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New perspectives on adolescent risk behavior

Richard Jessor

Introduction

The past several decades have witnessed a remarkable invigoration of theoretical and empirical work on adolescent risk behaviors – behaviors that can, directly or indirectly, compromise the well-being, the health, and even the life course of young people. Knowledge about risk behavior has expanded almost geometrically in recent years, and it has become far more coherent and systematic than before. Today's conceptualizations encompass a wide array of causal domains, from culture and society on one side to biology and genetics on the other; they also convey, at the same time, a hard-earned awareness of complexity and a renewed respect for developmental processes.

This invigoration and, indeed, transformation of work on adolescent risk behavior is obviously part of larger and more far-reaching trends in social inquiry as a whole, trends that, taken together, have been labeled "developmental science" (Cairns, Elder, & Costello, 1996) or, more narrowly, "developmental behavioral science" (Jessor, 1993). As an emerging paradigm, the trends refer to the multidisciplinary, multivariable, time-extended, process-focused, contextually situated, personcentered kinds of studies increasingly represented in contemporary social problem research. The chapters in this volume reflect, in one way or another, this newer orientation to inquiry, and risk behavior has been one of the arenas of social inquiry in which a developmental behavioral science approach has been most evident.

Most earlier work on adolescent risk behaviors was confined to a particular subset, often termed *problem behaviors*, that involved legal or



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normative transgression and that usually elicited social sanctions; traditionally, these included delinquency, drug use, alcohol abuse, and early sexual activity. More recent work has not only enlarged the perimeter around problem behavior to include, for example, tobacco use and risky driving, but has also recognized the functional commonality of these problem behaviors with other domains of adolescent activity that also compromise healthy development – inadequate social role performance, such as poor school progress; psychopathology, such as depression; and health-compromising behaviors, such as poor dietary practices or insufficient exercise. Increasingly, scholars have begun to show concern for an expanded repertoire of adolescent risk behavior and, increasingly, they have been exploring the organization and structure of diverse risk behaviors – their covariation, for example – rather than approaching them as unique or separate or isolated actions.

Expansion of the adolescent risk behavior domain has been accompanied by a parallel expansion of explanatory efforts. Single-variable explanations, such as low self-esteem or the absence of positive role models, have given way to well-articulated, multivariate, multilevel accounts that implicate person, context, and their interaction. As Wachs has noted in relation to development as a whole, "causality is best assigned to a complex of covarying multiple influences" (1996, p. 798), and this view seems to capture the current consensus in regard to risk behavior as well.

The concept of risk behavior as behavior that can compromise well-being, health, and the life course has its focus on the potential of such behavior to result in negative outcomes or adverse consequences – drug use can lead to trouble with parents or the law; early sexual activity can lead to unintended childbearing; school dropout can result in chronic unemployment. Risk behaviors can be considered, therefore, as *risk factors* for personally or socially or developmentally undesirable outcomes. Understanding the processes that link risk behaviors to such outcomes – that is, how risk behaviors function as risk factors – is a key task for research in this domain. Obviously, there is considerable uncertainty or variability in the linkage of risk behaviors to adverse outcomes, and that variability presents a critical explanatory challenge.

But the challenge on this outcome or consequence side of engaging in risk behavior is only half of the explanatory challenge. The other half lies on the other side, the side of accounting for why an adolescent



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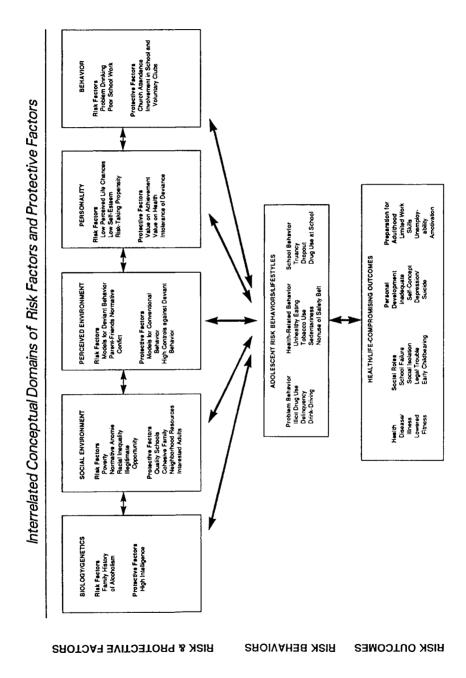
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engages in risk behavior in the first place. It is in this regard that the search for understanding has articulated a large array of antecedents or risk factors - both proximal and distal - that have been shown to influence engagement in risk behavior, and the explanatory account has progressed far beyond such early dispositional simplifications as "risktaking" and such contextual simplifications as "poverty." The elaboration of risk factors for engaging in risk behavior has implicated a variety of causal domains, and it has permitted the identification of both direct and indirect pathways of influence. At the same time, however, it has become quite clear that risk factors alone yield a less than exhaustive account of involvement in risk behavior. Just as there is great heterogeneity in the linkage between involvement in risk behaviors and the likelihood of adverse outcomes, as noted earlier, there is also great heterogeneity in the linkage between exposure to risk factors and the likelihood of involvement in risk behavior. In this connection, O'Connor and Rutter have noted that "variability in response to risk is as important as the effect of the risk itself" (1996, pp. 787–788).

It is this heterogeneity or variability on both the antecedent and the consequent sides of engaging in risk behavior that has led to an important new focus of inquiry concerning adolescent risk behavior, namely, the identification and assessment of protective factors. Conceptually, protective factors have both direct and indirect effects; they lessen the likelihood of engaging in risk behaviors, or of adverse outcomes from having engaged in them, but they also can serve as moderators of or buffers against exposure to risk factors or actual involvement in risk behaviors themselves. Recent research has begun to examine the concept of protective factors in a wide range of studies of adolescent risk behavior and, increasingly, to engage this additional level of complexity in the quest for more exhaustive explanation (Costa, Jessor, & Turbin, in press; Garmezy, 1985; Garmezy & Masten, 1986; Jessor, Turbin, & Costa, under review; in press; Jessor, Van Den Bos, Vanderryn, Costa, & Turbin, 1995; Luthar, 1992; Rutter, 1979, 1990; Stattin, Romelsjö, & Stenbacka, 1997; Werner, 1989).

A recent attempt to capture some of the new trends in thinking about adolescent risk behavior is shown in Figure 1.1. As a generic conceptual framework (Jessor, 1992), it seeks to represent the multilevel domains implicated in current research, their differentiation into multiple risk and protective factors, their linkage to each other, and their joint influ-







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ence on adolescent risk behaviors and risky lifestyles. It also illustrates the linkage of risk behaviors and risky lifestyles, in turn, to health-, development-, and life-compromising outcomes. The directional arrows are intended to convey that the framework is really a "web of causation" (MacMahon, Pugh, & Ipsen, 1960, p. 18), an interacting rather than a linear system, and that, in a dynamic system developing and changing over time, what is effect at one point in time may well be cause at another, and vice versa. The particular variables shown in the framework are an illustrative subset, and their location may well be arguable or depend on where the focus is in the ongoing developmental process (e.g., depression in this volume is considered a risk behavior, whereas it is shown as an outcome in Figure 1.1). But the overriding purpose of the framework is to illustrate the magnitude of the explanatory task, the complexity it entails, the need for differentiation of structures of variables, and the importance of articulating lines of both direct and indirect influence. Understanding the linkages in such a framework, and grasping its dynamics of change over time and development, constitute a truly daunting task. That, however, is what appears to be required by the recent trends and the new perspectives on adolescent risk behavior.

The chapters in this volume

In the preparation of this volume, no attempt was made to address every adolescent risk behavior that has drawn research attention in recent years. On the contrary, our primary concern was to articulate and exemplify the major new perspectives. Given the covariation among risk behaviors and the commonality of many of their risk and protective factors, a sampling of risk behavior domains and of the risk behaviors in those domains was deemed adequate. Three major do-

Figure 1.1 A conceptual framework for adolescent risk behavior: risk and protective factors, risk behaviors, and risk outcomes. (From Risk behavior in adolescence: A psychosocial framework for understanding and action (p. 27) by Richard Jessor, 1992, in *Adolescents at risk: Medical and social perspectives*, edited by D. E. Rogers and E. Ginzburg, Boulder, CO: Westview Press, Copyright © 1992 by Westview Press. Reprinted by permission of Westview Press.

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mains of adolescent risk behavior are represented by the various chapters: problem behavior, such as drug use, delinquency, early sexual activity, and risky driving; psychopathology, here depression; and inadequate social role performance, such as school failure and work-related difficulties. A fourth domain, that of health behavior — diet, exercise, safety, and so on — was reserved for a later conference and volume and, therefore, was excluded from this one.

Assignment of the various chapters to the different sections is also somewhat arbitrary because many of them transcend those confines. An effort was made to group them according to the salience of their substantive focus and to invite the reader to see them all as interrelated, despite their formal segregation.

Because the task assigned to the authors of the last two chapters in the volume - John Hagan, a sociologist, and Rainer Silbereisen, a psychologist – was to comment on the various contributions and to reflect on their implications for the next phase of research on adolescent risk behavior, only brief introductions to the various chapters need to be made at this point. The chapter by the Cairns and their two colleagues stands somewhat apart as a compelling exegesis on developmental science. It captures the centrality that development and change have assumed in contemporary risk behavior research - reliance on longitudinal design and on a life-span perspective in which the childhood antecedents and the young adult outcomes of adolescent risk behavior are considered an integral part of its investigation. The Cairns' concern for person-centered inquiry is also a theme echoed in later chapters as well. As Abbott has admonished us, "our normal methods . . . attribute causality to the variables . . . rather than to agents; variables do things, not social actors" (1992, p. 428). By way of counterpoint, the Cairns urge that agency be restored to persons in context, and they elaborate methods that are germane to that task.

The chapter by Kandel is a powerful example of the illumination that can be achieved by engaging biological variables in an account of variation in drug abuse. Her chapter makes it clear that biological risk factors can no longer be ignored and that what she terms "the mutual relevance of epidemiology and biology" can be a source of provocative hypotheses for future research. Loeber and associates provide an exhaustive examination of structure and organization among a larger than usual set of diverse risk behaviors and also among their risk factors.



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Their establishment of covariation of risk behaviors in these younger age cohorts argues for its robustness over a larger developmental span than adolescence alone. In the chapter by White, Bates, and Labouvie, as in several of the others, the focus is on the other side of adolescence, that is, on young adulthood, and on the long-term outcomes of earlier involvement in risk behavior – for them, adolescent drug use. An application of new, more sophisticated methods in an effort to understand the developmental process, the analysis of individual growth curves turns out to be descriptively enlightening.

Baer, MacLean, and Marlatt make a critical distinction between substance use per se and use-related problems in working toward a harm-reduction approach to treatment. Offering a new perspective on treatment or intervention for substance abuse problems, the authors emphasize the need to tailor treatment to differential trajectories of risk behavior development. Allan Williams brings new attention to a conventionally neglected problem behavior – risky driving. Motor vehicle crashes are the most serious cause of mortality for 16- to 19-year-olds. Williams shows the linkage of risky driving and crashes to other risk behaviors assessed earlier in adolescence.

The chapter by Udry and Bearman describes an extraordinary research endeavor – Add Health – that approaches the study of sexual behavior in a way that includes nearly every aspect of the new perspectives in developmental behavioral science. It involves biology and behavior genetics while assessing multiple social contexts and psychosocial dispositions; it is longitudinal in design; it is unusually comprehensive in the variables measured; and it even permits analyses of friendship pairs as well as of individuals. Clearly an exemplar for future research design, it is already an available resource of exceptional richness for risk behavior researchers and scholars. Adolescent sexual activity as risk behavior is also addressed by Graber, Brooks-Gunn, and Galen. They discuss the important notion of transition-based turning points in characterizing sexual initiation and then elaborate an extensive list of recent reorientations in the study of adolescent sexuality.

The chapter by Compas, Connor, and Hinden is an authoritative appraisal of the current state of research knowledge about adolescent depression, and it provides new perspectives that challenge conventional wisdom in that field. In their conclusion that comorbidity of depression is the rule rather than the exception, there is a challenge to

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the appropriateness of psychiatric nosological distinctions; and in their conclusion that gender differences are very small in magnitude, there is a challenge to the view of depression as being especially relevant to female adolescent development.

Ensminger and Juon implement a person-centered approach by clustering their now-adult sample on a variety of attributes reflecting successful role performance beyond adolescence, and then examining the differential childhood and adolescent precursors of membership in the various clusters. Illuminating the process of "making it" despite the adversities of the inner-city background common to all the clusters, the analysis also illuminates the role that protective factors, such as a supportive family and strong family supervision, play in that process. The chapter by Steinberg and Avenevoli focuses on school, family, and work as interactive contexts that influence the emergence of risk behavior in adolescence. Using both variable-centered and person-centered analyses and a longitudinal design, they reveal the centrality of role performance in school and the cascade of life-compromising consequences that can follow school disengagement. Their conclusion that "early engagement in school may serve as an important protective factor against subsequent problem behavior" appears to hold true for both boys and girls in their study. Mortimer and Johnson examine the paid work experience of teenagers as a risk behavior in an impressive longitudinal study, with follow-up into young adulthood. Different patterns of work, based on both duration and intensity, can, depending on the pattern, increase the likelihood of involvement in certain problem behaviors or, by contrast, result in higher grades and lower dropout during high school. Paid work experience in high school can also lead to more positive work-related outcomes in young adulthood. The study is, indeed, an instantiation of a rather new perspective in this domain of adolescent risk behavior.

Each of the two commentary chapters goes well beyond discussion of the various chapters to constitute a contribution in its own right. For Hagan, a key challenge is to find a language that can help to unify the various analytic approaches while being sensitive, at the same time, to the fact that young people are differentially advantaged or disadvantaged due to their life circumstances. His exploration of the "language of capitalization" and his conceptualization of "youth development as a capitalization process" are extremely provocative and richly heuristic.



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And finally, Silbereisen's summary of "lessons learned" gives salience to and elaborates the key themes emerging from the preceding chapters. But he also reminds us that much still remains to be done; for example, we have not yet succeeded in capturing the phenomenology of adolescence, the meanings that everyday life has for young people, nor have we taken full advantage of the "natural experiments" of rapid social change occurring internationally, contextual changes that directly affect the course and context of youth development. Silbereisen's chapter leaves us with a sobering reminder that the accomplishments represented by the various new perspectives are only one more step along the road to a fully comprehensive understanding of adolescent risk behavior. Much still remains to be done.

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