



PASO DEL NORTE
HEALTH FOUNDATION
HEALTHY KIDS

2019-2021 Strategic Plan

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Introduction

Health outcomes for children and youth are influenced by social environments and are frequently mediated by behaviors. Youth who are connected to high-quality out-of-school programs and have adult mentors are more likely to grow up healthier than disconnected youth. Actions and activities of young people are influenced at the individual, peer, family, school, community, and societal levels (Healthy People 2020). This means that kids are influenced not simply by what they know, but also who they know, what they feel, where they spend time, and how they are treated.

Well-designed youth activities increase the developmental assets and protective factors needed for children and youth to lead healthy and productive lives. In other words, kids who are involved in high-quality out-of-school programs increase their chances for living healthier lives than kids who are disconnected from these activities. Intuitively, one knows that kids who participate in clubs, sports, or other extracurricular activities outside of school are starting life with an advantage over kids who are not involved and are disconnected from positive activities. Science provides evidence that this intuition is correct.

As a regional health leader, the Paso del Norte Health Foundation (Health Foundation) strives to help kids grow up healthy by working to ensure that youth in the region are connected to a **positive activity** and **trusted adult** in a **safe place**. The purpose of the Healthy Kids Initiative is to simply get disconnected youth involved in a positive activity, which could be an out-of-school program or workforce opportunity, with a trusted adult in a safe place.

History

In 2010, the Health Foundation convened multiple stakeholders in Ciudad Juárez, Chihuahua, Mexico to discuss opportunities for youth and community-based organizations to bring health promotion and disease prevention to the residents of Ciudad Juárez. These meetings confirmed the concerns of Health Foundation Board and Staff: children and youth were living in environments that put them at risk for use of alcohol, tobacco, and drugs. Youth were also at an increased risk of exposure to and participation in violence and criminal activity. The problem was not that kids did not know drugs were unhealthy or that violence was illegal. Rather, low school enrollment, lack of safe places for play and recreation, and chronic unemployment were major contributors to the presence of these risky behaviors. In 2011, the Health Foundation partnered with five organizations to provide safe places for youth to participate in healthy activities across Ciudad Juárez. Evaluation results showed that Health Foundation funded programs allowed more kids to be in safe places. Research confirms that such impact contributes to long-term positive outcomes for youth.

On July 19, 2012, the Health Foundation Board of Directors approved the development of a strategic plan for the Positive Youth Development Initiative. In the same meeting, the reclassification of three Healthy Eating and Active Living proposals to Priority Area 4 - Healthy Relationships was also approved. Under this new initiative, three organizations were funded to provide activities for children and youth in a positive and safe environment.

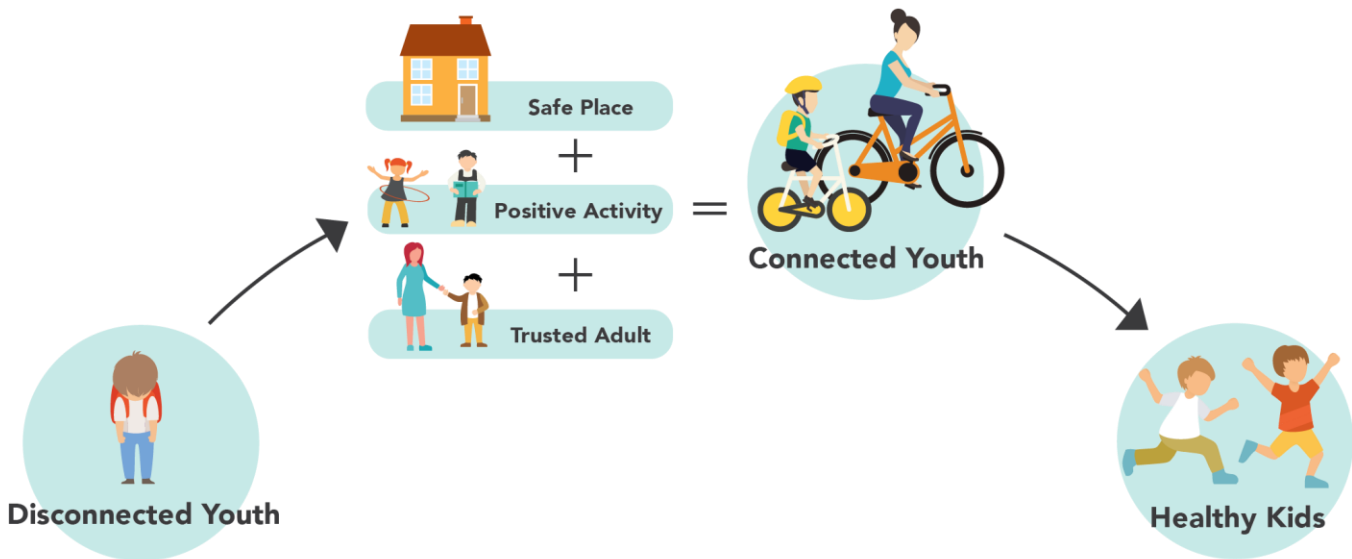
On May 16, 2013, the Health Foundation Board of Directors approved the 2013-2016 IGNITE strategic plan, which provided more organized and focused efforts for promoting health amongst disconnected

youth through out-of-school programming. In July of the same year, seven organizations - three from Ciudad Juárez and four from West Texas - were funded to advance the goals of the Initiative.

Since 2013, more than fifteen organizations have partnered with the Health Foundation in this priority area. A network of out-of-school time professionals, known as the [Borderland Out of School Time \(BOOST\) Network](#), was formed in 2015. BOOST is made up of more than thirty out-of-school providers throughout the Paso del Norte region, including Ciudad Juárez, with the vision of creating a cooperative community that supports quality out-of-school time experiences where children and youth thrive.

In 2020, the name of the IGNITE Initiative was changed to the Healthy Kids Initiative in an effort to be clearer and more descriptive with the focus of the Initiative.

Theory of Change



Youth Development Vocabulary

“Positive youth development” is an intentional approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive. It recognizes, utilizes, and enhances youths' strengths. It also promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths (Positive Youth Development, 2013). In contrast, unintentional approaches might include activities like afterschool daycare or programs without clearly defined outcomes.

The Health Foundation refers to “disconnected youth” as people between the ages of 5 – 17 who are not involved in out-of-school activities or not working (Health Foundation definition, 2013). A “connected youth” is a person, ages 5-17, who consistently participates in an out-of-school activity *or is working* and can identify a trusted adult in their life in the last 12 months. Though not formally evaluated, experience has shown that youth who participate at least once a week for 52 weeks are more likely to remain connected than youth who participate less frequently.

“Out-of-school Programs” are sets of activities that are implemented outside regular school hours, on weekends, summer, or during holiday breaks, and incorporate the quality indicators as shown in Table 1-Appendix A.

Evidence

Between the hours of 3 and 6 p.m., 11.3 million children in the U.S. are without supervision (Afterschool Alliance, 2014).

A review of 68 studies in which participants of high-quality afterschool programs were compared to non-participating control youth found that afterschool programs were associated with significant improvements in self-perception, positive social behaviors, significant reductions in conduct problems and drug use, and significant increases in achievement test scores, grades, and school attendance among participating youth (Durlak & Weissberg, 2013).

Among older youth, quality afterschool programs can help participants develop stronger connections to caring adults and their peer group and can help improve attitudes toward school and learning about college (Harris, Deschenes, & Wallace, 2011).

After school, unsupervised youth increase their chances of engaging in risky behaviors, such as drug use, unsafe sexual activity, and exposure to violence (McCombs, Whitaker, & Yoo, 2017).

A longitudinal study of youth aged 12-18 found that intensity of participation in OST activities, measured by hours of participation per week, was significantly related to indicators of positive outcomes for adjustment and consistently unrelated to indicators of problematic adjustment during young adulthood. These positive outcomes include psychological flourishing, civic engagement and education attainment (Mahoney & Vest, 2012).

As middle school students gain independence, they often phase out of organized sports or other active interests. Many of these students do not have other opportunities to engage in regular physical activity, especially if they are unsupervised after school. Additionally, children are more autonomous in their

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dietary decisions, leaving them susceptible to ill-advised food choices. Furthermore, many of these youths are also engaging in cigarette smoking, alcohol drinking and other unhealthy behaviors for the first time. Afterschool programs provide a place for middle school youth to stay physically active, while also learning to make positive nutritional and lifestyle choices (Afterschool Alliance, 2011)

A study measuring the health and social benefits of afterschool programs found that controlling for baseline obesity, poverty status, and race and ethnicity, the prevalence of obesity was significantly lower for afterschool program participants (21 percent) compared to nonparticipants (33 percent) (Mahoney, J., Lord, H., & Carryl, E., 2005).

Teens who do not participate in afterschool programs are nearly three times more likely to skip classes than teens who do participate. They are also three times more likely to use marijuana or other drugs, and are more likely to drink, smoke, and engage in sexual activity (YMCA of the USA, 2001).

A report by the U.S. Department of Education found that 10-16-year old’s who have a relationship with a mentor are 46% less likely to start using drugs and 27% less likely to start drinking alcohol. (Riley, R., Peterson, T., Kanter, A. Moreno, G., & Goode, W., 2000)

The hours between 3 and 6 p.m. are the peak hours for juvenile crime and experimentation with drugs, alcohol, cigarettes, and sex (Fight Crime: Invest in Kids, 2003).

During the summer months, first time use of alcohol, tobacco, and drugs peaks among kids 12 to 17 years old (SAMHSA, 2012).

A decade of research and evaluation studies, as well as large-scale, rigorously conducted syntheses looking across many research and evaluation studies, confirm that children and youth who participate in afterschool programs can reap a host of positive benefits in a number of interrelated outcome areas—academic, social/emotional, prevention, and health and wellness (Harvard Family, 2008).

Addressing the positive development of young people facilitates their adoption of healthy behaviors and helps to ensure a healthy and productive future population (McNeely, 2009).

Regional Data

There are more than 500,000 children and youth (K-12) in the Paso del Norte region.

County	Child Population
El Paso	155,167
Hudspeth	627
Doña Ana	48,104
Luna	5,469
Otero	12,659
Ciudad Juárez	412,045
TOTAL	634,071

(Kids Count, 2017: New Mexico data includes 5-19-year old’s; Texas data includes 6-17-year old’s; INEGI, 2015: Ciudad Juarez data includes 5-19-year old’s)

The CDC estimates that 18% of youth ages 12-17 do not participate in any out-of-school activity. Regionally, 23% of youth ages 5-17 are disconnected. The following are gross numbers of disconnected youth in the Health Foundation’s region:

Population Disconnection at 23%

County	Youth Disconnection
El Paso	35,688
Hudspeth	144
Doña Ana	11,064
Luna	1,258
Otero	2,912
Ciudad Juárez	94,770
TOTAL	145,836

An initial strategy of the initiative was to produce a density map of youth programs in the region overlaid with youth population. Maps were produced in March 2014 for all five U.S. counties in the Health Foundation’s service region and the municipality of Ciudad Juárez. The research indicates the following geographic areas have low densities of youth programs and a high proportion of youth:

New Mexico	Mexico	Texas
Doña Ana County	Ciudad Juárez	Anthony
Luna County		Canutillo
Otero County		Clint
		Fabens
		Horizon City
		Montana Vista
		San Elizario
		Sparks
		Socorro

The intent is to focus program expansion in these areas to serve more disconnected youth. The maps were updated in 2016 and indicated that these communities continue to have fewer out-of-school opportunities for youth to be connected than other parts of the region. The [2016 maps](#) can be accessed on the Health Foundation’s website.

Goals

- To improve a range of health outcomes by engaging disconnected youth in the Paso del Norte Region in high-quality programs during out-of-school hours.
- To provide the Health Foundation and the community with an opportunity to learn more about disconnected youth.

Objectives

- Continue to monitor the prevalence rate of disconnection.
- Establish at least ten programs in target areas for disconnected youth by December 2021.
- Ensure all partner program sites have at least five of the seven quality assessment indicators by December 2021.
- Explore opportunities for youth to be connected through workforce efforts by December 2021.

- Encourage all partner organizations to have at least two best practices or evidence-based strategies in place to promote healthy eating among youth by December 2021.

Strategies

- Create and deploy a Quality Youth Program self-assessment tool for partners to determine change in program quality. Offer technical assistance based on identified needs.
- Conduct an analysis of local government, school district, or youth workforce policies that contribute to disconnection. If deemed necessary, establish a policy agenda and advocacy efforts to contribute to policy change.
- Maintain and grow an online library of out-of-school time resources to support community organizations in designing, implementing, enhancing, and evaluating best practices and evidence-based strategies in the field.
- Coordinate with the Backbone Organization to lead technical assistance to grantees and BOOST Network efforts.
- Cultivate the Borderland Out of School Time (BOOST) Network to increase coordination and communication among regional providers/coalitions and increase opportunities for disconnected youth.
- Offer technical assistance and training to partner and community organizations for effective recruitment strategies, improving program quality, adopting the [National AfterSchool Association standards for healthy eating and physical activity in out-of-school time](#), and implementing positive youth development approaches.
- Recommend evidence-based models for organizations requesting assistance.
- Conduct an open RFP and issue grants to help organizations expand their current youth programs to recruit and serve more disconnected youth in identified target communities.
- Leverage other funding sources when possible.

Evaluation

Verification will be the primary evaluation approach used in this Initiative by grantees and Health Foundation staff. Grantees will submit reports describing the program successes and challenges, and self-monitor proposed objectives as well as lessons learned. Health Foundation staff will observe grantee programs noting examples of success and challenges. Staff and grantees will have the opportunity to reflect on lessons learned together.

There could be an occasional need for the Backbone Organization or an external consulting firm to assess program elements and provide intervention-specific evaluation reports, but those instances will likely be rare.

Appendix A

TABLE 1: Positive Developmental Settings (Eccles and Gootman, 2002).

The following quality indicators are best practices of out-of-school time programs and will be used to assess the quality of OST programs in the region.

Indicators	Descriptors	Opposite Roles
Appropriate Structure	Limit setting, clear and consistent rules and expectations, firm-enough control, continuity and predictability, clear boundaries, and age-appropriate monitoring	Chaotic, disorganized, laissez-faire, rigid, over controlled, and autocratic.
Community Involvement	Concordance, coordination, and synergy among family, school, and community	Discordance, lacking communication, and conflict.
Opportunities for Skill Building	Opportunities to learn physical, intellectual, psychological, emotional, and social skills; exposure to intentional learning experiences; opportunities to learn cultural literacies, media literacy, communication skills, and good habits of mind; preparation for adult employment; and opportunities to develop social and cultural capital.	Practices that promote bad physical habits and habits of mind and practices that undermine school and learning.
Physical and Psychological Safety	Safe and health-promoting facilities and practices that increase safe peer group interaction and decrease unsafe or confrontational peer interactions.	Physical and health dangers, fear, feeling of insecurity, sexual and physical harassment, and verbal abuse.
Positive Social Norms	Rules of behavior, expectations, injunctions, ways of doing things, values and morals, and obligations for service	Normlessness, anomie, laissez-faire practices, antisocial and amoral norms, norms that encourage violence, reckless behavior, consumerism, poor health practices, conformity.
Supportive Relationships	Warmth, closeness, connectedness, good communication, caring, support, guidance, secure attachment, and responsiveness	Cold, distant, overcontrolling, ambiguous support, untrustworthy, focused on winning, inattentive, unresponsive, and rejecting.
Youth Involvement	Youth-based, empowerment practices that support autonomy, making a real difference in one's community, and being taken seriously; practices that include enabling, responsibility granting, and meaningful challenge; and practices that focus on improvement rather than on relative current performance levels	Unchallenging, over-controlling, disempowering, and disabling; practices that undermine motivation and desire to learn, such as excessive focus on current relative performance level rather than improvement.

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