



# 2024: Familia Adelante Evaluation

Evaluation Report for the Alianza Coalition and Center for Prevention Services on the Familia Adelante Program, calendar year 2024.

*Project led by:*

**Ricardo Torres, BS**  
 Latino Program Manager  
 Center for Prevention Services  
 201 McCullough drive, Suite 220  
 Charlotte, NC 28262



*Report prepared by:*



**Drew Reynolds, PhD, MSW, MEd**  
 Principal Consultant, Common Good Data  
[drew@commongooddata.com](mailto:drew@commongooddata.com)

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# Table of Contents

<b>Executive Summary .....</b>	<b>3</b>
<b>Program Overview: Familia Adelante .....</b>	<b>4</b>
Program Goals and Expected Outcomes .....	4
Curriculum and Format.....	4
Research.....	5
Program Adaptation and Implementation .....	6
<b>Familia Adelante in Mecklenburg County .....</b>	<b>6</b>
<b>Evaluation Approach .....</b>	<b>7</b>
Sample .....	7
Method.....	8
Measures.....	8
Parent Survey Measures:.....	8
Youth Survey Measures:.....	8
<b>Results.....</b>	<b>9</b>
Caregivers / Parents.....	9
Caregiver Disapproval and Perception of Risk.....	9
Hispanic Stress Inventory .....	9
Youth.....	12
DFC Four Core Measures .....	13
Additional Social Indicators .....	14
Qualitative Feedback .....	15
1. Program is Valued and Appreciated .....	15
2. Desire for Expanded Content and Additional Topics .....	15
3. Increased Accessibility and Scheduling Options .....	15
4. Suggestions for More Engaging and Interactive Sessions.....	15
<b>Discussion .....</b>	<b>15</b>
Recommendations .....	17
1. Continue and Expand Familia Adelante Program .....	17
2. Enhance Interactive and Engaging Program Delivery .....	17
3. Expand Session Content to Address Identified Needs.....	17
4. Examine Youth Program Implementation .....	17

## Executive Summary

Since launching in Mecklenburg County in 2020, [Familia Adelante](#) (“Families Forward”) has grown into a transformative program supporting Latino families across Mecklenburg County. Originally a small pilot program run by the [Alianza Coalition](#) with the support of the [Center for Prevention Services](#), Familia Adelante now reaches more parents, caregivers, and youth, fostering resilience, preventing substance use, and strengthening family connections. Through a culturally responsive approach, this program has created a welcoming space for Latino families to gain knowledge, share experiences, and build support networks.

This year’s evaluation highlights important program success. First, there was an observed reduction in Latino parent/caregiver stress through pre-post surveys, with participants reporting lower rates of stress after completing the program. Parents and caregivers expressed strong appreciation for the program’s role in fostering a sense of community and providing a space to discuss challenging topics related to parenting, relationships with youth and spouse, acculturation stress, and adolescent risk behaviors.

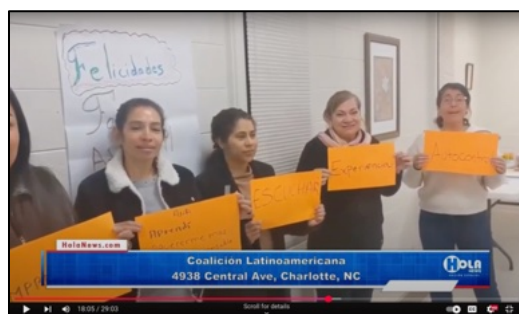


Figure 1: Familia Adelante [Featured on Hola News](#), Feb 5, 2025

One area of success revealed in the evaluation is that youth participants demonstrated positive shifts in perceptions of peer disapproval for some substances and increased awareness of the risks associated with vaping and prescription drug misuse. We are hopeful that these findings speak to the positive impact of prevention for youth – that having conversations with youth at a young age *before* onset can help to prevent future problems in adolescence and throughout the life course.

Moving forward, opportunities for enhancement include expanding session content, increasing interactive learning, and reviewing content delivery for youth. With its continued growth, Familia Adelante remains a model for culturally responsive, community-driven initiatives that empower Latino families to build healthier, more resilient futures.

Looking ahead, Familia Adelante is well-positioned to build on its successes and further extend its reach. We acknowledge and thank this program’s generous funders and supporters, including the Substance Use and Mental Health Services Administration, Alliance Health, ReCAST II Mecklenburg County, and the North Carolina Behavioral Health Equity Initiative.

We believe this program can serve as a model for how community-driven, culturally responsive initiatives can improve the health and wellbeing of Latino residents in Mecklenburg County. Let’s keep up the positive momentum – *¡Seguimos Adelante!*

In prevention,



Ricardo Torres, BS  
Latino Program Manager  
Center for Prevention Services



Drew Reynolds PhD, MSW, MEd  
Principal Consultant  
Common Good Data

## Program Overview: Familia Adelante

Familia Adelante is an evidence-based, family-focused prevention program designed to support Latino youth and their families in navigating the challenges associated with acculturation stress, family conflict, and risk factors that may contribute to behavioral health issues, including substance use and emotional distress. Developed as a culturally responsive intervention, Familia Adelante integrates psychoeducational strategies to strengthen family cohesion, enhance youth resilience, and promote overall well-being.

The program can be implemented in both universal prevention settings, serving a broad population, and selective prevention settings, targeting youth identified as at-risk due to environmental or personal factors. By fostering stronger connections to key social institutions such as family, school, and peer networks, Familia Adelante aims to equip Latino youth and their caregivers with the knowledge, skills, and coping mechanisms necessary to thrive.

### Program Goals and Expected Outcomes

The primary objectives of Familia Adelante are to:

- **Reduce overall levels of family stress** by improving communication and fostering positive family interactions.
- **Reduce youth behavioral problems** by promoting self-regulation, problem-solving, and social competence.
- **Mitigate the effects of acculturation stress**, including discrimination-related stress, by providing psychoeducational support tailored to Latino families.
- **Enhance psychosocial coping and life skills** in both youth and caregivers, equipping them with strategies to navigate challenges effectively.
- **Improve academic achievement** by fostering positive attitudes toward education and school engagement.
- **Decrease the risk of future substance use and emotional distress** by addressing early risk factors and reinforcing protective influences within the family unit.

### Curriculum and Format

The standard Familia Adelante curriculum consists of 12 interactive sessions designed for Latino youth ages 10-14 and their parents or caregivers. Rooted in a culturally responsive framework, the program acknowledges the unique experiences of Latino families, including the challenges of acculturation stress, discrimination, and navigating bicultural identities. The curriculum covers the following core areas:

- **Family and Peer Communication** – Strengthening parent-child relationships and fostering positive peer connections within the context of Latino family values, including familismo (family cohesion).
- **Substance Use Prevention** – Educating families on the risks associated with substance use while integrating culturally relevant discussions on how community norms and familial expectations influence youth decision-making.
- **Perceptions of Harm Related to High-Risk Behaviors** – Addressing the ways in which cultural identity, peer influence, and acculturation pressures shape attitudes toward risk-taking and reinforcing protective behaviors.

- **Coping with Acculturation Stress and Discrimination** – Equipping youth and parents with strategies to manage language barriers, cultural differences, and experiences of discrimination, helping families navigate challenges while maintaining strong ethnic identity and cultural pride.
- **Positive School Bonding** – Encouraging academic motivation and engagement by promoting bicultural competence, supporting youth in balancing cultural expectations at home with the demands of the school environment.
- **Behavioral and Emotional Well-Being** – Providing culturally tailored strategies for managing stress, regulating emotions, and fostering resilience, while integrating traditional Latino cultural strengths such as faith, extended family support, and collective problem-solving.

## Research

Research on Familia Adelante indicates that the program effectively reduces multiple risk behaviors among Latino youth and their families. Research by Dr. Richard Cervantes and colleagues found that participation in the 12-session curriculum led to significant improvements in family communication and increased perceptions of harm associated with substance use (Cervantes, Goldbach, & Santos, 2011). Additionally, there were notable reductions in social norms supporting risky sexual behavior, decreased anxiety related to HIV, and a decline in the use of marijuana and other illegal drugs among participants.

Further research on the program has examined the process of adapting/tailoring research for work with Latino adolescents (Cervantes & Goldbach, 2012) and the relationship between acculturation stress and mental health outcomes (Cervantes, Padilla, Napper, & Goldbach, 2013). These findings suggest that Familia Adelante is a promising multi-risk reduction intervention for addressing behavioral health concerns in Latino communities.

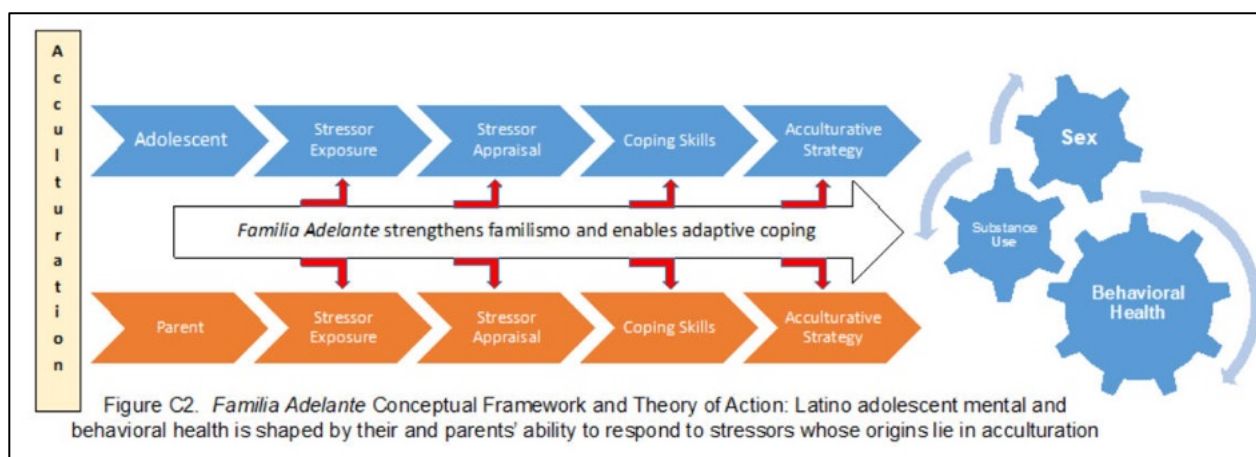


Figure 2: Familia Adelante Theory of Action. Retrieved from <http://www.familiaadelante.com/theory.htm>

## Program Adaptation and Implementation

For the implementation of Familia Adelante through the Alianza Coalition, modifications were made to align with programmatic and community needs:

- The number of sessions was reduced from 12 to 8 to increase accessibility and feasibility for participants.
- Content related to HIV and sexual risk prevention was omitted in this adaptation.
- Sessions were delivered in-person on a weekly basis, ensuring consistent engagement and reinforcement of key concepts.

By tailoring the program to the specific needs of the Alianza Coalition's target population, Familia Adelante continues to provide culturally relevant and impactful prevention education to Latino youth and their families across Mecklenburg County.

## Familia Adelante in Mecklenburg County

Since 2020, Familia Adelante has been implemented by The Alianza Coalition in partnership with the Center for Prevention Services to support Latino youth and families in navigating challenges related to acculturation stress, behavioral health, and substance use prevention. Over the past four years, the program has evolved in response to community needs, external challenges, and emerging opportunities, leading to a more robust and community-driven implementation in 2024.

The initiative began with a pilot program in 2020, which introduced Familia Adelante to small cohorts of Latino youth and families. Between 2020 and 2022, implementation was significantly shaped by the COVID-19 pandemic, requiring adaptations to a hybrid/virtual format. During this period, the program primarily collected qualitative data, capturing participants' experiences and insights on the program's impact.



Figure 3: Prevention Programming at the Latin American Coalition, Charlotte, NC

As in-person programming resumed in 2022-2023, Familia Adelante expanded its reach with a renewed focus on participant engagement. Evaluations from this period included participant satisfaction surveys and qualitative, open-ended survey responses, providing valuable insights into the effectiveness of the curriculum and areas for improvement.

The most significant expansion occurred in 2024, with the launch of a more structured and well-resourced cohort of Familia Adelante. This effort was strengthened by the support of ReCAST II Mecklenburg County, which played a pivotal role in enhancing program capacity. In spring 2024, ReCAST II collaborated

with Alianza to bring Dr. Richard Cervantes, the developer of Familia Adelante, to Charlotte, where he provided in-depth facilitator training for 26 Latino community members. Many of these newly trained facilitators serve in pastoral roles within faith-based organizations and community settings, further embedding the program within trusted cultural and social networks.



**Figure 4:** Dr. Richard Cervantes providing Familia Adelante training to trainees, February 2024.

Following the training on February 29 and March 1, 2024, three new Familia Adelante cohorts were immediately launched, reaching 30 parents/caregivers and 10 youth. These programs were facilitated by the newly trained community leaders, with ongoing support from Alianza, ensuring fidelity to the curriculum while maintaining cultural relevance.

In 2024, a total of 10 Familia Adelante cohorts were implemented across seven sites, including Spanish-language faith-based/church settings and apartment complexes. A total of 58 youth and 82 adults participated.

The program's sustainability and expansion have been supported through grant funding, including the Substance Abuse and Mental Health Service Administration's Drug-Free Communities and STOP Act grants, Alliance Health, ReCAST II Mecklenburg County, and the North Carolina Behavioral Health Equity Initiative, which have enabled continued implementation, training, and evaluation efforts. Moving forward, Familia Adelante remains a cornerstone prevention program for Latino families in Mecklenburg County, strengthening community capacity to support youth well-being through culturally responsive, evidence-based programming.

## Evaluation Approach

The evaluation of Familia Adelante in 2024 employed a pre-post survey design to assess changes in key outcomes among both youth and parent participants. This approach allowed for an examination of the program's impact on attitudes, perceptions, and behaviors over the course of the intervention.

### Sample

In 2024, a total of 10 cohorts of Familia Adelante were implemented across seven sites in Mecklenburg County. These sites included Spanish-language faith-based organizations, churches, and apartment

complexes, ensuring accessibility for Latino families in diverse community settings. A total of 58 youth (ages 10-14) and 82 adults (parents/caregivers) participated in the program.

## Method

The evaluation utilized a pre-post survey methodology, in which both youth and parent participants completed surveys at the start and end of the program. This design enabled a direct comparison of participant responses before and after completing Familia Adelante, measuring changes in key program outcomes.

To ensure ethical participation, the evaluation included active parental consent procedures, with consent materials available in Spanish and English. Depending on site logistics and participant accessibility, consent forms were provided in both digital and paper formats, ensuring flexibility across different program locations.

## Measures

The surveys for youth and parents were designed to assess multiple dimensions of prevention-related outcomes:

### Parent Survey Measures:

- Parental Disapproval of Substance Use – Assessed attitudes toward youth engagement in substance use.
- Parent Perception of Risk – Measured perceptions of the potential harm associated with youth substance use and other risk behaviors.
- Hispanic Stress Inventory-2 (HSI-2) – Captured levels of acculturation-related stress, including economic stress, discrimination stress, and family-related stress.

### Youth Survey Measures:

- DFC Four Core Measures – Standardized substance use prevention measures assessing youth past 30-day use, perception of harm, perception of peer disapproval, and perception of parent disapproval.
- Decision-Making Skills – Evaluated youth self-reported ability to make responsible and informed decisions.
- Parent-Child Relationship Quality – Measured communication, trust, and support within the parent-child dynamic.



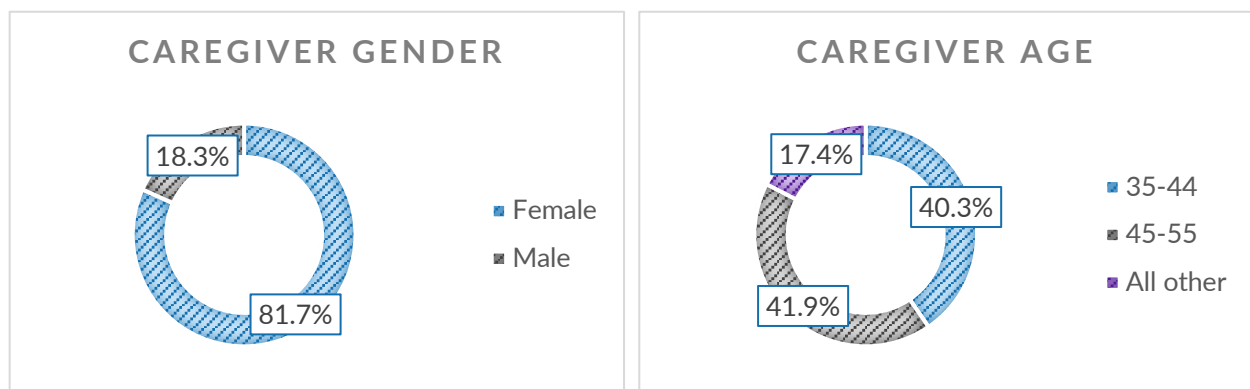
# Results

## Caregivers / Parents

A total of 62 caregivers completed the parent questionnaire, with 42 completing the pre-survey and 62 completing the post-survey. All caregivers identified as Hispanic or Latino, with a small group also identifying with other identities (e.g Black/African American).

Nearly all caregivers were born outside the United States and identified that they spoke Spanish at home. Top countries of origin included Mexico (47.5%) and Honduras (23.0%), with a smaller number representing El Salvador, Guatemala, Colombia, Ecuador, Peru, and the Dominican Republic.

In addition, 35.6% of caregivers shared that they live within one of the Mecklenburg County Public Health defined priority zip codes: 28205, 28206, 28208, 28212, 28216, 28217.



## Caregiver Disapproval and Perception of Risk

Caregivers were also asked to respond to a series of questions on their perceptions of youth drug use, including:

- How wrong do you feel it would be for your child to use \_\_\_\_\_?
- How risky do you feel it would be for your child to use \_\_\_\_\_?

Questions were asked for tobacco, vaping, alcohol, marijuana, and prescription drugs. Across the surveys, over 90% of parents indicated they felt it would be wrong/risky for children to use drugs. Specific results are not included to prevent accidental identification (cell size N<10), however, results suggested overwhelming disapproval from parents of child substance use and high awareness of risk.

## Hispanic Stress Inventory

The Hispanic Stress Inventory (HSI), developed by Cervantes et al. in 1991, is a culturally relevant tool designed to assess psychosocial stressors specific to Hispanic/Latino populations. Recognizing the unique challenges faced by both immigrant and U.S.-born Hispanics/Latinos, the HIS (Cervantes, Fisher, Padilla, & Napper, 2016) offers tailored versions to capture these experiences accurately. The scales include topics

related to occupational/economic stress, parental stress, immigration stress, marital stress, and family stress. For this survey, a shortened 12-item version designed for US-born adults was used. Respondents were asked to respond whether they had experienced the stressor identified, and if so, to what degree (Yes, and I felt... not at all, a little, moderately, very, or extremely worried/tense).

Table 1 presents findings of the percentage of stressors experienced by parents. The top stressors identified by parents included: insufficient income, poor academic grades for children, lack of access to health insurance, feeling unaccepted due to Latino culture, and family experiences of discrimination.

**Table 1: Percentage of parent/caregivers who experienced stressors**

	Pre	Post
My spouse and I disagreed on where we should live.	30.7%	37.8%
There is a lack of respect in our marital relationship	31.7%	35.8%
I have felt unaccepted by others due to my Hispanic culture.	37.5%	49.1%
Men in our family are too macho (jealous of women's accomplishments).	28.9%	31.0%
My children have received bad school reports (or bad grades).	62.2%	52.5%
My spouse and I disagreed about choosing our friends.	25.6%	27.3%
My income has not been sufficient to support my family and myself.	50.0%	56.4%
I have been around too much violence.	26.8%	22.0%
Because of the importance of getting ahead in my job I had to compete with others.	*	24.1%
I did not have health insurance to cover my illness.	43.2%	52.5%
I experienced discrimination because of the color of my skin.	41.0%	34.5%
Members of my family have experienced discrimination.	50.0%	37.7%

*\* Items with cell sizes  $n < 10$  omitted to prevent accidental identification*

The 12-item scale was tested for internal reliability. Chronbach's alpha was conducted on both pre and post surveys, with results of  $\alpha = .89$  and  $\alpha = .79$ , respectively. Results suggest the 12-item subset performed at acceptable internal reliability levels.



Participants in the post-test group (rank sum = 1818,  $n = 51$ ) had lower overall ranks compared to those in the pre-test group (rank sum = 1342,  $n = 28$ ). In addition, the average (mean) stressor rating dropped from 1.43 to 0.98 between pre and post.



Figure 5: Familia Adelante facilitator Alba Sanchez leading Familia Adelante group with adults

A Wilcoxon rank-sum test (Mann-Whitney U test) was conducted to compare stress levels (as measured by the Hispanic Stress Inventory stressor score) between parents/caregivers in the Familia Adelante program who experienced at least one stressor at pre-test and post-test. The results indicate a significant difference in stress levels between the two groups ( $z = -2.27$ ,  $p = 0.02$ ), suggesting that the distribution of stress scores at post-test is significantly different from pre-test.



Figure 6: Familia Adelante facilitators in a small group discussion during facilitator training

Table 2: Hispanic Stress Inventory Analysis

	Pre		Post	
	N	%	N	%
Number of parent/caregivers	41		62	
Number of parent/caregivers who experienced at least one stressor	28	68.3%	51	82.3%
Average number of stressors per parent/caregiver	4.27		4.26	
Average stressor rating (1-5) of parent/caregivers who experienced at least 1 stressor across all 12 stressors.	1.43 (.18)		0.98 (.09)	

Since a lower rank sum suggests lower stress scores, this result provides evidence that stress levels were lower at post-test compared to pre-test among parents/caregivers who reported experiencing at least one stressor. Thus, the Familia Adelante program may have contributed to a reduction in reported stress among Latino adult participants.

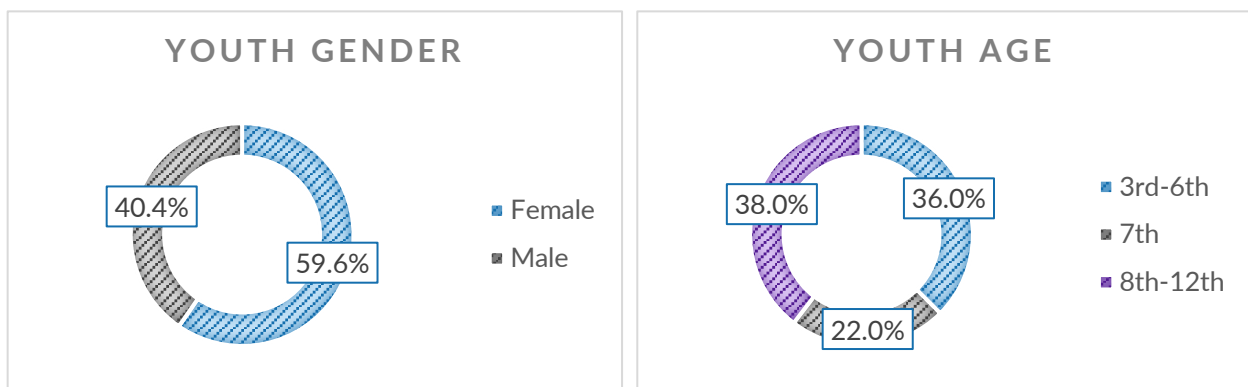
**Results suggest that Latino adults participating in the Familia Adelante program had lower stress levels after completing the program.**

## Youth

A total of 50 youth completed the parent questionnaires, with 62 completing the pre-survey and 50 completing the post-survey. Nearly all youth identified as Hispanic or Latino, with a small group also identifying with other identities (e.g Black/African American).

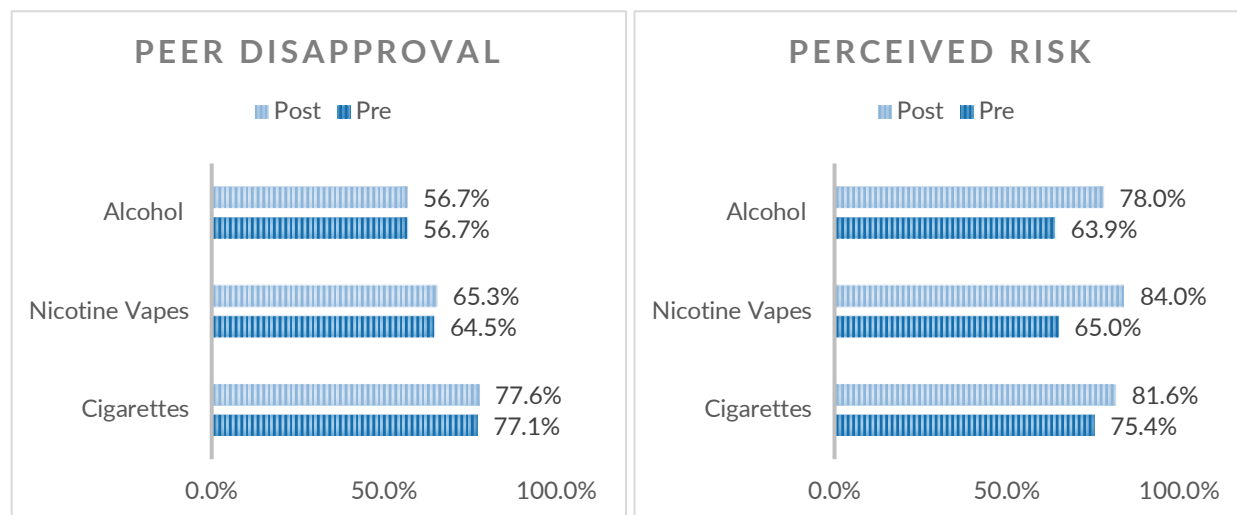
Roughly 26% of youth were born outside the United States, and all youth shared that they spoke Spanish at home. As such, most youth are second-generation youth who speak Spanish at home.

In addition, 35.3% of caregivers shared that they live within one of the Mecklenburg County Public Health defined priority zip codes: 28205, 28206, 28208, 28212, 28216, 28217.



## DFC Four Core Measures

Youth were asked to respond to four “core measures” questions as defined by the Drug-Free Communities (DFC) grant for each of six substances: tobacco, nicotine vapes, other tobacco, alcohol, marijuana, and prescription drugs (without a prescription).



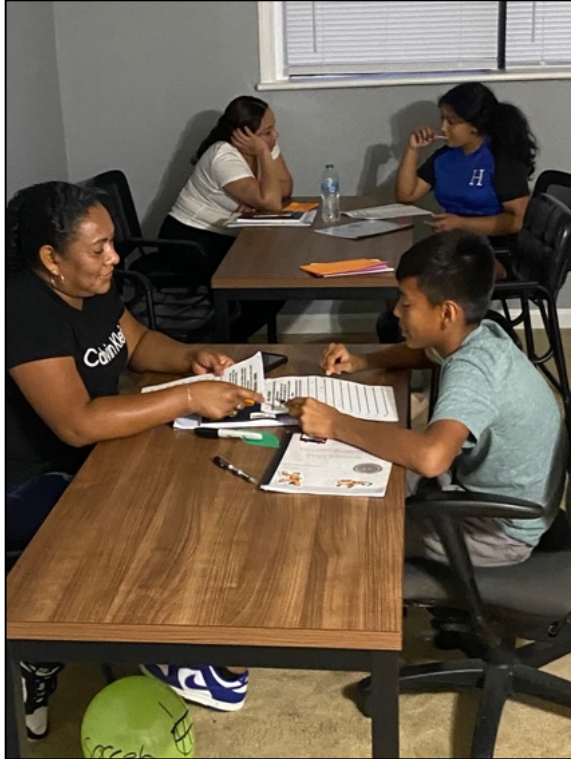
**Figure 7: Pre-post results for peer disapproval (% who say their friends would say it is ‘wrong’ or ‘very wrong’ to use) and perceived risk (% of youth who think there is ‘moderate’ or ‘great’ risk in using the substance).**

For 30-day use, youth were asked if they had used any of the substances in the past thirty days. The vast majority of youth reported that they had never used the substance. In addition, nearly all youth reported that their parents would say it is “wrong” or “very wrong” to use the listed substance. Results are not included in this report due to low cell count ( $n < 10$ ) and protection from accidental identification.

However, the data were more nuanced when youth were asked about whether they felt their peers would disapprove of their own use of the substance. Figure 7 shows results from these questions for alcohol, nicotine vapes, and cigarettes. Only about half of participants said their friends would disapprove of their use of alcohol and about 2 in 3 said the same for nicotine vapes, with no significant differences between pre and post.



Chi-square tests were used to determine if there were statistically significant differences between pre and post. There was an observed difference in the positive direction for both prescription drugs ( $p < .05$ ) and marijuana ( $p = .05$ ), suggesting that more youth said their peers would disapprove of prescription drug and marijuana use after completing the program.



There were also changes in perceived risk among youth program participants for some substances. Figure 7 presents results for alcohol, nicotine vapes, and cigarettes. All saw an increase in perceived risk at post, however, only prescription drugs ( $p < .05$ ) and nicotine vapes ( $p < .05$ ) showed a statistically significant difference from chi-square tests.

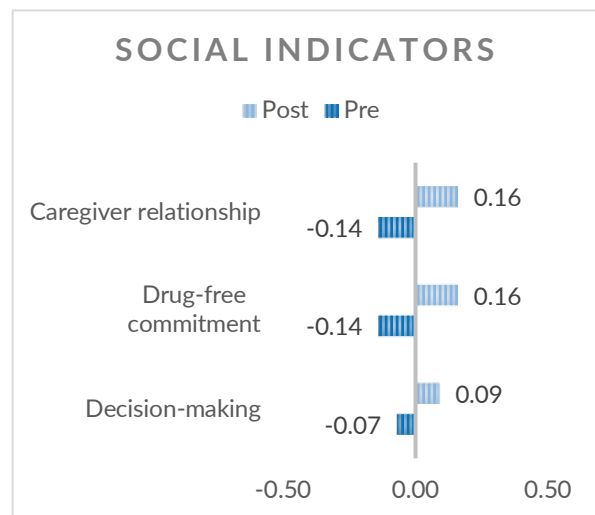
**Taken together, these data suggest that youth who participated in the program increased perceptions of risk of prescription drugs and nicotine vapes and reported higher peer disapproval for prescription drugs and marijuana use.**

### Additional Social Indicators

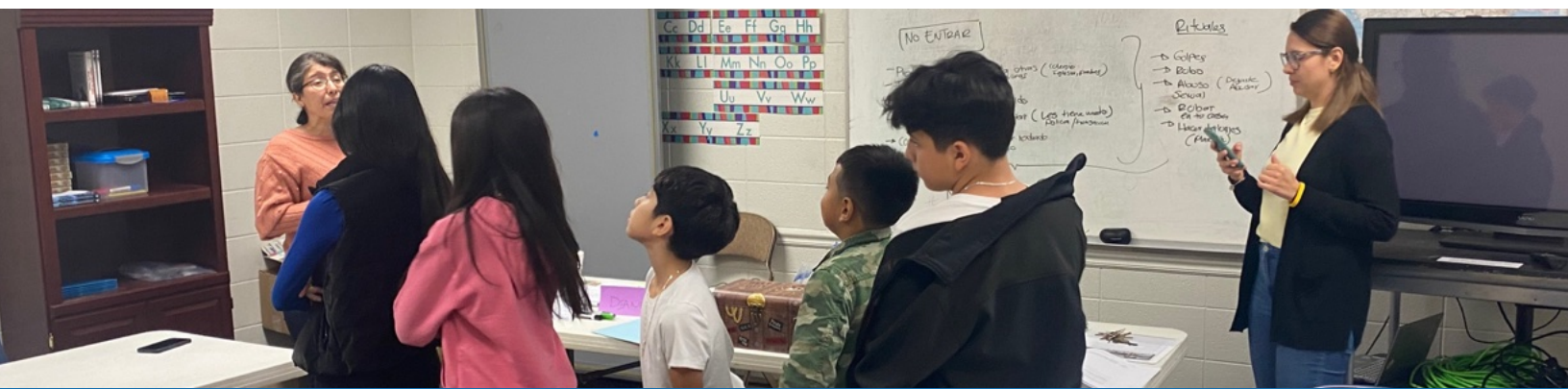
Pre-post surveys of youth also examined potential growth in the areas of decision-making skills, drug-free commitment, and perceived relationship between the child and caregiver or parent.

Figure 8 shows results of pre-post surveys. In each case, youth reported slightly higher scores on each social indicator at post when compared to the pre survey. T-tests and Wilcoxon rank-sum tests were conducted to determine if observed differences were statistically significant. None of the tests yielded significant results.

These results suggests that there is not currently observed evidence that the Familia Adelante program in 2024 yielded significant changes in the social indicators listed.



**Figure 8: Youth decision-making skills, drug-free commitment, and perceived relationship with caregiver/parent Z-scores, pre-post**



## Qualitative Feedback

Based on the qualitative feedback from both parents/caregivers and youth, several key themes emerged regarding their experiences with the Familia Adelante program:

### 1. Program is Valued and Appreciated

Parents expressed gratitude for the program, highlighting that it provided a safe and informative space that helped strengthen families. Many acknowledged the usefulness of the topics covered and appreciated the overall structure and facilitation. Similarly, youth participants enjoyed the opportunity to connect with peers and participate in group activities.

### 2. Desire for Expanded Content and Additional Topics

Both parents and youth suggested areas where the program could expand. Parents requested more sessions focused on mental health, relationships, sexuality, and parenting strategies. Some also suggested adding immigration, nutrition, and English learning programs. Meanwhile, youth expressed a desire for more interactive and in-depth activities, such as skits or discussions that keep them engaged.

### 3. Increased Accessibility and Scheduling Options

Several parents recommended offering the program in additional locations or providing different scheduling options, such as weekend morning sessions to accommodate work schedules. Some parents also suggested that both parents should be required to attend if possible, especially in two-parent households.

### 4. Suggestions for More Engaging and Interactive Sessions

Both parents/caregivers and youth emphasized the need for a more dynamic format. Parents suggested making sessions more engaging, as some found the late-day timing made it harder to stay focused. They also recommended incorporating English classes, writing workshops, and additional family-centered activities such as outdoor gatherings. Similarly, youth participants asked for more hands-on, interactive activities to keep them engaged, and they suggested keeping older and younger youth in separate groups for better age-appropriate learning.

Overall, the feedback highlights a strong appreciation for the program while also identifying opportunities for expansion, accessibility improvements, and more interactive learning experiences to better serve both parents and youth.

## Discussion

The findings from this evaluation suggest that the Familia Adelante program had a meaningful impact on reducing stress among participating Latino parents and caregivers. Participants who reported experiencing at least one stressor at the start of the program showed significantly lower stress levels at post-test, as measured by the Hispanic Stress Inventory. The observed decrease in average stressor ratings and the statistically significant Wilcoxon rank-sum test results suggest that participation in the program may have contributed to reducing stressors associated with financial hardship, family dynamics, and experiences of discrimination. These findings highlight the importance of culturally responsive interventions that address

the unique stressors faced by Hispanic and Latino families, particularly those who are immigrants or live in communities with economic and social disparities.

Despite the overall reduction in stress levels, some stressors persisted or even increased in prevalence at post-test. For example, more caregivers reported experiencing a lack of health insurance and feeling unaccepted due to their Latino culture at post-test than at pre-test. This may indicate that while the program provided coping strategies and support, broader systemic issues—such as access to healthcare and experiences of cultural discrimination—continue to affect participants beyond the scope of the program. These findings underscore the need for continued advocacy and policy-level interventions that can complement community-based programs like Familia Adelante.



**Figure 9:** Alianza staff members Diana Martinez and Ernesto Cervantes presenting information on substances

The results from the youth component of the program present a more nuanced picture. While youth did not report significant changes in their perceptions of parental disapproval or their own substance use, there were positive shifts in perceptions of peer disapproval for marijuana and prescription drug use. Additionally, there was an increase in perceived risk associated with nicotine vapes and prescription drug use, both of which were statistically significant changes. These findings suggest that the program may have helped reinforce key prevention messages related to substance use, particularly for prescription drugs and vaping, which are growing concerns among youth.

However, the lack of significant changes in broader social indicators such as decision-making skills, commitment to a drug-free lifestyle, and relationships with caregivers suggests that additional program enhancements may be necessary to strengthen these areas. Future iterations of the program might benefit from a greater focus on skill-building activities that enhance youth decision-making and resilience in the face of peer pressure. Additionally, more targeted parent-youth engagement activities could further strengthen protective factors within families.

Overall, the findings from this evaluation point to the effectiveness of Familia Adelante in addressing stress among caregivers and in shifting certain perceptions of substance use among youth. The program's culturally tailored approach appears to resonate with participants, particularly in supporting parents in navigating stressors related to immigration, economic hardship, and discrimination. Moving forward, continued program development should



consider ways to build on these successes while addressing persistent challenges, particularly around systemic barriers and youth behavioral outcomes. Strengthening partnerships with community organizations, healthcare providers, and schools may also help expand the program's reach and effectiveness in supporting Latino families.

## Recommendations

### 1. Continue and Expand Familia Adelante Program

Findings from this evaluation suggest that the Familia Adelante program may be helping Latino adults reduce stress and may support youth in changing perceptions of peer disapproval and risk of using substances. In addition, youth and parents provided positive feedback and excitement about the programs, suggesting that there is also a desire in the community for continuing to offer this program. A key recommendation/next step is to build upon and expand current efforts to deliver the Familia Adelante program.

### 2. Enhance Interactive and Engaging Program Delivery

Parents and youth expressed a desire for more dynamic and interactive activities. Incorporating more hands-on exercises, role-playing, and group discussions can help maintain engagement, especially for youth participants who benefit from experiential learning. Alianza staff may consider additional training for facilitators to adapt the approach to allow for more engaging ways to present the curriculum.

### 3. Expand Session Content to Address Identified Needs

Feedback suggests interest in additional topics such as mental health, relationships, parenting strategies, and substance use prevention. Alianza may consider offering other courses and programs that discuss these topics in greater detail to offer to program participants.

### 4. Examine Youth Program Implementation

Results from the analysis of youth pre- and post- data showed promising results on increasing peer disapproval and increasing perception of risk for certain drugs and substances. However, there is space for making a greater impact on youth's perceptions on drugs/alcohol, as well as on improving social skills including decision-making, drug-free commitment, and relationships with parents/caregivers.