

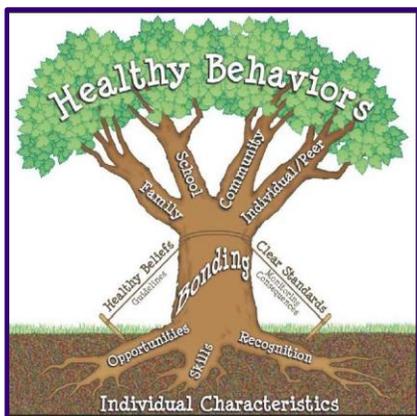
THE SOCIAL DEVELOPMENT MODEL: HEALTHY DEVELOPMENT ACROSS GENERATIONS

The SDM holds that providing youth with opportunities, skills, and recognition strengthens bonds that foster their success and health.

The **Social Development Model** (SDM—also referred to as the Social Development Strategy), created by SDRG’s founders, Richard F. Catalano and J. David Hawkins, is a way to **promote healthy youth development by reducing risk and increasing protection**. The model can be used by parents, schools, and communities to improve long-term well-being.

The tree diagram below is a useful illustration of the SDM. According to the model, bonding with adults has its roots in providing young people with developmentally appropriate, meaningful opportunities; skills to be successful in those opportunities; and recognition. These three lead to a strong bond that provides motivation to follow the shared beliefs and standards for positive behaviors in families, schools, the community, and peer groups.

A recent article by Catalano and colleagues summarizes outcomes, not only in an intervention group implementing the SDM, but in the next generation as well. This study adds to the evidence demonstrating how the SDM promotes long-term well-being.



The Social Development Model in Action: Raising Healthy Children

The Raising Healthy Children intervention (RHC) implements SDM constructs in the school and family environments. RHC was tested as a part of the Seattle Social Development Project in Seattle elementary schools from 1983-1989. During the elementary school period, families and schools are the most significant environments for youth socialization, and the peer environment becomes more significant for youth during this time.

The RHC Intervention

The **goal of this intervention was to strengthen children’s bonds to their schools and families** in order to increase positive behavior and academic success. The RHC intervention developed opportunities, skills, recognition, and emphasized positive behaviors through:

- **Parent workshops** that provided opportunities for and reinforcement of positive involvement
- **Teacher training** in classroom management promoting positive student participation
- **Social-emotional skills** lessons taught in school

RHC simultaneously increased clear standards for positive behaviors at school and at home. Researchers believed that these elements would encourage youth to bond with their peers through positive

relationship building. They believed that, by building this foundation in elementary school, youth would see more positive, protective outcomes through middle school and beyond.

RHC Outcomes

Researchers assessed the outcomes of RHC participants through their school years and into adulthood (age 39). Compared to a comparison group not involved with the RHC intervention, the benefits continued through adulthood and included:

- **Significantly less delinquency** and substance use, and higher academic achievement at age 18
- **Significantly lower rates of depression and anxiety** and sexually transmitted infections, and better physical health and economic outcomes at age 21
- **Significantly improved health and economic outcomes** in the 30s, when these areas increase in importance as predictors of later health and economic well-being in adulthood

The positive benefits of the intervention were stronger among African American participants, completely eliminating the disparity between Black and White young adults in income levels and rates of sexually transmitted infections.

Researchers also explored the outcomes of the children of RHC participants (the next generation) through their school years. Children of RHC participants demonstrated **significantly fewer developmental delays** in the first five years of life, as well as fewer teacher-rated child behavior problems, higher teacher-rated academic skills, and lower youth self-reported alcohol and drug onset between ages 6 and 18 than children of parents who did not participate in RHC.

Tested, Long-Term Results

RHC demonstrated population-level impacts on economic, health, and behavioral health outcomes well into adulthood and into the next generation. The SDM at its heart holds that providing opportunities, skills, and recognition promotes bonding and connecting to positive groups. Bonding provides the motivation to follow shared beliefs and standards for behaviors at school, home, and in the community. The body of research summarized in this article adds further evidence of the power of the SDM to promote long-term well-being. The article also highlights the power of embedding controlled tests of interventions and models within longitudinal studies, and the importance of starting prevention interventions in elementary school. The SDM is a powerful theory for developing and testing interventions. As such, it can also be **a useful model for anyone who works with young people.**

“This paper summarizes the power of a social development model-based intervention to impact not only young people, but also their children in the next generation.”

**—Kevin Haggerty
Director of SDRG**

For additional information on this topic, please refer to the original article:

Catalano, R.F., Hawkins, J.D., Kosterman, R., Bailey, J.A., Oesterle, S., Cambron, C., & Farrington, D.P. (2021). Applying the social development model in childhood to promote healthy development: Effects from primary school through the 30s and across generations. *Journal of Developmental and Life-Course Criminology*, 7(1), 66-86. <https://doi.org/10.1007/s40865-020-00152-6>

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