Creating a future for youth locally and globally: An Agenda to Address the Root Causes and Consequences of Poverty

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IT WILL TAKE A VILLAGE

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McSilver staff and collaborators (NYU; MSSM; Columbia; HSRC; UKZN; Hospital Garrahan; Red Cross of Thailand)
Community Collaborative Board members
MISSION: McSilver conducts, promotes, and disseminates interdisciplinary, applied research to address root causes of, effects of, and responses to poverty locally, across the US and globally.

McSilver Community Collaborative Board
The Institute recognizes the significant link between individuals, families and communities and their external environments, as well as the interrelatedness of race and poverty. With this important frame in mind, the Institute will encourage innovative efforts in the following areas:

- Applied Research
- Development of Mutually Beneficial Partnerships
- Organizational Development
- Policy Development and Dissemination
- Locating Research and Related Projects in Poverty Studies
What defines the activities at McSilver?

Commitment to conducting applied research studies drawing on collaborative, action oriented research methods
Participatory research has been described as “providing direct benefit to participants either through direct intervention or by using the results to inform action for change” (Israel et al., 1998, p. 175).

What distinguishes participatory research efforts from other approaches is the emphasis on the intensive and ongoing participation of direct service providers and community members in creating knowledge (Israel, Schulz, Parker, & Becker, 1998).
Collaboration across the Research Process

**Study Aims**
- Defined collaboratively
  OR
- Advice sought
  OR
- Researcher defined

**Research design & sampling**
- Decision made jointly
  OR
- Researcher educates on methods & advice sought
  OR
- Methods pre-determined

**Measurement & Outcomes**
- Defined within partnership
  OR
- Advice sought
  OR
- Researcher defined

**Procedures (recruit, retain, data collection)**
- Shared responsibility (e.g. community to recruit, research staff to collect data)
  OR
- Designed with input
  OR
- Designed by researchers

**Implementation**
- Projects are co-directed
  OR
- Researchers train community members as co-facilitators
  OR
- Research staff hired for project

**Evaluation**
- Plans for analysis co-created to ensure questions of both community & researchers answered
  OR
- Community members assist in interpretation of results
  OR
- Researchers analyze data

**Dissemination**
- Members of partnership define dissemination outlets
  OR
- Members of community fulfill co-author & co-presenter roles
  OR
- Researchers present at conferences & publish
McSilver Institute for Poverty Policy and Research

COMMUNITY COLLABORATIVE BOARD

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CHAMP; CHAMPions (Collaborative HIV prevention & Adolescent Mental health Project)
CHAMPSA & CHAMP+/VUKA

Collaboratively developed and delivered family-based prevention of youth HIV exposure & support for HIV-infected youth across the globe
- CHAMP-Chicago (NIMH; PI: Paikoff)
- CHAMP-NY (NIMH; PI: McKay)
- CHAMP-South Africa (NIMH; PI: Bell)
- CHAMPT&T (NIMH; PI: Baptiste)
- CHAMP+ (NIMH; PI: McKay)
- CHAMP+SA (NINR; PI: Mellins)
- CHAMP+Argentina (NIDA; PI: McKay)
- VUKA (South Africa; NICHD; PI: McKay)
- CHAMP+Asia (Treat Asia; NICHD pending; PI: Mellins & McKay)
What defines the activities at McSilver?

Via partnerships with global, federal, state and local policy makers, public safety net systems and educational systems are improved.
Goal of CTAC

- Provide training and intensive support on quality improvement strategies, including business, organizational and clinical skills to all NYS mental health clinics, with the overall goal of improving the efficiency and effectiveness of the service system.
Center for Collaborative Inner-City Child Mental Health Services Research (CCCR)

(Ervin Torres, Francis Lewis, Rita Lawrence)
Mission of the CCCR

Enhance urban child mental health services research capacity with a specific focus on improving the overall health and mental health of highly vulnerable youth, too often struggling with overlapping threats to emotional and physical wellness within contexts associated with serious stressors.
Youth and families impacted by poverty face serious associated stressors

Youth living within communities impacted by poverty face enormous challenges and exposure to a wide range of social ills including, community violence, substance abuse, crime, HIV infection, school failures and drop out, early pregnancy and homelessness (Brooks-Gunn & Duncan, 1997; Attar et al., 1994; Horowitz, McKay et al., 2005).
Critical considerations

- Poverty and social inequity drive major health and mental health threats to youth
- Serious disparities in service delivery exist
- New, just solutions rely on the translation of knowledge gathered directly from highly vulnerable youth and their caregivers into action (practice and policy)
The CCCR aims to develop and test novel clinical practices and service delivery models that are informed by existing empirical findings, as well as via intensive collaboration between researchers, practitioners, youth and families living in inner-city neighborhoods.
The CCCR will also focus on mentoring new investigators, particularly those with direct clinical practice experience within child mental health systems. The CCCR is meant to help the next generation of practice-based researchers:

1) learn methods that are sufficiently resilient to navigate obstacles within “real world” urban communities and mental health practice settings;

2) integrate parents, youth, and mental health providers’ perspectives into all aspects of the research process.
Step UP, a model for enhancing student achievement and mental health set within three high schools designed BY youth FOR youth struggling academically and behaviorally.
Far too many youth and families struggle with poverty-related stressors and associated serious consequences, including high prevalence of:

1) mental health and substance use difficulties

2) academic underachievement and high school drop out

3) early pregnancy
What does a high school diploma have to do with poverty?

$20,241

The average dropout can expect to earn an annual income of $20,241. That’s a full $10,386 less than the typical high school graduate, and $36,424 less than someone with a bachelor’s degree.

12

While the national unemployment rate stood at 8.1 percent in August, joblessness among those without a high school degree measured 12 percent. Among college graduates, it was 4.1 percent.
30.8

Dropouts experienced a poverty rate of 30.8% (vs. 13.5% for graduates)

63

Among dropouts between the ages of 16 and 24, incarceration rates were 63 times higher than among college graduates

$292,000

When compared to the typical high school graduate, a dropout will end up costing taxpayers an average of $292,000 over a lifetime (e.g., associated with incarceration and other factors such as how much less they pay in taxes)
Factors that Promote Resilience

Youth who struggle

Youth who succeed
Factors that Promote Resilience

- Individual capabilities
- Mental health
- Self-esteem
- Social skills
- Motivation
- Positive peer relationships
Factors that Promote Resilience

- Caring adult role models
- Family and community supports
- Parental supervision
- Response and support in times of stress
Factors that Promote Resilience

- Quality education
- Attachment to school
- Access to employment and educational opportunities
- Positive, future oriented role models/mentors
Project
Step UP
Project Step UP

Intervenes with urban minority youth across multiple ecological contexts

Community • School • Family

To promote academic achievement, mental wellness & a positive transition to young adulthood
SUPPORTS
Family Support • Positive Family Communication
Other Adult Relationships • Caring Neighborhood
Caring School Climate • Parent Involvement
in Schooling

EMPOWERMENT
Community Values • Youth as Resources
Service to Others • Safety

BOUNDARIES AND
EXPECTATIONS
Family Boundaries • School Boundaries
Neighborhood Boundaries • Adult Role Models
Positive Peer Influence • High Expectation

CONSTRUCTIVE USE OF TIME
Creative Activities • Youth Programs
Religious Community • Time at Home

COMMITMENT TO LEARNING
Achievement Motivation • School Engagement
Bonding to School • Reading for Pleasure

POSITIVE VALUES
Caring • Equality and Social • Integrity
Honesty • Responsibility • Restraint

SOCIAL COMPETENCIES
Planning and Decision Making • Interpersonal
Competence • Cultural Competence
Resistance Skills • Peaceful Conflict Resolution

POSITIVE IDENTITY
Personal Power • Self-Esteem • Sense of Purpose • Positive
View of Personal Future
<table>
<thead>
<tr>
<th>McSilver Institute for Poverty Policy and Research</th>
<th>NYU Silver School of Social Work</th>
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<tbody>
<tr>
<td><strong>Skills-focused Youth Groups</strong></td>
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<tr>
<td><strong>One on One mentor (counseling/ texting)</strong></td>
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<td>🌟</td>
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<td><strong>Family engagement (HV, Workshops)</strong></td>
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<td>❤️</td>
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<td><strong>School/ Teacher Engagement</strong></td>
<td>❤️</td>
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<tr>
<td><strong>Academic Support (tutoring/ mentoring)</strong></td>
<td>❤️</td>
<td>🌟</td>
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<tr>
<td><strong>$ Academic incentives</strong></td>
<td>☀️</td>
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<tr>
<td><strong>$ Internships/Career Day</strong></td>
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<tr>
<td><strong>$ Leadership Group (community projects)</strong></td>
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<td><strong>Evaluation/ Research</strong></td>
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Step UP Youth
• 361 students have been enrolled in STEP UP (6 cohorts) with funding support from the Robinhood Foundation

• Longitudinal outcomes are available for the first two cohorts of STEP UP students
  – 46 new students in Cohort 1 (2008-2009)
  – 45 new students in Cohort 2 (2009-2010)
**Step UP students met the following criteria:**

1) 75% GPA or lower  
2) behind academically  
3) insufficient credit accumulation for on-time high school graduation  
4) poor school attendance  
5) behavioral and/or mental health challenges identified by school or parent  
6) engagement in high risk behavior (e.g. substance use)  
7) school disciplinary or guidance actions
### Youth Demographics

**Cohort 1 & 2**

<table>
<thead>
<tr>
<th>Variables</th>
<th>Total</th>
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<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>51</td>
</tr>
<tr>
<td>Female</td>
<td>49</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>41</td>
</tr>
<tr>
<td>Latino/a</td>
<td>41</td>
</tr>
<tr>
<td>Other (includes Asian, Bi-racial, unknown)</td>
<td>18</td>
</tr>
<tr>
<td><strong>Grade at start of Step-Up</strong></td>
<td></td>
</tr>
<tr>
<td>9th</td>
<td>18</td>
</tr>
<tr>
<td>10th</td>
<td>41</td>
</tr>
<tr>
<td>11th</td>
<td>26</td>
</tr>
<tr>
<td>12th</td>
<td>14</td>
</tr>
<tr>
<td><strong>Youth Age at start of Step-Up (Mean ± SD)</strong></td>
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<tr>
<td></td>
<td>15.84 ± 1.12</td>
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</table>
Of the 91 students referred to Step UP in Cohorts 1 and 2, 79 ultimately enrolled and completed the school-year program (87%).

• We defined having completed Step UP as taking advantage of the multiple program offerings across the week (group meetings, meetings with one-on-one counselor, meeting with youth specialist, tutoring sessions, family visits, recreational trips, internship and job preparation and placement).
An engagement rate of 87% is unprecedented for adolescent school-based programs

<table>
<thead>
<tr>
<th></th>
<th>Traditional MH</th>
<th>School-based MH across ages</th>
<th>Boys and Girls Club</th>
<th>Step UP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retention</td>
<td>9%</td>
<td>72-25%</td>
<td>58%</td>
<td>87%</td>
</tr>
</tbody>
</table>
• Of the 79 students who completed Step UP, only **3 students** were known to **drop out of high school** with 6 additional students lost to follow-up *(after they transferred to another high school)*

• A highly conservative estimate of those completing Step UP and dropping out of high school is **11%** *(again with outcomes of 6 students unknown)*

• **All graduating students** passed required regents in 4 years.

<table>
<thead>
<tr>
<th>Teens with MH needs</th>
<th>Drop Out Rate for</th>
</tr>
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<tr>
<td></td>
<td><strong>45%</strong></td>
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Of the students who completed Step UP and remained at the same high school allowing Step UP staff to assist with post-graduation plans, 90% of students enrolled in a college program.

<table>
<thead>
<tr>
<th></th>
<th>Teens with Mental Health Issues</th>
<th>Step-Up</th>
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</thead>
<tbody>
<tr>
<td>Post-Secondary Education</td>
<td>32%</td>
<td>90%</td>
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</table>
Of the students who completed Step UP, only 1 pregnancy was reported.

<table>
<thead>
<tr>
<th></th>
<th>NYC high poverty communities</th>
<th>Teens with MH issues</th>
<th>Step UP</th>
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</thead>
<tbody>
<tr>
<td><strong>Teen Birth Rate</strong></td>
<td></td>
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<tr>
<td><em>(2009) Ages 15-19</em></td>
<td>13%</td>
<td>50%</td>
<td>.01%</td>
</tr>
<tr>
<td>% of Students</td>
<td>Noting Improvement in</td>
<td></td>
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<td>---------------</td>
<td>-----------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>70%</td>
<td>Grades</td>
<td></td>
<td></td>
</tr>
<tr>
<td>74%</td>
<td>Ability to Problem Solve</td>
<td></td>
<td></td>
</tr>
<tr>
<td>50%</td>
<td>Ability to Deal with Stress</td>
<td></td>
<td></td>
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<tr>
<td>74%</td>
<td>Ability to Complete School Work On Time</td>
<td></td>
<td></td>
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<tr>
<td>50%</td>
<td>Ability to Calm Themselves Down</td>
<td></td>
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<tr>
<td>54%</td>
<td>Motivation to Finish Homework</td>
<td></td>
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<tr>
<td>73%</td>
<td>Motivation to Get Good Grades</td>
<td></td>
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<tr>
<td>62%</td>
<td>Motivation to Pursue Post-High School Plans</td>
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### Cohort 1

<table>
<thead>
<tr>
<th>Statement</th>
<th>Paired t-tests</th>
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</thead>
<tbody>
<tr>
<td>I have a career plan</td>
<td>-2.368 (p = 0.03)*</td>
</tr>
<tr>
<td>I know where I could go to get help with emotional problems</td>
<td>-3.186 (p = 0.04)**</td>
</tr>
<tr>
<td>I turn to others for support when I have family problems</td>
<td>-2.551 (p = 0.02)*</td>
</tr>
<tr>
<td>I show others that I care about them</td>
<td>-1.654 (p = 0.11)</td>
</tr>
<tr>
<td>I am comfortable with the number of friends I have</td>
<td>-1.729 (p = 0.10)</td>
</tr>
<tr>
<td>I can identify two or more people I can turn to for help</td>
<td>-2.551 (p = 0.02)*</td>
</tr>
</tbody>
</table>
**Cohort 1: Children’s Hope Scale**

<table>
<thead>
<tr>
<th></th>
<th>Mean (SD)</th>
<th>Paired T-Test</th>
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</thead>
<tbody>
<tr>
<td>TOTAL HOPEFULNESS BEFORE STEP-UP</td>
<td>15.64 (4.74)</td>
<td>t = -4.42, p &lt; .001</td>
</tr>
<tr>
<td>TOTAL HOPEFULNESS AFTER STEP-UP</td>
<td>18.92 (3.18)</td>
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McSilver Poverty Agenda

The primary mission is to **enhance human well-being** and help **meet the basic human needs of all people**, with particular attention to the needs and **empowerment of people who are vulnerable, oppressed, and living in poverty**.

*NASW Code of Ethics*
McSilver Poverty Research Agenda

• **Social justice** is a fundamental value and concern, as well as a commitment to **peace and human rights**

• **Dual focus** on **social action** and **individual change** which has the SW profession alternating between two complementary and sometimes opposing forces: 1) focus on personal challenges and; 2) focus on public issues

Lundy & Van Wormer (2007)
IT TAKES A VILLAGE
to create and translate knowledge in order to MAKE A
DIFFERENCE for youth and families impacted by poverty across
the globe
www.mcsilver.org