YOUTH CIVIC ENGAGEMENT AND HEALTH, WELLBEING, AND SAFETY: A REVIEW OF RESEARCH

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When young people have a chance to identify social issues they are passionate about, and have the opportunity to take action to address them, they both contribute to society and reap individual benefits. Meaningful opportunities for civic engagement are transformative for young people, who so often feel voiceless and excluded from decision-making in the civic and social settings where they spend time. In the contemporary context, young people learn about civic engagement in a world that is divisive and uncertain. Youth may be *both* less trusting of formal political institutions *and* increasingly willing and able to engage in civic life, for example given the ease of using new technologies. Youth voices are needed and many youth are looking for a chance to contribute to the world around them. Soliciting young people's input on the community issues and problems they face not only supports positive individual development, it can also help shape policy and community initiatives in ways that expand reach and deepen impact.

There are many ways to define youth civic engagement (YCE); for this review, YCE will be defined as the "individual and collective actions designed to identify and address issues of public concern" [1] with a focus on the behavioral dimension of the complex ways young people are connected with their communities. Some examples of YCE include volunteering or community service, political activities such as campaigning, activism such as participating in protests, organizing community members, and participating as community representatives (e.g., community youth councils, urban planning efforts or participatory budgeting efforts)[2-4]. For this review, youth is defined broadly to include individuals between the ages of 13-25, roughly corresponding to middle and high-school, and college-aged young people. Importantly, not all youth complete middle or high school and certainly not all youth go to college. The educational tracks and socioeconomic contexts youth are exposed to have direct bearing on the civic opportunities and experiences they can access[5-7]. In turn, there are important disparities in who is civically engaged[8]; the issue of disproportionately available civic opportunities and disparities in civic engagement is addressed throughout this review. Many scholars across fields such as community psychology, developmental psychology, public health, and epidemiology argue that civic engagement contributes to healthy youth development and the development and maintenance of healthy and safe communities. YCE can be thought of as a predictor, a consequence, and a process involved in health and safety at the individual and community level. For this review, individual health includes mental, physical, and behavioral health outcomes and safety refers mostly to community-level rates of violence and juvenile justice system involvement, although the definitions vary somewhat across studies. Healthy communities refer to both "civic health" (defined below) and community-level rates of health and safety outcomes.

Associations between civic engagement and health and safety are complex and multidirectional. Research studies are only beginning to test their causal interrelations and to address the complexity of measuring and unpacking relations at the individual and community level. Youth civic engagement can be thought of as related to health and safety in five key ways

(See Figure 1, adapted from[9]). First, community-wide levels of civic engagement (sometimes referred to as "civic health") supports community health and the health and safety of individual subpopulations, including youth (Figure 1, A). Second, communities high in "civic health" support youth civic engagement (Figure 1, B). Third, youth civic engagement can influence subsequent health and safety among engaged individuals (Figure 1, C). Fourth, youth civic engagement in community health and safety projects and policy-making can improve the projects and policy, which can in turn have positive effects on the health and safety of community members (Figure 1, D). Finally, youth health and safety can be considered a precursor to youth civic engagement or as part of the definition of individual health (i.e. youth who are healthy and thriving are also involved in contributing to the world around them) (Figure 1, E).
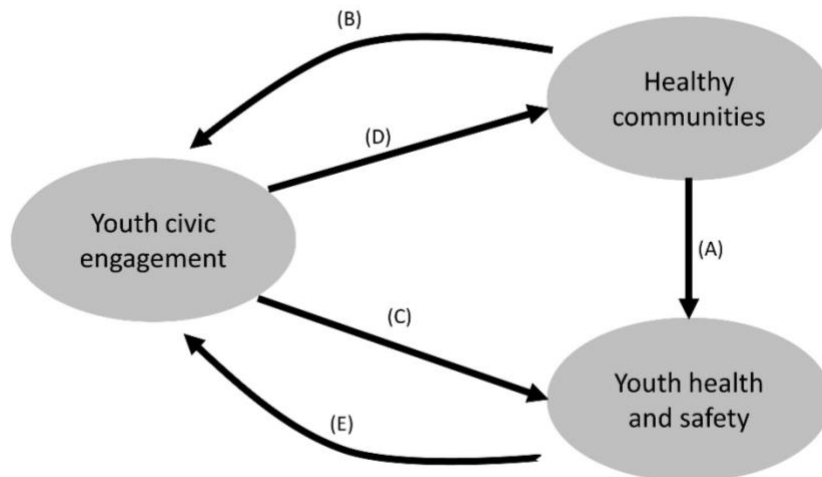
PART I. COMMUNITY-LEVEL "CIVIC HEALTH" AND YOUTH HEALTH AND SAFETY

Communities in which residents are highly engaged in civic activities might be healthier and safer (Figure 1, A). Recently, some have argued that "civic health" is a property that characterizes communities and in turn, may predict community-level and individual-level health and safety, including among youth. Civic health has been defined as "a measure of well-being for a community, state, or nation and is determined by how actively citizens are engaged in their communities"[10]. Coined through an initiative of the National Conference on Citizenship, "civic health" is meant to capture the idea of community vitality and how well community members work together, or are prepared to work together. Measures of civic health include indicators such as levels of civic engagement, social connectedness, group participation, and trust and confidence in civic and social institutions. Importantly, these are most often measured at the individual level (individual civic engagement and perceptions of social capital) and aggregated at the community level.

The term civic health is relatively new and evidence is sparse regarding whether communities that rank highly on their civic health also have higher rates of physical, mental, and behavioral health and safety among residents. However, aspects of civic health such as social connectedness, social trust, and civic participation have long been conceptualized and measured as "social capital" and there is evidence that communities with more social capital are healthier. Epidemiologists such as Kawachi and colleagues have shown how social capital, the resources that are accessed by individuals as a result of their membership in a network or group, can be

good for individual health[11-13]. They have made a strong epidemiologic case for devoting resources to understanding and strengthening the civic characteristics of communities as a way to support the health of individuals who live there. Many funding initiatives have turned attention to building healthy communities through strengthening social capital (for example, the Robert Wood Johnson Foundation healthy community focus area and The California Endowment's Building Healthy Communities initiative) and initiatives to conceptualize and operationalize "civic health" as a characteristic of communities. Social capital is most often thought of as a property of communities or social relationships, but there is considerable debate about how best to measure it. When it comes to links between social capital and the health of individuals in communities, evidence comes mainly from two types of studies.

First, there is evidence from studies of *community rates of social capital* and *community-level rates of health and safety*. Not surprisingly, communities with higher social capital have healthier populations and are safer. Neighborhoods higher in social capital tend to be safer, for example as indicated by lower homicide rates[14] and rural communities that are more civically robust have less violent crime[15]. In one study, neighborhood social capital, measured through aggregated reports of reciprocity, trust, and civic participation, was associated with lower neighborhood death rates and heart disease, after adjusting for factors like poverty[11].

Second, there is some evidence that *community-level* social capital impacts *individual-level* health and safety. In several studies, neighborhood and community social capital is positively associated with individual health outcomes such as self-reported health[16]. The findings may be especially true for certain aspects of social capital like social trust[17] and certain types of communities such as urban neighborhoods[18]. Such public health and epidemiologic studies often examine effects by age and generally find stronger links between social capital and individual health among older adults. Often youth under the age of 25 are not included in these studies leaving open questions about the unique effects of social capital and civic health at the community level on *youth* health and safety. This is a consequential gap in light of work by community and developmental psychologists who have shown that community characteristics matter in specific ways for youth. For example, in communities with "youth bulges," or high youth to adult ratios, youth and young adults show lower civic knowledge but more civic participation[19]. Others have shown that neighborhood level factors such as inequality may work in different ways for youth compared to adults, for example, serving to motivate youth civic participation while hindering adult civic participation[20].

Some studies explore these links in a third way, by examining connections between *individual reports of social capital* and *individual youth health and safety*. When measured in this way, findings are most accurately interpreted as evidence that youth who *perceive* connection to community and who are involved in their communities tend to be healthier. For example, youth in one study who report higher levels of community organization and higher involvement in civic and social groups reported lower use of alcohol and other drugs[21]. Peer affiliation and social bonding are also linked with later initiation and lower rates of substance use[22, 23]. Living in communities with strong social bonds seems to be good for health and safety, although it is not clear whether the key is *actual access* to social capital, or *perceived* social capital, or some combination[24, 25].

Additional evidence in several areas would clarify our understanding of how aspects of communities, like the civic health of communities, affect youth health and safety. First, large studies from public health examining social capital and health often focus on adult populations; applying the rigorous methods of such studies with youth would help clarify the unique links between civic health and social capital and the healthy development of young people. Second, studies of civic health and social capital do not uniformly define and measure the relevant properties of communities, making it somewhat difficult to understand whether there are consistently positive links between civic health or social capital and youth health and safety.

Third, it is important to point out that there are both structural (physical, place-based, contextual, and locational) and social (people-based, relational) resources in communities that impact health and safety. As Diez-Roux and Mair explain, neighborhoods "possess both physical and social attributes which could plausibly affect physical health[25]." The structural and social aspects of communities often align, for example communities with low-quality housing are often also low on social cohesion, but not always[24]. The evidence reviewed above comes from studies that measure social capital through both structural and social resources. Moving forward, a research agenda to understand the effects of civic health on youth and community health should focus on the additive and interactive effects of *structural* and *social* aspects of community. Finally, there is also evidence that social capital can have ill effects on health. For example, communities high in social capital can have higher rates of substance use, perhaps because of social contagion effects or the easy spread of poor health habits in tight-knit communities (see[26] for a recent analysis of the downsides of social capital for health). Of course, by some definitions, social capital is not necessarily positive; tight-knit groups can hold health-harming values or can come in destructive forms, such as gangs[27]. It is important to understand the boundaries and limits of social capital and civic health on promoting youth health and safety and conditions under which communities high in social capital might undermine health.

PART II. COMMUNITY-LEVEL "CIVIC HEALTH" AND YOUTH CIVIC ENGAGEMENT

Communities with a strong civic infrastructure, for example those with many community organizations, are likely able to support more youth civic engagement (Figure 1, B). Young people need access to civic opportunities in order to engage in civic life[28]. Recent work has conceptualized this by looking at civic infrastructure. For example, one recent study illustrates how communities with a strong "culture of engagement," (as defined by robust youth participation in community based organizations), foster youth civic engagement and ultimately can support their health and community wellbeing[29].

WHAT DO WE NEED TO KNOW?

Systematic evidence documenting how civic infrastructure supports youth civic engagement is needed. A promising approach will be to merge data from community-level indicators of civic health and infrastructure with individual level data on youth civic engagement.

In addition, it would be helpful to know what type of civic infrastructure best supports youth engagement, what recruitment methods and opportunities are most effective, and what transforms sporadic engagement into sustained and meaningful engagement with community initiatives where youth really have a chance to have collective impact. Simple exposure to civic opportunity is not enough to engage youth, but affording meaningful opportunities is a necessary condition to support youth civic engagement.

PART III. YOUTH CIVIC ENGAGEMENT CAN INFLUENCE SUBSEQUENT YOUTH HEALTH AND SAFETY

For individuals, YCE can support positive development and promote individual health and wellbeing (Figure 1, C). Several youth development theories propose how YCE can play a role in healthy development. These include Positive Youth Development (PYD) theory, concepts of resilience, sociopolitical development theory (SPD) and empowerment theory. PYD theory highlights how positive developmental contexts (families, schools, communities) support thriving youth; in turn, thriving youth take action to contribute to the world around them[30]. YCE can promote skills and attributes associated with resilience, suggesting that YCE can buffer young people from adverse health and safety experiences. The SPD framework focuses on the context of oppression and disadvantage and "the evolving critical understanding of the political, economic, cultural, and other systemic forces that shape society and one's status within it, and the associated process of growth in relevant knowledge, analytical skills, and emotional faculties" [31]. According to this approach, for marginalized youth of color, activism and resistance are important means of engaging with social and political systems and promoting healthy development [32-35]. Relatedly, theories of psychological empowerment point out the important role of self-efficacy and perceived control in health [36-38].

When thinking about potential health effects of YCE, it is productive to consider a wide spectrum of civic activities but also critical to differentiate between the various types given that youth are exposed to a variety of civic opportunities depending on their socioeconomic contexts and ethnic and immigrant backgrounds[39]. Whereas volunteerism opportunities tend to be more numerous than political opportunities[28], some civic activities that provide a chance for contribution come in the form of protesting, building coalitions, or petitioning. The health effects of civic engagement for individuals will likely differ for volunteerism and political activities. Volunteer and community service activities allow young people to channel their energy into individual, often apolitical, actions providing direct help to others to alleviate suffering. This differs from political forms of YCE, more often directed toward addressing systemic or structural social problems. To the extent that volunteering affects health, it may be through the good feelings associated with helping others. In contrast, political civic activities like protesting a political initiative might affect health through a pathway of empowerment. Across both political and non-political types of activities, youth may find the opportunity to matter and to carve out meaningful role in their community.

Out of the many forms of YCE available to youth, the evidence linking volunteering to health is the most extensive. The empirical literature linking volunteering in *older adulthood*

with longevity and better health [40, 41] is robust. The empirical literature linking YCE and health among adolescents and young adults is emergent but expanding. Most of the evidence is correlational and comes in two forms: observational survey studies drawing on large samples and evaluations of particular volunteer programs. In large observational survey studies, volunteering is relatively consistent in predicting better mental health, such as fewer depressive symptoms,[42-44] and better behavioral health, such as fewer substance use behaviors[43]. In program evaluation research, there is some evidence that volunteering is related to reduced health-risk behaviors. For example, the Teen Outreach Program, which includes a volunteer component, was shown to reduce risk for teen pregnancy[45, 46]. One study, notable for its causal methodology, used a randomized control trial design to examine the effects of volunteering on physical health among late adolescents. High school students randomly assigned to volunteer at an after-school program for two months had lower cardiovascular risk, cholesterol and body mass index, compared to a group of non-volunteers [47].

The empirical literature linking activism with health and safety is more sparse, and the links are more complex. Importantly, the experience of activism tends to be more controversial, more motivated by a desire to make change, and may involve a different subset of youth[48]. In a set of studies using the National Longitudinal Study of Adolescent to Young Adult Health, activism was linked with *more* substance use over time [43] and either not associated with[43], or associated with more depressive symptoms [42]. Although there is limited direct evidence linking activism and health, indirect evidence supports both positive and negative theorized pathways from activism to wellbeing. Activism is associated with greater self-esteem, empowerment, and self-confidence[33, 49]. Activism might play a role in coping or buffering stress. In one German study, people who used activism as a way to cope with social and political stressors experienced mental health benefits[50]. However, the buffering effect of activism might vary by factors such as racial and ethnic background and the nature of the social stressor. One recent study of college students in the U.S. found differential effects of political activism on mental health for Latinx and Black young adults experiencing discrimination. Political activism buffered the negative effects of racial and ethnic discrimination on stress and depressive symptoms for Latinx college students but exacerbated the negative effects of such discrimination on stress and anxiety for Black college students[51]. Further, activism often arises in response to feeling marginalized or discriminated against[52, 53], experiences that are linked to poor health. Activism can also be unsafe— perhaps disproportionately for some young people. For example, taking a public stand on controversial issues can expose young people to psychological and verbal backlash, and in extreme cases of high-risk activism, to threats to physical safety[54]. Given the emphasis on changing systems, activism can also be frustrating when things are slow to change and can place an undue burden on groups who are marginalized to address systems change.

The evidence linking young adult voting behavior and subsequent health is very sparse. Voting is related to fewer depressive symptoms and fewer health-risk behaviors over time[42, 43]. Some studies find that voting is linked with physiological changes in the short-term[55, 56] pointing out a potential biological pathway by which voting might affect health. However, it is not clear whether voting has causal, cumulative, or long-term effects on health and wellbeing.

WHAT DO WE NEED TO KNOW?

There are several gaps in our current knowledge about how YCE affects individual health and safety. First, there is a need for stronger causal evidence to build confidence in the direction of effects between YCE and health and wellbeing. While it is robustly documented that people who are more engaged in YCE, especially forms such as volunteering, are healthier, there is not yet clear evidence that YCE *causes* better health. Second, we need to better understand the "dose" (how much?) and qualities (what kind?) of YCE experiences that can promote health. It follows from existing evidence that YCE efforts that are sustained as opposed to one-time only; are positive experiences; feel good or effective; are social experiences; and involve direct contact with others might be most beneficial to health. Especially regarding activism, little is known about the qualities of activist experiences that sustain participation and support health as opposed to increasing stress or leading to burnout. We also need to understand for whom YCE can be good for health and for whom it can be harmful. In particular, how does YCE effect health for young people from different sociodemographic backgrounds such as racial and ethnic group, gender, socioeconomic status and immigrant background? Finally, more is needed to forward our understanding of *how and why* YCE can lead to better health. The pathways from different forms of YCE to different health outcomes are numerous and understanding the mechanisms connecting different types of YCE experiences with health outcomes will help focus programs, policies, and practices to support meaningful YCE opportunities and positive pathways to health. Qualitative and program evaluation research might be especially helpful.

PART IV. YOUTH CIVIC ENGAGEMENT IN COMMUNITY HEALTH AND SAFETY INITIATIVES CAN IMPROVE COMMUNITY HEALTH AND SAFETY

When youth are engaged in community health and safety efforts, they can improve the products of projects, initiatives and policies (Figure 1, D). This can strengthen community health and safety, which can have positive effects on the health and safety of community members. While the *practice* of youth engagement in community initiatives through community organizing, activism, and civic engagement has a long history, the academic theory and research evidence about how such practices affect the community initiatives is more recent.

The theoretical basis for involving youth in community projects comes from fields such as education, community psychology, developmental psychology and public health. The culmination of many approaches is community-based participatory research (CBPR), a relatively recent advance in research that emphasizes the need for researchers and community members to share equitable and mutually beneficial roles in research projects, especially those designed for community benefit [57-61]. While CBPR was developed for partnering with a range of communities, it is most often practiced with adults. Youth-focused CBPR is relatively rare [62] although many scholars doing youth-focused projects advocate for the need for more youth involvement [63]. A variant of youth-focused CBPR called youth-led participatory action research (YPAR) has recently gained popularity[64]. In YPAR, the goals are threefold: youth development, community development, and improved research. YPAR has gained traction as an innovative approach to positive youth and community development.

YPAR is argued to enhance the quality of services and programs offered by youth-centered community-based organizations and initiatives such as neighborhood organizations, schools, and after-school programs. Engaging youth can benefit community-based organizations by building organizational capacity and increasing publicity and visibility to facilitate uptake of community-based interventions. As interventions become more effective, and organizations are able to better serve youth, policies can become more responsive to youth needs. Therefore, youth-led civic engagement practices, such as YPAR, can enhance the success and sustainability of adolescent interventions[65] which can promote overall health and safety for youth and communities.

YPAR can also help youth-focused community-based organizations (CBOs) better serve their target communities – particularly those that are hard to reach. By using YPAR as a tool, CBOs gain community insight, participation, and buy-in toward achieving their programmatic goals. For example, an organization might want to develop a substance use prevention program by first understanding the local community needs regarding youth substance use. Engaging youth in this endeavor can enhance the research and maximize the potential for the uptake and impact of an intervention. Many argue that health interventions, in particular, are most effective when communities are partners in intervention development and implementation [63, 66]. For youth-serving interventions, youth-engaged approaches are attractive because youth from a given community have access and reach in youth populations[63]. Thus, youth-focused health promotion interventions resulting from the engagement of hard-to-reach youth, especially from marginalized communities, might result in improved health and education systems, services, and policies.

Despite growing adoption of youth-engaged practices such as YPAR in community organizations, and "Action Civics" models employed by some schools and community programs[67], more empirical evidence regarding how such programs support theoretical benefits for communities is needed[68]. One qualitative study using focus group participants from five CBOs suggested that YPAR changed the culture of organizations, for example, leading them to value participatory evaluation more highly[69] aligning with the idea that YPAR can affect institutional identity and organizational culture. Engaging youth in health research and promotion, thus, might enhance the responsibility of programs to youth and community health and safety needs.

WHAT DO WE NEED TO KNOW?

The biggest gap in understanding how YCE can improve the health and safety of communities is the difficulty of capturing the impact of YCE at the community level. While there are not comprehensive strategies or standardized tools for evaluating organizational impact of YPAR and youth-based CBPR programs, some efforts to measure the impact of participatory processes in public health research on organizations and communities suggest evaluating the process of participatory approaches, the implementation, and the outcomes[61]. More specifically in the realm of youth-based participatory projects, some proposals for evaluating impact are that organizations should reflect on how the youth-engaged projects have contributed to the mission and success of CBO or community initiative [70-73]. The challenges are definitional (what is

"impact" at the organizational and community level and how do impacts at each level inter-connect?), logistical (how can projects effectively focus on outcomes at both the individual and organizational/community level?) and an issue of measurement (how do we measure the added value of community participation to organization and communities? [61]). Given theory and qualitative evidence supporting youth-engaged processes, each of these questions deserve careful attention to build the evidence base for how engaging youth in communities can improve community health and safety initiatives.

PART V. YOUTH HEALTH AND SAFETY PREDICTS CIVIC ENGAGEMENT

Youth health and safety can also be understood as a precursor to YCE or YCE can be considered as a part of the definition of individual health (Figure 1, E). When looking at evidence that health and safety are correlated with civic engagement, it is critical to remember that the casual direction is not well-understood. Young people who participate in civic activities may already be on positive developmental trajectories [30]. While there is evidence suggesting that civic engagement can support health (reviewed above), there is also evidence to suggest that young people who become engaged in their communities are healthier, and often embedded in safer environments to begin with. This may be especially true for individuals who participate in non-controversial forms of civic engagement, such as voting[74]. Evidence from England suggests that less healthy people are less likely to vote [75] and in the US, one study found that young adults with depressive symptoms were less likely to vote [42]. Being embedded in safe communities characterized by strong social connections might support more civic engagement. For example, adolescents who report feeling more socially connected to family and community contexts and perceiving stronger social capital (including living in a safe neighborhood) are more likely to be engaged in civic activities during adolescence [76] and voting and volunteering as adults[77]. If positive and safe social environments support civic engagement and civic engagement supports further health and safety, the "civic engagement gap" might perpetuate gaps in health and civic outcomes. At the same time, equitable opportunities for meaningful civic engagement for youth from all backgrounds might be one way to interrupt this cycle.

In addition to health and safety *predicting* youth civic engagement, civic engagement might be thought of as part of the definition of what it means to be "healthy and thriving." Similar to modern arguments that "civic health" is a meaningful construct to assess how communities are thriving, which is underpinned by the assumption that strong civic fabric is part of the definition of healthy communities, there is a theoretical argument that youth who are healthy and thriving are also involved in contributing to the world around them. This is a philosophical proposition that relies on a view of human development expanding the concept of individual health to *thriving*, a process that involves youth contributing in meaningful ways to shaping their communities and their own development[78]. This view communicates that youth engaging in their communities is indicative of, indeed partly defines, what it means to be healthy. From this view, making sure youth have opportunities for meaningful civic engagement is one way to ensure that they will develop in a healthy and productive way.

WHAT DO WE NEED TO KNOW?

One area where more evidence would be helpful is in characterizing how much, and in what ways, health and safety predict YCE. While we know that healthier people are more likely to be involved in many forms of civic engagement, at the same time, experiencing difficult circumstances such as oppression and discrimination, being denied rights, and experiencing certain health issues can be very motivating in terms of civic action [52, 79-82]. Sometimes, residents of communities who feel unsafe or unhealthy will mobilize to create change. Thus, low levels of health and safety can also predict more YCE. Better understanding of the role of race, class, and gender inequalities, the individual factors (e.g., sense of efficacy and knowledge about civic systems) and the contextual factors (e.g., civic leadership, strong social networks, and place-based factors) that facilitate successful mobilization would significantly advance our knowledge of how youth health and safety predict YCE. In turn, this would help endeavors to isolate the effects of YCE on subsequent health and safety and best support YCE experiences that promote healthy outcomes for youth.

PART VI. CONCLUSION

Youth civic engagement is critical both for supporting and maintaining democracy, as well as for supporting youth development into constructive and healthy adults. Among the many reasons why youth should be engaged in their communities in active and meaningful ways, one understudied reason gaining momentum is that YCE seems to be linked with youth health and safety at the level of both individual youth and communities. The available evidence points to certain forms of YCE as beneficial for youth health and safety, especially volunteerism. At the same time, other forms of YCE such as activism are related with health and safety in complex ways. In the current moment of increased youth activism, it is well worth understanding how best to support young activists in ways that will promote health and safety. Furthering the importance of this topic is that fact that YCE can promote community health and safety when youth are constructively engaged in civic participation, for example through YPAR or youth advisory councils, where they might affect the health and safety policies relevant to youth.

It is important to explicitly note one critical aspect of linking YCE and youth health and safety, which is that there are troubling disparities in both health and safety and levels of youth civic engagement across socioeconomic and racial/ethnic lines. In general, youth of color and adolescents from lower socioeconomic backgrounds have poorer health status, measured by markers such as disease (e.g., HIV/AIDS), some indicators of behavioral health such as unintended pregnancies, access to health services, and personal safety (higher exposure to homicide, dating violence) [83, 84]. At the same time, youth of color, those from immigrant-origin backgrounds, and those from lower socioeconomic backgrounds have access to fewer opportunities for high-quality civic engagement. YCE might provide a way for these youth to mobilize to change the conditions that affect them. At the same time, youth must be supported by systems that invite their input but don't place the burden of correcting unfair policies and unequal rights onto the young people who experience systemic injustices.

All youth deserve access to high quality opportunities to engage in their communities in meaningful ways. This is their democratic right and a great opportunity to support youth and community development. This review proposes that YCE and health and safety might be thought of as connected in five main ways, summarizes the state of evidence linking YCE with health and safety, and points to the gaps in our current knowledge. In sum, when youth are constructively engaged in civic life, they can experience benefits to their own health and safety while also contributing to the health and safety of their communities. Devoting resources to understand how best to support these positive connections is a worthwhile investment for both our youth and our communities.

Not an exhaustive list, these resources came to the author's attention in the course of the research project.

CIRCLE

This website compiles information about youth civic engagement. There are both research-based resources and tools for practitioners.

CIVIC HEALTH INDEX

The National Conference on Citizenship developed the Civic Health Index to report on how well communities are organized to define and address public problems.

NATIONAL NETWORK OF STATE ADOLESCENT HEALTH COORDINATORS

This website provides resources for those integrating youth engagement into state level program and policy development.

NEW JERSEY NEXT GENERATION COMMUNITY LEADERS

Profiled in a *Health Affairs* blog and described at the New Jersey Health Initiatives website, this RWJF-funded project provides youth aged 14-21 with opportunities to make meaningful change in their communities through summer employment on self-designed, community-focused projects.

PACE PRIMER

The Civic Engagement Primer–also known as the #PACEprimer–is a resource designed to explore help philanthropies assess their interest and understanding in civic engagement, and ultimately help funders integrate civic engagement in their work.

POSITIVE YOUTH DEVELOPMENT FRAMEWORK

This framework, often applied in international contexts, describes approaches and activities that support healthy, productive and engaged youth.

RITA ALLEN FOUNDATION

The Rita Allen Foundation seeks to foster a culture of civic science in which broad engagement with science and evidence helps to inform solutions to society's most pressing problems. Making progress toward this goal requires building new knowledge and collaborations across many sectors.

ROBERT WOOD JOHNSON FOUNDATION CULTURE OF HEALTH

An overview of RWJF's work to advance a culture of health. Civic engagement is identified as a driver for one Culture of Health action area, "Making Health a Shared Value." Resources related to RWJF's work toward "Fostering Cross-Sector Collaboration to Improve Well-Being" are also available.

THE CALIFORNIA ENDOWMENT BUILDING HEALTHY COMMUNITIES INITIATIVE

This comprehensive community initiative aims to advance statewide policy, change the narrative, and transform 14 of California's communities devastated by health inequities into places where all people and neighborhoods thrive.

THE CALIFORNIA HEALTHY PLACES INDEX

This website explores local factors that predict health outcomes and the policy actions that can affect those outcomes. Youth actions are highlighted as one pathway to several health outcomes.

YPAR HUB

This website features stories about Youth-Led Participatory Action Research (YPAR) projects and provides tools for getting a YPAR project started.

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