Building on Strengths: Tools for Improving Positive Outcomes Among Boys and Young Men of Color

Executive Summary: Main Findings on Protective Factors and Programs

Using Prevention Research to Guide Prevention Practice

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INTRODUCTION

Prevention practitioners working at the state, tribe, jurisdiction, and local levels are well-positioned to more effectively address the diverse substance use, misuse, and related behavioral health needs of the populations they serve, including traditionally underserved groups such as boys and young men of color.

State- and frontline practitioners ensure that federal Block and discretionary grant funds are spent on effective solutions to prevent substance use and misuse. They do this by implementing SAMHSA's Strategic Prevention Framework (SPF), a five-step planning process that supports the systematic selection, implementation, and evaluation of evidence-based, culturally appropriate, sustainable prevention activities. For example, over the past five years state- and local-level prevention practitioners have:

- Identified and used behavioral health indicators and other data to inform prevention planning for priority populations, such as Native Americans and Pacific Islanders.

- Addressed data gaps for hidden or hard-to-reach populations (e.g., for 18- to 25-year olds not attending college)

- Incorporated cultural practices into strategic prevention planning efforts

- Identified and used "shared" risk and protective factors (i.e., factors common to both substance misuse and mental health outcomes) to inform the selection of prevention programming and engage stakeholders from multiple disciplines in prevention activities.

- Directed prevention efforts to reduce behavioral health disparities, for example, by increasing awareness of adverse childhood experiences, such as abuse, neglect, and crime in the home, that are strongly related to the development and prevalence of a wide range of health problems.

- Supported the implementation of evidence-based programming by, for example, increasing awareness of factors that contribute to effective program implementation and capacity to monitor and evaluate prevention programming.

Building on past and current work at the state and local level, SAMHSA's Center for the Application of Prevention Technologies (CAPT) has developed three practice support tools

that highlight research evidence on the experience of boys and young men of color, specifically, and youth of color in general. These tools include:

- [Ensuring the Well-being of Boys and Young Men of Color: Factors that Promote Success and Protect Against Substance Use and Misuse](#). This tool distills information from cross-sectional and longitudinal studies on factors that have been shown to either protect boys and young men of color from substance use and misuse, mitigate risks associated with adverse experiences or situations, or promote well-being.

- [Positive Approaches to Preventing Substance Use and Misuse Among Boys and Young Men of Color: Programs and Strategies At-A-Glance](#). This tool provides summaries of interventions that have been shown to promote protective factors and positive youth development for boys and young men of color in the United States. These programs and strategies help young people develop social skills, civic and cultural competencies, positive attitudes toward community, and a strong sense of identity— examples of the abilities and attitudes that allow a young person to succeed and thrive.

- [Sources of Data on Substance Use and Misuse Among Boys and Young Men of Color](#). This tool offers a quick overview of key national, state, and local data sources that provide substance use consumption, consequences, and protective factor data for this population.

Each tool is based on a review of the literature; guidelines for the reviews are described in their respective tools.

HIGHLIGHTING PROTECTIVE FACTORS

Research suggests that boys and young men of color are at increased risk for poor educational, economic and health outcomes. Such disparities have been linked to social determinants such as historical trauma,[1] cultural subjugation and geographic marginalization or segregation,[2] discrimination and minority stress,[3] gender norms and gender role stress[4] as well as risk behaviors that may occur secondary to these social determinants—for example, reduced job prospects and underemployment, access to services, and exposure to violence[5]. What we know less about and seldom dwell on are those factors that promote well-being from the start or protect against substance misuse, specifically.

Far too often, practitioners tend to focus on deficits of or risks faced by youth of color. Although such a focus is important for identifying and alleviating sources of oppression, discrimination and economic inequality, concentrating on adversity has overshadowed the strengths or assets that communities of color summon to raise their children.[6] Therefore, this tool shifts the attention away from the many risks that youth of color face, and instead focuses on the constellation of factors that protect against substance misuse, including the unique strengths of this population. An emphasis on strengths and protective factors is in keeping with other emerging theories on positive behavioral health and youth development. For example, these theories propose that: positive mental health focuses more on coping than mental breakdown;[7] subjective well-being asserts greater influence on the environment than the other way around;[8] coping strategies and social supports can modify a person's reaction to environmental stressors and minimize poor health outcomes;[9] and youth are assets to be developed and should be provided the means and opportunities to build successful futures.[10]

> **Note, however, that a focus on protective factors and positive approaches alone is not sufficient to prevent substance misuse. Comprehensive prevention approaches that address risk factors as well as protective factors operating at the individual, relationship, community, and society levels simultaneously are needed to produce change.**

APPLYING A SOCIO-ECOLOGICAL APPROACH TO PREVENTION

Health disparities are created and can be averted by considering multi-layered determinants of health behaviors. As noted above, our behavior happens in context. We are influenced not only by traits specific to us or what we think and believe, but by our relationships with others, the institutions and communities to which we belong, and the broader society in which those institutions are embedded. The socio-ecological model comprises multiple levels that consider the different contexts and settings with which a person interacts. These levels include the following: [11, 12]
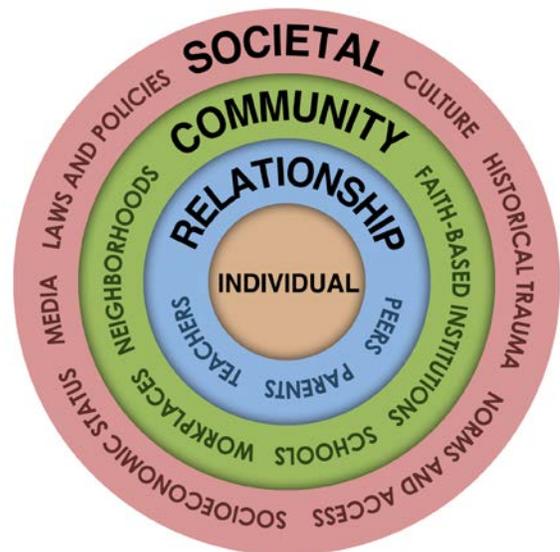
- **Individual**: Includes those factors specific to the individual, such as age, education, income, health, and psychosocial strengths.

- **Relationship**: Includes an individual's closest social circle—family members, peers, teachers, and other close relationships—that contribute to their range of experience and may influence their behavior.

- **Community**: Includes the settings in which social relationships occur, such as schools, workplaces, and neighborhoods.

- **Societal**: Includes broad societal factors, such as social and cultural norms. Other significant factors operating at this level include the health, economic, educational, and social policies that promote economic, social, or health equity between populations.

What goes on at each level is influenced by—as well as influences—the other. For example, a society that offers greater legal protections for lesbian and gay youth (societal level), may support more Gay-Straight Alliances in schools which may improve school climate for sexual minority students (community-level), therefore reducing the incidents of victimization of sexual minority students (relationship level), and leading to a reduction in stress experienced by a sexual minority student (individual level).

The factors and programs included in this suite of CAPT tools are organized according to the levels of the socio-ecological model. Within each level, the factors are further divided by study population. These include:

- Boys and/or young men of color
- Young populations (male and female) of color
- Populations predominantly of color (more than 75% of the sample was ethnic/racial minority)

We included studies with both young female and male populations of color because findings from these studies have implications for boys and young men of color. We have defined 'boys and young men of color' as males aged 25 years or younger who identify as African-American/Black, American Indian/Alaska Native, Asian American, Latino/ Hispanic, Pacific Islander/Native Hawaiian, or subpopulations of these pan-ethnic and -racial groups (e.g., Afro-Caribbean, Ojibwe, Mexican). Similarly, we define 'girls and young women of color' as females aged 25 years or younger who identify as African-American/Black, American

Indian/Alaska Native, Asian American, Latino/ Hispanic, Pacific Islander/Native Hawaiian, or subpopulations of these pan-ethnic and -racial groups.

Primary findings from our suite of decision support tools on boys and young men of color are summarized below, organized by levels of the socio-ecological model.

PROMOTING CHANGE AT THE INDIVIDUAL LEVEL

Individual-Level Protective Factors

Characteristics indicative of **social-emotional competencies** appear frequently in the research literature as factors that protect against substance use and misuse, as well as help promote well-being; therefore, it is important to understand what these competencies are because of the volume of evidence suggesting their importance. Social-emotional competencies include self-awareness, self-management, social awareness, relationship skills, and responsible decision making. According to the Collaborative for Academic, Social, and Emotional Learning (CASEL), those who have developed these skills are better able to:[13]

- Understand how one's thoughts and emotions affect one's behavior; assess one's strengths and limitations; be optimistic

- Regulate one's thoughts, emotions, and behaviors in different situations; manage stress; control impulses; set and work toward goals

- See different perspectives and empathize with people from diverse backgrounds; understand social or cultural norms for behavior; identify social support provided by family, school and community

- Establish and maintain healthy relationships; develop appropriate communication strategies; cooperate with others; resist negative peer or social pressure; negotiate conflict productively; seek and offer help as needed

- Make constructive and respectful choices regarding behavior and social interactions that are grounded in ethical standards, social norms, evaluation of consequences, and well-being of self and others

In addition to social-emotional competencies, youth of color who have a **positive ethnic self-concept** are less likely to misuse substances and more likely to experience emotional and social

well-being. Ethnic self-concept includes having a strong and positive sense of ethnic or racial identity, participating in cultural traditions and speaking native languages. For example, greater ethnic orientation is associated with lower likelihood of cigarette and marijuana use among Hispanic 9th grade students in Southern California.[14] However, research indicates that being able to navigate two or more cultures (having a bicultural or multi-group orientation), including dominant and heritage cultures, also can be beneficial. Bicultural orientation is associated with an optimistic outlook among Latino middle school students;[15] and multi-group ethnic identity is associated with lower prevalence of drug and alcohol use among Dominican descent adolescents.[16]

Youth who participate in **extracurricular activities**, such as school sports,[17] are less likely to use substances and more likely to report or demonstrate well-being. For example, urban African American and Latino males who were members of an athletic team (school- or community-based), participated in community groups, attended religious services, and/or did activities with their family were more likely to hold prosocial values (e.g., think it's important to get educated, have a good paying job, and have a positive community reputation).[18] Other studies looked at participation in sports as being associated with lower odds of smoking[19] and using steroids.[20] Similar results are noticeable across various races and ethnicities; and with both boys and girls.

Similarly, participation in **prosocial activities**—that is, acts of kindness that involve helping, sharing, or donating goods and services for the purpose of benefiting another or society as a whole—is also associated with positive outcomes for youth of color. Evidence suggests that prosocial behaviors are linked to happiness and vice versa—happy people have the personal resources to contribute, but providing opportunities for prosocial behavior increases well-being and other prosocial activities.[21] These links might explain, too, why those with **internal assets** such as confidence, optimism, hope, and motivation also report more positive emotional well-being.

Other individual behaviors and characteristics have been found to specifically protect against substance misuse and promote well-being among youth of color. These include the following:

- **Attitudes and beliefs about substance use.** Perceiving substances to be harmful and/or disapprove of use can be protective against future alcohol and drug use.

- **Participation in religious activities.** Attending religious services, being involved in religious activities and having religious values and beliefs are protective especially as seen in studies that include both boys and girls of color as participants.

- **Academic performance.** Achieving high grades in school and feeling a sense of attachment to school is associated with lower rates of substance use and other risk behaviors as well as improved social skills and study habits.

- **School attachment.** For boys and young men of color, in particular, school involvements, enjoying school, perceived school support and high readiness to learn are associated with lower rates of substance misuse.

Individual-Level Prevention Programs

Most prevention programs designed to bolster positive outcomes for youth of color aim for individual behavior change and target universal populations. However, only two programs *(Joven Noble; Sport Hartford Boys)* were designed for or evaluated specifically with boys and young men of color. The majority (n=15), were designed for or evaluated with youth of color (boys and girls). Five were designed for or evaluated with all youth, but demonstrate outcomes for youth of color.

If you look at the setting where these programs take place, the majority occur at school, either during or after school, which makes sense due to the amount of hours youth spend in that setting. Two programs predominately occur in the general community *(Big Brothers/Big Sisters; Prodigy).* One program *(Residential Student Assistance Program)* gets implemented at a residential child care facility, but that is with a selective population that is at high-risk and has multiple problems.

As for protective factors, social-emotional competencies were the most commonly identified protective factors associated with the prevention strategies included in this document. This coincides with the research suggesting that social-emotional competencies are associated with promoting well-being and preventing substance use and misuse.[22] Interestingly, regarding other protective factors, seven programs infused elements of cultural heritage into programming. Past research has demonstrated that having a strong cultural identification can make adolescents more able to benefit from protective factors than adolescents who do not have this strong identification.[23] Three programs infuse Native American or Alaska Native traditions, one program infuses African traditions, one program infuses predominantly Hawaiian and Filipino traditions, and two programs infuse Hispanic/Latino traditions.

Programs that focus on strengthening individual assets are associated with reductions in behavioral problems generally and more specifically substance use (i.e., alcohol, cigarette, and marijuana) as well as improved psychosocial skills, school commitment and academic efficacy.

PROMOTING CHANGE AT THE RELATIONSHIP LEVEL

Relationship-Level Protective Factors

Having healthy and high-quality relationships with family, friends, and others is especially beneficial to youth of color as well as to the general youth population. General family factors include: bonding, communication, cultural practices, involvement in school, relationship quality, rule and reward structures, social support, socio-economic status, structure, parent mental health, and general functioning. Other major influences at the relationship level include peer and teacher support, and having adult role models other than parents.

A strong family unit can also provide a foundation for healthy development, with the relationship quality between parents and children affecting a child's life beneficially. For example, one research study demonstrated that black and Hispanic adolescents, and emerging adults who report having **positive parent-child relationships,** are likely to report greater agency in life, such as the ability to plan ahead, be self-efficacious, and be optimistic about the future.[24] Family relationships may buffer external or environmental stressors, as well. Positive parent-child relationships—characterized, for example, by open communication, instrumental and emotional support, indirect expressions of caring, parental control, and valued relationship qualities[25]—are associated with **family attachment** which provides protection against illicit drug use[26] and related substance misuse problems.[27]

Attachments to parents, or individuals like a parent, seem particularly important in buffering stressors and promoting well-being. **Maternal warmth**, for example, is linked to an increase in pro-social behaviors for American Indian adolescents experiencing high adversity.[28] Close maternal relationships can also enhance social skills[29] and enhance school readiness.[30] **Connections to fathers** are associated with lower odds of crack use among African American youth[31] and alcohol use among Latino youth,[32] as well as lower substance use severity among African American juvenile offenders.[33]

General family functioning and the specific ways parents manage the family by, for example, implementing rules and rewards and monitoring child behavior influences developmental success and substance misuse. **Parental monitoring**, which involves parents knowing where their children are when they are not at home, knowing who their children's friends are, and keeping track of their children's activities, can be protective against substance use and misuse. For example, parental monitoring behavior is associated with delayed onset of alcohol use,[34] and lower alcohol and substance use in general, among youth of color.[35] Positive family

management strategies also are associated with child social-emotional competence[36] which is a key protective factor at the individual level. These strategies include a combination of family practices such as open parent-child communication, parental warmth, parental monitoring, parent homework engagement, and appropriate discipline.

Families teach children about the norms, values, and expectations of their particular cultural group. There is some evidence to suggest that **family cultural practices and traditions** promote positive adaptation among youth of color. Parent efforts to teach their children about cultural practices and background is associated with lower levels of substance abuse[37] as well as lower levels of driving under the influence.[38] Family cultural practices and traditions are thought to offer protective benefits by promoting children's positive ethnic self-concept[39] which, as noted above, is associated with both lower rates of substance misuse as well as emotional well-being.

Peer support seems to be especially important in protecting against substance use and misuse. Friendships can provide informal social support, and help perpetuate the message that it is wrong for youth to use substances. If friends do not support substance use behavior, it is less likely that a youth will participate in that behavior.[40]

Relationship-Level Prevention Programs

Family functioning is affected by stressors in the larger environment. For this reason, many of the family functioning prevention programs are designed to help families deal with these stressors or buffer their children from them. Environmental stressors can sometimes push families into extremes—either dysfunction where family competence declines, or the opposite —families gain competence and thrive in adverse circumstances.[41] Family systems theory provides some explanation for why this is: Families with structures, roles, and processes in place are better able to handle crises and stressors, and therefore can successfully adapt to adversity. Some of these processes include such things as meals together, open communication, clear rules, and so forth.[42] Programs that focus on family functioning (e.g., quality of relationships and family management practices) typically target patterns of behavior in families that are detrimental to child well-being (e.g., child neglect, lack of boundaries, and lack of communication) while strengthening practices that are likely to promote well-being and protect against risk behaviors. Oftentimes, such programs are designed to bolster the protective power of families since families are the first line of defense in adverse circumstances. Families can either pass along the stressors of the larger environment or filter these in order to protect children.

In our search of evidence-based registries and the evaluation literature, we found 16 programs targeting relationships as the unit of change. Programs focusing on family systems and family behavior help families learn new or reinforce existing strategies that may benefit their children. All the programs identified in our search aim to increase positive family functioning. In contrast to programs focused on individual-level change, only five are implemented universally. Eight of them are specifically designed for youth of color who are exhibiting behaviors that place them at greater risk for negative outcomes. Many of the family-based programs are implemented in multiple settings—home, school, and sometimes community.

Programs that focus on family functioning are associated with reductions in behavioral problems, generally, and, more specifically substance use, risky sex, and delinquency as well as improved parent-child communication and academic performance.

Interestingly, our search did not yield any programs focused on peer influences. Research focusing on protective factors with youth of color (see above) shows that peer support protects against substance use behaviors. Friendships can provide informal social support, and help perpetuate the message that it is wrong for youth to use substances. Because of this connection, programs that focus on peer interaction and friendship networks may be an innovative approach to future prevention programming for youth of color.

PROMOTING CHANGE AT THE COMMUNITY LEVEL

Community-Level Protective Factors

The actual setting where social relationships occur can affect an individuals' behavior. However, less is known about community-level influences than individual- and relationship-level ones. Nonetheless, recent studies do suggest that certain characteristics in community settings may prevent substance use and promote well-being for youth of color. These characteristics include **community attachment** as well as **living in strong, socially cohesive neighborhoods**. Neighborhood attachments are often assessed as sense of belonging or connectedness to one's geographically defined community, having community members who can be counted on for help, or being satisfied with or happy living in one's neighborhood. Neighborhood strength, on the other hand, embodies not only a strong sense of communal identity, but also civic participation and the ability to influence local policies. African American adolescents living in communities with strong sense of identity, resources, civic participation, influence on local

policies, and efforts to address alcohol use were less likely to use alcohol.[43] Individuals living in communities with these kinds of ties and collective abilities may be less likely to use substances because they fear communal retribution or rejection. Communities with these attributes also may be more empowered to put in place policies that deter substance misuse and promote well-being.

Moreover, **communities where individuals feel safe and free from violence** also promote well-being and protect against substance misuse. For example, neighborhood safety reduces substance use disorders among Latino young adults, and African American children exposed to lower levels of community violence exhibit greater self-control and cooperation in preschool.[44]

A **positive and supportive school climate** also was found to promote well-being and protect against substance use and misuse. The National School Climate Council defines school climate as "the quality and character of school life" which is "based on patterns of students', parents' and school personnel's experience of school life and reflects norms, goals, values, interpersonal relationships, teaching and learning practices, and organizational structures."[45] School climate attributes found to influence minority youth outcomes include, for example, attending schools that reward prosocial involvement;[46] and include students who are highly motivated to achieve academic success and committed to school,[47] perform well academically and have good attendance records,[48] and perceive their school to have a positive climate.[49]

Other community-level factors have been found to specifically protect against substance use and misuse:

- **Living in communities that reward youth for prosocial involvement** may be protective against current marijuana use among Hispanic youth.[50] Communities that value youth as assets offer opportunities for youth to contribute. As noted above, such prosocial involvements are linked to well-being and lower rates of substance use and misuse.

- **Living in neighborhoods with high immigrant populations** can protect Mexican-heritage 7th graders from alcohol, cigarette, and marijuana use.[51] It is likely that living in such communities reinforces values and traditions specific to Mexican culture and this encourages families to teach their children about such traditions which in turn promote individual sense of positive ethnic self-concept that protects against substance misuse.

Similarly, several community-level factors have been found to specifically promote well-being. **Access to center-based care prior to entry into kindergarten** promotes growth in children's social skills.[52] Youth discharged from foster care at older ages are more likely to show signs of

resilience (i.e., ability to cope with adversity).[53] Thus, foster care organizations with policies promoting older age at discharge may be more likely to see positive outcomes among participating youth.

Community-Level Prevention Programs

Community ties and neighborhood strengths can be both health promoting and protective against substance misuse. Our search yielded eight programs that were designed to create change at the community level. Four programs were designed or evaluated with youth of color (boys and girls) and four with all youth, but demonstrated outcomes specifically for youth of color. Our search did not produce any community-level programs that were designed or evaluated with boys and young men of color specifically.

The majority of community-level programs (n=7) were designed to impact the school environment—an important setting because youth spend much of their day there.[54] In general, a positive school experience, such as one that involves supportive peers, teacher influences, and opportunities for success (academic or social) is associated with adolescent resilience in general.[55] Some programs are integrated into existing curricula and provide training for teachers on behavior modification strategies (e.g., *PAX Good Behavior Game, PeaceBuilder Prevention Program)* or educate teachers about emotional development (e.g., *Classroom Consultation for Early Childhood Educators Program).* These programs aim to help teachers better manage their classroom, reduce violent and delinquent behaviors at school, and increase prosocial behavior among students. Other programs provide guidance to teachers (or other instructors) on how to implement specific classroom or school-wide activities with the goal of creating a school and classroom climate that is more supportive of students (e.g., *HighScope, Positive Action).*

Some school-based programming extends outside the classroom and school setting and involves other stakeholders, such as parents (e.g., *Project SUCCESS)* and peers (e.g., *FastTrack).* Involving multiple stakeholders and targeting other levels of influence (i.e., family relationships) can provide a more holistic and comprehensive approach to health promotion and the prevention of substance use and misuse; these approaches are often is associated with successful outcomes.[56] Consider, for example, the *Child-Parent Center*—an alternative school that provides preschool and kindergarten education as well as serves as a social services hub for family resource distribution.

While the school setting is particularly pertinent to youth, neighborhood characteristics also influence youth behavior (see above). Therefore, strategies or programs that intervene to make

communities safer or to increase opportunities for youth to connect positively to their neighborhood through civic participation may have positive health benefits. Neighborhood-level programs do show promise, however, and are beginning to develop an evidence base. For example, housing interventions such as rental vouchers and relocation to low-poverty neighborhoods show potential in affecting social, economic, and environmental well-being because of their ability to reduce overcrowding, segregation, and concentrated poverty in low-income neighborhoods where people of color often reside. As of yet, these types of neighborhood-level strategies have not demonstrated effectiveness regarding well-being and substance misuse among youth of color. There needs to be further research to assess their impact on health improvements.[57]

The outcomes associated with the community-level programs that we did review include: increased well-being (i.e., increased healthy attachment to significant adults; increased self-control; increased initiative; better social-emotional development), increased academic success (i.e., more likely to complete high school; performing better in math and reading), reduction of delinquent behaviors (i.e., fewer arrests for drug crimes), and reduction in substance use (i.e., lower rates of ever used marijuana; less likely to use tobacco, cocaine, or heroin by grade 8).

PROMOTING CHANGE AT THE SOCIETY LEVEL

Society-Level Protective Factors

There are few recent studies on societal factors that protect against substance use and misuse, and that promote well-being among youth of color. At the societal level, **cultural milieu** and **immigrant status** were found to be protective. **Cultural milieu** refers to the values, beliefs, and norms of the general environment. When that milieu favors ethnic or cultural heritage practices, it is associated with, for example: lesser likelihood of illicit drug use;[58] fewer alcohol abuse and dependence symptoms;[59] school attachment;[60] pro-social behaviors;[61] and lower odds of drinking initiation.[62] **Immigrant status**, specifically, being born outside the United States, is associated with lesser likelihood of lifetime alcohol use among Latino middle school boys and less frequent substance use among Latino youth in general. However, there are exceptions to these studies: American orientation, for example, was found to be associated with lower odds of marijuana use among Hispanic early adolescents.

Socioeconomic status or one's social status (whether perceived or defined by other indicators) is typically protective when that status is relatively high. However, indicators of economic

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disadvantage such as free or reduced lunch status are associated with lower likelihood of alcohol use. This may be due to the fact that groups of young individuals with limited resources are less inclined to spend those resources on alcohol.

Other factors notably missing from recent studies of societal influences are those that focus on policy contexts which may include policies thought to promote health equity, but for which there is limited empirical evidence linking them to improvements in health outcomes, such as emotional well-being and substance use behaviors among youth of color.

Society-Level Prevention Programs

Based on our search parameters, we were unable to identify any societal-level programs designed for or evaluated with youth of color. One reason for this dearth of programs: Compared to those at the individual and relationship levels, programs and strategies designed to produce societal and community-level change are difficult to evaluate in a way that meets the rigorous research criteria applied by evidence-based registries.[63] Moreover, societal-level policies and programs that have the potential to promote positive well-being among youth of color may exist, but may not have been evaluated to ascertain their influence on health outcomes, including emotional well-being and substance misuse, among populations of color.

To begin to identify societal-level strategies that have the potential for increasing well-being and reducing substance misuse, it is important to examine protective factors that research suggests are associated with those positive outcomes (see above). Among these factors is socioeconomic status. Worth mentioning are several types of policies thought to enhance socioeconomic advantage and promote health equity, but that require further study to demonstrate their associations with improvements in health outcomes, such as emotional well-being and substance use behaviors among youth of color. These include policies that intend to:

- Increase access to comprehensive early childhood education.[64,64]

- Increase the income security of the economically disadvantaged (populations of color are disproportionately low income).[64, 65]

- Counteract the targeted marketing that encourages cigarette and alcohol consumption among populations of color.[65]

- Reduce residential segregation and promote housing choice and mobility.[65]

- Promote cooperation among municipalities (rather than intervene in deprived

neighborhoods only) to encourage building of affordable housing in more racially-ethnically diverse areas, reducing exclusionary zoning ordinances, implementing transportation systems accessible to suburban or higher income areas, and building the regional employment base.[66]

Also, as noted above, another factor found to protect against substance misuse and to promote well-being among youth of color was cultural milieu that, for the most part, reinforced heritage traditions and practices. Therefore, an area requiring further investigation may be strategies designed to help immigrants and other cultural minorities retain and celebrate cultural traditions.

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DISCUSSION

Overall, we found that very little research focused on protective factors and substance misuse prevention programs specifically for boys and young men of color. For this reason, we expanded our search to include research that focused on protective factors and prevention programs for youth of color. Our results suggest that we know relatively more about individual- and relationship-level factors than we do about community- and societal-level factors. For this reason, it should come as no surprise that most programs designed to meet the needs of youth of color are designed to bolster individual- and relationship-level factors thought to protect against substance misuse or promote well-being.

So, how can prevention practitioners make use of these findings? First, practitioners may want to prioritize strategies that target protective factors that are supported by data at the local level. Some questions to consider when planning these efforts include:

- How is the factor related to the priority problem in your community?
- What outcomes do you want to address?
- Is this factor associated with behavioral health issues? If yes, how does that impact your ability to address this factor?
- Do you have the resources and readiness necessary to address this factor?

- How might community norms and/or social conditions support or compromise your ability to address this factor?
- Does a suitable program or strategy exist to address this factor?
- Can you produce outcomes within a given timeframe?

As noted in each of the tools, end-users should be aware of their limitations. These include the following:

- The literature summaries are limited to the time frame, databases, and search parameters used.
- The quality of research methods and evaluation methods were not considered.
- Studies that demonstrated insignificant or negative findings were not included.
- Studies and programs often focused on pan-ethnic populations and ignored within group differences (e.g., Hispanic/Latino vs. Cuban American, Mexican American, Puerto Rican American).

Despite these limitations, each tool in this suite is potentially useful to prevention practitioners who are interested in alleviating health disparities among youth of color by understanding factors that protect against substance use, as well as the current landscape of programs designed to promote positive development among youth of color.

In addition to drawing attention to the factors and programs summarized here, there is more that prevention practitioners can do to promote the well-being of boys and young men of color. Recommended approaches include:

- Supporting innovative programming that addresses the specific needs of boys and young men of color with an emphasis on program evaluation, so that developers are better able to demonstrate evidence of effectiveness.

- Identifying more protective influences at the community and societal levels so that the burden to change shifts away from the individual and family and moves to structural and societal determinants of health and well-being.

- Implementing programming designed to address multiple levels of influence (i.e., at individual, relationship, community, and societal levels).

- Considering prevention across the lifespan (i.e., beyond youth) as the stressors associated with discrimination and oppression may accumulate over time, leading to

increased substance misuse and other negative health consequences in middle to late adulthood.

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