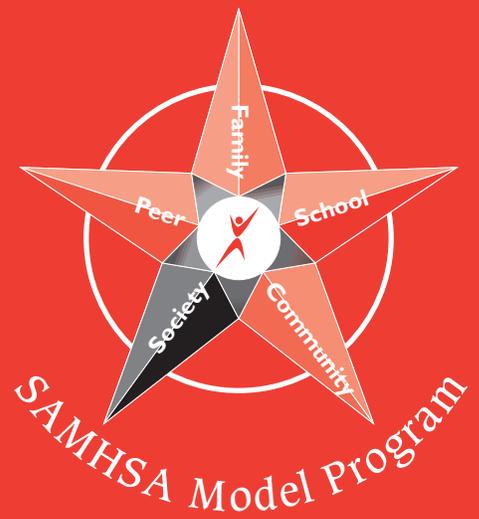




Also available
in Spanish



*Effective Substance Abuse and
Mental Health Programs
for Every Community*

Across Ages

Across Ages is a school- and community-based drug prevention program for youth 9 to 13 years old that seeks to strengthen the bonds between adults and youth and to provide opportunities for positive community involvement. The unique and highly effective feature of Across Ages is the pairing of older adult mentors (age 55 and above) with young adolescents, specifically youth making the transition to middle school. The program employs mentoring, community service, social competence training, and family activities to build youths' sense of personal responsibility for self and community. Specifically, the program aims to—

- Increase knowledge of health and substance abuse and foster healthy attitudes, intentions, and behavior toward drug use among targeted youth
- Improve school bonding, academic performance, school attendance, and behavior and attitudes toward school
- Strengthen relationships with adults and peers
- Enhance problem-solving and decisionmaking skills

The overall goal of the program is to increase the protective factors for high-risk students to prevent, reduce, or delay the use of alcohol, tobacco, and illegal drugs, and the problems associated with such use.

INTENDED POPULATION

The original project and two replications were designed and tested on African American, Asian American, Hispanic/Latino, and White middle school students (sixth grade) living in a large urban setting. More than 30 subsequent replications have been adapted for 9- to 13-year-old African

Proven Results*

- Increased knowledge about and negative attitude toward drug use
- Decreased alcohol and tobacco use
- Increased school attendance, decreased suspensions from school, and improved grades
- Improved attitudes toward school and the future
- Improved attitudes toward adults in general and older adults in particular

**The level of mentor involvement was positively related to improvement on various outcome measures.*

INTERVENTION

Universal

Selective

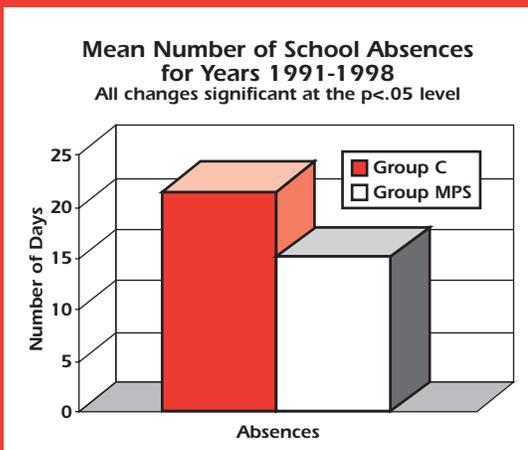
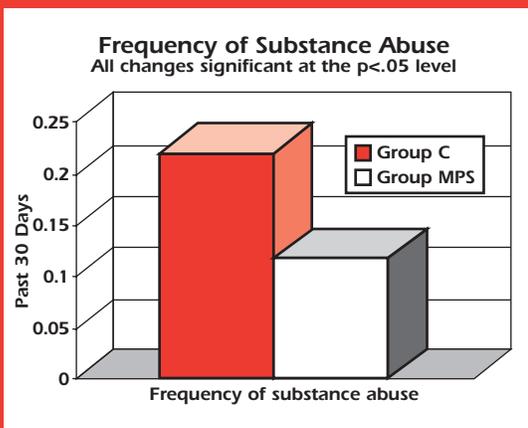
Indicated



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention
www.samhsa.gov

OUTCOMES

The data demonstrate the efficacy of the intervention for all program youth. In particular, the research showed the effectiveness of matching youth with older adult mentors in improving prosocial values, increasing knowledge of the consequences of substance use, and helping youth avoid later substance use by teaching them appropriate resistance behaviors.



American, American Indian, Hispanic/Latino, and White youth living in urban, suburban, and rural settings. Testing has shown that Across Ages is not appropriate for extremely rural communities because these communities do not offer the anonymity necessary for the youth-mentor relationship to work effectively. Risk factors for intended population include:

- Residence in communities with no opportunities for positive free-time activities
- Few positive adult role models
- Being in kinship care due to inability of one's birth parents to care for one, often due to incarceration or substance use

BENEFITS

Participating youth have an opportunity to form lasting relationships with significant adults who can provide guidance, nurturing, and support. They learn positive coping skills and have an opportunity to be of service to their community. As a result, youth demonstrate improved commitments to school, healthier attitudes and behaviors regarding nonuse of substances, a sense of social responsibility, and the capacity for positive problem solving.

HOW IT WORKS

Across Ages can be implemented as a school-based or after-school program. It has been replicated most successfully in urban/suburban settings where there is access to transportation **and** sufficient numbers of older adults not personally known or related to participating families and youth. If the project is school-based, most of the activities for youth will take place in the classroom; if it is an after-school program, a school, community center, or faith-based institution is an appropriate setting. The activities and interventions include:

- **Mentoring.** Older adults (55 and older) are recruited and trained, and spend a minimum of 2 hours each week in one-on-one contact with the youth.
- **Community Service.** Youth spend 1 to 2 hours per week performing community service.
- **Social Competence Training.** Across Ages uses the Social Problem-Solving Module of the *Social Competence Promotion Program for Young Adolescents* that is composed of 26 weekly lessons, 45 minutes each.
- **Family Activities.** Monthly weekend events are held for youth, their family members, and mentors.

Across Ages materials are available in English and Spanish.

IMPLEMENTATION ESSENTIALS

To replicate with fidelity, programs must:

- Use all program components
- Have mentors who are 55 years or older
- Implement State- or agency-approved screening and training of mentors that includes 8 to 10 hours of preservice training and monthly in-service meetings
- Provide training and orientation for all participants
- Provide stipends or reimbursement to mentors
- Vigilantly monitor the mentor-youth matches
- Prepare written agreements among collaborating organizations
- Staff the program adequately (i.e., a minimum of one full-time and one part-time staff person for 30 youth and 15 to 20 mentors)

Resources

In addition to part-time clerical support, the program needs:

- **Program Coordinator:** One full-time college graduate with a minimum of 3 years of experience in education, social work, counseling, or related field
- **Outreach Coordinator:** One individual familiar with the community to recruit mentors and oversee community service, preferably working full time, but a part-time employee is acceptable

Across Ages requires family consent for youth participation as well as cooperation from the school and/or referring agencies. A classroom and one or more central meeting locations are needed for youth-mentor training and meetings, participation in social competence curriculum, training and in-service meetings for mentors, and family activities.

Timeline

Program planning and startup take about 6 months, including mentor recruitment and 2 days of preservice staff training. Two days of technical assistance (TA) during the first year and 1 day of TA in subsequent years are recommended. Across Ages requires 12 months of youth-mentor collaboration for successful implementation.

PROGRAM BACKGROUND

Across Ages was developed at Temple University's Center for Intergenerational Learning in Philadelphia, PA. The Center is dedicated to strengthening communities and meeting the needs of individuals and families by bringing generations together. The project was originally funded in 1991 by the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Prevention (CSAP) as a school-

and community-based demonstration research project and was replicated in Philadelphia and West Springfield, MA, from 1995 to 1998. Today, more than 30 replication sites span 17 States.

EVALUATION DESIGN

The outcome research design was quasi-experimental rather than experimental since it was not possible to select schools on a completely random basis. A classic randomized pretest–posttest with a control group design was used for the evaluation. The three groups evaluated were:

- **Group C:** The control group did not receive the intervention.
- **Group PS:** This group participated in the Positive Youth Development Curriculum (PYDC) and performed community service activities 2 hours per week. Caregivers and family members were invited to attend family workshops and activities.
- **Group MPS:** This group participated in the PYDC, community service activities, and family workshops and activities 4 hours per week. Participants in this group also were matched with older mentors with whom they met regularly for 2 to 3 hours per week. (For details, see *Outcomes* section.)

The main hypotheses of the Across Ages replication were that the multifaceted intervention provided by this project would result in significant positive outcomes for all students participating in the experimental groups. More specifically, it was predicted that sixth-grade participants in both the PS and MPS groups would demonstrate significant improvement between pre- and posttest scores in a number of areas when compared to students in the control group.

PROGRAM DEVELOPER

Andrea Taylor, Ph.D.

Dr. Andrea Taylor is assistant director of the Temple University Center for Intergenerational Learning, an organization with a 21-year history of implementing innovative cross-age programs. She is the principal investigator and project director of *Across Ages* and *Project Youth Connect*, two projects funded by SAMHSA/CSAP. In conjunction with the Philadelphia Family Planning Council and Congreso de Latinos Unidos, Inc., she is a co-investigator on the Abuelas Y Jovenes Project, a SAMHSA-funded initiative for pregnant and parenting teens. All of these projects involve intergenerational mentoring as an approach to positive youth development, the prevention of failure in school, substance abuse, and early or repeated teen pregnancies.

CONTACT INFORMATION

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RECOGNITION

Model Program—Substance Abuse and Mental Health Services Administration, U.S.

Department of Health and Human Services

Best Practice Model in Youth Violence

Prevention—Centers for Disease Control and

Prevention, U.S. Department of Health and

Human Services

Top 25, Positive Youth Development Program—

U.S. Department of Health and Human Services