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ORIGINAL ARTICLE

WILEY CHILD & FAMILY SOCIAL WORK

Youth-led activities associated with positive competence changes in a community-based program for adolescents

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Abstract

This study examined the types of youth-led activities performed during the community-based program "Building My Future" and their impact on personal, problem-solving, and community competences. At-risk and non-at-risk adolescents (N = 410) participated in 49 groups in the local social services. Different types of pre-intervention and intervention activities and the meetings held with external resources were associated with pre-post changes in self-concept, productive task orientation, connectedness, coping skills, participation, and integration with the community, using cluster analyses. Results showed that adolescents who performed the pre-intervention activity carried out more modules and performed more intervention activities. Performing group dynamics as a pre-intervention activity, carrying out creative activities, volunteering, excursions, and games, but no sports, and meeting up with associations were related to the most positive changes in at-risk groups. Non-at-risk groups that mainly participated in amusing activities experienced a decrease in their competence scores. This shows the relevance of the types of self-selected activities carried out when promoting positive development and can serve as guidance for future community work.

KEYWORDS

at-risk adolescents, cluster analyses, community program, competence, positive youth development, youth-led activities

1 | INTRODUCTION

It is widely accepted that the way adolescents spend their leisure time has important implications for their development by providing opportunities for them to form social relationships, display new skills, and create new identities (Mahoney, Vandell, Simpkins, & Zarret, 2009). Meaningful engagement through leisure activities can promote positive relationship building, colearning, and empowerment, enabling youth to learn about themselves, others, and the world (Hopper & Iwasaki, 2017). By contrast, the amount of time young people spend unsupervised, mostly in unstructured peer-focused activities or in front of screens, has been a concern (Eccles & Gootman, 2002; García-Poole, Byrne, & Rodrigo, 2017). Opportunities for deviance may be highest when adolescents lack adult supervision, are involved in unstructured settings without an agenda, and are in the company of peers (Osgood & Anderson, 2004). In fact, adolescent engagement in less structured activities with nonadult supervision has been associated with poorer psychological well-being and substance use (Lee & Vandell, 2015), misconduct and antisocial behaviour (Levine Coley, Eileen Morris, & Hernandez, 2004), depression and anxiety (Maras et al., 2015), and low academic performance (Posner & Vandell, 1999). By contrast, participation in extra-curricular leisure activities and out-of-school personal and social skills programs has been linked to numerous developmental assets and better school performance (Badura et al., 2016; Durlak & Weissberg, 2007). This evidence has led to the creation of guides for academically oriented out-of-school program providers (Beckett et al., 2009). However, as evidence grows on the benefits of leisure activities, a need has arisen for more in-depth guides on nonacademic, youth-led community programs, especially for at-risk populations.

Young people living with challenging at-risk situations often have limited access to leisure opportunities and resources, as well as limited

connections to community support (Cammarota, 2011). However, there are doubts concerning the type of activities that may work best in this population. In most intervention programs with vulnerable youth population, adults propose and lead the chosen extra-curricular activities in the school setting. As many young people at psychosocial risk do not complete compulsory education or have negative school experiences related to academic failure (Casillas et al., 2012; Morales & Guerra, 2006), they could be mostly out of reach of or unmotivated to attend academically oriented after-school programs. In this sense, a bottom-up or youth-led approach to activities performed in community settings could be an alternative and effective strategy for intervention. Meaning-making assets together with interpersonal skills are two of the core strengths included in the Resilience Portfolio Model (Grych, Hamby, & Banyard, 2015), seen as malleable behaviours that can promote psychological health in at-risk populations. This study takes a comprehensive approach to the study of youth-led activities and their impact on person-centred competence profiles in the context of a community-based intervention program for at-risk and non-at-risk adolescents. This is a novelty because most studies have focused on the impact of leisure activities on variable-centred averaged outcomes such as academic and educational performance, antisocial behaviour, and psychosocial functioning (Agans et al., 2014; Mahoney et al., 2009).

1.1 | Community-level interventions for adolescents

The rise of the Positive Youth Development framework has highlighted the importance of strengthening personal, social, and community competencies for better adjustment results and more sustained improvements in problematic areas (Lerner et al., 2013). This framework has also highlighted the importance of engaging adolescents in a variety of leisure activities for promoting competences. The activities that take place in a community provide a unique normative system, expectations, goals, relationships with adults and peers, and opportunities for growth (Rogoff, Baker-Sennett, Lacasa, & Goldsmith, 1995). Participation in experiential learning programs such as 4-H organizations (head, heart, hands, and health), Girls and Boys Clubs, or Scouting has been related to increased self-esteem and reduced problem behaviours and has been found to predict civic engagement and youth contribution (Anderson-Butcher & Cash, 2010).

Importantly, what youth do with leisure time, rather than what leisure time does to youth, should also be emphasized, with youth-led engagement promoted through constructive and meaningful leisure activities (Hopper & Iwasaki, 2017). Accordingly, out-of-school time planners and educators should partner with youth, engaging them in projects that are meaningful to the youth themselves, to the adults who support them, and to their communities. Examples of programs that use this type of bottom-up approach could be "The Beat of Boyle Street" program, in which youth lead the creation of rap lyrics with significant meanings (Lashua & Fox, 2007); the "Conservation Corps' Youth Council," in which 15- to 18-year-olds gain voice by participating in all stages of research, planning, and decision-making of an environmental organization (Hubbard, 2015); or the "Youth Neighbourhood Mapping Initiative," in which adolescents use technology and voice their perspectives on city planning (Santo, Ferguson, & Trippel, 2010). However, a rigorous evaluation of the effectiveness of these types of youth-led programs has yet to be addressed.

1.2 | The present study

In this study, we evaluated the impact of engagement in youth-led activities on the effectiveness of the "Building My Future" program (in Spanish "Construyendo Mi Futuro", Rodrigo et al., 2006), a psycho-educational community-based intervention program that aims to promote personal, social, and community competences. This program is being widely implemented in the local social services and community resources, as part of a family preservation service targeting families with psychosocial risk. However, to avoid social stigmatizing, the program engages both at-risk and non-at-risk adolescents into action projects that involve a variety of activities selected by them, in which they are able to display multiple assets, make decisions, and achieve their project goals. The program is structured yet flexible, open to taking on different types of activities proposed and arranged by the participants under the supervision of the group facilitators. Furthermore, facilitator's emphasis on the planning of each action, the selection of strategies, and the reflection on the achievements made, all of which play an important role during the program. These action projects are embedded in the working sessions of the five modules of the program: (a) "Creating our group," (b) "Getting to know our surroundings," (c) "Making our surroundings better," (d) "Clarifying my future," and (e) "Boosting our relationships." Throughout these modules, the "Big Three" effective features of positive development promotion are present: (a) positive and sustained adult-youth relationships, (b) activities that build important life skills, and (c) opportunities for participation and leadership in valued community activities (Lerner, 2004).

As a first research question, we analysed the patterns of individual changes in the adolescents' personal, problem-solving, and community competences observed after the program completion. Self-rating measures of the abovementioned personal assets were taken at the beginning and the end of the program. As covariation is possible in the changes to these outcomes, we identified individual patterns of pre-post changes following a person-centred approach (Bergman, Magnusson, & El Khouri, 2003), based on previous studies applying this approach to positive parenting outcomes (e.g., Byrne, Rodrigo, & Máiquez, 2014). Moving forward from the basic question of "does it work" to a more complex question of "what works best for whom" (Granger, 2010), we also aimed to describe these profiles in terms of sociodemographic variables (age, sex, and psychosocial risk status), seeking to identify the differential effectiveness of the program. On the basis of scarce empirical research, we hypothesized that participants who were younger, girls, and at psychosocial risk would be mainly represented in the profile with more positive competence changes (Allen & Philliber, 2001; Lerner & Lerner, 2012).

As a second research question, we investigated which types of pre-intervention and intervention activities were associated with the patterns of competence changes obtained. Different leisure activities are unique in their contents and in the developmental assets they offer to youth, and therefore, they may also yield different competence-related effects. Here, we focused on how setting variations in the opportunities to engage in different activities are aligned with

variations in the programs' impact on personal, social, and community capabilities. Understanding the source of differential effects can help researchers and practitioners refine a program's theory of change, make program improvements, and tailor components to specific populations or contexts (Greenberg & Lippold, 2013). Previous research has identified person-centred profiles of the breadth of participation in organized and/or unstructured types of leisure activities (Sharp, Tucker, Baril, Van Gundy, & Rebellon, 2015). Here, we are more interested in testing the impact of each of the participants' activities in terms of their content and external support, because the program allows for a variation in this implementation component that may affect the program results (Durlak & DuPre, 2008). In accordance with previous studies, we expected patterns with positive competence changes to be characterized by the performance of motivational and team-building pre-intervention activities (Hopper & Iwasaki, 2017). Patterns with positive competence changes were also expected for those who performed creative and volunteering activities, which have been linked with higher reports of initiative, positive relationships, and social capital (Vysniauskyte-Rimkiene & Matuleviciute, 2016). Finally, we also predicted positive results for those performing leisure activities that required planned meetings that mobilized community resources, because the ability to set future goals and plans has been related to positive developmental outcomes (Johnson, Blum, & Cheng, 2014).

2 | METHOD

2.1 | Participants and procedure

Primary caregivers of all participants gave informed consent, and the procedures were approved by the Committee for Research Ethics and Animal Wellbeing at the University of La Laguna. The participants were 410 adolescents (53% girls and 47% boys) who attended the "Building My Future" program. This program is offered during the academic year (from October to June), with adolescents generally attending the group activities at least once a weak. Thus, each participant only attended to one edition (year) of the program. For the present study, we have accumulated data from 3 years (from 2013 to 2016) and presented results for the intervention group only, because the comparison group did not perform any activities waiting for the next edition. During these years, the program was implemented in 17 municipal sites of the Spanish Autonomous Community of Castile and Leon. The flow of participants through the stages of the study is depicted in Figure 1.

The average age of participants was 13.8 (*SD* = 1.56; age range from 11 to 18 years of age), and participants were categorized into two groups: younger adolescents (11- to 13-year-olds, 46%) and older adolescents (14- to 18-year-olds, 54%). The majority were students, half of them lived in a rural area, had fathers and mothers with a low level of education, and most of the fathers were employed, whereas only half of the mothers were employed. At-risk participants were referred by the social services for having parents attending the family preservation services. Non-at-risk participants were voluntarily enrolled from the same neighbourhoods and did not have parents attending the family preservation services. The majority of groups were guided by one facilitator (94%), and after each edition of the program (1 year), the same facilitators took on a new group. Facilitators included social workers (44%), social educators (37%), leisure instructors (12%), and psychologists (7%). In order to engage adolescents into starting the program and to create group adherence, the facilitators announced an attractive pre-intervention activity at the beginning of each edition (overnight stay, excursion, etc.), informing the public at a

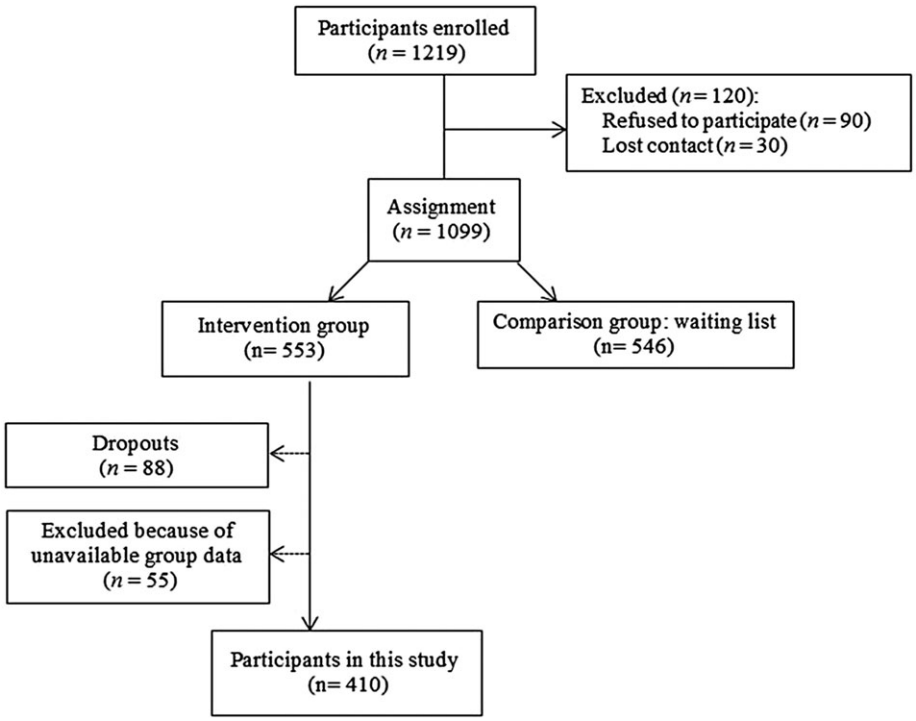

FIGURE 1 Flowchart of participants

community level (families attending the social services, adolescent hot points, schools, …). Adolescents belonged to 49 intervention groups, with 41% placed in non-at-risk groups and 59% placed in at-risk groups with medium and high levels of psychosocial risk according to the social workers. An average of 4 out of 5 (*SD* = 1.6) modules were completed, with an average attendance rate of 73% across modules.

The program team provided an intensive 25-hr training about the program for all the group facilitators and service coordinators in the capital of the region. Once the program had started (after the pre-intervention enrolment activity), two warm-up sessions were necessary to create a group feeling and to establish the group roles. Part of the first session was also used for participants to complete the questionnaires. The posttest questionnaires were completed during the last session within a week of the program completion.

2.2 | Instruments and measures

2.2.1 | Self-Concept and Social Realization Questionnaire

We used the Self-Concept and Social Realization Questionnaire (De Mendoza, Medina, & Hernández, 2005; in Spanish *AURE*). The instrument has 42 items comprising three factors: (a) Self-concept (16 items, α = .89), as the positive evaluation of one's personal qualities; (b) Task-oriented Strategy (13 items, α = .89), which includes the need to be efficient and to enjoy facing the challenges that one is involved in while engaging in activities or performing tasks; and (c) Empathy and Social Realization (10 items, α = .87), which involves the capacity to enjoy caring relationships, a positive attitude toward communication and collaboration with others, and concern about other people's problems. Each item is presented using Osgood's semantic differential scale where two affirmations are opposed and must be valued (e.g., *I feel good about myself*, 1 2 3 4 5, *I feel uncomfortable with myself*). Scores nearer to 1 represent higher levels of competence, so all scores in this instrument were inverted for easier understanding.

2.2.2 | Coping Scale for Children and Youth

A reduced version of the Coping Scale for Children and Youth (Brodzinsky et al., 1992) was used, with 29 items, with responses rated on a 5-point scale going from 1, *never*, to 5, *always*. This instrument includes four factors: (a) Assistance Seeking (4 items, α = .60), which involves interpersonal problem solving such as getting advice or sharing feelings with a family member or another person; (b) Cognitive-Behavioural Problem Solving (8 items, α = .76), such as making plans to solve problems and then following them, or thinking about the problem in a new way to minimize discomfort; (c) Cognitive Avoidance (11 items, α = .83), involving putting the problem out of one's mind or trying to pretend that the problem did not happen; and (d) Behavioural Avoidance (6 items, α = .66), consisting of reducing tension by indirect means such as avoiding people that remind you of the problem or displacing anger on to another person.

2.2.3 | Perceived Community Support Questionnaire

We applied the Community Participation and Community Integration subscales of the Perceived Community Support Questionnaire (Gracia, Herrero, & Musitu, 2002), comprising 11 items with responses rated on a 5-point scale going from 1, *strongly disagree*, to 5, *totally agree*. The two factors of community support measured were (a) Community Integration (5 items, α = .66), measuring the sense of belonging to a community or neighbourhood, and (b) Community Participation (6 items, α = .64), measuring the level of involvement in the community's social activities.

2.2.4 | Implementation checklist

During the program, the facilitator of each group filled out a checklist with information related to different implementation aspects. Forty-nine checklists (one for each intervention group) were analysed, and group data were then assigned to the members of each group. In particular, we analysed the type of pre-intervention activity organized by the group facilitators, the number and type of activities chosen by each group of participants during the program, and the number of meetings and types of external resources used to perform the activities (Table 1).

A panel of professionals not involved in the evaluation work categorized the intervention activities according to their content. *Sporting activities* included playing soccer, basketball, and volleyball; attending basketball games; multiadventure park visits; ice skating; archery; table soccer; horse riding; paintball; and rock climbing. *Creative/artistic* activities included balloon modelling; graffiti drawing on paper; notebook, and wallet handicrafts; gift making; decoration of the program's premises; photography; carolling; dance; hip hop improvisation; choreographies; body language, voice, and improvisation; drama; and workshops in handcrafted jewellery, fantasy make-up, stage

TABLE 1 Activity-related variables in the implementation process of the Building My Future program

Components	Indicators	Measures	Selected by
Pre-intervention activity	- Presence/absence (yes/no) - Type of pre-intervention activity	Implementation checklist Games, get-together, multiadventure, group dynamic, or excursion.	Group facilitator
Intervention activity	- Number (cumulative) - Type of activities performed (yes/no)	Implementation checklist Sport, creative/artistic, volunteering, excursion, cultural, learning, games, shared meal.	Group of participants
Meetings with external resources during the program	- Number (cumulative) - Type of external resources contacted (yes/no)	Implementation checklist Town hall resource, school or high school, association, sports club, other groups in the program, and cultural resource.	Group of participants

decoration, magic, gardening, cooking, bread making, non-alcoholic cocktail making, percussion instruments, and clowning. *Volunteering activities* included collaboration with mental health, intellectual disability, and Alzheimer associations; collaboration with the non-governmental organization against poverty "Joined Hands"; working with elderly people for the "Red Cross"; collaboration with the Provincial Plan of Road Safety Education; participation in craft fairs for different non-profit organizations; and fund-raising for the end-of-program trip. *Excursion activities* included trips to a city, an amusement park, a heated swimming pool, or youth hostels and camping and nature tours (snow, mountains, and natural parks). *Cultural activities* included visits to museums and exhibitions, cultural city walking tours, cinema visits, and video forums. *Learning activities* included sign language classes, talks on topics of interest (drug abuse, urban tribes, affectivity and sexuality, and communication skills), and conflict-solving group dynamics. *Game activities* included traditional games ("Back to front hide and seek"), Trivial Pursuit, Twister, PlayStation championships, and other games that were not specified. *Shared meals* included mid-afternoon light meals and evening meals.

2.3 | Data analyses

For our first aim, we first examined averaged pretest/posttest changes on each of the nine competence factors using repeated analysis of variance (ANOVA) measures. Then, we identified different patterns of competence changes, using a hierarchical cluster analysis with Ward's Method, on the pretest/posttest competence change scores (Ward, 1963). All the variables were standardized to *z* scores to assist in the interpretation of the resulting profiles. Then, to examine whether these different patterns differed significantly in the competence measures, a multivariate ANOVA was performed with the three-cluster solution as a predictor and the competence measures as dependent variables, setting the alpha level at .05. Finally, sociodemographic factors were associated with cluster membership to identify the profile of individuals in each cluster.

For our second aim, we first examined the participants' level of engagement in the pre-intervention and intervention activities and the performance of meetings with external resources for descriptive purposes. Then, we tested whether the clusters differed significantly in any of the activity-related variables mentioned using chi-square and univariate ANOVA analyses. Post hoc Scheffe tests were also performed and alpha levels were set at .05. Data were analysed using the SPSS-21 analytical software.

3 | RESULTS

For our first research question, analyses of averaged pre-post changes on each competence factor showed that participants only experienced a significant increase in their Self-concept, $F(1, 409) = 14.04$, $p \leq .001$, and Behavioural Avoidance, $F(1, 409) = 8.53$, $p \leq .01$, with small effect sizes. To capture the interindividual variability that may underlie the average results, we examined the existence of different patterns of competence changes. A three-cluster solution was chosen for the changes in competences, as the clusters were theoretically meaningful and represented the best possible balance between cluster size and differentiation. The hierarchical three-cluster solution was replicated using the iterative partitioning method k-means, and the multivariate ANOVA analysis showed that the three clusters differed significantly in competence changes, Wilks' lambda = .284, $F(18, 410) = 38.81$, $p \leq .001$, with a large effect size (partial $\eta^2 = .47$). One-way ANOVAs by cluster membership with Scheffe post hoc comparisons were conducted to verify significant mean differences between the variables included in the clusters. Clusters differed in all variables, and the effect size was explored using the partial η^2 statistic. Results can be seen in Table 2.

Cluster 1, with mixed changes ($N = 110$), involves increases in personal, social, and community competencies, yet with higher levels of problem avoidance. After the intervention, this group presented higher Self-concept, Empathy and Social Realization, Assistance Seeking, Cognitive-Behavioural Problem Solving, Community Participation, and Community Integration. On the other hand, their Task-oriented Strategy remained the same, and their Cognitive and Behavioural Avoidance increased. Participants in Cluster 2, with negative changes ($N = 170$), showed a reduction in personal and community competences after the intervention. This group presented a lower level of Self-concept, Empathy, and Social Realization, as well as a lower level of Community Participation, whereas all four problem-solving

TABLE 2 Centre of the final clusters in *z* change scores and univariate contrast of variances between the clusters according to personal, problem solving, and community competences ($N = 410$)

	Clusters							
Competences	1. Mixed changes ($N = 110$)	2. Negative changes ($N = 170$)	3. Positive changes ($N = 130$)	$F(2, 407)$	η^2	Post hoc tests		
Self-worth	0.20	−0.49	0.72	87.65***	.30	3-1***	3-2***	1-2***
Task-oriented strategy	0.00	−0.41	0.73	79.98***	.28	3-1***	3-2***	1-2***
Empathy and social realization	0.38	−0.46	0.56	65.90***	.25	3-2***	1-2***	
Assistance seeking	0.50	−0.05	−0.11	16.32***	.07	1-3***	1-2***	
Problem resolution	0.53	−0.19	−0.10	23.19***	.10	1-2***	1-3***	
Cognitive avoidance	0.64	−0.07	−0.58	68.77***	.25	1-3***	1-2***	2-3***
Behavioural avoidance	0.63	−0.05	−0.51	61.14***	.23	1-3***	1-2***	2-3***
Community participation	0.49	−0.41	−0.01	32.59***	.14	1-2***	1-3***	3-2***
Community integration	0.34	−0.19	−0.18	14.03***	.06	1-2***	1-3***	

***$p \leq .001$.

strategies and their Community Integration remained the same. Finally, participants in Cluster 3, with positive changes (N = 130), showed positive changes in their personal competences and less problem avoidance. These adolescents presented a higher level of Self-worth, Task-oriented Strategy, and Empathy and Social Realization; a lower level of Cognitive and Behavioural Avoidance; and the same level of Assistance Seeking, Cognitive-Behavioural Problem Solving, Community Participation, and Community Integration. The clusters were then characterized in terms of sociodemographic variables. Cluster 1 had an overrepresentation of boys, $\chi^2(2) = 9.30$, $p \leq .01$, and adolescents from urban areas, whereas Cluster 3 was characterized by adolescents from rural areas, $\chi^2(2) = 9.51$, $p \leq .01$. Cluster 3 was also characterized by adolescents placed in at-risk groups, whereas Cluster 2 had an overrepresentation of adolescents in non-at-risk groups, $\chi^2(2) = 12.06$, $p \leq .01$.

In relation to our second research question on the impact of the type of activities on cluster membership, we first examined the level of participants' engagement in the pre-intervention and intervention activities, as well as their attendance to meetings with external resources. Overall, 75% of participants were enrolled in a pre-intervention activity, in which a get-together activity was preferred (45%), followed by excursions (18%), multiadventure activities (16%), group dynamics (14%), and games (7%). Adolescents who performed the pre-intervention activity carried out more modules, M = 4 (SD = 1.6) versus M = 3.3 (SD = 1.5), $F(1, 409) = 9.07$, $p \leq .01$, and performed more intervention activities during the program than those who did not, M = 2.5 (SD = 1.9) versus M = 1.8 (SD = 1.8), $F(1,409) = 8.67$, $p \leq .01$. The average number of intervention activities carried out during the program was 2.2, with a range from 1 to 6. Overall, excursions were the most performed (80%), followed by learning activities (59%), creative/artistic activities (42%), cultural activities (42%), sporting activities (38%), and games (34%). The least chosen activities were volunteering (17%) and shared meals (16%). An average of 2.5 meetings took place with external community resources in order to perform the chosen activities. Overall, town hall resources were the most contacted (49%), followed by associations (35%), schools (29%), and cultural resources (16%). Less contact was made with sports clubs (10%) and other groups in the program (9%).

Second, we examined the impact of the activity-related variables on the cluster membership. Results revealed significant differences between the clusters in five of the six activity-related variables, with small to large effect sizes (Table 3). Adolescents belonging to Cluster 1, with mixed changes, were less likely to perform the pre-intervention activity, especially not a get-together. This group was also characterized by doing fewer excursions and by having more external meetings than Cluster 2, especially with town hall resources. Those belonging to Cluster 2, with negative changes, were characterized by performing a get-together as a pre-intervention activity and not group dynamics.

TABLE 3 Participants' distribution in the activity variables by the competence clusters (N = 410)

	1. Mixed changes (N = 110) M (SD) %	2. Negative changes (N = 170) M (SD) %	3. Positive changes (N = 130) M (SD) %	F/χ^2	p	ES η^2/V
Pre-intervention presence	65.2	85.1	71.3	9.71	.008**	.19
Pre-intervention activity				24.04	.002**	.25
Games	14	3.6	8.3			
Overnight stay	27.9	55.8	41.7			
Multiadventure	20.9	17.4	11.1			
Group dynamics	11.6	5.8	25			
Excursion	25.6	17.4	13.9			
Number of intervention activities	2.5 (1.8)	2.2 (1.8)	2.6 (2)	.97	.378	
Type of intervention activity						
Sport	45.6	43.8	26.3	7.23	.027*	.18
Creative/artistic	40.4	30	53.8	9.35	.009**	.21
Volunteering	14	6.3	30	16.5	.000***	.28
Excursion	64.9	86.3	85	11.39	.003**	.23
Cultural	36.8	51.3	36.3	4.52	.104	
Learning	64.9	58.8	56.3	1.06	.588	
Games	38.6	22.5	42.5	7.82	.020*	.19
Shared meal	22.8	18.8	8.8	5.51	.064	
Number of meetings	3.3 (2.8)	1.8 (2.2)	2.7 (2.9)	4.22	.016*	.05
Type of resource						
Town hall	62.7	40.2	47.7	7.17	.028*	.18
School	40.3	23.9	26.7	5.17	.075	
Association	42.6	20.5	44.2	12.95	.002**	.24
Sport resource	10	10.3	10.3	0.00	.998	
Other groups	7.8	5.7	12.2	2.27	.320	
Cultural resource	18.5	9.2	20.7	4.68	.097	

*$p \leq .05$. **$p \leq .01$. ***$p \leq .001$.

This group was also characterized by not engaging in creative or artistic activities, volunteering, or games, and by having fewer meetings with external resources. Finally, adolescents in Cluster 3, with positive changes, were characterized by performing group dynamics as a pre-intervention activity, by carrying out creative/artistic activities, volunteering, excursions, and games, but no sports, and by meeting up with associations.

4 | DISCUSSION

This study takes a comprehensive approach to the study of youth-led activities and their impact on person-centred competence profiles in the context of a community-based intervention program for at-risk adolescents. With regard to our first research question, benefits of the program were poor and mixed at an average level, showing increases in the adolescents' Self-concept, but also in Behavioural Avoidance. Before interpreting that the program did not work properly, it is important to examine at the individual level whom it benefits the most (Granger, 2010). The cluster analysis performed in this study has enabled us to capture the high variability in the adolescents' competence changes after participating in the "Building My Future" program. Three profiles of individual changes were identified, and sex, residential area, and group risk status were important sources of variation in the typology of changes. Participants in Cluster 1, with mixed changes (27%), were more likely to be boys and live in urban areas and experienced positive changes on all personal and community competences, except Task-oriented Strategy, which remained the same. Participants also increased the use of Cognitive-Behavioural Problem Solving, which is positive, but increased their Cognitive and Behavioural Avoidance as well, which is usually seen as a negative coping strategy (Dickson, Ciesla, & Reilly, 2012). It could be that adolescents are increasing their awareness of the problems that they face and trying to solve them positively, while also avoiding getting further involved and making their feelings worse. In previous studies, boys have been found to present higher levels of avoidance, especially in social situations, and this gender difference increases during middle adolescence (Eschenbeck, Kohlmann, & Lohaus, 2007).

Participants in Cluster 3 with positive changes (32%), who lived in rural areas and were placed in groups at psychosocial risk, increased their personal competencies the most and reduced their Cognitive and Behavioural Problem Avoidance, yet maintained the same level of community competences. As expected, at-risk adolescents from rural areas were overrepresented in the profile with more positive competence changes (Allen & Philliber, 2001). Our results indicate that mixing medium and high levels of psychosocial risk in the same group can be beneficial, a result also obtained in positive parenting programs that target at-risk families (Alvarez, Rodrigo, & Byrne, 2016). Experiential learning requires exposure to heterogeneous groups, which are more likely to reveal different points of view and alternative ways to react, a precondition that facilitates change (Byrne et al., 2014).

Cluster 2, with negative changes (41%), identifies participants with the worst achievements, which mainly account for the poor averaged results. These participants were placed in non-at-risk groups and experienced negative changes in their personal and community competencies. The lack of contrasting views may have diminished the possibility of creating a climate of experiential learning.

Our second research question examined whether a differential impact of activity variables may help further explain the patterns of interindividual variability, given the importance of implementation factors on program effectiveness (Durlak & DuPre, 2008). As we expected, adolescents who performed the pre-intervention activity carried out more modules and performed more intervention activities. Adolescents chose voluntarily to participate in the pre-intervention activity, so it is reasonable to think that this initial positive disposition can be in part explaining the later increased engagement in the program. Moreover, cluster results showed that differences in the design of the pre-intervention activity were associated with the poor achievements in personal and community competences in Cluster 2 and to the benefits in personal competences in Cluster 3. As expected, it is crucial to carry out an initial well-structured activity to promote team building (group dynamics) from the beginning of the program, as only spending time overnight with the rest of participants in get-togethers is not really beneficial if no organized group activities take place. It is also preferable to perform other activities rather than excursions, as shown in Cluster 1 with benefits in personal and community competences. These results are in line with theoretical expectations that recommend avoiding leaving adolescents with peers in less structured free time activities (Eccles & Gootman, 2002). Strengthening the peer group would prevent the occurrence of negative interactions that reinforce disruptive norms and negative behaviour patterns (Dworkin & Larson, 2006).

As expected, variations in the selection of leisure activities during the program that mobilized the use of community resources, and the planned meetings that took place, were critical factors associated with the poor results in Cluster 2 with non-at-risk participants and the benefits obtained in Cluster 3 with at-risk participants. Results showed that participants in Cluster 3, despite living in rural areas with fewer resources (Sharp et al., 2015), carried out creative or artistic activities, volunteering, excursions, and games, and met up with many associations to prepare and organize the activities, whereas this was not the case for participants in Cluster 2. Participants in Cluster 1, with mixed results, were also characterized by meeting up with town hall resources. Previous research has found that creative activities and volunteering are linked with higher reports of initiative, positive relationships, and social capital (Larson, Hansen, & Moneta, 2006; Vysniauskyte-Rimkiene & Matuleviciute, 2016). These types of activities work on meaning-making assets and interpersonal skills serving as opportunities to promote resilience in at-risk populations (Grych et al., 2015).

Some competencies, such as self-esteem and participation in organized activities, are known to decrease during adolescent years (Jarus, Anaby, Bart, Engel-Yeger, & Law, 2010; Robins, Trzesniewski, Tracy, Gosling, & Potter, 2002). Our results demonstrate that the potential strength of the program to counteract the developmental dip in those competencies seems to be more effective in the more vulnerable group of at-risk adolescents as compared with the non-at-risk group. Specifically, our intervention reinforced personal and social competencies that are usually undermined in at-risk adolescents. Intervention in this at-risk group has also been effective in promoting a more efficient

decision-making process, by decreasing the avoidant way of addressing problems that is also typical in adolescents with psychosocial risk (Ebata & Moos, 1994). More efforts should be made to increase these adolescents' self-awareness of collective efficacy and community participation (Talò, Mannarini, & Rochira, 2014) while performing the activities and connecting with community resources during the program.

5 | LIMITATIONS

Several limitations of the present study are noteworthy. First, we have not incorporated adolescents' reports of their personal experiences with their peers and facilitators during the performance of the activities. Second, we need more information on the main factors that drive the adolescents' activity choices in at-risk and non-at-risk contexts. Third, comparing our results to developmental change without the intervention was not possible because facilitators were not able to collect posttest measures of the adolescents placed in the waiting list. Fourth, we do not have information on the impact of the professionals' group management on the program results. Finally, evidence of program effectiveness is only provided for immediate changes yet not for long-term changes.

6 | CONCLUSIONS AND APPLICATIONS TO PRACTICE

The present study illustrates how a youth-led approach to leisure activities performed in community settings could be an effective strategy for intervention in at-risk adolescents. Altogether, our results provide a realistic and detailed vision that can guide practitioners into knowing who benefits more from the program and what types of activities achieve the best improvements. First, it is important for facilitators of community-based intervention programs targeting adolescents to carefully prepare the pre-intervention activity (i.e., group dynamics) to motivate participants and foster their continuation in the program. Second, we encourage practitioners in the youth development field to guide adolescents into choosing the intervention activities using a youth-led approach. Whether a game, a volunteering action, or a work of art, it is important for adolescents to be able to carry out an intrinsically motivated activity from start to finish. That means from the group thinking to the designing, to the planning, to effectively taking it on board and finally reporting the achievement to the community and reflecting on how it was possible, enabling success and positive feedback, which many adolescents are not used to receiving. Third, we have demonstrated that both non-at-risk and at-risk participants need to be engaged in these types of activities. If non-at-risk adolescents participate in activities solely focused on the amusing and joyful side of the experience, their performance after the program will end up worse than that of at-risk adolescents attending groups following carefully designed activities. This study has provided critical evidence for community intervention purposes and can help inform future decisions on preventive actions with vulnerable youth.

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