heavy drug use. Young people who drop out of school are also commonly found in the polydrug use category; only a few of them report no use (NIDA/Johnston et al. 1979). Youth who engage in theft or run away from home tend to be among those who drop out and among those who show some substance use. The more aberrant behaviors are likely to cluster in groups and to be characterized by more intense use of alcohol and a variety of drugs. This clustering of problem behaviors is a relatively recent social phenomenon--one that has been a source of great concern to parents, educators, policy makers, and other adults. (Additional research-based documentation of these patterns is cited in the "Behavior" section of the appendix to this chapter, pp. 31-37. The appendix summarizes the body of research on which the discussion in the following pages is based. The body of research is extensive and growing. Therefore, it was impossible in this relatively brief discussion to examine all the possible intercorrelations of problem behaviors and related factors. Instead, the research reviewed for this chapter constitutes a solid basis for discussing selected factors.)

Correlates of Adolescent Problem Behavior

During the 1970s, when drug abuse and other forms of adolescent problem behavior were beginning to be viewed as symptoms of a deeper crisis among the nation's youth, a number of investigators tried to clarify our understanding of the factors leading to both initial and excessive use of substances among youth and of adolescent problem behavior generally. They also studied the processes by which people move into dysfunctional patterns of drug use and factors that appear to be important for the prevention and treatment of drug problems.

The literature based on these studies--commonly referred to as correlate research--is so vast that only a portion of it could be reviewed for this monograph. Although caution should be used in drawing sweeping conclusions from a review of studies based on such a wide range of data and methods, it is possible to examine this literature as a whole and find in it continuity and coherence. Despite the use of different measures, different populations, and different study methods in the studies that were reviewed, certain

results recur consistently.

Since such a wide variety of correlates has been identified, we have organized them according to a systems model, which essentially creates separate categories of correlates and attempts to examine how the different categories relate to each other. We will discuss five categories that define an individual's relationship with self and environment: physical/genetic, cognitive/emotional, behavioral, social network, and societal/cultural.

Physical/genetic includes physical processes and functions. When we discuss alcohol and drug use, this category could include correlates such as hyperactivity, allergic reactions, heredity, and blood sugar level. Physical/genetic correlates such as early physical maturation may also be important when we consider aspects of school performance, delinquency, truancy, running away, sexual acting out, and other dysfunctional behavior.

Cognitive/emotional includes a wide variety of correlates such as the development of values, motivation, thought processes, and emotional processes. Research that considers other patterns of dysfunctional behavior may also focus on strategies used in problem solving, attribution of meaning, or dealing with depression or anxiety.

Behavioral correlates consist of those actions that others can observe an individual performing. In relation to dysfunctional behavior, these include acting out, manifest skill in problem solving, self-control, management of demanding tasks, communication skills, and task achievement of many kinds.

Social network correlates refer to that matrix of relationships in which each individual is enmeshed; they comprise that individual's social reality. They include peers, who have an influence on alcohol and drug use as well as on other behaviors; parents, who serve as models of drug use, ability to cope with stress, and social relationships (models that may be either complementary or contradictory to peer influence); teachers and students at school; fellow workers in a job setting; and people contacted through participation in extracurricular and religious activities.

Societal/cultural correlates are those influences that society and culture as a whole place on members of society. They include cultural expectations of youth; the influence of the mass media; and national and regional opinions about youth development, employment opportunities, drug and alcohol laws, truancy, vandalism, theft, sexual activity, and related behaviors.

As is evident from the accumulated body of correlate research summarized in the appendix, there are many similarities among youth who engage in various forms of problem behavior. Furthermore, many of the correlates associated with problem behavior--impulsiveness, irresponsibility, and rebelliousness, for example--are similar to each other. These similarities are most apparent in the

cognitive/emotional, behavioral, and social network categories, as highlighted below:

- Cognitive/emotional correlates significantly related to a variety of problem behaviors include low self-esteem, impulsiveness, negative attitudes toward school, low cognitive development, and low academic aspirations.
- Behavioral correlates most frequently associated with other problem behaviors are school discipline problems, delinquent behavior, all types of antisocial behavior, and frequent use of cigarettes, alcohol, and other drugs. (In short, many types of problem behavior are closely correlated with each other.)
- Social network correlates most strongly associated with involvement in problem behavior include a variety of forms of family disorganization, inadequate parenting, poor parent-child relationships, and peer models.

Peer models for and approval of problem behavior are critically important social network correlates. They are almost always a part of the experience of those involved in drug and alcohol use, running away, adolescent pregnancy, premarital sex, and dropping out of school.

Variables Affecting the Onset of Problem Behavior

How can we know when factors that are associated with problem behavior might actually lead to problem behavior? In a pure cause-and-effect sense, this is difficult to determine. If we could define precise causal relationships for such problem behaviors as drug abuse, drug abuse prevention would be a simple matter of applying scientifically exact technologies. It is, however, a much more complex and human process, and at present we can only speculate about the causes.

The growing body of research into drug abuse correlates does suggest some consistent patterns, however, and there is beginning to be a consensus among prevention theorists that can help us to understand, predict, and prevent problem behavior among adolescents (Robins et al. 1977; Robins 1978). Problem behavior among youth almost always appears to be associated with a broader set of variables that subsume the correlates of problem behavior summarized above. The three variables that seem to occur most consistently in relation to problem behavior are stress, skill deficiencies, and situational constraints.

Stress. Youth experience stress in a variety of forms--for example, loss (of a parent or friend), rejection, abuse (sexual or physical), and failure in varying degrees of severity and across different aspects of their experience. At-risk youth are highly

stressed; although all youth inevitably experience some stress, those with lower levels of stress appear to be less inclined toward problem behavior.

Skill deficiencies. Young people vary according to the kinds of skills they have for coping successfully with stress when it occurs. Important developmental skills relate to such tasks and life events as problem solving, communication, accurate self-assessment, and constructive processes for interpreting and understanding experiences. At-risk youth are often characterized by low attainment of such skills. Some youth who have adequate life-coping skills can deal effectively with high degrees of stress; others who lack such skills are more vulnerable.

Situational constraints. At the situational level the influence of the peer group is particularly important. Many teenagers' peers or role models encourage experimentation with high-risk behaviors such as substance abuse, precocious sexual activity, and vandalism. At-risk youth often find themselves in situations where problem behavior is expected and supported.

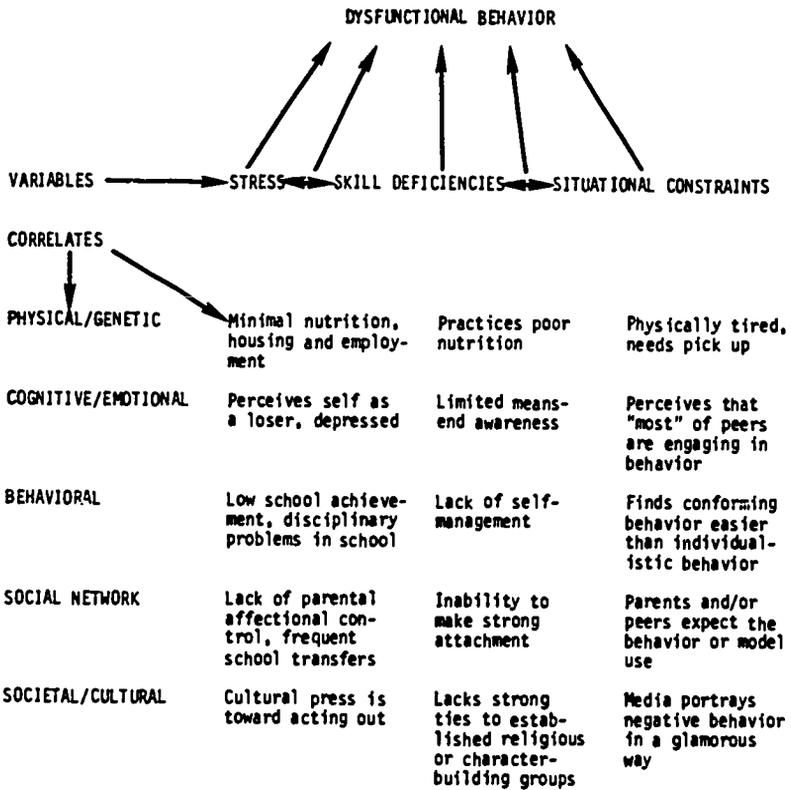
All of these variables can interact with each other, and they can contribute separately or collectively to the development of problem behavior. Figure 1 illustrates the nature of the possible interactions by presenting examples of the correlates of problem behavior from the appendix. As figure 1 indicates, many correlates and variables can work together to determine whether or not a young person will become involved in substance abuse or other forms of problem behavior. The influences vary from individual to individual. No one factor by itself is either necessary or sufficient to produce problem behavior. Rather, it appears that the combination of varieties and degrees of factors produces a range of problem behavior of varying severity.

A "Common Cold" Metaphor

The conceptual approach described above can be seen in terms of a health problem that, although less serious, has been just as difficult to eradicate as drug abuse: the common cold.

To prevent a cold we have to pay attention to a wide variety of conditions that can be seen as corresponding to the three variables of stress, skill deficiency, and situational constraints. We try to maintain a proper balance of conditions in order to reduce our vulnerability, i.e., we try to reduce stress. Therefore, we try to maintain proper nutrition and get enough rest, fresh air, and exercise. To minimize exposure to pathogens, we stay away from people who are already sick with colds and we avoid extreme temperatures, i.e., we try to minimize situational constraints. Some of these efforts help us maintain a condition of balanced health, i.e., improve our coping skills, and others keep us from exposure to conditions that are known to contribute to physical breakdown

Figure 1
EXAMPLES OF FACTORS THAT INFLUENCE YOUTH TOWARD DYSFUNCTIONAL BEHAVIOR



when the body is vulnerable.

In a similar way, if we are to prevent alcohol and drug abuse and other problem behavior among youth, we need to maintain healthy balanced conditions and reduce exposure to harmful influences. We must attempt to decrease physical and emotional stress and increase a wide range of coping skills. We must also create and maintain healthy, constructive environments and social situations. By maximizing the survival, maintenance, and healthy growth of individuals and groups, we can reduce the likelihood of problem behavior.

Yet other measures need to be taken to deal with the sometimes unavoidable circumstances that induce problems. An individual who has been raised to be mentally and physically sound and to cope successfully with stress may suddenly encounter extreme uncertainty, distress, or danger. If, at the same time, drugs and alcohol are readily available and there is strong social support for their use, the likelihood of use will increase (this happened to young soldiers in the Vietnam war). For adolescents, the influence of the drug-oriented peer culture can provide a similar jolt.

Relationship of Peer Influence to Other Factors and Implications for Prevention Programming

Given all the previously discussed factors that influence an adolescent's drug and alcohol use and related problem behavior (the five categories of correlates and the three major variables described above), where can a prevention program begin? Although a number of correlates are associated with problem behavior, one that appears frequently and exerts an undeniable influence is association with peers who also accept and exhibit such behavior. Peer influence certainly is not the only factor, or even in many cases the critical factor. Nevertheless, the growing importance of peer influence in normal, healthy adolescent development should alert us to the need for particular attention to peer influence in any discussion of problem behavior among adolescents.

The almost universal presence of peer-group conformity can be understood from several perspectives. Developmentally, adolescents derive progressively less protection and information from their parents, while at the same time they are receiving increasing support and choosing more interaction with peers. For example, Clark et al. (1975) document a shift toward friends as an information source about drugs from seventh grade on. Utech and Hoving (1969) and Curtis (1974) find that parents decrease as reference sources as children grow older. While both found decreases in conformity to parents, only Utech and Hoving found increasing conformity to peers. Curtis indicated that respect for the advice and directions given by friends did not increase.

This difference in findings may be clarified in several ways.

First, youth are not influenced equally by peers in all areas of life. Teenagers most strongly influence each other regarding dress and appearance, choice of leisure-time activities, language, and use of alcohol and drugs (Hedin and Simon 1980). Parental influence is strongest with regard to moral and social values, vocational choice, and educational plans (Cooper et al. 1977). Further, Stone et al. (1979) point out that some youth are more parent-oriented while others are more peer-oriented, and that choices with respect to drug use may differ according to those orientations. Indeed Jessor and Jessor (1977), Kandel (1978, 1975), and Lassey and Carlson (1980) have all documented that the degree of emotional closeness between parents and their adolescent children is a factor in drug use. Values consensus between parents and youth has also been noted by Jessor and Jessor (1977). For example, youth who are alienated from their parents who oppose use, and who are at the same time friends with peers who favor use are more likely to use drugs and alcohol (Jessor and Jessor 1977); Kandel 1975; Edelbrock 1980). The studies suggest that youth are more at risk if people in their dominant reference group use substances and less at risk if the group is comprised of nonusers. Peer-oriented youth are more at risk if their friends use substances; parent-oriented youth are more at risk if their parents are users.

Although parental influence is more important for some young people than for others, peer influence is the dominant factor for many teenagers' entrance into problem behaviors. Since peer influence is so clearly part of the problem, it must also be part of the solution. If this is to happen, then it is important to understand how peers can influence each other in positive ways. Peers not only influence each other negatively by manipulation and coercion, but also positively by offering advice, support, and the opportunity to discuss conflicting points of view (Kiesler and Kiesler 1969; Shute 1975). In the peer group, attitudes, values, parental behavior, the school, and society are discussed, judged, and mediated. As participants in these groups, teenagers are influenced by their desire to conform to both stated and unstated group expectations. The way in which peer influence impels youth toward or away from drug experimentation is complex--but undeniably important.

Peer Approaches in Prevention

The foregoing discussion of problem behavior notwithstanding, strong peer interaction and influence is a normal, necessary, and healthy part of adolescent development (Erikson 1968). This natural tendency to rely on peers provides an opportunity to channel that very force toward healthy behavior and the promotion of the survival, maintenance, and growth of the individual. Peer groups have outstanding potential as an effective method for preventing problem behavior because they can readily be tailored to

deal with so many of the factors related to stress reduction, building coping skills, and modifying situational constraints outlined previously. For example, the following types of peer programs can help to address many different factors associated earlier in this chapter with adolescent problem behavior. All are discussed in detail in the next chapter.

- Positive peer influence programs can help to channel peer pressure in positive directions; they can also help to develop and enhance self-esteem and problem-solving and decision-making skills.
- Peer teaching programs address the need not just for useful information and skills among youth, particularly in relation to academic success in school; they also provide participating youth with meaningful roles and real-world responsibilities at a time when youth are increasingly isolated from such roles and responsibilities in the prolonged adolescence of the peer culture.
- Peer counseling/facilitating/helping programs assist young people in solving problems and coping with some of the challenges with which they are inevitably confronted in modern society; family problems and problems with friends and school are commonly dealt with in these kinds of programs.
- Peer participation programs can function as a link between the world of peers and the world of adults by providing peers with real-world tasks and responsibilities and adult guidance in accomplishing them.

In short, peer programs can address all the major variables--stress, skill deficiency, and situational constraints--that the foregoing discussion has identified as being closely related to problem behavior. The growing popularity of peer-group strategies in schools and youth-service programs across the country attests to the effectiveness of these approaches, and research evidence has also begun to support such approaches.

In Conclusion

This chapter has analyzed a broad spectrum of factors related to adolescent problem behavior and in doing so has proposed a theoretical approach both to the development of problem behavior and to ways of preventing it. Although we still know very little about actual cause-and-effect relationships, a number of closely related sociocultural correlates of adolescent problem behavior have been identified by various studies, and many of these recur consistently in relation to overlapping patterns of problem behavior. The role of peer influence is only one of many factors, but, given its significance in normal, healthy adolescent development, it is critical.

By providing as many opportunities as possible for healthy development and by minimizing risks we can reduce young people's vulnerability to problem behavior. Since anything that severely obstructs the survival, maintenance, or growth of an individual may lead to negative outcomes, an effective approach to the prevention of problem behavior calls for many kinds of simultaneous efforts. Prevention should work to minimize avoidable stress, abuse, and loss in the lives of young people. It should provide a wide range of constructive coping skills--skills that can promote healthy social and emotional development and thus help in the management of unavoidable stresses. Further, prevention should reduce the impact of situational factors that encourage drug and alcohol abuse.

Peer group approaches show great promise in accomplishing many of these ends. Peer programs can help young people to become more competent, to make meaningful contributions to their peer groups and their communities, and, most important, to gain experience in functioning as effective and concerned human beings.

APPENDIX

This appendix summarizes the research on factors relating to alcohol and drug use, running away, premarital intercourse, adolescent pregnancy, dropping out of school, and mental health problems referred to throughout chapter II.

For a significant number of subjects, research findings point to events, influences, and personal characteristics that appear to occur before the onset of problem behavior. These we call antecedents. Research also documents events, influences, and personal characteristics that are present at the time individuals are engaging in the problem behavior. These we call concomitants.

For those interested in the prevention of problem behavior during adolescence, the distinction can be useful. For example, if research has clearly demonstrated that a factor such as poor problem-solving skills is usually present prior to and while a person is experiencing dysfunction behavior, an intervention to enhance problem solving skills would be clearly indicated. However, if research showed that poor problem-solving skills were only a concomitant of the dysfunctional behavior, this factor probably would not be so important. (One might assume in such a case that the dysfunctional behavior led to a decline in problem-solving skills.) Consequently, although information about concomitants can suggest directions for prevention programming, it is not as cogent as information about antecedents. In order to provide the reader with a clearer picture of the various factors that contribute to dysfunctional behavior, the appendix is divided into two distinct categories: antecedents and concomitants. Some of the factors may be found listed in both categories.

A bibliography listing the various studies cited in the appendix appears on pp. 38-45.

ANTECEDENTS

CONCOMITANTS

PHYSICAL/GENETIC

Failure to meet basic survival needs, health care, nutrition, housing, employment found prior to mental health problems (Bronfenbrenner 1974)

Early maturing males, but not females, were sexually experienced at very young ages (Kinsey et al. 1953; Chilman 1963)

Genetic factors are associated with acute toxic reactions to drugs (Yesell 1972)

Excessive use of marijuana may result in cardiovascular distress and injury (Johnson and Murray 1980)

ANTECEDENTS

CONCOMITANTS

PHYSICAL/GENETIC (cont.)

Girls who become pregnant entered adolescence earlier than normal (Moore and Caldwell 1977)

Genetic factors appear to play a role in the development of alcohol problems (Schuckits et al. 1972; Goodwin et al. 1973) and also in mental health problems and suicide (Schulsinger 1980)

Individuals are more vulnerable to adverse effects of toxic substances on brain during childhood and adolescence (Spyker 1975)

COGNITIVE/EMOTIONAL

Negative attitude toward school and low self-esteem found to precede onset of drug use (Ahlgren et al. 1980)

Low sense of psychological well being precedes onset of marijuana use (Smith and Fogg 1978; Paton et al. 1977; Haagen 1970)

Low self-esteem regarding school found prior to onset of drug use (Norem-Hebeisen 1980; NIDA/Smith 1975b)

High rebelliousness, untrustworthiness, sociability, and impulsive traits found in later drug users (NIDA/Smith 1975b)

Lower ego maturity predicts psychopathology in adults (Kohlberg et al. 1970)

Scores of later premaritally pregnant girls were somewhat higher with respect to being more energetic, nonconformist, more outgoing, and socially active (Moore and Caldwell 1977)

Psychedelic drug use is associated with high scores on measures of alienation and search for meaning, disillusionment and rebellion, need for stimulation, search for self-definition, seeking relief from anxiety and tension, high need for novelty, insecurity, egocentricism, shyness, feeling inadequate, depression, and tenseness (Braucht et al. 1973)

Dislike of school is associated with initial drug use (Ahlgren et al. 1980), dropping out of school (Bachman et al. 1978), running away from home (Brennan 1980). Onset of marijuana use is associated with higher scores on political, personal, and family estrangement scales (Clarke and Levine 1971)

Lower educational aspiration correlates with dropping out of school (Bachman et al. 1978), illicit drug use (Milman and Wen-Huey 1973), and pregnancy (Chilman 1963)

ANTECEDENTS

CONCOMITANTS

COGNITIVE/EMOTIONAL (cont.)

Tolerance of deviance strongly predicts alcohol and drug use, radical politics, delinquency, premarital sex (Jessor and Jessor 1977)

Inconsistency between one's own and one's parents' opinions about drug use strongly predicts marijuana use (Jessor and Jessor 1977)

Disagreement with parents' opinions about drinking predicts frequency of drunkenness (Jessor and Jessor 1977)

Lower academic aspirations predict marijuana use (Jessor and Jessor 1978)

Less adequate problem solving is found among both drug users and youth with mental health problems (Spivack et al. 1976)

Lower expectation of getting one's needs met is more frequent among heavier drinkers (Jessor et al. 1968)

Lower commitment to traditional values is associated with premarital intercourse (Vener and Stewart 1974)

Lower religiosity is associated with premarital intercourse (Jessor and Jessor 1977; Cvetkovich and Grote 1976) and drug use (Jessor and Jessor 1977)

Problem drinking seems more associated with personality factors such as alienation, rather than parent and peer variables (Smart and Gray 1979)

Lower cognitive development is associated with drug use (Spivack et al. 1976), premarital intercourse, and pregnancy (NIH/Chilman 1979)

Higher life stress scores are found in drug-dependent adolescents (Duncan 1977) and those with mental health problems (Coddington 1972)

Risk taking and sensation seeking is associated with premarital intercourse (Cvetkovich and Grote 1976)

Lower self-esteem is associated with dropping out of school (Bachman et al. 1978), premarital intercourse (Cvetkovich and Grote 1976), and running away (Brennan 1980)

ANTECEDENTS

CONCOMITANTS

COGNITIVE/EMOTIONAL (cont.)

Concern about parents' drug use, and siblings' drug use is correlated with dropping out of school (Harris 1980)

Impulsive, fatalistic attitudes are associated with dropping out of school (Conger 1973)

A lack of long-term goals is associated with dropping out of school (Conger 1973; Bachman et al. 1978)

BEHAVIORAL

Low school achievement predicts drug abuse (NIDA/Smith 1975b; Jessor and Jessor 1977), dropping out of school (Bachman et al. 1978), and mental health problems (Kohlberg et al. 1970)

Frequent cigarette smoking predicts drug use (Smith et al. 1975) and dropping out of school (Bachman et al. 1978)

Involvement in minor delinquent activities predicts drug use and dropping out of school (Bachman et al. 1978) and onset of use of hard liquor (NIDA/Kandel 1975c)

Disciplinary problems in school predict drug use and dropping out of school (Bachman et al. 1978; Nylander and Rydelius 1973)

Delinquent and deviant behavior predicts subsequent drug use (Jessor and Jessor 1978; NIDA/Johnston 1979; Kandel 1973)

Lack of success in attainment of school goals correlates with alcohol and marijuana use (Cooper et al. 1977), use of illicit drugs (Milman and Wen-Huey 1973), promiscuity (Sorenson 1973)

Frequency of school absenteeism correlates with increasing levels of drug use (Cooper et al. 1977) and dropping out of school (Office of Education 1978)

Narcotic addicts have been found to be immature, insecure, irresponsible, egocentric, hedonistic, and lacking in personal controls (Braucht et al. 1973)

Frequent use of alcohol and drugs is associated with premarital intercourse (Vener and Stewart 1974; Jessor and Jessor 1977) and running away from home (Edelbrock 1980)

Heavy drug use and use of hard drugs is associated with promiscuity (Vener and Stewart 1974)

ANTECEDENTS

CONCOMITANTS

BEHAVIORAL (Cont.)

All types of antisocial behavior in childhood predict a high level of antisocial behavior in adulthood (Robins 1978)

Nonvirgin females and males are more likely to engage in delinquent behavior (Vener and Stewart 1974)

SOCIAL NETWORK

Parental use of hard liquor predicts use of marijuana by children and transition to other drugs (Kandel 1974)

Parental divorce, arrest, and drug use problems predict liability to addiction (Robins et al. 1977)

Lack of closeness between parents and children predicts drug use (Kandel 1974)

High level of adolescent peer activity predicts marijuana use (Kandel 1974)

Pattern of drug use and problem behavior by close friends is a strong predictor of marijuana use (Kandel 1974) and alcohol abuse (Jessor and Jessor 1977)

Lack of an enduring relationship involving intensive interaction predicts mental health problems (Bronfenbrenner 1974)

Stressful families and broken homes precede dropping out of school (Bachman et al. 1978)

Family factors such as parental and sibling drug use, family disorganization, father unemployed, and one or both parents missing are associated with solvent abuse (Barnes 1979)

Frequent drug use is associated with a perceived lack of parental support (Cooper et al. 1977; O'Dowd 1973; Blum 1972)

Male addicts lack identification with a positive male figure (Harbin and Maziar 1975)

Greater heterosexual activity is associated with frequent drug use (Milman and Wen-Huey 1973)

Family emphasis on independence instead of self-discipline and community responsibility is associated with frequent drug use (Blum et al. 1978)

Same-sex parents and siblings serve as "models" for smoking by adolescents (Banks et al. 1978)

Frequent drug users found to have less supportive perspective (O'Dowd 1973)

Boys who were frequently drunk often had mentally ill or alcoholic fathers (Nylander and Rydelius 1973)

ANTECEDENTS

CONCOMITANTS

SOCIAL NETWORK (Cont.)

Dropout-prone youth in a middle-class school had a high incidence of victimization (physical abuse, incest or sexual assault) and loss (death of a family member or friend, moves, or school transfers) (Harris 1980)

Lack of consistent parental discipline is associated with premarital intercourse (Ehrmann 1959; Cvetkovich and Grote 1976)

Nonvirgin females were more apt to be in one-parent families, in a variety of home situations (such as substitute parents), and in poor communication with parents (Kantner and Zelnick 1972; NIH/Chilman 1979; Sorenson 1973)

High parental and peer acceptance of deviance, friends modeling and approving deviance, and frequent conflict with parents were associated with premarital intercourse (Jessor and Jessor 1977)

Nonvirgin females with many sexual partners ranked high on peer involvement and low on parent involvement (Miller and Simon 1974)

Rejecting parents are associated with children who are frequent runaways (Edelbrock 1980)

Poor relationships with parents, high family stress, and low educational attainment of parents is associated with dropping out of school (Office of Education 1978; Harris 1980; Bachman et al. 1978)

Low-income, minority youth were more likely to be school dropouts (Bachman et al. 1978)

There is a strong association between poverty and premarital intercourse and pregnancy among black adolescent girls (Kantner and Zelnick 1972)

ANTECEDENTS

CONCOMITANTS

SOCIETAL/CULTURAL

Adolescent drug use has grown as the broader society increasingly becomes a drug culture (Conger 1973)

Equal rights for women, a decrease in early marriages, and more permissive attitudes toward sexual behavior may be reasons for increased rates of premarital intercourse and adolescent pregnancy (NIH/Chilman 1979)

Portrayal of drugs as glamorous stimulates drug use by youth (Hanneman and McEwen 1976)

Growth of new drugs in high schools is sudden and sporadic --a form of fad behavior (Hunt et al. 1979)

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III. TYPES OF PEER PROGRAM APPROACHES

by Henry S. Resnik and Jeanne Gibbs

Introduction

One of the assumptions underlying peer programs for drug abuse prevention is that, particularly for young people, peer groups can have a significant impact on attitudes and behavior. The impact can be either positive (the peer group provides a healthy support system as young people make the transition from youth to adulthood) or negative (often peer groups are a principal setting for adolescent problem behavior). Generally, peer programs aim at enhancing the positive impact of peer groups and minimizing their potential negative impact. Peer programs are not monolithic, however; they employ diverse approaches in attaining similar goals.

A wide variety of program approaches directed at youth can be categorized as peer programs, and the inclusion of a program in this category depends on the conceptualization of a peer program being applied. The narrower the concept, the narrower the range of programs. Given the diverse cultural and psychosocial variables associated with drug abuse and other kinds of problem behavior, it is in the interest of drug abuse prevention practitioners to include as broad a range of program options as possible.

The discussion of different types of peer programs in this chapter is based on an assessment of more than 60 peer programs that had either been conducted or were being conducted throughout the country at the time of this writing. The assessment employed several different methodologies including first-hand observation

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of peer programs in progress, computer searches of relevant data bases, telephone interviews with developers of peer programs, and a literature search of numerous books, periodicals, and program manuals. Many of the programs covered by the research are identified by name in this chapter and are also listed in chapter V ("Resources") for further reference. Others are described in terms of generic models. Clearly, the sample of peer programs assessed for this monograph represents only a small percentage of the many thousands of peer programs in existence across the country. Nevertheless, the sample is broadly representative of many different program types.

An important consideration in the following overview of peer programs is its broad interpretation of the term peer. Many discussions of peer-oriented programs distinguish between programs that involve youth of the same age interacting with each other and youth of one age--teenagers, for example--interacting with youth of a younger age, usually elementary school-age children. Although some program developers would refer to the latter as cross-age programs, they are subsumed here under the rubric of peer programs. For reasons that should become evident, cross-age programs have more commonalities with "same-age" peer programs than differences.

A Broad View of Program Goals

One useful way of looking at peer programs is to examine the various prevention-oriented goals that they address. Although peer programs can be diverse and seemingly unrelated, all peer programs tend to focus on one or more goals that, taken together, constitute clear paradigms. These goals, in turn, pertain to many of the developmental factors and correlates of problem behavior described in the preceding chapters.

Certainly one of the most important aspects of peer programs--one that virtually all peer programs targeted at adolescents have in common--is that they address a major problem of adolescents in our society: a lack of meaningful roles, activities, and opportunities for participating in decisions that affect their lives. It is this lack of meaning that leads to the isolation of adolescents in the idle, purposeless peer groups where so much problem behavior and acting out originates. One goal of many peer-oriented programs, therefore, is to generate meaningful involvements, activities, and responsibilities for youth and to encourage the participation of youth in real-life decisions and the important business both of youth-serving institutions and of the larger society.

Another major goal of peer programs addresses the widespread problem of negative peer pressure--that is, peer pressure to engage in such antisocial and self-destructive activities as substance abuse, sexual promiscuity, and juvenile delinquency. Many peer programs have as a basic goal the channeling of peer pressure and the

normal energies and risk-taking tendencies of youth toward constructive ends.

A third major goal deals with young people's need for skills and competencies of all kinds--social, interpersonal, academic, organizational, and many others. Here the program goal is to provide young people with needed skills, often through training in a peer-group context.

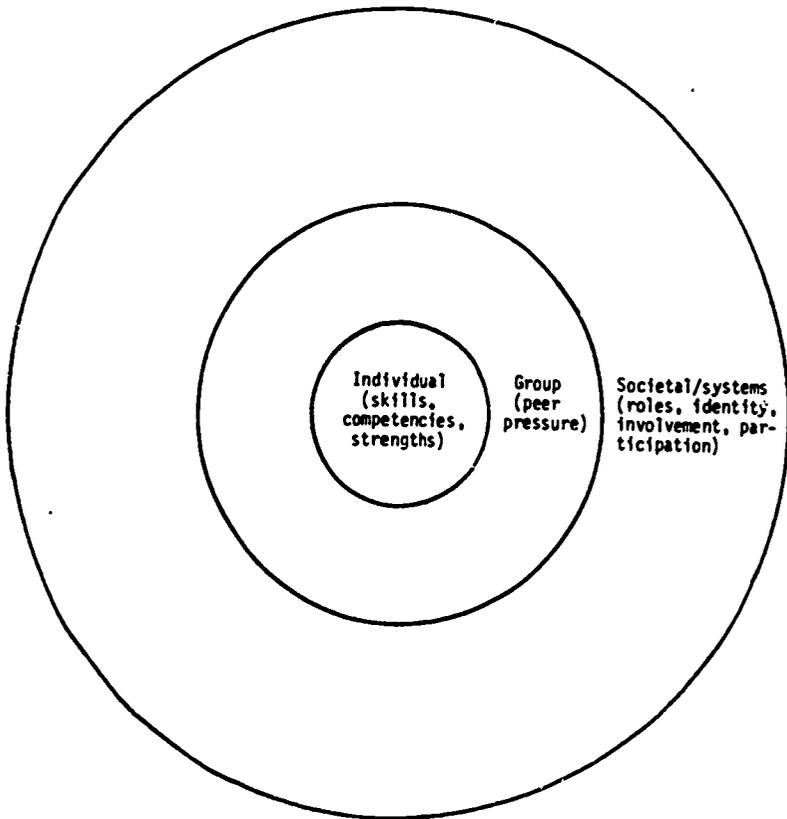
These three major program goals can be represented graphically as a series of concentric circles progressing outwardly from the individual level to the societal-systems level (see figure 1). At the individual level, the principal focus is on the acquisition of skills, competencies, knowledge, and personal strengths. At the group level, the focus is on peer group influences and pressure. At the societal/systems level, it is on helping youth to establish meaningful roles and identities in the larger social and organizational settings that make up the fabric of their day-to-day existence--primarily the school, community youth groups, the community itself, and even in some cases the larger society as represented by policy-making boards and government.

In many peer programs the goals depicted in figure 1 overlap. Some programs encompass all three goals. Whatever the goal or the particular approach of a peer program, peer programs are distinguished from other kinds of programs by an emphasis on young people in the context of the peer group. They view the elements of peer pressure, peer influence, and group interaction as key factors. Equally important, given the concern that most peer programs have with assisting youth to achieve meaningful roles in society, peer programs are often conceived by their adult sponsors as a means of helping young people to assume positions of leadership and responsibility, using the peer context as a vehicle.

Drug Abuse Prevention as a Program Goal

Like so many drug abuse prevention programs aimed at youth, peer programs may or may not address the drug program explicitly. Some of the programs surveyed for this monograph confront the issue of drug use in the peer group directly and were designed to prevent or eliminate it. Others, particularly school-based programs for younger children or community-based alternatives programs, make little or no mention of drugs; instead, they focus on the correlates of drug abuse such as low self-esteem, poor decision-making skills, and the lack of satisfying alternatives to drugs. (In some instances "nonspecific" programs have demonstrated positive drug abuse prevention outcomes; some programs have been found to have drug abuse prevention effects without ever mentioning drug abuse (Schaps et al. 1981). Other types of programs address various aspects of health and include drugs as only one of many health risks that adolescents encounter.

Figure 1
ORIENTATION OF PROGRAM GOALS



Preventing drug abuse is often a major goal of peer programs equal in importance to the goals described in figure 1. Similarly, many peer programs have been developed in order to prevent adolescent pregnancy, juvenile delinquency, vandalism, dropping out, and related problems of today's youth. Some peer-oriented prevention programs deal with the entire spectrum of adolescent problems; without singling out any particular problem behavior, they are concerned with the prevention of problem behavior generally.

Settings for Peer Programs

As noted above, one of the most important elements that virtually all peer programs have in common is a focus on the peer-group context as a vehicle for delivering services and changing behavior. Consequently, peer programs tend to be located in settings where groupings of young people commonly occur, either naturally and spontaneously or as a result of society's conventions and laws.

The school. School-based programs comprised a majority of the programs included in the research for this monograph. Even when programs in schools were initiated by adult leaders from community-based agencies, the programs recognized the school as a dominant factor in the lives of adolescents, second only to the family in its importance as a social system that shapes young people's values and cultural and group norms. As James Coleman and his colleagues (1961) noted in their classic study of the American high school, the school is the crucible in which the basic structure of the adolescent society is shaped. Many different kinds of peer groups exist within the typical school. Whether in the form of structured groups such as classes and clubs or more natural groupings such as social cliques and commonly recognizable types--"grinds," "stoners," "jocks," and the like--the abundance of peer groups and subgroups makes schools a logical setting for peer-oriented prevention programs.

For reasons that are not so readily apparent, initiating a peer program within a school can be a difficult and challenging process. Some of the considerations that can help planners of school-based peer programs are presented in the following chapter. It should be sufficient to note here that most secondary schools in America have been beset by problems in recent years and that often peer programs are perceived by school authorities as being inconsistent with the schools' major priorities, such as instruction in the basic skills or the maintenance of order and discipline. Most schools that implement peer programs find that far from contradicting such goals, peer programs support them. Nevertheless, peer programs often require some kind of change in normal school routine.

Community agencies. Local youth-serving agencies--Y's, Boys, and Girls Clubs, recreation centers, and Planned Parenthood centers,

for example--are the second most important setting for peer programs after schools. These kinds of community agencies have a single clear advantage over schools: young people go to them voluntarily. The resources of most community agencies are even more strained than are those of schools, however; consequently, community agencies usually offer limited program services to limited numbers of young people.

The street. Substantial numbers of young people--primarily youth from low-income families in large cities--tend to avoid both schools and community youth-service agencies. Yet alienated dropouts and pushouts are often the ones who can benefit most from peer-oriented prevention programs. Unfortunately, many of the peer programs encountered in the research for this monograph deal with this segment of the youth population after they have become involved in problem behavior like juvenile delinquency and drug abuse. Such programs are not, strictly speaking, primary prevention programs, although in some cases they reach troubled young people soon enough to be classified as a form of early intervention.

Not all of the young people who spend much of their time "on the street" are school dropouts, of course. For many urban youth the turbulent life of the street is a principal source of recreation (and education). For low-income youth in particular street gangs are a powerful peer group, a kind of second family. Although often viewed by the larger society as an entirely negative presence on the urban landscape, youth gangs are support systems that offer many positive benefits to their members. Successful gang programs have been able to redirect group energies from negative activities such as conflict with other gangs and petty crime to more constructive pursuits.

Low-income youth in urban settings are not the only ones for whom "the street" functions as a unifying social and cultural factor in peer-group relations. The street is just as important in the lives of many middle-class youth as it is to low-income gang youth. Particularly in cities of the American West, but in most middle-class suburbs throughout the country as well, the importance of the street derives from its being the background for an endless variety of adolescent rituals involving cars. In this sense "the street" is typically "the strip," a wide boulevard lined with the neon glitter of instant gratification and automotive fantasies. Unlike the clearly defined turf of an urban youth gang, the strip tends to be neutral territory for all the community's adolescents, but it is no less powerful a factor in their acculturation, their peer-group orientation, and their development (Myerhoff and Myerhoff 1972). As with the gang culture, adults usually intervene in the adolescent strip culture only at a point when it produces flagrantly illegal behavior.

The Role of Adults

In any peer program the role of the adult program leader can make the difference between the program being a peer program or being simply an adult-dominated group. To cite an extreme example, it would not make sense to categorize a teacher lecturing to a class about American history as a peer program. The role of the peer group as a group and the role of individual students in relation to their peers in such a situation would be minimal. The teacher would be the dominant figure and the principal source of learning and motivation.

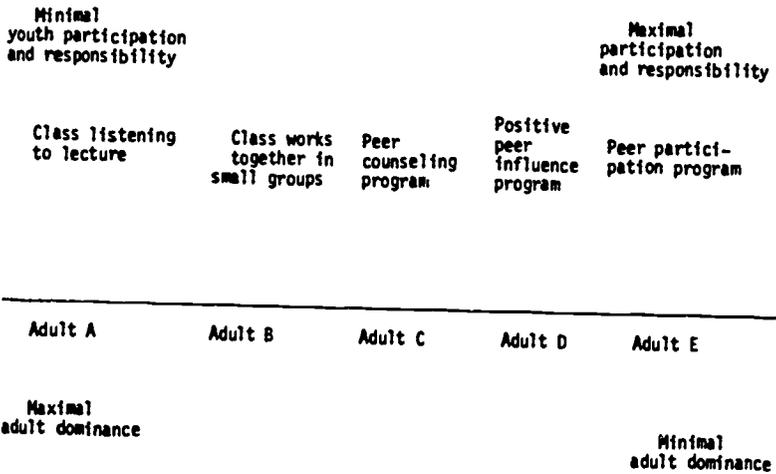
Peer programs, on the other hand, foster an attitude of inter-group communication among peers. They also require peers to assume initiative and responsibility. Although the adult leader may be extremely important to the smooth functioning of a peer group (this is especially true of groups that are just beginning or groups of younger children), the adult's principal role in an effective peer program is to help young people assert themselves and interact in a creative, caring way with their peers.

The attitude and style of the adult leader is a key factor in the success of any peer program. Two groups of young people could be engaged in virtually identical activities; yet, depending on the attitude of the adult leader, one group could be considered a smoothly functioning peer group, while the other would be no more than a collection of obedient children.

Absolute objectivity in defining peer programs is elusive at best. The "peer-ness" of a program depends to a great extent on where it stands along a spectrum in which the role of the involved adult(s) is a principal factor. This hypothetical spectrum is illustrated in figure 2. A teacher (Adult A) lecturing a class about American history would be at one end; although useful for some pedagogical purposes, this approach would not be categorized as a peer program. Somewhat further along the spectrum, another teacher (Adult B) who invites the class to work together as groups and help each other learn facts about American history would be engaged more in the role of facilitator and guide that characterizes a peer program. Adult C is the organizer of a peer counseling group, and Adult D is the leader of a "positive peer pressure" group--in a sense, these are the mainstream types of peer programs that tend to be the most familiar examples of the genre. Further along the spectrum, Adult E sees the program primarily as a means of helping young people participate actively in decisions in the local school or community and take on important responsibilities.

One hazard of placing peer programs on such a spectrum is the possibility that it can lead to rigid categorization of certain types of peer programs as being more or less participatory or peer-oriented than others further along the spectrum. In actual practice, however, the program format is much less important than the attitude of the adults involved. Programs that are established

Figure 2



THE ROLE OF THE ADULT

ostensibly to encourage youth participation and decision-making --for example, youth advisory boards--are often totally dominated by adults who should be playing a facilitating, guiding role but who are unwilling to relinquish control.

Four Program Categories

The balance of this chapter examines, describes, and analyzes a variety of peer program approaches. For convenience and clarity the approaches have been divided into four broad program categories. As with any such conceptualization, perceptive readers will quickly discover instances of possible overlap or misclassification. The purpose of the chapter is to encourage thoughtful examination of the philosophical and methodological ingredients of peer programs--not to create a new variation on the pigeon-hole game.¹

All of the peer programs described in the following pages reflect the concepts and philosophical assumptions previously discussed. In addition, each category places a particular emphasis on one type of activity or group interaction.

Positive peer influence programs emphasize group interaction among peers and positive potential of peer intragroup and individual influence.

Peer teaching programs emphasize the role of young people in conveying various kinds of information to their peers--about basic literacy skills or positive health practices, for example.

Peer counseling/facilitating/helping programs focus more on the role of the peer group member as a helper of others. In many cases, research has repeatedly shown, the helper is the principal beneficiary of these kinds of programs; often the act of helping another person is the first opportunity a youth has to experience a sense of meaningful responsibility in the world outside the home.

Peer participation programs focus primarily on creating new roles for youth within the school or the larger society by giving program participants decision-making powers and responsibilities that may place them on a peer level with adults. Peer participation programs tend to focus on older adolescents.

Table 1 summarizes the four categories and cites examples of specific programs in each category that are discussed more fully in the following pages.

¹These categories were developed specifically for the purposes of this monograph and represent the authors' "best attempt" at a workable categorization.

Table 1
TYPES OF PEER PROGRAMS

Program	Emphasis
<p><u>Positive peer influence</u></p> <p>Elementary school level: Magic Circle Ombudsman Tribes</p> <p>Secondary level: SPARK PEDE Operation Snowball</p> <p>Low Income-oriented: Positive Peer Culture Gang programs</p> <p>Health-specific: Houston smoking prevention program Project CLASP Saying No</p>	<p>Group Interaction</p>
<p><u>Peer teaching</u></p> <p>Youth Tutoring Youth Jigsaw</p> <p>Programs With Health-related Content Teen Involvement Teen-Age Health Consultants (TAHC) Planned Parenthood programs</p>	<p>Information</p>
<p><u>Peer counseling/facilitating/helping</u></p> <p>Palo Alto Peer Counseling Program Student service centers Gainesville, Florida, peer facilitator program</p>	<p>Youth in helping relationships</p>
<p><u>Peer participation</u></p> <p>Something More than Survival Channel One Urban Youth Teams Youth action teams Three O'clock Lobby</p>	<p>Youth empowerment and responsibility</p>

POSITIVE PEER INFLUENCE PROGRAMS

With a principal emphasis on peer-group interaction, this category includes a wide variety of programs targeted at different age groups and settings.

Programs for Elementary School-age Children

Since adolescence is the developmental phase when peer influence becomes particularly important, most peer programs focus on young people in their teens. Many educators and prevention specialists have recognized, however, that the elementary grades are also an appropriate time to begin providing children with positive peer-group interaction experiences and peer-oriented social and communication skills. This is the goal of a number of different programs that have gained increasing acceptance in the drug abuse prevention field.

Magic Circle, a program of the Human Development Training Institute, in La Mesa, California, is a packaged curriculum approach for the elementary grades that relies largely on group discussions of diverse topics. Although a Magic Circle discussion might seem like any other classroom discussion to an uninformed observer, the program establishes specific group norms aimed at enhancing peer-group interaction and the listening skills and self-esteem of the participants. Teachers trained in the Magic Circle approach encourage their students to listen for ways in which one student's thoughts about a given topic are similar to those of others in the group. An atmosphere of open sharing is also an important ingredient; no one is forced to participate in a discussion, no put-downs are allowed, and the opinions and experiences that students share during the discussion are not to be judged. In contrast to the teasing and one-upmanship common to elementary school children, Magic Circle creates an atmosphere of mutual trust and caring. Usually held for a period of 20 minutes or so each day, Magic Circle discussions can help to create a positive, constructive classroom atmosphere throughout the school day. Developed for several levels of the elementary grades, the program provides detailed explanations of its techniques and discussion topics sufficient for an entire school year (Schaps and Slimmon 1976).

Ombudsman, developed by the staff of the Charlotte Drug Education Center, in Charlotte, North Carolina, is targeted primarily at the fifth and sixth grades, but it can also be used at the junior high school level. Subtitled "A Classroom Community," Ombudsman is a regular school course designed specifically to counteract some of the negative factors associated with drug abuse--for example, low self-esteem, negative social attitudes, and low valuing of school. The course is divided into three phases.

- In the first phase, "Self-awareness," the group engages in a series of activities that foster a clearer sense of oneself

as an individual, with an emphasis on enhancing self-esteem through positive feedback from other members of the group.

- The second phase, "Communication and Group Skills," revolves around group interaction exercises. During this phase the students engage in mutual problem-solving exercises and discuss factors that impede successful intergroup relationships.
- The third phase, "Project/Outreach," requires the class to develop a project or activity, often outside the normal school day, in which the group members are able to assume leadership and responsibility or to perform some kind of community service.

Throughout, Ombudsman stresses group interaction, openness, sharing, and mutual respect. Even the first phase, which focuses on individual self-awareness, has a group orientation--as the authors put it, the program provides "mirrors" (the other group members) that will "reflect and support our own inner strengths and priorities" (Charlotte Drug Education Center 1980, p. 27).

Similar in many ways to both Magic Circle and Ombudsman, the Tribes program, created by the staff of the Center for Human Development, in Lafayette, California, focuses even more explicitly on peer-group interaction. Tribes originated with the assumption that "prevention does not happen by controlling others...but by transferring to others the responsibility to take care of themselves." The purpose of the program, which can be adapted to most elementary grades, is to "help children and youth develop their own inner resources and responsibilities" and to "develop a positive peer environment, conducive to learning and emotional development" (Gibbs and Aller 1979, p. 7). One of the important steps in the Tribes process is "building community," primarily through an extended phase of teacher-led classroom meetings that are designed to establish group norms of active listening, respect and consideration for all group members, and the right "to pass" (not participate). Once a caring, trusting atmosphere of intergroup communication has been established, the class divides into separate "tribes" of six students each and engages in a variety of activities ranging from self-awareness exercises to academic work to problem solving. The entire Tribes process is designed to lead the students through successive stages of mutual cooperation. As outlined in the Tribes manual, these stages are:

Inclusion: getting to know one another
Influence: learning to work together
Affection: working together creatively

Each of the three programs for elementary school-age children described above has its own particular approach, style, and philosophy. Nevertheless, these programs have more similarities than differences. They are all school-based; they provide specific activities and processes for enhancing peer-group interaction; and they can be implemented in the classroom with relatively

little financial outlay or training. Many elementary-level teachers may have difficulty attempting these approaches, however, since they all require a special attitude of acceptance and conscious role modeling on the part of the teacher. An ability to be comfortable with students sitting in circles and discussing their thoughts and feelings spontaneously is also important. As with peer-oriented programs for adolescents, the adults involved must have confidence in the ability of young people to accept responsibility and to interact freely with their peers.

Programs for the Secondary Level

Although peer counseling, which emphasizes peers in helping relationships with others, is by far the most popular secondary-level approach to peer programming, several approaches are similar to the programs mentioned above in focusing on group interaction as a means of developing positive peer-group support.

One of the most established drug abuse prevention programs in the country, New York City's SPARK program, relies heavily on peer-group discussions as a way of confronting and dealing with problem behavior among high school students. Operating in all of New York City's 98 high schools, SPARK sponsors one or more professional program coordinators in each school. Although SPARK varies somewhat from one school to another, peer-group meetings and discussions are a common element. Essentially, SPARK is a counseling program. It is available both as a prevention program to self-referred students who need help with personal problems and as an early intervention program for students who are experiencing difficulties either in or out of school and who are referred to SPARK by teachers, guidance counselors, or other school staff.

Summarizing observations of peer-group sessions in 12 different randomly selected high schools, an evaluation of SPARK by the State Office of Drug Abuse Services reported that

...the atmosphere was generally relaxed. Virtually all students appeared to be sincerely interested in group discussions, and most were active participants. A [SPARK coordinator] was present at all group sessions, and used a variety of role-playing and problem-solving techniques to engage students. From the quality of student participation in the sessions, it was evident that the [SPARK coordinator] had created an environment within which students felt free to reveal deeply personal information without fear of recrimination. There was much sharing of problems and feelings, and actively supportive behavior between the [SPARK coordinator] and the students, and among students themselves (New York Office of Drug Abuse Services, 1977, p. 24).

According to the developers of the program, the role of the SPARK coordinator is critical to the program's success. Although students are encouraged to assume leadership roles, one of the main tenets of the program is that "...adolescents need structure and discipline...We don't believe in peer programs without a responsible adult involved" (Cuaranta 1980). SPARK was one of the first drug abuse prevention programs in the country to demonstrate through evaluation studies a positive impact on drug use and other forms of problem behavior among students.

The PEDE program (Person Education-Development Education), serving schools in the Minneapolis-St. Paul area, is similar to SPARK in its emphasis on communication and problem-solving skills in a peer-group setting. Initiated in 1972, PEDE places a primary focus on four-day institutes in which teenagers receive training in a variety of affective and group process skills. Upon returning to their respective schools, the program participants are then encouraged to implement any one of several different peer outreach approaches schoolwide. These include peer counseling, alternatives activities, youth service bureaus, and peer participation in program planning.

One important distinction of the PEDE program is that it uses its peer training as a lever for further program planning and development. After they have been trained, many PEDE participants become members of a Core Group that includes teachers, parents, and administrators, in addition to students. This Core Group then becomes a mechanism for assessing needs within the school, analyzing problems, and developing programs. The PEDE program has been implemented in more than 24 schools in five Minnesota counties.

Operation Snowball is a statewide program in Illinois sponsored by the Illinois Alcoholism and Drug Dependence Association (IADDA), an independent organization that works closely with the State's alcoholism and drug abuse agencies. In building an extensive system of substance abuse prevention programs, Operation Snowball shares one of the main premises of PEDE: namely, that an intensive training institute in which teenagers come together to acquire problem-solving and helping skills can be the lever for far-reaching changes and program activities at the local community level. Operation Snowball is an outgrowth of the annual Illinois Teenage Institutes, which have been sponsored by IADDA since 1975. Each of the institutes has assembled several hundred teenagers from all over the state for 6 days of training, sharing, and skill development at a rural retreat center. The primary emphasis of the institutes is on developing leadership among the teenage population of the State to deal with substance abuse problems. In this sense the Illinois institutes are similar to institutes in several other States--Ohio, Wisconsin, and Indiana, for example.

Operation Snowball was designed to build on the enthusiasm generated by the summer institutes by developing a mechanism for continuing the program throughout the year. Staffed and facilitated almost entirely by volunteers, the Operation Snowball teams usually

meet on a weekly basis, either to plan local programs and activities for the community's youth or to function as a problem-solving support groups for the participants. In many cases the teams play both roles. By the fall of 1980 there were several dozen continuing Operation Snowball teams throughout the State, IADDA had developed a detailed program manual offering resources for program planning and development, and the number of youth interested in joining the program was steadily growing.

Operation Snowball, PEDE and SPARK have one main quality in common: they provide a support group for teenagers who often have no other easily available context in which to discuss problems or receive the kinds of "strokes" and sharing that are so necessary for self-esteem. Testimonies of the positive impact these programs have on their youthful participants abound. "I was very glad to be here [the PEDE training program] because I got to learn about other people. This was probably one of the best weeks of my life" (PEDE 1980, p. 1). "Because of what I learned in SPARK, I now do what I think is right for me. If I don't want to go along with what the other kids want, I come right out and say so, and I'm not afraid of losing their friendship" (New York Office of Drug Abuse Services 1977, p. 23). "What began with fifteen students has grown into boulder size. Snowball is something a lot of adults couldn't do that kids can" (Carlson 1979)--these are typical of the supportive and enthusiastic comments volunteered by program participants. Furthermore, all three programs not only build the kind of enthusiasm and support reflected in these comments, they sustain it through a continuing mechanism that enables groups of teenagers to meet throughout the year in the school or the community. The training program or institute is the motivating force behind a continuing positive peer-group support system.

Programs That Address the Values of Low-income Youth

At times there is a good deal of overlap between primary prevention programs, which are concerned with substance abuse and other problems before they occur, and early intervention programs, which address problem behavior after it has been observed. SPARK, for example, often deals with the problems of seriously disruptive students or students who are so unmotivated that they are on the brink of dropping out of school. Thus, the program often functions as a form of early intervention. There is no mistaking the intention of a generic approach known widely as Positive Peer Culture. This approach grew out of residential treatment programs for hardcore juvenile delinquents and has since been adapted to school- and community-based prevention and early intervention programs.

One of the leading proponents of the Positive Peer Culture concept is Harry Vorrath. Vorrath worked on the staff of the famed Highfields program through which, in the 1950s, Lloyd McCorckle, Lovell Bixby, and Albert Elias pioneered a peer-oriented treatment

model called Guided Group Interaction. A residential treatment center for delinquent youth, Highfields stressed peer-oriented group counseling sessions, which were held five times each week. The purpose of these sessions was to develop such an intense feeling of responsibility within the group for each other's behavior that the atmosphere of directness, honesty, and self-responsibility fostered in the group meetings would carry over into the program's more mundane daily activities. Like so many of the drug abuse treatment programs that evolved during the 1960s (often in deliberate imitation of this approach), the Highfields model stressed a confrontational mode of behavior intended to force program participants into being honest and self-aware.

Vorrath describes his modification of the Highfields model in his book Positive Peer Culture:

Built around groups of nine youth under the guidance of an adult leader, Positive Peer Culture is designed to "turn around" a negative youth subculture and mobilize the power of the peer group in a productive manner. Youth in PPC groups learn how to identify problems and how to work toward their resolution. In group sessions and in day-to-day activities the goal is to fully involve young people in the helping process.

In contrast to traditional treatment approaches PPC does not ask whether a person wants to receive help but whether he is willing to give help. As the person gives and becomes of value to others he increases his own feelings of worthiness and builds a positive self-concept...

Positive Peer Culture does not seek to impose specific rules but to teach basic values. If there were one rule, it would be that people must care for one another. Caring means wanting what is best for a person. Unfortunately, positive, caring behavior is not always popular among youth. In fact, negative, harmful behavior frequently is more acceptable. Therefore, PPC uses specific procedures to foster caring behavior. Once caring becomes fashionable, hurting goes out of style. (Vorrath and Brendtro 1974, p. 3)

The main distinction between Positive Peer Culture and the more confrontational peer-group treatment approaches, in short, is the difference between "trust and openness" and "invasion and exposure."

One of the most important insights that drug abuse prevention professionals can gain from the Positive Peer Culture approach is that it is more oriented to the values of low-income youth than to the more conventional middle-class values around which so many drug abuse prevention programs evolve. Among middle-class youth there is much less emphasis on the value of "toughness" than there is among low-income youth. Finding the high school primarily an

accepting and acceptable environment, middle-class youth tend to identify masculinity with athletic achievement. Low-income youth, on the other hand, are less likely to have positive feelings towards school and are more inclined to identify masculinity with aggression, bravado, and petty crime. Thus, peer programs for low-income youth almost by definition tend to intervene in existing problem behavior more often than programs aimed at middle-class youth. There are certainly many exceptions to these generalizations; furthermore, they do not take into account the more complex distinctions between middle-class and low-income adolescent females. Nevertheless, they point to issues that warrant the consideration of drug abuse prevention professionals.

Clearly, prevention specialists need to develop ways of assessing the cultural norms of any adolescent peer group with which they are working prior to developing peer-oriented strategies. Certain ways of implementing values clarification or problem-solving exercises will be effective in a middle-class setting, but not in a low-income setting--and vice versa. The main distinction between an approach like Positive Peer Culture and other peer program approaches is that it addresses the underlying issue of the adolescent peer culture and value system directly. It recognizes that the value system is part of the problem.

The value system of middle-class youth may also be part of the problem but in an entirely different way. For example, many middle-class youth tend to be highly achievement-oriented; they value competition so strongly that large numbers of their peers become, by default, members of an ignominious "out group." Because the middle-class peer culture places so much emphasis on "winners" and "losers," it creates a particular susceptibility to substance abuse and related problems among those who perceive themselves as being in the latter group. The culture of low-income youth, on the other hand, places more of an emphasis on a sense of community--in a sense, the entire community is an "out group" in the eyes of the larger society. For many low-income youth, the peer group on "the street" is a powerful and binding support system. Both value systems present potential problems to prevention workers interested in initiating peer-oriented programs, and neither value system is problem-free.

In many cities the most visible embodiment of the peer culture of low-income youth is the street gang. Youth workers often consider "gang" a misnomer, since it tends to be associated with highly organized groups that are intent primarily on intergroup violence. Indeed, the degree to which low-income youth groups are either highly organized or violence-prone varies from one city and one period of time to another. Even within particular cities, incidents of violence among youth groups tend to occur in cycles.

As with middle-class youth, low-income and street gang youth often become involved in antisocial, criminal, and self-destructive behavior because they lack anything better to do. Yet many programs for low-income youth have been able to redirect the energies of

these groups toward more constructive ends. This was the basic purpose of the Chicago Youth Development Project, which was funded by the Ford Foundation in the 1960s and was one of the most intensive efforts at working with groups of street youth ever attempted. The project proceeded on the assumption that "delinquent behavior was functional for their group life and for individuals in relation to their groups [and that therefore] work with individual boys had much less prospect of success than work with groups of boys" (Gold and Mattick 1974, p. 35). Even such a relatively conventional activity as a weekend camping trip was found to have a profoundly positive impact on groups of low-income boys.

The Chicago Youth Development Project placed youth workers in low-income, inner-city communities who then became dedicated advocates and friends to many different groups of neighborhood youth. This attitude of advocacy was a critically important factor. The project's youth workers did not judge the culture of the low-income youth with whom they worked; they accepted it. They understood, moreover, that its negative aspects--such as delinquency and dropping out of school--were often the consequence of powerful social forces over which the boys had no control.

Health-specific Programs

All of the programs described in the preceding sections of this chapter aim at channeling peer pressure in positive directions through a long-term process of working with groups to develop individual skills, enhanced self-awareness, and a positive peer-group climate. Specific program content relating to drug use is only one aspect of the total approach. A number of group-oriented programs have evolved in recent years, however, that focus specifically on substance abuse and related health issues.

One of the pioneering efforts in this area is the smoking prevention program developed by Richard I. Evans and his colleagues at the University of Houston. Evans' program, conducted over a period of several years in the late 1970s, was based on several premises about smoking behavior:

- Even though most children now believe that smoking is dangerous, this belief is not sufficient to deter them from experimenting with cigarettes (the teenage population, particularly teenage girls, has a disproportionately high percentage of cigarette smokers in comparison with the rest of the population);
- Traditional programs fail because of their emphasis on hazards that may occur in the future; they do not take into account the present-orientation of most adolescents;

- Most important, traditional information approaches do not deal with the social pressures to smoke cigarettes, which are often the reason for initial experimentation; principal among these social pressures is the impact of the peer group.

Evans and his colleagues (1976) experimented with 750 male and female seventh-grade students in 10 junior high schools in Houston. Over a 10-week period, the experimental group was given intensive instruction in dealing with social pressures through the use of videotapes depicting various social pressures to smoke. These were followed by classroom discussions focusing on how to resist these pressures. When the seventh graders who received instruction through the program were compared with a similar group of seventh graders who did not receive it, the experimental approach produced significant results in deterring the onset of smoking. (The authors indicated, however, that "the reduced onset of smoking rates in the experimental group may be partly attributed to the dependent variable measurement procedure itself ...") (Evans et al. 1976, p. 132)

The Houston program has encouraged many other researchers and program developers to explore similar approaches. At Stanford University, Project CLASP incorporated aspects of the Houston approach and, in addition, used peer leaders (high school students) "as the primary agents delivering the intervention to seventh grade students." The premise for using high school students was that "it is well known that in early adolescence peers more than adults become the central influence in social concerns" (Perry et al. 1978, p. 1). This project and followup versions of it not only emphasized the importance of peer pressure, they offered students instruction and practice in ways of resisting peer pressure. Although relatively short-term interventions compared with the kinds of continuing peer programs described in the preceding section, the Stanford and Houston programs both demonstrated statistically significant levels of success.

Another program based on the same principles was developed for the 1979 Drug Abuse Prevention Campaign sponsored by the National Institute on Drug Abuse. Published as a booklet entitled Saying No: Drug Abuse Prevention Ideas for the Classroom (NIDA 1980), this approach is aptly summarized by the booklet's title. The developer of the booklet, California prevention specialist Kathy Hintz, is currently expanding its basic concepts into a comprehensive school-based program.

The main purpose of Saying No is to provide teachers of seventh- and eighth-grade students with easy-to-use classroom techniques for helping students learn about the importance of peer pressure and giving them ways to "say no." Following are examples of some of the activities described in the NIDA booklet:

- In social studies the students are encouraged to study the lives of leading Americans--Cesar Chavez, Susan B. Anthony,

Jane Addams, and others--who overcame various pressures to abandon their work and succeeded.

- In Language Arts classes students define terms such as "peer," "pressure," "influence," and "alternatives" and then discuss ways in which these terms are relevant to them.
- In math classes students are encouraged to develop surveys and statistical profiles of substance use patterns in their schools and to determine the importance of factors associated with substance abuse and peer pressure.

In developing the program into a more detailed course of study the author has included specific modules dealing with assertiveness training for young people so that in addition to being aware of negative peer pressure they will be equipped with specific skills for resisting it (Hintz, 1980).

PEER TEACHING PROGRAMS

Peer teaching programs and programs in the program category that follows--peer counseling/facilitating/helping--have one principal element in common that has made them increasingly attractive to school systems throughout the country. Almost universally school systems are confronted with declining enrollments, diminishing resources, and shrinking buying power. The use of peers as ancillary helpers and teachers satisfies two pressing needs simultaneously: it provides young people with meaningful roles and opportunities to accept mature responsibilities (to be sure, this is not always perceived by schools as a particularly urgent need), and at the same time it provides the schools with a virtually unlimited supply of paraprofessionals. Peer teaching programs are not limited exclusively to schools. Like most other peer-group-oriented youth programs, however, the majority are located in school settings, mainly because that is where the majority of young people spend so much of their time.

The main characteristic of a peer teaching program is that it is content-specific. Rather than focusing on group process or positive peer pressure, like the programs described earlier, peer teaching programs are set up primarily to offer instruction in a particular content area, usually involving one peer teacher and either an individual student or a group of students. In some peer teaching programs several peer teachers work together as a team.

Positive peer pressure programs tend to be adult-directed. In such programs the adult structures group meetings so that the participants will learn new, more positive ways of communicating and interacting. Even when the adult group leader is able to draw away from the group and remain more in the background, the adult determines and guides the group's activity and process. In contrast, peer teaching programs require the adults involved to give much more control of the main program activities to youth. In peer teaching programs the adults must provide the youth with intensive preparation so that they will be able to enter into a teaching relationship with other youth in a spirit of confidence. Once peer teaching situations have been established, the adult leader must remain involved and alert as a monitor and guide. Nevertheless, the adults in peer teaching programs must be willing to give up a good deal of authority and recognize the value of peer teaching to convey cognitive information even more successfully perhaps than a teacher using conventional techniques.

The logistics and strategies of peer teaching programs vary from one program to another. Youth Tutoring Youth (YTY), the pioneering program developed by the National Commission on Resources for Youth, emphasizes a one-to-one tutoring approach, usually with secondary-level students tutoring elementary-level students. YTY was originally funded by the Neighborhood Youth Corps (NYC), a program of the Department of Labor, in several cities in the Northeast. The first YTY program, which was initiated in 1967, paid tutors a small wage for participating. Only low-achieving, alienated youth were chosen for participation. Yet across the board the tutors made significant, often startling, gains in their own basic skills as a result of the experience (Gartner et al. 1970, p. 28-37). Following the program's early successes, YTY was expanded to schools and community agencies in many different cities until it became the best known peer teaching program in the country, with programs in hundreds of schools and communities. Many of these programs are still in existence.

Although the YTY model emphasizes tutors working on a one-to-one basis with tutees, many other variations are possible. These include:

- One tutor with a group of tutees;
- Groups of tutors teaching other groups of students;
- Peer tutors acting as aides to teachers, librarians, and other school staff.

According to YTY's originators, certain basic ingredients are necessary to ensure the success of a tutoring program:

- A climate of acceptance. The program must have the active support of the school administration and everyone involved-- it can be blocked or defeated by a single teacher who does not wish to cooperate.

- **Administration.** Someone must be designated to supervise the program and train the tutors. This is a time-consuming, challenging job that requires patience and skill.
- **Space.** A convenient, comfortable place must be provided where tutors and tutees can work together. In some cases this logistical requirement is further complicated by the need for older students to leave their secondary schools in order to tutor children in elementary schools.
- **Tutoring sessions.** Ideally, tutors will meet with their tutees on a regular basis. YTY recommends one session a day lasting at least an hour and a half.
- **Materials.** Reading materials and other incidentals that will enable tutors to prepare learning games and activities should be readily available (Gartner et al., p. 95-96).

On the surface, at least, peer tutoring seems to be such a simple and logical approach to dealing with students' needs for individualized instruction and the schools' needs for additional resources that one might expect tutoring programs to be a nearly universal phenomenon. Tutoring is deceptively easy to implement, however. Tutoring programs demand supervisors who are extremely skillful in preparing tutors to work with tutees and then carefully monitoring their progress, while at the same time allowing them enough independence and autonomy to master the task.

Although the potential benefits of tutoring programs are great, teachers often regard the preparations and logistical problems as an unnecessary inconvenience. One approach to simplifying these problems is represented by the Jigsaw technique, developed by a team headed by University of California educator Eliot Aronson. Jigsaw incorporates many of the principles of peer tutoring, but it takes place entirely within a self-contained classroom. Jigsaw can be used in virtually any subject area; essentially, it is a process for developing student-oriented teaching and learning. Each jigsaw lesson follows a series of specific steps:

- The class divides into small groups, usually six to a group;
- Each group receives a specific assignment--for example, to describe the process of growing and harvesting wheat (the assignment is shared by the entire class);
- Within each group, one student becomes responsible for finding information relating to a series of questions developed by the teacher--for example, how wheat is grown, where it is grown, how it is marketed, and what it is used for;

- All students responsible for these individual topics form into an "expert" group to get information about their topics and answers to their questions;
- After the expert groups have completed their research, each group member reports back to his or her original Jigsaw group--in effect, the students are responsible for teaching their peers the particular "piece" of the lesson that they have been assigned (hence the name "Jigsaw");
- Each group is then tested for knowledge of the factual information learned during the lesson (peer pressure for cooperation and accuracy usually runs high during Jigsaw). (Aronson et al. 1978)

In theory, Jigsaw can lead to many benefits for the participating students. These include improved classroom climate, improved peer relationships, better attitudes toward school and learning, and enhanced academic performance and self-esteem. Nevertheless, like peer tutoring, Jigsaw can be deceptively simple. Extensive training is needed in order to prepare teachers to implement Jigsaw in the classroom. Even after training, many teachers resist using Jigsaw because it is such an unconventional approach to classroom management (Adams 1980).

Programs With Health-related Content

As with positive peer pressure programs, many peer teaching programs involve content that focuses specifically on drug abuse and health. One school-based approach that has been widely used and disseminated is Teen Involvement for Drug Abuse Prevention. Originally developed for public schools in Maricopa County, Arizona, Teen Involvement calls upon high school students to act as teachers and role models for students in the elementary grades. Described in an Administrator's Guide and a teen adviser's manual that are currently available from the National Clearinghouse on Drug Abuse Information (see resource section), the program consists of eight lessons that focus on the concept of eight basic human needs developed by Dr. Harold Laswell. Each lesson singles out one of the basic needs and offers a variety of activities that the teen advisers can conduct, working in teams of two. The principal goal of Teen Involvement is to prevent drug abuse by helping young people examine the reasons why people become dependent on drugs, clarify their own values in relation to drugs, and make better decisions when confronted with drug use among their peers.

Teen Involvement is a highly structured approach that can be implemented with relatively little training. The key ingredients are effective teen advisers (peer teachers) who can assume the teaching role in a classroom of younger students. Far more demanding of their teenage participants are several programs that call upon peer

teachers to become health resources for their peers in both school and community settings. These programs require extensive, sophisticated training in both content and process skills.

One example of a program that uses peer teachers as health educators is Teen Age Health Consultants (TAHC), which is based in Minneapolis, Minnesota. TAHC was initiated by a national consortium of free clinics in 1973 on the premise that teenagers frequently acquire misinformation about health matters (sexuality, drug use, and venereal diseases, for example) from their peers. Instead, the founders of TAHC decided, teenagers could be trained to be effective health educators. As the program's founders observed:

The grapevine can be infiltrated with accurate and non-judgmental information related to issues of current concern to adolescents. Teenagers can spread accurate rumors as well as mythology. Teenagers can function as responsible and trustworthy service providers in their community. Teenagers can learn the difference between judging others and providing a problem solving strategy. Our task is to find creative and challenging experiences for young people in order to assist them in building the bridges between their inner worlds and our society (Jordan and Valle, undated, p. 13).

Peer Education Health Resources, the nonprofit agency that sponsors TAHC, is an independent, community-based organization, and the founders of the program quickly learned that links with local schools were essential to its success. One of the first steps recommended for initiating TAHC in a particular community is enlisting the support of the high school administration in setting up a year-long program that students can take for school credit. The program begins with a semester course that takes place during 2-hour, after-school training sessions held once a week. The basic purpose of this course is to provide the participants with an overview of comprehensive health education and skills they will need to act as peer educators in a variety of school and community settings. Specific content includes communication skills, problem solving and decision making, male and female reproductive anatomy and physiology, venereal diseases, birth control, human sexuality, pharmacology and drug abuse, mental health, nutrition, medical procedures, and information about local health agencies and community resources. The second part of the program consists of a practicum phase. While continuing to meet as a group for support and planning purposes, the peer educators use the practicum to initiate a variety of community projects aimed at reaching out to and counseling peers.

The key to the success of a TAHC program, according to the program's originators, is "a dynamic, sensitive trainer. The trainer must inspire trust, honesty, enthusiasm, and caring among the student volunteers, who look to the trainer for positive role modeling." In addition to being a paragon of openness and trustworthiness, the

trainer must assume the primary administrative responsibility for the program, including recruiting the peer teachers and supervising their progress throughout the school year (Jordan and Valle 1978).

Even with well qualified trainers, programs like TAHC have some built-in hazards. Gaining the acceptance of school administrators can be a challenge, especially if they view TAHC as duplicating existing health education programs. Therefore, TACH bills itself as a "supplementary" health education effort. In many schools and communities the contents of the TAHC curriculum can be a source of controversy. TAHC initiators always make sure to develop support not just among school administrators, but among parents as well. In addition, TAHC postpones dealing with some of the more sensitive topics in its curriculum until a climate of trust has developed.

Some of the most extensive peer education programs focusing on health issues have been initiated by various chapters of Planned Parenthood. Although each chapter is autonomous, all share a common mission of providing teenagers with accurate, unbiased information about sexuality and other aspects of human development, including substance abuse.

A particularly novel approach to peer education programming was developed by the Planned Parenthood League of Massachusetts. This Cambridge-based organization has developed a popular program entitled Youth Expression Theatre. The staff of the project consists of "a family planner, a social worker, a sex therapist, and a classically trained dramatic arts professional" (Verhoeven 1980a, p. 2). Working with an average of 12 student volunteers each year --a heterogeneous group from all over greater Boston--this staff presides over an intensive summer training program in which the students develop semi-improvised skits highlighting such issues as health education, sexuality, teenage pregnancy, and drug and alcohol abuse. Performances for school audiences and community groups begin in the fall and continue throughout the school year.

One of the principal criteria for recruiting teenage participants, according to program director Alice Verhoeven (1980b), is that they be interested in peer helping relationships, not just in theater, since the purpose of the skits that the students perform is to spark questions, comments, and suggestions. These they respond to as if they were still playing the character in the skit. In some instances they may even improvise an ending to the skit to stimulate further discussion.

One of the outstanding successes of Youth Expression Theatre, its director notes, is that the group has been invited to perform by some highly conservative organizations that would not otherwise be interested in Planned Parenthood programs. "When you see one of the plays," program director Verhoeven told an interviewer for Boston's Real Paper, "you realize that sex is one of the concerns, but it's not the whole thing. The real issue comes down to two

things: the lack of communication...and self-esteem... The same kinds of feelings that can lead a kid into drug abuse, depression, or a suicide attempt might be redirected in another kid into getting pregnant " (Katz 1980).

PEER COUNSELING/FACILITATING/HELPING PROGRAMS

In the late 1960s and early 1970s, when school systems across the country were initiating drug abuse education and prevention programs in an atmosphere of rush and panic, one approach touted as an alternative to the kinds of programs that relied entirely on information was peer counseling. The PRIDE program, in Dade County, Florida, placed a strong emphasis on peer counseling. Since this was also one of the most extensive and best-financed drug abuse prevention programs in the entire country, PRIDE and the concept of "peer counseling" quickly garnered a national, and even international, reputation. Eventually, with the help of a handbook (The Complete Handbook of Peer Counseling) co-authored by the program's founder, Don Samuels, and his wife, Mimi Samuels (1975), drug abuse prevention programs across the country began to imitate PRIDE. Although the PRIDE program has changed in recent years, the handbook is still available and widely used, and it has had a great deal to do with keeping the term "peer counseling" alive.

Resistance to the term is not uncommon, however. Even program directors who use it hasten to explain that peers do not actually counsel anyone in the conventional sense of the word. They listen, they help, they empathize, they refer--but they do not counsel. Fellow Floridians Robert Myrick and Tom Erney, whose Gainesville-based program is also nationally known, made this abundantly clear in their own set of materials, in which the favored term is "peer facilitating."

The term "peer facilitator" deserves special attention. This term is becoming more popular because it presents few problems to students who are systematically organized to help others. The term "peer counselor" has been used in the past, but this has presented more problems. Some parents, for example, have complained that they do not want their children being "counseled" by another student (Myrick and Erney 1975, p. 9).

However they are labeled (the various terms will be used here more or less interchangeably), these kinds of programs have several clearly distinguishable qualities in common.

- Almost invariably, they are divided into two distinct program phases: an intensive training phase and an implementation, or practicum, phase during which the participating peer helpers offer direct services to other youth.
- The training phase has certain common themes. Communication skills in particular are emphasized--active listening, for example, and ways of indicating, through verbal signals or body language, that the peer helper is attending to, and concerned about, what the "client" is saying.
- As with so many other peer programs, the role of the adult supervisors is critically important. The adults must be role models--of empathy, understanding, and caring.
- Peer counselors are virtually prohibited from giving advice. Their role is to listen, to reflect, to question, to probe with discretion, and to be a friend. Problems of an extremely serious or urgent nature are to be referred to responsible adults.
- Peer helpers almost always acquire skills in values clarification, problem solving, and decision making--skills that they can share with and transfer to those whom they help.
- The program participants usually spend time during training learning about important community resources --for crisis intervention, drug and alcohol information and treatment, advice about sexual problems, and the like. Thus, peer helpers become important sources of referrals to community agencies.
- Confidentiality is a key factor. Peer counselors and facilitators must be able to make it clear that they can be trusted. Some peer counseling programs have done poorly because, for one reason or another, students felt that they could not sufficiently trust the peer helpers.
- Whether peer helpers are selectively recruited or allowed to participate in the program's training phase at random, successful programs attempt to involve a diverse and representative group of students as peer counselors. If fellow students perceive the peer counseling group as a special elite of high achievers or class leaders, many of the students who are most in need of someone to talk with will stay away. In some programs, to ensure diversity the program supervisors conduct a schoolwide survey called a "sociogram,"

which asks the student body to identify those students whom they might go to if they needed help with a problem.

- Every student interested in becoming a peer counselor does not necessarily have the maturity, the inner discipline, or the quality of empathy that the task requires. During training, some students discover that they do not wish to continue participating in the program. In other cases the supervisors may feel that certain candidates are not sufficiently mature or responsible--and, in a considerate, compassionate way they will inform them of this decision.

One way of looking at what is required of a peer counselor is to consider the kinds of skills and methods a peer counselor uses, in contrast to some common mis-perceptions of a counselor's role. For example:

A Peer Counselor Does	A Peer Counselor Does Not
Facilitate ("make easy") trust, openness, comfort, and empathy	Dominate, preach, or tell people what to do
Accept people as they are	Judge people or try to change them
Listen, clarify, and help people see alternatives for decision making	Give advice or offer solutions
Give support and encouragement to take positive action	"Rescue," do for a person what he/she should do independently
Validate people without being phony	Put people down
Respect confidentiality	Gossip about what was said in group or counseling sessions
Realize that not all problems can be solved and not all people want to be helped	Expect all problems to be resolved quickly and easily
Work with people who have normal developmental ("growing up") problems	Work with seriously disturbed people

**A
Peer Counselor
Does**

**A
Peer Counselor
Does Not**

Refer troubled students to a professional person: counselor, psychologist, or community agency

Attempt to provide services beyond what he/she is qualified to provide

Although developed for peer counseling programs sponsored by the Center for Human Development, in Lafayette, California, these assumptions are shared by most peer counseling programs across the country (Center for Human Development 1979).

Particular approaches to implementing the practicum phase of a peer counseling program vary from one program to another, even when they are based on common assumptions like those described in the preceding pages. Following are a few examples of the many different ways in which peer counseling/facilitating/helping programs can be, and have been, implemented.

The Palo Alto Peer Counseling Program, one of the first peer counseling programs in the country, accepts any student who wishes to participate (in contrast to programs that select peer counselors after training). According to program director Barbara Varenhorst (1974), the rationale for this is that "...some enroll to learn how to help others, while others come to get help for themselves." Thus, during the practicum phase, a great number of potential counselors are available, compared with more selective programs. These students are usually given counseling assignments--but not always. One of the ultimate goals of the program is "...to reduce students' formal assignments and at the same time bring about changes in relationships, as a trained corps of students sensitively observes needs and reaches out to help others in a natural way." Over the long term, the kind of training in communication and problem-solving skills that the program provides can have an impact on the climate of an entire school, particularly on the ways in which peers interact with each other. Actual counseling assignments are only part of the broad picture of positive change.

Specific assignments are often made in the Palo Alto program in response to requests from teachers and counselors. According to a description of the program:

Requests must include a clear statement of the problem and the type of student help desired. These requests are reviewed for their appropriateness with respect to what kind of training students have been given, how much time is involved, and what can actually be expected of a teenager. Approved requests are discussed and distributed in practicum groups.

Students are allowed to choose their assignments, with

guidance from practicum leaders. Many peer counselors pick an elementary-level assignment first and then, with experience, move on to an assignment with their own peer group (Varenhorst 1974).

Counseling assignments can vary from helping other students with specific problems to assisting on a survey of student needs. Whatever the assignment, the training creates a pool of helpers who are trained to be sensitive to human needs and concerns.

In contrast to the Palo Alto approach, which makes peer counselors available on a nearly continual basis, many school systems have established student service centers. Comfortably furnished with couches, carpets, and bean bag chairs, student service centers are friendly, informal places where students can go for quiet conversation or assistance with problems from peer helpers. In addition to sympathetic listeners, many student service centers also provide informational resources--pamphlets and flyers, for example--describing services that are available in the community. In most cases an adult supervisor is either stationed in the student service center or is nearby and readily available as well. Another version of the student service center is the "rap room"--like the student service center, an informal, welcoming place where students are likely to feel comfortable seeking informal help.

One difficulty in separating such helping services from the normal school routine is that many students with problems will avoid them rather than admit that they are in some kind of trouble. To some students, a visit to a school's student service center or rap room is tantamount to an admission of guilt. Thus, peer counselors often find that students with problems prefer talking to them in less conspicuous settings--on the school lawn or in the cafeteria at lunch, for example. Nevertheless, student service centers and rap rooms can be a necessary refuge from the noise and pressure of school activities. The location of the center, the way in which it is presented to and perceived by the student body, the extent to which it is really a place where students can feel welcome and comfortable--all are factors that will determine whether students use the service and find it valuable.

Peer helpers can provide assistance in a variety of other settings and content areas. A few of these are suggested by Robert Myrick and Tom Erney (1979, p. 150-153), the originators of the Gainesville peer facilitator program, in their book Youth Helping Youth:

- Vocational exploration groups. Peer facilitators can assist small groups of peers in learning about the world of work, career opportunities, and job skills.
- In-school suspension programs. Many schools have found that in-school suspension is a productive alternative to making students leave school when they are in trouble. The "time out" in school can be even more productive when a skilled

peer facilitator is available for informal discussion.

- Working in community agencies. Peer facilitators can do outreach work with other young people outside of school --for example, hospitalized youth or youth in institutional settings. Working with adults in need is another alternative.

Whether the peer helpers are paid or working as volunteers, and whether the program is in a school or a community setting, peer helper programs have repeatedly demonstrated that they can have a positive impact on participating youth. One of the main reasons for the success of peer helping programs is that they offer young people meaningful responsibilities. They are based on the premise that caring for others and knowing how to help others is an important stepping stone to maturity.

One of the main objections to peer counseling programs has always been that young people will not be able to handle the responsibility of helping others. Rarely, however, has this fear been justified. In well planned peer helping programs supervised by conscientious adults the helping experience has been a source of growth. Given the responsibility and the skills for handling it, most young people rise to the challenge.

PEER PARTICIPATION PROGRAMS

The conventional notion of a peer program implies youth working together with, or helping, other youth in the context of a group of peers. It also implies clear distinctions between the world of youth and the world of adults. The relationship of adults to peer programs, in the conventional view, is to guide, to facilitate, to lead, and to teach. All of the programs described in the preceding three sections fit this model of peer programming.

A problem with the conventional view of peer programs, however, is that it is limited to the perception that young people are relatively isolated in their peer groups from the rest of society, and that only within their peer groups can they begin to exercise adult responsibilities and learn patterns of positive, constructive, responsible behavior. The peer group is certainly a logical place to start with such approaches. But to limit them exclusively to the peer setting is to miss one of the main points about peer programs: whatever else they accomplish, they provide young people with opportunities to accept and deal with the kinds of responsibilities that they will have to assume as adults. In a sense, peer programs focused entirely on the peer group provide youth with "practice" at adult roles. Denying young people the opportunity

to exercise their new skills and knowledge in the actual world of adults negates one of the most important peer program goals. It negates the promise of genuine responsibility and empowerment that should be at the heart of a peer program.

The logical extension of programs that focus primarily on the peer group itself is the concept of programs designed to help youth take on active roles in the larger society. Often these kinds of programs are described as "youth participation programs." Since "youth participation" tends to have a somewhat specialized meaning, a preferable term for the purposes of this publication is "peer participation."

Almost invariably, peer participation programs, like other peer programs, involve young people in a peer-group context. The main distinction between peer participation programs and other kinds of peer programs is that the former focus not on the peer group itself but on how the peer group can participate actively in the adult world.

One category of peer participation programs involves young people working on a "peer" basis with adults. In programs like these the participating youth share in making decisions, carrying out tasks, and most of the other responsibilities that adults might also assume. An example of this kind of program is Something More Than Survival (Bennett 1979), which involves youth in assessing school needs and problems by means of a school climate survey and then developing programs or strategies based on the survey's findings. Although described as a "peer-initiated" program, Something More Than Survival relies on the participation of a broad cross-section of the school community. The participants include:

- A survey coordinator--usually a counselor, teacher, or administrator--who assumes responsibility for the entire project;
- A steering committee of about 12-15 people, including students, teachers, parents, and staff members;
- Student volunteers, whose basic role is to administer the school survey by interviewing a broad segment of their peers;
- Task forces, which are formed after the survey is completed in order to develop programs or solutions addressing key problem areas;
- The principal--as the head of the school, the principal is a member of the steering committee and is a critical factor in the success of the project.

In one intermediate school in a middle-class suburban California community the school climate survey was first administered during the 1978-79 school year. As a result of the survey, a set of

objectives was generated by the school climate task force. These included:

- Involve students in a campaign to reduce litter and graffiti on campus;
- Increase number and variety of student activities during lunch and special events after school;
- Strengthen and broaden student involvement in student government;
- Continue various counselor-led support groups;
- Encourage teachers to use more positive reinforcement in the classroom.

Support for the program was strong throughout the school, particularly on the part of the principal, who included the task force objectives in his list of personal objectives submitted to the district administration. A year later the school climate survey was administered a second time in the school, and significant improvements were shown in most areas (Center for Human Development 1980).

Clearly, without the support of the school principal a program like Something More Than Survival cannot even begin. Given the problems faced by so many schools today, it is often easier to implement peer participation programs in community settings, where significant organizational changes are not necessarily required. Rather than changing existing organizations, community-based peer participation programs often establish new organizations in which youth and adults work together to address community problems and youth needs. Channel One, a program sponsored jointly by the National Institute on Drug Abuse, the Prudential Insurance Company, and a variety of other private-sector representatives, is an example of this approach. Now in place in more than 140 communities across the country, Channel One begins by setting up a broad-based steering committee comprised of youth and adults representing different community agencies and constituencies. The steering committee members work together to plan youth-oriented programs and often become an important presence for youth advocacy and the effective coordination of the community's youth services.

One of the main components of Channel One projects is their emphasis on youth employment and career development. Channel One steering committees have developed a wide range of youth-initiated projects through which young people can earn money and gain employment skills. These include:

- Initiating a youth-operated tourist center in a community near the Canadian border that is a regular stopping point for Canada-bound tourists;

- Developing a food coop for the elderly, organized and staffed by youth;
- Supervising and acting as life guards for a Boys Club swimming pool;
- Re-seeding clam beds and monitoring the ecology of a seaside town in Massachusetts;
- Building community facilities such as recreation centers or renovating historical landmarks.

The purpose of Channel One is to provide a process for youth involvement in developing community activities and alternatives to drug abuse. Once the process has been implemented, the actual projects are determined according to the needs of the communities in which they will take place.

Although the potential for gaining job skills is not necessarily an aspect of every peer participation program, in a time of high unemployment among youth, particularly minority youth, it is increasingly important. It is central to the concept of Urban Youth Teams, developed by the drug abuse prevention program of the West Dallas Community Centers, Inc., in Dallas, Texas. Based in five community centers that are scattered throughout a densely populated, low-income community dominated by housing projects, West Dallas' urban youth teams are established by youth workers based in the community centers. One of the goals of each urban youth team is to develop marketable skills as one way of empowering the participants. Among the activities initiated by urban youth teams have been:

- Development and operation of a profitable business in silk-screening tee-shirts and other wearing apparel;
- A study of Mexican American and African folk healing methods that was funded after one of the teams developed a proposal for the project to the National Endowment on the Humanities;
- The operation and production of the first newspaper developed solely for the West Dallas community.

Similar to the urban youth team concept is the notion of youth action teams (YATs) developed by a group of young people working with the Social Action Research Center, in San Rafael, California. Craig Sundlee and Willie Stapp (1979), two of the members of the original YAT, have spelled out the various processes for establishing youth action teams in their book The YAT Manual. Working closely with two adults--a "team coordinator and a learning coordinator"--a YAT, according to Sundlee and Stapp,

...begins by identifying an existing social problem or current need. Next, an action plan is prepared which

outlines concrete activities for improvement. At the same time learning contracts are developed in the areas of knowledge which will be used in the activities. The team members learn the issues and are well prepared for them (Sundlee and Stapp 1979, p. 9).

The many different kinds of YAT projects recommended and described in the manual include:

- Development of a newsletter focusing on youth education and employment. This newsletter was circulated to 14 task forces studying the subject. Through the participation of the YAT, it offered youth's point of view to adult planners and policy makers regarding decisions about youth programs.
- The St. Paul Consumer Action Service. A group of students at the St. Paul Open School, in St. Paul, Minnesota, developed a youth-managed program to handle and investigate consumer complaints. Through this program students learned how to interpret contracts, use small claims courts, write business letters, and clarify information through telephone interviews, among many other skills.
- In East Lansing, Michigan, a group of young people established a nonprofit organization called the Three O'clock Lobby. Taking its name from the hour of the day when most schools dismiss their students to participate in the events of the "real" world, the Three O'clock Lobby has become a youth advocacy organization focusing on legislative and political issues of importance to youth. Among other projects, the group obtained funding for a toll-free telephone line to provide information and establish contacts with other youth advocacy organizations in the state. The group has also lobbied intensively for various youth-oriented legislative causes: the group supported elimination of the status offender category, for example, and opposed increasing the drinking age from 18 to 21 and lowering the minimum wage for youth (Sundlee and Stapp, p. 10-14).

In their book The Value of Youth, Arthur Pearl, Douglas Grant, and Ernst Wenk (1978) sum up the qualities that are essential to peer participation programs. Young people in America, the authors maintain, are devalued--they have "few acceptable social roles... and not enough important work." What is needed is a policy that values youth.

A policy that values youth will enable our young people to learn to cope with a changing world, while enlisting them as agents in the change process. A policy that values youth need not be

inflationary. New funds are not needed to begin to put youth to work. Much can be accomplished by redirecting funds that currently support programs which de-value youth. New programs could provide for more positive roles for youth in education, the community, the justice system, the economy, and other areas of vital interest to the local, national, and world communities (Pearl 1978, p. 11).

But Does It "Work"?

Increasingly, human service providers are concerned with the results of various program approaches, and abundant research has been done on the effects of peer-oriented strategies. Most of the research has focused on variables that are related to drug abuse--self-esteem, for example--rather than on actual drug use or intentions to use. Nevertheless, some of the findings are drug-specific, and, taken together, the accumulating body of research is persuasive. Among the findings:

- Tutors in peer tutoring programs usually make significant gains in their knowledge of the subject matter they are teaching; tutors' affective gains (in such areas as self-esteem and attitudes toward school) have also been impressive. There is less evidence of specific gains among those who are being tutored; often peer tutoring programs are adopted as much for the benefit of the tutors as of the tutees (Allen et al. 1976; Paolitto 1976; Cognition et al. 1978; Hedin 1980; Mosher et al. 1976).
- As with peer tutoring programs, there is more evidence of the effectiveness of peer counseling programs on the helpers rather than the helped. Nevertheless, significant affective gains have been demonstrated in peer counseling programs, and young people, school counselors, and school administrators widely attest to the valuable contribution they can make to the development of a positive school climate (Davis et al. 1977; Hebeisen 1972; Mosher 1977; Conrad 1980).
- There is evidence--much of it cited earlier in this chapter--that short-term peer-oriented prevention programs can be successful. The value of the "saying no" strategy is only beginning to be explored, but since it is based on demonstrably successful strategies, it clearly deserves attention and study.
- A good deal of research evidence supports the notion that the kinds of positive peer pressure programs represented by Tribes, Jmbudsman, and similar

approaches promote (1) a greater sense of acceptance by peers, (2) greater pursuit and use of information provided by peers, (3) higher motivation to succeed in school, (4) greater willingness to express ideas to classmates, (5) higher achievement in a variety of academic tasks, (6) greater ability to understand the perspective of others, (7) higher self-esteem, (8) more positive interpersonal relationships with school peers, and (9) more positive perception of and liking of school peers and school personnel (Johnson 1980).

The above summary only hints at the volumes of research and evaluation reports on peer-oriented strategies that are currently available. Whether any of this research can actually encourage adults to value youth, however, is a moot point. At their best, peer programs are an important way to begin that process.

OVERVIEW OF PEER PROGRAMS DESCRIBED
IN CHAPTER III¹

PROGRAM	AGE/GRADE LEVEL	EMPHASIS	DEGREE OF YOUTH RESPONSIBILITY	POTENTIAL IMPACT
Magic Circle	Elementary	Peer-group communication, self-esteem, listening skills	Low	Improved intergroup communication, personal growth, improved classroom climate
Ombudsman	Elementary	Peer-group communication, self-esteem, listening skills, decision making	Medium	Improved intergroup communication, personal growth, improved classroom climate, participation in community service activity
Tribes	Elementary	Peer-group communication, self-esteem, listening skills	Low	Improved intergroup communication, personal growth, improved classroom climate
SPARK	High school	Counseling, peer-group interaction, alternatives	Medium to high	Personal problem solving, improved self-esteem, reduction of problem behavior, greater acceptance of school
PEDE	Elementary/secondary	Peer institutes, core group activities	Medium to high	Improvement in school climate, personal growth (self-esteem, decision making skills)
Operation Snowball	Secondary	Peer institutes, peer support groups, community activities and alternatives	High	Personal growth (counseling, problem solving), involvement in meaningful activities, new roles
Houston/Stanford smoking prevention programs	Secondary	"Saying no" techniques, awareness of pressures	Low	New awareness of pressures of media and peers, ability to resist pressures

¹The purpose of this chart is to offer a brief overview of the various programs and approaches described in chapter III. The descriptions in the chart are intended as suggestions of program attributes and do not represent an exact assessment of all possible program elements and effects; rather, these are program highlights.

PROGRAM	AGE/GRADE LEVEL	EMPHASIS	DEGREE OF YOUTH RESPONSIBILITY	POTENTIAL IMPACT
"Saying No" (NIDA)	Secondary	Awareness of pressures, "saying no" techniques	Low	New awareness of pressures of media and peers, ability to resist pressures
Positive Peer Culture	Secondary	intervention, counseling, peer responsibility and caring for other peers	Low to medium	Personal growth, sense of caring and responsibility for self and others
Youth Tutoring Youth	Elementary/secondary	Peer teaching of cognitive information and skills, tutor-tutee relationship	High	Improved sense of responsibility and maturity in the tutor, improved cognitive learning and skills in both tutor and tutee
Jigsaw	Elementary	Peer teaching of cognitive information, peer-group cooperation	Medium	Improved group cooperation, improved cognitive learning
Teen Involvement	Elementary/secondary	High school students teach elementary school students about values and health	High	Positive role modeling of older peers, knowledge about health, human needs, and drug abuse
Teenage Health Consultants	Secondary	Peer teaching of cognitive information, training of peer teachers	High	Communication of accurate information about health issues by trained peers to their peers, also assistance in problem solving and crisis intervention
Planned Parenthood Programs	Secondary	Peer teaching of cognitive information, training of peer teachers	High	Communication of accurate information about health issues by trained peers to their peers, also assistance in problem solving and crisis intervention

PROGRAM	AGE/GRADE LEVEL	EMPHASIS	DEGREE OF YOUTH RESPONSIBILITY	POTENTIAL IMPACT
Peer counseling/ helping/facilitating programs	Secondary	Intensive training of peers as helpers, facilitators, and counselors; awareness of limits of peers' ability to help and actually counsel; development of cadres of peer helpers	High	Improved school climate, personal growth of both peers and those whom they help, provision of additional helping resources in the school and community
Student service centers	Secondary	Training of peers as helpers/advisers, awareness of community resources and helping techniques	Medium to high	Provision of a clearly identified resource to which students in trouble can turn (other than adults); provision of additional helping resources in the school; provision of information about community services
Something More Than Survival	Secondary	School climate assessment with peer participation; implementation of a plan to improve school climate	Medium to high	Development of an accurate assessment of school climate shared by a broad group; possible improvements in school climate; benefits to peer participants
Channel One	Secondary	Community-based peer participation, development of youth employment and other skills, provision of alternatives	High	Public/private sector partnership, personal growth of peer participants, provision of needed alternatives
Youth teams	Secondary	Community-based peer participation, development of employment opportunities and other alternative activities	High	Personal growth of peer participants, provision of needed alternatives

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IV. PROGRAM PLANNING AND IMPLEMENTATION

by Mark Amy

Good planning can make the difference between an effective peer program and one that people look back on a few years later, asking, "By the way, whatever happened to that peer program?" The same could be said of just about any human service program, of course, and many of the principles and strategies for good planning discussed in this chapter could be applied to other human service program approaches as well. Nevertheless, certain aspects of planning for a peer program are unique. These, as well as a general planning process, will be highlighted in this chapter.

What the reader should not expect from this chapter is a cookbook or a step-by-step, failsafe, how-to-do-it method. There are no precise prescriptions for good planning. Planning is an art, not a science. Fortunately, it is an art that can be mastered relatively easily by people who have common sense, an awareness of the needs of others, and a genuine commitment to getting the job done well. If good planning as an art is not exactly paint-by-numbers, neither is it the creation of the Sistine Chapel ceiling.

This chapter offers guidelines and a process for effectively planning peer programs. It incorporates many of the attitudes about peer programs--why they are needed, what they should accomplish and how they should operate--found in the preceding chapters of this publication. It is also based on the assumption that good planning is, among many other things, an attitude, a way of solving problems. It is the ability to ask the right kinds of questions about the circumstances surrounding a program, to anticipate problems in order to be ready to deal with them effectively if and when they arise, and to think on one's feet. Above all good planning takes practice. Good planning of a peer program in particular requires people to work together comfortably and cooperatively.

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Without planning, a program has no clear vision of what it is doing or why it is doing it. Usually the only thing left is a vague notion of wanting to help people. The planning process should be intensive at the beginning of a program and part of a program's continuing activities after it is under way. The alternatives to this are no planning, aimlessness, waste, frustration, and, during a program's implementation phase, management by crisis. More often than not, the result is failure.

It should be noted that this chapter deals with relatively general aspects of planning and implementing a peer program. The details of implementing specific types of peer programs will differ somewhat from one program to another. Without a clear understanding of basic principles, however, program planners may never have an opportunity to focus on details.

Who Are the Program Planners?

No successful peer program ever got started without the energy and commitment of an individual--or two people or a small group--working with the conviction that a peer program would be an interesting, creative way of addressing the problems and needs of youth and youth-serving adults. Several terms will be used in this chapter to refer to these program planners--primarily, they will be identified as the planners or the initiators. Who are they? What kinds of people do they tend to be? As with good program planning in general, there are no hard rules and no ideal situations from which to initiate a peer program. Probably the most important requirement is that the planners and initiators be people who are convinced that a peer program is needed and that it will work. They may have read about peer programs in a book, a monograph, or a journal article. They may have heard about peer programs from colleagues who have either observed or been involved with such programs. In some cases they may be responding to an official mandate to explore and initiate a peer program--from a school principal, a local youth advisory board, or a local board of education.

Whoever they are and however they conceived the idea of doing a peer program, the initiators must be prepared to accept the responsibility for developing support, organizing the program, and building a constituency for it. In addition, they should be prepared to put in extra hours and energy.

Early in the program development process the initiators should assemble a planning group. This does not need to be a large group; it could include anywhere from eight to 20 people. But its members should occupy key positions in the institutions or agencies whose cooperation will be needed to make the program work. It should also include representatives of the program's target population--youth.

In both school and community settings, it is important to work with "key players" as early as possible. If the program planners are located in a drug abuse agency, for example, they will certainly want to involve decision makers in youth-serving agencies such as local Ys, community mental health centers, Boys Clubs, and the like. If they are located in a school, they will need to involve administrators, principals, and, possibly, district office staff members.

No matter what the setting, expansion of the planning group will broaden the ownership of the program. It can be a way of creating a support group that will become increasingly interested in the program as each group member makes contributions to the planning process.

The Critical Steps

Once the planning group has been established it will be important to follow a set of clear, logical steps. Briefly summarized, these steps are:

1. Identifying problems and needs;
2. Assessing and identifying resources available to deal with the problems and needs;
3. Developing an action plan by:
 - Clarifying goals and objectives;
 - Agreeing on program methods;
 - Conducting a force-field analysis;
 - Specifying the action steps, timelines and assignments that will be required to make the plan a reality;
 - Preparing for program documentation and assessment;
4. Implementing the program;
5. Conducting an assessment/evaluation.

These are the steps of a logical planning process for any service program. Most people in human service agencies who have ever engaged in planning can recite them, or a series of steps very much like them, by rote. This does not necessarily mean that they can carry the steps out clearly and logically, however, or that they really understand the rationale for the process and the need to make planning a continuing activity, as opposed to a formality undertaken to please some real or imaginary officialdom.

The purpose of the following sections is to translate the steps of the process into something more concrete through discussion and illustration and, in addition, to show how they can be made relevant to planning and developing peer programs.

Identifying Problems and Needs

Almost always program initiators have some idea of the problems and needs they wish to address without actually performing a formal needs assessment. Needs assessments can vary from relatively inexpensive and informal procedures to extremely elaborate community studies involving computerized data collection and the administration of complicated survey forms. For most planners initiating peer programs today, an informal and inexpensive needs assessment may be the only option. It is possible, for example, to conduct informal interviews with a cross-section of young people and youth-serving professionals in school or community settings. This can help the program's planners to check their perceptions of what the problems and needs in the school or community really are. Exhibits 1 and 2 on the following pages suggest questions that interviewers conducting such an assessment could ask. (Note: The questions assess resources as well as needs.)

Planners often proceed from what they believe to be a clear perception of problems to developing goals and objectives for their programs without conducting a needs assessment. Many begin to develop goal statements without even considering the problems or needs. And just as many begin by identifying a method--for example, peer counseling--without having a clear idea of either the goals or the needs. One of the most difficult things when planning groups is to shift the focus from the activity, or methods, of the program to the development of goals and objectives that are in line with clearly identified problems. The process can be much smoother if the planning group begins at the beginning--with needs assessment and problem definition.

Assessing Resources

Even a well-done needs assessment will not tell the planners exactly what kind of program should be adopted. This is why an assessment of existing resources can also be helpful--and is often included in the definition of a needs assessment. Through such an assessment, for example, the planners may find that youth in the community have few people with whom they can share their problems. The identified need in this case might be that there are not enough counseling services and that some kind of paraprofessional help must be provided. If the planners' philosophical orientation is that youth ought to be doing more than just receiving services--that they should be involved as actual participants in delivering services--they might decide to initiate a peer counseling program.

Similarly, the needs assessment might reveal (as needs assessments often do) that the youth of the community have little in the way of recreational or employment opportunities. The planners might decide in this case to develop a youth involvement program

Exhibit 1

QUESTIONS FOR INTERVIEWS WITH STUDENTS/YOUTH

1. How do you spend your leisure time?
2. Where would you go for information about recreational opportunities?
3. Where would you go for information about drug problems, birth control, and similar issues?
4. Where would you go if you had a personal problem to discuss?
5. What resources do you know of for young people who need to discuss personal problems (other than parents)?
6. What are the most critical problems or pressures facing you?
7. What are the most critical problems or pressures facing your friends?
8. What services do you think need to be provided by the school or community agencies to help with these problems?
9. What resources do you know of in the school or community where young people can get help for these problems?
10. Please list the school or community services that you consider most valuable and important to you and your friends.

Exhibit 2

QUESTIONS FOR INTERVIEWS WITH YOUTH-SERVING ADULTS

1. What do you think are the most significant issues, pressures, or problems facing the young people in this community?
2. What services or opportunities need to be provided by schools or community agencies to help with these problems?
3. What do you consider to be the most valuable services that are currently provided for youth in the school and community?
4. What do you consider to be the most critical gaps in youth services in the school and community?
5. What specific agencies are offering needed youth services?
6. What changes in existing services could be made to better serve the community's youth?
7. What is the most important service or opportunity that needs to be provided for the youth of this community that is not currently being provided?

that would provide meaningful alternatives. Again, however, the planners' philosophical orientation would be a factor in their decision to implement a youth action team, as opposed to developing a recreation program designed and provided entirely by adults.

Clearly defining needs and identifying existing resources is important in establishing the rationale for a peer program. Since planners will usually find that there are not enough services to meet known needs--for tutoring in basic skills, for example, or for counseling--a peer program can be seen as a logical mechanism for providing new program services at relatively low cost.

It is likely that to some extent the planners will have certain methods and approaches in mind while they are conducting the needs assessment. They should leave room for the possibility that these services will not, in fact, be needed. On the other hand, they can also be on the lookout for existing service delivery systems to which a peer component could be added. Some peer programs have formalized this process to the extent of conducting school- or community-wide searches for agencies or mechanisms that would be amenable to a peer component (asking counselors, for example, if they believe that there is a need for peer helpers or contacting a local youth agency like the YMCA to see if they would be interested in hosting a peer program).

Clarifying Goals and Objectives

Goals and objectives are the vision of a program. They should provide the planners with a picture of what the program is about, and they should say what it will accomplish--in specific, observable terms. Well thought out goals and objectives proceed along a spectrum from the general to the specific. The most general kind of statement about what the program will do is, in fact, a statement of its mission. For example:

- The program will reduce drug and alcohol abuse among youth in the school and the community.
- The program will reduce truancy and dropping out and will improve students' attitudes toward school.

Goal statements are even more specific. They answer the question, "What exactly do we want the program to accomplish?" For example:

- Twenty percent of the youth in the community will increase their decision-making skills as a result of participating in the program.
- Truancy at the junior high school will be reduced by 25 percent.

Program objectives are the specifics that must be accomplished

in order to produce the conditions defined by the goals. They are much more quantifiable, and they should be stated in measurable, time-limited terms. For example (referring to the two goals above):

- Goal: Twenty percent of the youth in the community will increase their decision-making skills as a result of participating in the program.

Objectives:

- By April 1, 1982, 200 youth will have increased their awareness of their personal decision-making techniques as a result of participating in the entire 18-week course in communication skills and decision making being offered by the staff of the peer helper program;
 - By April 1, 1982, 200 youth will be able to identify the consequences of a decision they make, as recorded by the program's decision-making scale and the observations of the program staff;
 - By April 1, 1982, 200 youth will be able to identify 2 specific decisions they have made in the last month.
- Goal: Truancy at the junior high school will be reduced by 25 percent.

Objectives:

- During the 1981-82 school year 50 students will report in formal interviews that they feel more self-confident as a result of being involved in a school peer participation program as a resource person;
- During the 1981-82 school year 75 students will demonstrate a higher self-concept as recorded by their performance on pre- and post-program administration of the Tennessee Self-concept Scale;
- During the 1981-82 school year 100 students will demonstrate that they are more aware of the consequences of school truancy through discussions with their program advisers.

There are as many different ways of writing goals and objectives as there are ways of following the basic process of program planning. More important than adhering slavishly to any particular format is that the goals and objectives, as stated, make sense to the planners who have generated them. Unfortunately, however, in developing goals and objectives planning groups often fall into the trap of thinking that there is some particular format or mystical language that will make the goals and objectives "good"--and that without this their goals and objectives will be meaningless.

The main point of this section bears repeating: goals and objectives are the vision of a program; they are the planners' way of saying what the program should be about and what it should accomplish. If the planners do not understand their own goals and objectives, no one else will either.

One way of simplifying and demystifying the development of goals and objectives is to begin the process at a meeting in which as many people as possible who are interested in the proposed program participate. (This could be done at the first meeting of the planning group.) In an existing school or community agency everyone who might be associated with the program would be invited. The entire staff of a community program might be required to attend--that way, no one could say later that he or she did not understand the purpose of the program or had not had an opportunity to participate in important decisions about it. This group can then discuss general questions such as "What should the program accomplish?" and "What kinds of things would we like to see happen as a result of the program?" The answers can be recorded in the same general terms as the discussion itself. Gradually, the questions can be narrowed and focused, but even here, the purpose is not to write out specific, quantifiable objectives. That can be done later by one, two, or three people. Actually honing an objective into a carefully worded statement is not an appropriate activity for a large group.

One problem that program planners often have with developing goals and objectives is that they come up with methods instead. "Our objective is to provide 25 hours of training" is not an objective; it is a statement about methodology, a description of an activity. An objective for this activity would be a statement of the outcome of the training, a description of what the program planners want to see happen as a result of the training. (For example: "After training, the students will demonstrate that they can use at least three of the problem-solving techniques practiced during the training sessions.")

Agreeing on Program Methods

Program planners often initiate the planning process with specific methodology--that is, a particular kind of peer program--in mind. In most cases this is difficult to avoid. Planners often become interested in the idea of a peer program because they have heard about, and are attracted to, a specific approach. Selecting the method beforehand is not necessarily undesirable as long as the planners can keep an open mind and revise or adjust their original intentions if a change in plans clearly becomes necessary.

Often, on the other hand, the planners will begin only with the idea that a peer program would be a good approach to working with and helping youth. In these cases they will need to study a variety of different approaches before making a decision about

which one will best suit their particular needs. One way of studying different methodologies is to visit other programs that are using them, observe the programs in operation, and talk with the program staff and the youth involved. Another way of getting introduced to the wide variety of available options is to study as many different books and reports on peer programs as possible. Chapter V of this monograph, "Resources," includes some of the best materials on peer programs available.

Clearly, the methods on which the planners finally decide should be in accordance with the needs they have identified. But a number of different program approaches might be appropriate in addressing any particular need. When this occurs several additional considerations will come into play:

- **Acceptability.** Some programs may be more likely to attract opposition, or less likely to attract support, than others. Despite the careful explanations of program directors, for example, many people are still suspicious of peer counseling. Some positive peer pressure programs that emphasize affective education may be opposed by members of the community who favor the "back to the basics" approach. There may be subtle opposition to the concept of peer participation in decision making. The planners need to test the political waters frequently by discussing their plans with a wide circle of potential supporters and helping them see the payoff for all concerned.
- **Costs.** The costs of peer programs vary considerably. Some can be implemented at almost no additional cost--peer tutoring programs, for example, and certain kinds of peer participation programs. Others, such as peer counseling, will require training that could be expensive, particularly if outside consultants must be hired to do it. A student service center requires the presence or supervision of an adult whenever the center is in operation.
- **History and attitudes.** Less quantifiable, but equally important, is the general emotional climate into which the peer program is being introduced. To a great extent this climate is shaped by the attitudes of key adults toward peer-oriented programs and the concept of peer participation, and often these attitudes have been influenced by past experience. Many schools and communities, for example, may have tried to implement a peer program several years ago; if the experiment was not a success, present attitudes toward a new peer program may be colored by the unpleasant memory. It might be better in such a situation to select a program approach that would be distinct from the earlier approach.

The planners cannot be too aware of these and similar considerations in determining which program approach is most likely to succeed. Nevertheless, the selection of the particular methodology

is one of the points in the program planning process where the craft of planning is superceded by the artfulness of the planners.

Conducting a Force-field Analysis

One technique for anticipating problems and dealing with them effectively before they actually occur is force-field analysis. Essentially all this involves is identifying the various factors that would either support a proposed plan or stand in its way. One common way of doing a force-field analysis is to brainstorm the various factors and list them on a sheet of newsprint, as in the following example, which analyzes the factors that might support or obstruct a proposed peer counseling program:

<u>Support</u>	<u>Obstruct</u>
<ul style="list-style-type: none">● Need has been identified● Enthusiastic planning group● Excellent trainer available● One of the planners has had experience with this type of program● Parents support the idea	<ul style="list-style-type: none">● Suspicion about peer counseling--is it therapy?● One of the school counselors resents the idea● Difficult to schedule the training program● Lack of agreement on how to select peer counselors

The technique of force-field analysis is based on the recognition that there will always be positive and negative aspects of any particular planning step. When these factors balance each other or the negatives outweigh the positives, the planners may decide on another course of action. On the other hand, often the negative factors can be addressed and turned into positives--the counselor who opposes the program, for example, could become a potential ally if he is given a role in planning and supervising it.

Force-field analysis can be applied to every step in the program planning process. For example, after the planning group has been established, the group can analyze the factors that will both help and hinder it from continuing. During the needs assessment the group can review the factors that make the needs assessment either reliable or questionable. Force-field analysis will be particularly useful in selecting methodologies.

Specifying Action Steps

Once a particular program approach has been chosen, specific planning for the implementation phase will begin. In effect, the planning group will thereby become the planning-and-implementation group. Several group members will probably take on principal responsibilities for seeing that the program is implemented properly

and that the original plans are carried out as the planners intended.

This is an appropriate point in the planning process for the group to develop a master chart describing the various action steps that must be taken in order to make the plan a reality. These action steps answer the "who? what? where? and when?" of program implementation. (Presumably, the "why?" has already been answered by the preceding steps of the planning process.) Developing the list of action steps as part of the group planning process accomplishes a number of things:

- It ensures that the people who are best qualified to handle certain responsibilities will receive the appropriate assignments;
- It helps to divide responsibilities for program implementation fairly so that no one person must shoulder too much of the work;
- As a result of being done in a group, it facilitates group "ownership" of the implementation process.

Assessment/Evaluation

The planning group still is not ready to call it a day, for one of the most important steps in the planning process must be completed prior to the beginning of the implementation phase: preparations for program assessment or evaluation.

The main purpose of program assessment is to find out how the program is doing and how well it is meeting its goals and objectives. In essence, this process tells the story of the program--both to the planners and to anyone else who is interested in knowing what happened.

Planners often assume that the purpose of evaluation is to make a judgment about whether or not a particular program is "good" or "bad." That is not the purpose of the kind of evaluation described here. Instead, evaluation should be designed to tell the planners what aspects of the program can be improved and whether or not the program is actually achieving what they want it to achieve.

Because of this, one of the most important points about program assessment is that it must be planned in advance. It is not something that an independent consultant can do after the program's first year has been completed, for example, if the program planners suddenly decide that they need to submit a written report about the program to interested decision makers or funding agencies. Evaluation always involves some kind of systematic data collection, and this should be done while the program is in progress.

Program evaluation should be as straightforward as possible. One of the most important parts of it--commonly called "process evaluation"--is simply keeping track of what happens in the program from one day to another. This should begin immediately, starting with the first planning session. Brief reports can be developed summing up each meeting, including information about the numbers and names of people in attendance, decisions that were made, and topics that were discussed. During the implementations phase, a system should be developed for keeping track of the people served, the services provided, and any other developments that are pertinent.

One way of making the process interesting and creative is to involve young people in it directly. One peer program in California, for example, has two student "chroniclers." They see themselves as historians and story tellers, and they do a great deal of process recording. One of the chroniclers uses a relatively objective method that incorporates a systems approach, i.e., noting various aspects of the program's process at given intervals and recording specific processes from one meeting to another. The second chronicler records subjective impressions in anecdotal fashion, in the manner of a newspaper or journal report. Similarly, in many other peer programs, methods of keeping statistical records are developed jointly by the program staff and the participating youth--and then maintained by both parties as well.

Another important aspect of program assessment--commonly called "outcome evaluation"--tracks the program's progress in meeting its specific objectives. Several methods can be used, including questionnaires, systematic observation of program activities, and paper-and-pencil instruments administered before and after young people participate in the program's activities. One of the common mistakes of this kind of program documentation is assuming that standardized pencil-and-paper instruments are the only sure method for collecting accurate information. This is not necessarily true. Assessing the program's attainment of its objectives can be a sophisticated process involving elaborate statistical data analysis, or it can be as simple and straightforward as a series of individual interviews.

Even the simplest kind of program evaluation can benefit from the assistance of an evaluation specialist in the initial planning and design stages. An outside specialist can help the program staff clarify the questions about the program they want the assessment to answer and can also either identify or help the participants to develop reliable assessment instruments and techniques. Finding good evaluation resources continues to be a problem for program planners in human service fields. Commonly available sources of evaluation expertise include established local drug abuse programs that have conducted evaluations of their services and social science departments in local colleges and universities.

Issues in Program Implementation

Since no two program planning groups are likely to proceed in exactly the same way, it follows that there will be a good deal of variability in the ways in which programs are actually implemented. Although the program's planners and staff will decide at some point on a particular peer program model to adopt, a model is little more than a conceptualization. It is a frame, a skeleton, a sketch. Even if the planners attempt to follow a particular model to the letter, they will invariably encounter unique conditions that will make their version of the model different from anyone else's. Since the specific details of program implementation will be determined largely by local conditions, there are even fewer reliable rules for program implementation than there are for planning. Nevertheless, certain broad issues pertaining to the implementation of peer programs should be carefully considered as the planning group moves on to actual implementation.

Youth roles. Young people have few genuine opportunities to plan, develop, and carry out projects or programs. In institutions such as schools and in society in general they are usually viewed as passive consumers. At best, they are provided a few opportunities to state their needs or to offer feedback about the services provided them. Consequently, their personal investment in these services is limited. Limited "ownership" often translates to limited learning and limited impact.

Research into peer programs has consistently underscored the importance of personal investment. Repeatedly, the most significant impact of peer programs has been on young people who provide services to their peers. Specific behavior and attitude changes in relation to self-concept, problem-solving skills, and belief in one's ability to effect significant change have been dramatically enhanced for those young people involved in "making the program happen."

Youth should be involved as directly as possible in each step of implementing a peer program. Three or four young people should be included as principals in the program planning process, and youth input and direct involvement should expand as the process continues. An important nuance here is that the peer program should not be developed for youth, but with and by them. Young people can learn from the more creative processes such as planning and from the mundane, day-to-day tasks such as letter writing, record keeping, and arranging for meeting places. They should be "go-fers" as well as policy makers.

Specific plans, formal or informal, can be developed for expanding the roles of participating youth. For instance, most initial peer program training tends to be adult-led. Subsequent training events may include youth as co-facilitators of small-group discussions or as co-trainers. Young people can also arrange for training sites, develop materials, and assist when changes are

needed in the training design. Youth can become increasingly involved in management, evaluation, public relations, and fund raising. In one peer program, for example, the participating youth are responsible for almost all of the evaluation procedures, including administering of instruments, negotiations with funding sources, and decision making related to evaluation designs.

To involve as many youth as possible it is important to recognize the wide variety of skills and talents among the program participants. Not all students will have either the desire or the ability to take on the role of trainer. Students who cannot be trainers may be excellent illustrators or editors for the program newsletter. One young person may be good at relating to people on the telephone, while another is skilled at making presentations to large groups; one may excel at planning and policy development, another at one-to-one helping relationships. A variety of roles can be developed that range from service delivery to management to support to policy development. All of these roles are important to a peer program, and none should be glamorized or made to seem more valuable than the others.

Youth involvement in all aspects of a peer program requires a willingness on the part of the sponsoring adults to take risks. It may mean giving young people responsibilities they have not previously experienced. They may make mistakes. The adults will have to give youth not just a chance to succeed in their new responsibilities, but, in some cases, a chance to fail.

Adult roles. The support, experience, and modeling of adults are critical to the success of a peer program, and one of the biggest challenges that the participating adults will face is achieving the right balance between youth and adult program control. The issue of control--when to keep it and when to relinquish it--will usually be at the heart of the adult's relationship to the program.

It is appropriate, for example, for the adult to function as a liaison between the program and the institution in which it operates, as well as other institutions and agencies. Although youth should also be involved in intra-institution functions or interagency collaboration, most institutions and agencies will usually require the presence of an adult associated with the peer program at program meetings and other events. An adult's presence is especially important when presentations about the program are made to groups of parents.

The role of the adult sponsor or supervisor is critical for setting limits and developing rules governing appropriate behavior. Although youth should be involved in these aspects of program implementation, an adult will have to be in charge and will have to accept final responsibility for what happens. Most young people in peer programs readily agree to this and perceive that boundaries between adults and youth roles are necessary. How the adult exercises his or her authority is important in

maintaining the balance. Ideally, the adult will adopt a facilitative, as opposed to authoritarian, leadership style.

Adult involvement in service delivery will differ from one program to another. In some programs adults and youth share this role, functioning as co-trainers, co-facilitators, or adult-youth leadership teams. Adults in some peer counseling programs counsel specific "clients" that either they or the participating youth consider too challenging, difficult, or risky for youth to handle.

Another important adult role is that of personal support person for individual young people in the program. To many young people in the kinds of challenging new situations that peer programs provide, the support and guidance of a sympathetic adult can make the difference between growth and positive achievements, on the one hand, and a feeling of inadequacy and defeat, on the other.

Special considerations for school-based programs. Because most young people spend so much of their organized time in schools, most peer programs also take place in the school setting. In a way this is unfortunate. The schools have become a battleground today for dealing with social problems, and they are preoccupied with such difficult issues as racial integration, moral development, crime prevention, juvenile delinquency, vandalism, and drug and alcohol abuse. This is happening at a time when the entire educational system is under fire, school funds are being cut further every year, and vocal segments of the community are demanding that schools concentrate only on "the basics." All of these factors are important considerations for those who are considering implementing peer programs in schools.

Unless introduced very carefully, a peer program in a school can appear to be another item being added to a list of things "we would like to do if we ever get around to it" that is already much too long. It is important, therefore, that the initiators present the peer program as a form of relief, rather than as an additional burden. One way to do this is to approach school faculty members, administrators, and policy makers with ideas about ways in which a peer program can address their primary concerns. For instance, the peer program planners may have identified enhancing students' self-esteem as a specific program outcome. School personnel may be much more concerned about reducing truancy and vandalism. Thus, it may be necessary for the program initiators to adjust their goal statements or add new outcomes.

Another approach would be to plan the peer program so that it complements existing services, rather than being seen as competing with them. A peer big brother/big sister (cross-age helping) program that is part of the school counseling center would require less funding, less attention, and less change in the school's routines, for example, than an entirely separate student service center.

In schools there will probably be a percentage of teachers and administrators who oppose the idea of a peer program even before it has been explored. School people have seen too many "innovative" programs come and go, and their skepticism is understandable. These skeptics should be kept well informed about the program's progress. The principle that often works best in such cases is agreeing to consider each others' perspectives. The program planners say to the skeptics, in effect, "We know you don't like these kinds of programs, and what we'd like to do is reach an agreement with you that when or if the program interferes with you, we'll talk about it."

It is virtually impossible, or at least extremely difficult, to launch a peer program successfully in a school setting without the support and cooperation of the principal. In some instances the principal may not particularly like the idea of a peer program, but he or she will not resist it if there are enough teachers, counselors, and other administrators who support it. Outright opposition on the part of the principal will be difficult to overcome.

If the peer program is being initiated by people who are based in community agencies, it faces yet another obstacle. The history of outside agencies working cooperatively with schools is mixed. Although there are some notable examples of mutual and cooperative projects, there are just as many failures. Program planners in community agencies should keep this in mind and should include in the planning group at least one person from within the targeted school and one person who has a history of successfully working with schools.

Troubleshooting

As with any human service program that requires a delicate balance of different human and organizational factors, peer programs do not always succeed or survive. Program planners should be aware of some of the most common causes of program failure and avoid them.

One major reason for the termination of peer programs is that either the charismatic individual or the highly motivated group that initiated the program leaves the school or community agency in which the program was launched. Unless the program has been very well established in the school or community--a process that can take three to five years at least--the program will collapse without the continuing support of those who understand it and most want it to succeed.

In many instances the initiators discontinue their involvement with the program because the funding that enabled them to supervise or guide it has elapsed. This is true of many student service centers that were initiated in Michigan at a time when

resources for additional support staff were much more plentiful than they are today. The implications for establishing new peer programs are clear: costs must be kept to a minimum. Whenever additional funding is sought, it should be either short-term and incidental or guaranteed for a long enough period of time so that the program will have a fair chance of becoming self-supporting or obtaining permanent funding.

Given the climate of turmoil and change in human service professions and schools today, another reason for the failure of many peer programs is that they become enmeshed in trendiness. Often peer programs are touted as being innovative, and this alone generates hostility and skepticism. In fact, peer programs existed in the days when most of the American population lived in rural settings and attended one-room schools--the "innovation" of cross-age helping was a necessity, not a frill. Initiators of peer programs would be well advised to eliminate the word "innovative" from their vocabularies.

Peer programs will not survive, whatever their merit and their accomplishments, unless they are institutionalized. If they are located in community settings such as the YMCA, they must become as important to that institution as swimming and basketball. Creating this kind of institutional acceptance must be a major goal of the program initiators. Similarly, school-based programs are more likely to survive if they become part of the regular curriculum. A peer counseling class can be offered in conjunction with psychology or social studies, for example. Many peer programs have become a relatively permanent fixture in school systems when their sponsors have arranged for them to be included as elective courses.

Programs often lose support because decision makers and key people are not informed about what they are doing. The program's advocates must assume responsibility for keeping these key people informed on a regular basis. In community settings this may mean regular mailings of a program newsletter, appearances on local talk shows, using free public service announcement time on television, and similar techniques for getting the word out. In schools regular communication can be as simple as an occasional notice placed in teachers' mailboxes or brief presentations at faculty meetings.

Finally, peer programs often fail because they were poorly planned, or because they were not really planned at all. Especially in the early 1970s, many peer programs imitated what were then considered to be national peer program models. Almost invariably, however, the imitations experienced serious problems. They had no plan, no vision, and no sense of where they were going. They simply duplicated someone else's process, often right down to inappropriate details--what might have worked in New York or Kankakee usually did not have a chance in Miami or Sheboygan.

It seemed easy to program planners at the time. The peer program

"model" came complete with a step-by-step plan that required no thought, creativity, or investment of time and effort. Programs based on this premise failed before they began.

Conclusion

Planners of peer programs need to be aware of the potential pitfalls ahead of them, but they should also recognize that peer programs have enjoyed growing popularity in the last several years and that they have succeeded in addressing important needs. Most peer programs do not fail; they continue and flourish. Moreover, it is likely that peer programs will proliferate in the years ahead, as resources for human and social services become increasingly scarce. Peer programs are important and helpful because:

- They are cost-effective--they draw on the energy and enthusiasm of youth and adults who are interested in solving problems and willing to volunteer their time.
- They provide needed opportunities for the involvement and participation of young people in constructive activities;
- They function as a transition between youth and adulthood at a time when youth have become increasingly isolated in the peer subculture;
- They supplement existing resources, which are often inadequate in meeting the needs of youth;
- They are flexible--they can be implemented in many different ways, and a variety of program approaches can address critical needs of adolescent peers.

For all these reasons a well planned peer program can be a new beginning and a source of optimism at a time when young people urgently need to assist in solving social and human problems.

V. RESOURCES

BOOKS, ARTICLES, AND CURRICULAR MATERIALS

Drug Abuse Prevention

It Starts With People.

Written as part of NIDA's 1978 drug abuse prevention media campaign, this book offers an overview of drug abuse prevention and reports on the activities of specific prevention programs, including peer programs.

Single copies are available free from:

National Clearinghouse on Drug Abuse Information
5600 Fishers Lane
Rockville, MD 20857

Minnesota Primer on Primary Prevention.

An excellent brief conceptual framework for drug abuse prevention that includes definitions, historical information, and a concise statement of prevention theory. Developed by the Chemical Dependency Programs Division of the Minnesota Department of Public Welfare.

Sold by:

Documents Section
Department of Administration
140 Centennial Building
St. Paul, MN 51555

Prevention Program Planning and Development

Prevention Planning Workbook.

A thorough and sensible overview of program planning and development, with step-by-step suggestions to guide program planners through the entire process.

Prevention: Working With the Schools.

A trainer's manual and participant workbook for an

intensive course aimed at prevention workers in community-based program settings--contains many suggestions on how to initiate programs in schools and work cooperatively with school personnel.

Both available from:

Prevention Branch
National Institute on Drug Abuse
Room 10-A-30
5600 Fishers Lane
Rockville, MD 20857

Developing Successful Programs, by V.C. League and Karen Trisko. Brief but to the point, this booklet offers clear instructions on how to plan and implement a human service program.

Available from:

Awareness House
Box 9997
Mills College Station
Oakland, CA 94613

Positive Peer Influence Programs

Magic Circle.

A component of the Human Development Program, Magic Circle offers affective education activities for the elementary grades through a series of workbooks targeted at different grade levels.

Information about the entire program is available from:

Human Development Training Institute, Inc.
P.O. Box 1505
La Mesa, CA 92041

Ombudsman.

Developed by the staff of the Charlotte Drug Education Center, in Charlotte, North Carolina, this program, subtitled "A Classroom Community," is clearly presented in a manual that describes all the activities in the Ombudsman course.

Write to:

Charlotte Drug Education Center
1416 East Morehead
Charlotte, NC 28204

Tribes.

The Tribes manual includes a wide variety of activities designed to foster cooperation among students in elementary-level classrooms.

Available from:

Center for Human Development
3702 Mt. Diablo Boulevard
Lafayette, CA 94549

Saying No.

This booklet, produced for NIDA's 1979 drug abuse prevention campaign, offers specific suggestions to teachers on making students more aware of drug abuse, peer pressure, and ways of saying no.

Single copies are available free from:

National Clearinghouse on Drug Abuse Information
5600 Fishers Lane
Rockville, MD 20857

Positive Peer Culture, by Harry Vorrath and Larry K. Brendtro. (Chicago: Aldine Publishing Company, 1974)

This book documents and describes a widely used approach to intensive counseling that uses the peer group as a positive, caring, supportive tool to promote healthy behavior.

A Process and Resource Guide to Operation Snowball.

This looseleaf book contains a variety of how-to-do-it materials and reports on the Operation Snowball program in Illinois.

Available from:

Illinois Alcoholism and Drug Dependence Association
401 West Highland Avenue
Springfield, IL 62704

The following journal articles are particularly helpful:

Evans, R.; Roselle, M.; Mittelmark, M.; Hansen, W.; Bane, A.; and Davis, J. Detering the onset of smoking in children: Knowledge of immediate psychological effects and coping with peer pressure, media pressure, and parent modeling. Journal of Applied Psychology, 8(2):126-135, 1976.

McAlister, A.; Perry, C.; Killen, J.; Slinkard, L.A.; and Maccoby, N. Pilot study of smoking, alcohol and drug abuse prevention. American Journal of Public Health, 70(7): 719-721, 1980.

Peer Teaching

Children Teach Children: Learning by Teaching, by Alan Gartner, Mary Kohler, and Frank Riessman. (New York: Harper & Row, 1970)

In this seminal book on peer tutoring, the founders of the Youth Tutoring Youth program describe the program's early history and outstanding results.

For further information and materials about the Youth Tutoring Youth program contact:

National Commission on Resources for Youth
36 West 44th Street
New York, NY 10036

The Jigsaw Classroom, by Eliot Aronson, et al. (Beverly Hills: Sage Publications, 1978)

The Jigsaw technique establishes small teaching groups within self-contained classrooms--and, as a result, promotes cooperation and positive peer pressure. This book describes the Jigsaw approach in detail and was written by the program's developer and colleagues who implemented pilot programs in Austin, Texas.

Teen Involvement.

A systematic program that helps exemplary teenagers teach younger children about drug abuse and human needs, Teen Involvement consists of an administrator's manual and a guide for teen advisers with complete instructions for program implementation.

Both the manual and " " guide are available from:

National Clearinghouse on Drug Abuse Information
5600 Fishers Lane
Rockville, MD 20857

Two of the best books available on peer tutoring programs are listed below. Each one offers helpful guidelines on how to establish a successful program.

Tutoring With Students, by Ralph J. Melaragno. (Englewood Cliffs, NJ: Educational Technology Publications, 1976)

Cross-age Helping Program: Orientation, Training and Related Materials, by Peggy Lippitt, Ronald Lippitt, and Jeffrey Eisman. (Ann Arbor, MI: Center for Research on Utilization of Scientific Knowledge, Institute for Social Research, University of Michigan, 1971)

Peer Counseling/Facilitating/Helping

Peer Counseling, by Mimi and Don Samuels. (Miami, FL: Fiesta Publishing Corp., 1975)

This detailed description of the pioneering peer counseling program in Dade County is almost a classic on the subject. The book provides a strong rationale for peer counseling and then describes the Dade County program and its program evaluation in detail.

Youth Helping Youth: A Handbook for Training Peer Facilitators and Caring and Sharing: Becoming a Peer Facilitator, by Robert D. Myrick and Tom Erney. (Minneapolis: Educational Media Corporation, 1979)

The first is a trainer's manual, the second a complete guide for student peer facilitators. These materials are designed primarily for middle school and high school students and are based on peer facilitator programs that originated in Gainesville, Florida.

Children Helping Children: A Trainer's Manual for Student Facilitator Programs and Becoming a Friendly Helper: A Student Facilitator Handbook, by Robert D. Myrick and R.P. Bowman. (Minneapolis: Educational Media Corporation, 1981)

This set of books is similar to the preceding set, but it was developed for peer facilitator programs to be implemented entirely within the elementary grades.

Peer Counseling: An In-depth look at Training Peer Helpers and Peer Power: Becoming An Effective Peer Helper, by H. Dean Gray and Judy A. Tindall.

Similar to the preceding sets of manuals (but designed specifically for high school students), these materials have been popular in many peer helping programs.

Available from:

Accelerated Development, Inc.
P.O. Box 667
Muncie, IN 47305

Teen-Age Health Consultants Program Guide.

This guide offers complete instructions on how to implement a teen-age health consultant program and is especially useful for its suggestions for trouble-shooting in sensitive situations.

Available from:

Peer Education Health Resources
1600 Portland Avenue
St. Paul, MN 55104

Peer Participation

Something More Than Survival, by Sherrin Bennett.

This program involves students in conducting a school climate assessment that can lead to constructive change. The materials include a detailed guide and a set of easy-to-use worksheets.

Available from:

Center for Human Development
3702 Mt. Diablo Boulevard
Lafayette, CA 94549

Channel One.

For information about this program jointly sponsored by the National Institute on Drug Abuse, the Prudential Insurance Company, and other private sector representatives, contact:

Prevention Branch
National Institute on Drug Abuse
Room 10-A-30
5600 Fishers Lane
Rockville, MD 20857

The YAT Manual, by Craig A. Sundlee and Willie Stapp.

Written by two youth activists who launched several YATs (youth action teams) themselves, this book contains helpful pointers and a sound rationale for peer participation.

Available from:

Social Action Research Center
18 Professional Center Parkway
San Rafael, CA 94903

Youth Into Adult, by Mildred McCloskey and Peter Kleinbard.

This is a series of program descriptions of nine outstanding youth participation programs across the country.

Available from:

National Commission on Resources for Youth
36 West 44th Street
New York, NY 10036

New Roles for Youth in the School and the Community, by the National Commission on Resources for Youth. (New York: Citation Press, 1974)

This book is similar in many ways to Youth Into Adult, but it is considerably longer and contains descriptions of a much wider variety of programs.

The Value of Youth, Arthur Pearl, Douglas Grant, and Ernst Wenk, Eds. (Davis, CA: International Dialogue Press, 1979)
A collection of essays and reports on the general theme of youth participation, this book eloquently states a position of youth advocacy.

National Center for Service-Learning.

This center, a program of ACTION, publishes a variety of materials relating to youth participation in volunteer programs. For descriptions of the center's publications and services write to:

National Center for Service-Learning
ACTION
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806 Connecticut Avenue, NW
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