



Adult Mentor is one of twenty Maternal and Child Health (MCH) **National Performance Measures (NPMs)** for the Title V MCH Services Block Grant to States Program. This NPM is focused on increasing the percent of adolescents, ages 12 through 17, who are reported by a parent to have an “adult mentor” – at least one other adult in their school, neighborhood, or community who knows them well and who they can rely on for advice or guidance.

For [Adult Mentor](#) there are 14 evidence-based strategies from [MCHbest](#) and 1 field-based practice from [Innovation Hub](#) (see page 3)

The [What Works Evidence Accelerators](#) provide background information and a summary of effective strategies. The strategies support having a connection to a caring adult, which is a protective factor associated with several measures of child well-being.¹ Emerging evidence has identified programs to foster youth-adult partnerships in a wide variety of settings, including after-school programming.²

Overview. Adolescents who have mentors use them as sources of guidance, emotional support, and advice. Mentors can be teachers, coaches, religious leaders, neighbors, or other adults in the community.³ They create a safe space where discussions can occur without judgment. Mentors can offer support in challenges that adolescents face such as relationships, school, career planning, and acquisition of necessary life skills.⁴

Effective mentoring relationships include common components such as open communication and accessibility; mutually-established goals; shared enthusiasm; a supportive, nurturing relationship; mutual respect and trust; and an ongoing exchange of knowledge. Mentors should facilitate a sense of independence and collaboration and serve as role models to their adolescent mentees.⁵

Studies have shown that adolescents with mentors have higher grades, better school attendance, and are more likely to graduate high school and pursue higher education.⁶ Adolescents with mentors appear to be less likely to engage in risky behaviors like substance abuse, delinquency, and early sexual activity.⁷ Mentors can help adolescents explore career options, develop job skills, and build professional networks, increasing their chances of success in the workforce.

Mentors can provide a safe space for adolescents to explore their identities, values, and goals, contributing to a stronger sense of self and belonging.⁸ Mentorship can provide emotional support and guidance, potentially reducing symptoms of anxiety, depression, and other mental health challenges.⁹

Data. This NPM is measured through data collected from the [National Survey of Children’s Health \(NSCH\)](#). In 2022, 86.3% of parents reported that there is at least one adult in their child’s school, neighborhood, or community who knows them well and who they can rely on for advice or guidance.¹⁰

Social Determinants of Health (SDOH).

Adolescent-adult mentorships are affected by many of the same [SDOH](#) that affect adolescents in general: access to services, cultural and linguistic barriers, implicit biases, power dynamics, trauma, and chronic stress.¹¹ Strategies for effective mentorship that address these issues include:

- **Awareness.** Mentors should be knowledgeable about SDOH and related impacts on adolescents.
- **Culturally competent practices.** Programs should prioritize cultural competency training for mentors and ensure culturally sensitive practices throughout the mentorship journey.¹²
- **Holistic support and collaboration.** Mentorship programs should collaborate with organizations addressing SDOH factors to provide holistic support for adolescents and connect them with needed resources.¹³
- **Advocacy and empowerment.** Mentorship programs can empower mentees and mentors to become advocates for social justice and policy changes that address SDOH issues.¹⁴
- **Flexibility and adaptation.** Mentorship programs should be flexible and adaptable to meet the individual needs and challenges of adolescents facing SDOH-related factors.

Health Equity. There are disparities in the number of youths that have a mentor according to gender, race and ethnicity, age, ability, and household income. Mentorship rates are not equal; adolescents from lower-income families and/or neighborhoods have less access to natural mentors during this critical period in development, and programs designed to provide novel opportunities and increased social capital to youth from marginalized backgrounds have the potential to reproduce rather than reduce inequality.^{15,16}

Strategies to achieve equitable and inclusive access to safe and convenient opportunities for youth to have an adult mentor relationship include:

- Working with schools, community organizations, and businesses, especially those in underserved areas, to promote mentoring and raise awareness of the benefits of mentoring for youth and adults.
- Matching adolescents and mentors considering cultural backgrounds, languages, and lived experiences to foster better connection and understanding.¹⁷
- Equipping mentors with knowledge and skills to recognize and respond to trauma in adolescents, creating a safe and supportive environment.¹⁸
- Offering virtual mentoring offerings to allow opportunities for rural youth and youth with issues with transportation options.

Children and Youth with Special Health Care Needs (CYSHCN) and Children with Disabilities. Mentorship and navigation programs have been identified as components of an “ideal program” for CYSHCN to improve health outcomes during transitions.¹⁹ To ensure that mentorship programs have the greatest impact for children regardless of need or disability, strategies include:^{20,21}

- Recruiting mentors with lived experience of need or disability to provide relatable role models and demonstrate possibilities for success.
- Organizing peer support groups or connect mentees with adolescents with similar disabilities to foster belonging and shared experiences.
- Encouraging involvement of people with lived experience in the design, decision-making, and implementation of mentorship programs.

Key Resources. Systematic reviews suggest that youth mentoring programs can promote positive outcomes, particularly when mentors employ targeted approaches matched to the needs of their adolescent mentees.^{22,23,24,25} The What Works for Health Database, developed by the University of Wisconsin Population Health Institute, has identified several evidence-based programs:

- [Big Brothers Big Sisters Program.](#)
- [Dropout Prevention Programs.](#)
- [Intergenerational Mentoring and Activities.](#)
- [Mentoring Programs for High School Graduation.](#)
- [Mentoring Programs to Prevent Youth Delinquency.](#)

Search the [Established Evidence database](#) for peer-reviewed research articles related to strategies for improving access to a mentor.

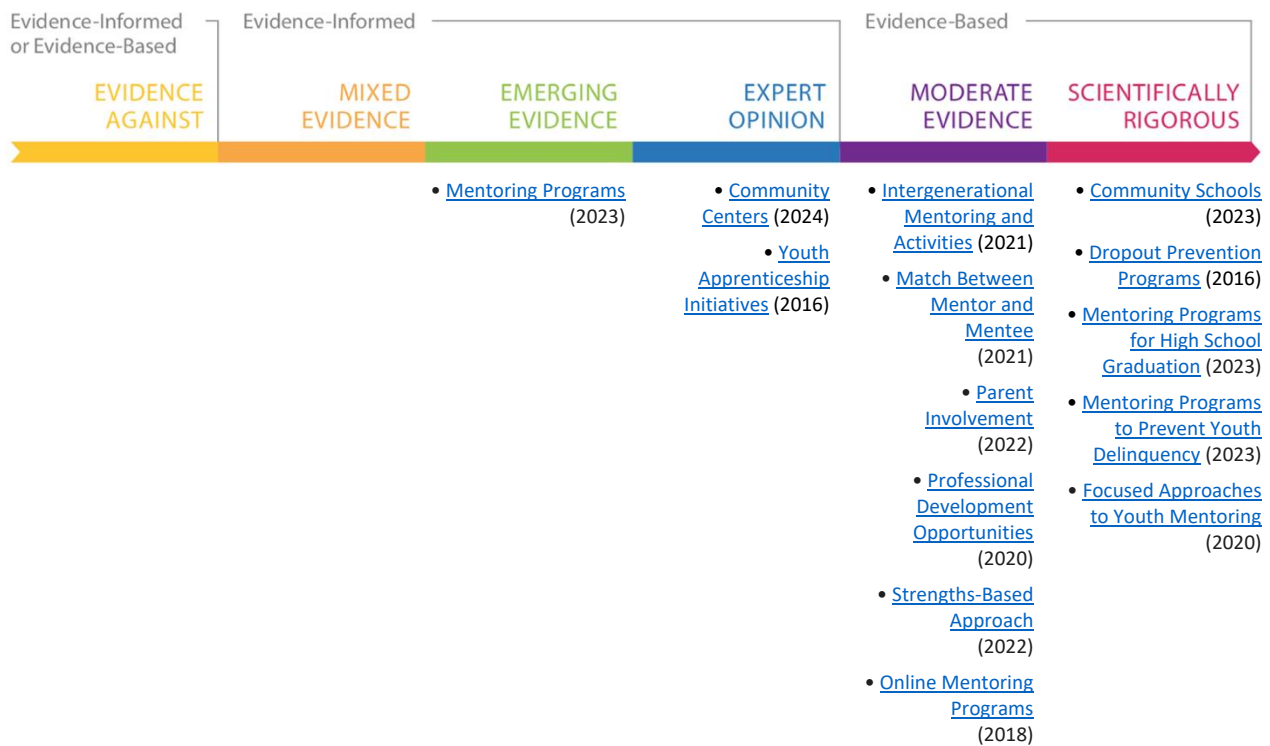
Find [field-based resources](#) focused on improving access to a mentor relevant to Title V programs in the [MCH Digital Library](#).

Partnership and the Role of Title V. Title V can use these approaches to help facilitate change:

- Collaborating with other government agencies, private foundations, and non-profit organizations to leverage funding for mentorship.
- Establishing and enforcing quality standards for mentorship programs to ensure program effectiveness and protect adolescent mentees.²⁶
- Collaborating with schools, community centers, libraries, and faith-based organizations to utilize existing infrastructures.
- Offering training, technical assistance, and resources to enhance the quality and effectiveness of existing mentorship programs within the community.²⁷
- Conducting public awareness campaigns to highlight the benefits of mentorship for adolescents and their health, encouraging both mentors and adolescents to participate.²⁸
- Providing a variety of mentorship models (individual, group, virtual) to accommodate different preferences and accessibility needs.
- Integrating interventions within mentorship programs that address specific health concerns like substance abuse, mental health, and sexual health.²⁹

Adult Mentor Strategies. This page summarizes the latest strategies and practices that have emerged as potential approaches for increasing the percent of adolescents, ages 12 through 17, who have one or more adults outside the home who they can rely on for advice or guidance. It provides a framework to identify, understand, and implement “what works” in creating new Evidence-based/informed Strategy Measures (ESMs). Use the links below to access strategy and practice details, approaches, supporting evidence, outcomes, and examples of how Title V agencies are either using these strategies directly or adopting components of the intervention that address this NPM.

Evidence-Based/Informed Strategies. 14 strategies have emerged from studies in the scientific literature as being effective in advancing the NPM. They can be adopted or adapted to meet your program needs. More information on these strategies can be found in the MCH Evidence Center’s [MCHbest](#) database.



Field-Based Practices. 1 practice from a state-/community-based program has emerged as a potential approach for advancing the NPM for specific communities or populations. It can be used as a model to meet your program needs. More information can be found in the Association of Maternal and Child Health Program’s (AMCHP’s) [Innovation Hub](#).



Additional Practices from the Field:

- The [National Youth Mentoring Initiative](#) supports efforts by Boys & Girls Clubs to provide adult mentors.
- The Community Toolkit has developed a learning module on [Building Youth Mentorship Programs](#).
- The [New York State Mentoring Program](#) is the nation’s first school-based one-to-one mentoring program. This highly successful program screens and trains volunteers and matches them to children in their communities.

Key Findings. The following are key findings emerging from the literature:

1. Pairing mentors and mentees based on ethnicity, race, class, and gender results in longer retention and stronger interpersonal feelings of warmth, trust, and respect.^{29,30,31,32} If pairing on these traits is not possible, then training and supervision of cultural and relational dynamics is imperative.^{29,33,34}
2. Mentor motivation has a significant impact on the success of the match and mentor retention.^{35,36,37,38,39} This motivation is a desire to support and guide youth towards positive outcomes and a belief in the importance of investing in the next generation.^{40,41}
3. Setting clear expectations and providing pre-match training with mentors has a positive correlation with the mentor's competency skills.^{42,43,44,45}
4. Understand the needs of youth when implementing mentoring programs.^{46,47} Identifying mutual interests, compatible personality traits, and goals for mentorship results in better matching and increased feelings of mattering, belonging, and engagement.^{45,47}
5. The length of the relationship and the activities conducted while mentoring impacts overall outcomes.^{39,48} Activities that are targeted, problem-focused, and instrumental lead to higher levels of positive youth outcomes.^{45,50,51}

Discussion: Research, Practice, Partnership.

Research. Multiple strategies are emerging as potential approaches to advance this NPM, but they have not been studied with enough rigor to be included in the evidence-based continuum. Additional research is needed to verify outcomes, but initial studies have shown promise of these strategies in MCH settings:

- Establishing online programs to increase options for youth in a variety of settings.⁵²
- Exploring why some relationships end prematurely to learn ways to better support the ongoing mentoring relationship.⁵³
- Developing the role of staff support to support the mentor and mentee relationship.⁵⁴

- Addressing expectations for the mentor relationship to increase the frequency of successful matches.⁵⁵
- Investigating the impact of mentoring on the mental health of young people to further improve youth mental health.⁵⁶

Practice. The following tools can be used to translate evidence to action to advance this NPM:

- [Elements of Effective Practice for Mentoring \(Mentor\)](#). An online guide with guidance to establish a mentoring program and addresses special populations.
- [Resources for Mentoring Programs](#) (National Mentoring Resource Center). This website contains resources reviewed by the National Mentoring Resource Center Research Board.

Partnership. The following organizations focus efforts on advancing FCC:

- [MENTOR](#). Created over 30 years ago to support a youth mentoring field and movement.
- [National Mentoring Resource Center](#). Provides mentoring tools, training, technical assistance, research summaries, and other information for youth mentoring programs.



Frameworks and Tools for “What Works.”

Use this accelerator to strengthen current or new programs that align with multiple MCH frameworks across domains and settings. Access toolkits related to these frameworks for additional resources:

- [MCH Evidence Framework](#)
- [Blueprint for Change for CYSHCN](#)
- [Maternal Health Toolkit](#)
- [Life Course and Social Determinants Brief](#)

Need More Help? [Contact us for training and technical assistance](#) customized to your needs.

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