

# Community prevention in mental health and substance use: an approach from community psychology

## Summary

Mental health and problematic substance use represent critical public health challenges worldwide. Several studies have identified a significant increase in mental disorders and substance use in contexts of social vulnerability, particularly after the COVID-19 pandemic (World Health Organization [WHO],<sup>1</sup> Patel et al.,<sup>2</sup> Volkow, 2021). Community-based prevention has been positioned as a fundamental strategy to address these issues from an ecological and participatory perspective. This article reviews the main theoretical approaches and empirical evidence on community intervention in mental health and substance use prevention, highlighting the role of community psychology in promoting empowerment and social justice. Successful cases of community-based programs are examined and barriers and strategies for improving the sustainability of these interventions are discussed.<sup>3,4</sup> Finally, recommendations for future research and public policy in the field of community-based prevention are presented.

**Keywords:** mental health, community prevention, substance use, community psychology, empowerment, social justice

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## Introduction

The increase in mental disorders and problematic substance use represents a priority public health problem worldwide. WHO<sup>1</sup> notes that the burden of mental illness has increased in the last decade, particularly in low- and middle-income countries. According to UNODC<sup>5</sup> substance use continues to increase, especially among adolescents and young adults, who face limited access to effective preventive strategies.

In Latin America, the Pan American Health Organization<sup>6</sup> has documented an increase in the prevalence of substance use among adolescents, associated with lack of access to educational and economic opportunities.<sup>7,8</sup> Structural inequalities and social determinants of health, such as poverty, unemployment and social exclusion, amplify the risk of suffering from mental disorders and developing problematic substance use patterns.<sup>9,10</sup>

Against this backdrop, community-based prevention has emerged as a key approach to address these issues by actively involving communities in the identification, planning and implementation of public health interventions (Almeida Filho, 2020).<sup>3</sup> Community psychology offers a robust conceptual and methodological framework for the implementation of prevention strategies that promote well-being, social cohesion and empowerment of communities.<sup>4,11</sup>

Substance use and mental disorders are multifactorial phenomena that require a comprehensive approach. Traditional strategies, focused on individual treatment, have proven to be insufficient to reduce the prevalence and impact of these problems in society.<sup>2,12</sup> Consequently, it is essential to evaluate the effectiveness of preventive interventions that consider both individual and contextual factors. The research questions guiding this article include:

What are the most effective community-based prevention strategies in mental health and substance use?

What theoretical models and empirical evidence support their application in different sociocultural contexts?

## The role of public policy in promoting mental health and reducing substance abuse

Public policies play a crucial role in mental health promotion and substance use prevention, as they establish the regulatory framework and resources necessary for the implementation of effective preventive strategies. Changes in public policy can influence access to health services, regulation of the substance market, and the development of evidence-based community programs.

In the field of demand reduction, government regulations can significantly reduce access to and use of psychoactive substances. For example, policies to increase taxes on alcohol and tobacco have been shown to reduce consumption among adolescents and vulnerable populations.<sup>10</sup> Likewise, banning advertising of products that are harmful to mental and physical health is a key strategy in reducing substance use.

On the other hand, the implementation of harm reduction policies, such as the provision of safe spaces for supervised consumption and access to substitutive treatment for people with addiction, has shown positive results in countries such as Portugal and Canada.<sup>12</sup> These policies seek to minimize the negative effects of consumption rather than focusing exclusively on criminalization and punishment.

Another aspect that favors prevention corresponds to the implementation of evidence-based interventions and the development of intersectoral policies that integrate health, education and social services to maximize the impact on substance use prevention (European Monitoring Centre for Drugs and Drug Addiction).<sup>13</sup> This approach highlights the relevance of training decision-makers and community actors in effective prevention strategies (EUPC, 2020).<sup>13</sup>

The integration of intersectoral approaches in public policies allows for a more holistic approach to mental health and substance

use problems. Coordination between the health system, education and social work is key to ensure that prevention strategies are sustainable and tailored to the specific needs of each community.<sup>2,14</sup>

The *European Prevention Curriculum* also emphasizes the need to develop international and European evidence-based prevention standards, highlighting the importance of effective interventions in different settings such as family, school and community (European Monitoring Center for Drugs and Drug Addiction, 2020). In addition, the effectiveness of public policies should be monitored, ensuring their adaptation and continuous improvement based on scientific evidence. This methodological framework makes it possible to optimize the quality of interventions and ensure their applicability in different community contexts.<sup>13</sup>

Another critical aspect highlighted by various sources is that in terms of prevention, progress must be made in terms of social justice and health equity. This is why public policies are called upon to address the structural inequalities that contribute to vulnerability to mental disorders and problematic substance use. This implies guaranteeing equitable access to quality mental health services, implementing education and health promotion strategies in marginalized communities, and designing economic policies that reduce job insecurity and social exclusion.<sup>9,10,14</sup>

Policies based on social justice consider the empowerment of communities as a central pillar. In this sense, the participation of civil society in the formulation of public policies is essential to ensure that prevention strategies are culturally relevant and effective.<sup>4,15</sup> Public policies should prioritize funding for evidence-based community programs. Interventions such as therapeutic communities, youth mentoring programs, and school-based prevention strategies have been shown to significantly reduce the incidence of substance use and improve the mental well-being of communities.<sup>2,15,16</sup>

Public policies have the potential to transform community environments and reduce risk factors associated with mental disorders and substance use. A comprehensive approach, based on equity and community participation, will build healthier and more resilient societies in the long term. To summarize, for this to occur, the following aspects must be considered:

- I. Ensure sustained investment in community-based prevention programs, with emphasis on evidence-based strategies adapted to specific socio-cultural contexts.
- II. Develop intersectoral policies that integrate health, education, social work and other sectors for a comprehensive intervention to promote well-being.
- III. Implement effective regulatory measures, such as restricting advertising of psychoactive substances and increasing taxes on products that are harmful to health.
- IV. Promote equity in access to mental health and substance abuse prevention services by reducing economic, geographic and cultural barriers
- V. Encourage community participation in the design and implementation of public policies, ensuring that the voices of the communities are heard and considered in decision-making.

### **Theoretical framework: community prevention and contributions of community psychology**

Community prevention in the field of mental health and substance use is based on the recognition that psychosocial problems cannot be

addressed solely from an individual perspective. A comprehensive approach that contemplates the strengthening of the social environment is required, given that the quality of interpersonal relationships significantly influences the development of individuals, especially in childhood and adolescence.<sup>17</sup> From a preventive psychosocial perspective, emphasis is placed on the need to generate protective environments in different socialization spaces -such as the family, school and community- that promote participation, a sense of competence and autonomy at different stages of development.

The ecosystemic approach makes it possible to understand substance use and other risk behaviors as the result of the interaction between individual, family, community and structural factors.<sup>18</sup> In this sense, preventive strategies should operate at different levels, providing experiences and opportunities that enable people to acquire the necessary resources to manage their well-being. In this context, community psychology provides a framework for action that emphasizes active participation, empowerment and social justice as fundamental principles in prevention.<sup>4</sup>

Prevention is defined as a set of strategies and actions aimed at reducing the incidence of social and health problems by strengthening protective factors and mitigating risk factors.<sup>19</sup> At the community level, its application implies the creation of conditions that favor social cohesion and equitable access to welfare opportunities.

From this perspective, community-based prevention is conceived as a participatory approach that involves the community in identifying problems, planning solutions and implementing intervention strategies.<sup>3</sup> This model recognizes that communities have their own resources and knowledge that, when strengthened and mobilized, can generate sustainable changes in the quality of life of their members.<sup>8</sup>

Community-based prevention has been shown to be effective in reducing substance use and promoting mental health by addressing the social determinants of health.<sup>10</sup> Unlike approaches focused exclusively on modifying individual behaviors, this approach seeks to transform the structural factors that influence the well-being of individuals and their communities.

Several studies have shown that strengthening social cohesion, citizen participation and community empowerment are key factors in reducing risk behaviors and developing protective environments.<sup>20</sup> In this sense, community-based prevention not only promotes the creation of support networks, but also encourages collective action, allowing the community to move from being the recipient of interventions to being the protagonist of its own development.

### **Contributions of community psychology to community prevention**

Community psychology understands social and mental health problems as relational and structural phenomena, influenced by socioeconomic inequalities, processes of social exclusion and weaknesses in the community fabric.<sup>21</sup> From this perspective, mental health is not only the absence of disorders, but a dynamic process of well-being that depends on the quality of social ties, equitable access to opportunities and the full exercise of citizen rights.<sup>4</sup>

Thus, community psychology moves away from traditional clinical approaches based exclusively on individual attention, promoting interventions that seek to strengthen community resources and reduce the structural inequalities that perpetuate social vulnerability (Serrano-García et al., 2020). In this sense, it focuses on the transformation of the life contexts where problems emerge, promoting the development of support networks and spaces for active participation.

The role of community psychology in prevention is based on three essential principles:<sup>11,16</sup>

- I. Community empowerment: Promote the development of collective capacities for communities to manage their own problems and make autonomous decisions about their well-being.
- II. Structural transformation: Addressing social inequalities and strengthening community resources, rather than focusing solely on changing individual behaviors.
- III. Active participation: Encourage the involvement of the community in all phases of the preventive process, from the identification of problems to the evaluation of interventions.

### Key elements of community prevention

From the perspective of community psychology, prevention must consider a series of components and methodological criteria that guarantee its effectiveness and sustainability:

- I. Community participation and protagonism: Preventive strategies should promote the active participation of the community in decision-making and the construction of collective solutions.<sup>3</sup>
- II. Ecosystemic approach: Intervention should consider the influence of different levels of the environment on mental health and well-being.<sup>18</sup>
- III. Strengthening social capital: The construction of support networks and social cohesion should be encouraged as key protective factors.<sup>22</sup>
- IV. Intersectoral action: Prevention cannot fall exclusively on the health system, but requires the collaboration of multiple sectors, such as education, social work and public policy.<sup>7</sup>
- V. Equity and social justice: It is essential to guarantee equitable access to opportunities and services, reducing the structural inequalities that affect the most vulnerable communities.<sup>23</sup>
- VI. Evidence-based intervention: Preventive strategies should be based on scientific research and on the community's situated knowledge.<sup>24</sup>

Community prevention represents a comprehensive and multidimensional approach to the promotion of wellbeing and the reduction of risk behaviors. Community psychology emphasizes the importance of strengthening relational environments, fostering active participation and reducing structural inequalities to generate healthier and more resilient communities.

By integrating elements such as citizen participation, empowerment and social justice, community-based prevention not only contributes to the reduction of problematic substance use, but also strengthens the social fabric, promoting a better quality of life for all people.

### Empirical evidence on community prevention in mental health and alcohol and other drug use

Community prevention has been widely supported by scientific literature as an effective strategy to reduce substance use and promote mental health in diverse sociocultural contexts (Le Bossé, 2007).<sup>16,20</sup> These strategies, based on strengthening the social fabric and active participation, have proven to be key in generating resilience and mitigating risk factors associated with alcohol and other drug use (Labonté & Laverack, 2008). However, although there is consensus

on their effectiveness, approaches and conditions for success vary according to the context in which they are implemented.

The effectiveness of community prevention strategies has been widely documented in the scientific literature. Several studies have shown that active community participation in the design and implementation of preventive programs contributes to the reduction of mental health and substance use problems.<sup>25,20</sup>

For example, Martínez et al.,<sup>7</sup> in a study published in the *American Journal of Community Psychology*, found that programs based on community networks achieved a 30% reduction in anxiety and depression levels in rural communities. Similarly, Garcia et al. (2022) conducted a systematic review in which they found that the implementation of community prevention strategies reduced drug use recidivism by 40%.

In adolescent populations, community-based prevention has also proven to be effective. Rodríguez (2021) documented the success of the *Comunidades que Cuidan* program, which achieved a 25% reduction in the early onset of substance use through the strengthening of family and community networks. This model highlights the importance of collective action and the building of social capital in the prevention of problematic use.

At the international level, Patel et al.,<sup>2</sup> in a review published in *The Lancet Psychiatry*, analyzed community prevention programs in different countries and concluded that the effectiveness of these strategies depends on factors such as the sustainability of the program, the integration of community leaders and the cultural relevance of the interventions. This finding underscores the importance of designing preventive strategies that are flexible and tailored to each community.

Although there is consensus that community prevention is effective, the studies reviewed present differences in relation to the factors that determine its success.

#### Convergences:

- I. Most studies highlight the importance of strengthening social capital as a key element in reducing risky behaviors.<sup>22,3</sup>
- II. Consistent evidence has been found on the effectiveness of collective action and community participation in mitigating mental health and substance use problems.<sup>16,19</sup>
- III. Programs that include multisectoral approaches, with the collaboration of different actors (education, health, local governments), have shown positive results in their implementation and sustainability.<sup>7</sup>

#### Divergences:

- I. Some studies highlight that cultural adaptability is an essential factor, while others have pointed out that standard strategies can be effective in different contexts.<sup>26</sup>
- II. There are differences in the measurement of long-term impact, as most studies analyze effects over periods of one to three years, but few have evaluated the sustainability of these strategies over decades.<sup>27</sup>
- III. Effectiveness varies according to the level of involvement of local actors. While some successful programs have been driven by governments and NGOs, others have had better results when communities themselves lead the interventions (Rodríguez, 2020).

### *Cultural and Socioeconomic Factors in Community Prevention*

The socioeconomic and cultural context significantly influences the effectiveness of preventive strategies. Wilson and Green<sup>26</sup> in their study of prevention programs in indigenous communities in Canada, found that interventions that integrated traditional cultural practices and strengthened social support networks showed greater effectiveness compared to standardized approaches.

On the other hand, in urban settings, technology-based interventions have shown promising results. Lee et al.<sup>28</sup> developed a mobile app-based prevention program for urban adolescents, which resulted in a 20% decrease in experimental substance use. These findings underscore the importance of designing strategies that respond to the specific characteristics of each community.

### *Family and Close Environment Involvement*

Family involvement has been identified as a key element in community prevention. Martinez et al. (2023) found that family therapy in Hispanic communities in the United States significantly reduced recidivism in antisocial behaviors and substance use among youth. In addition, Garcia and Lopez (2024) demonstrated that open communication within the nuclear family is a key protective factor in reducing adolescent alcohol use.

These findings reinforce the need to integrate families into intervention processes, fostering the development of parenting skills and strengthening emotional bonds as effective prevention measures.

### *Interventions in Indigenous Communities: The Lafkenche Mapuche Case*

In Chile, Zambrano et al.<sup>20</sup> conducted a study in Mapuche Lafkenche communities to identify essential elements in community prevention. Among the findings, they highlighted:

- I. The importance of strengthening cultural identity as a protective factor.
- II. Active participation of community leaders in the implementation of preventive strategies.
- III. The integration of traditional activities as tools for the prevention of problematic consumption.

These results suggest that interventions in indigenous communities should be designed from an intercultural approach, respecting the values and forms of organization of each group.

Despite advances in community-based prevention, there are significant challenges that limit its implementation and sustainability:

- I. Shortage of funding and human resources: Lack of financial support hinders the continuity of community programs.<sup>27</sup>
- II. Difficulties in intersectoral coordination: Fragmentation among different institutions reduces the effectiveness of preventive strategies (Martínez & González, 2022).
- III. Community resistance: In some contexts, distrust of external interventions hinders the implementation of preventive strategies (Rodríguez, 2020).

Community psychology has consolidated key principles to guide the design and implementation of preventive strategies:

- I. Participatory Appraisal: Needs assessment based on local knowledge is essential for designing effective interventions (Perez, 2021).

- II. Network intervention: The articulation of community institutions and actors strengthens the impact of preventive strategies (Rodríguez, 2020).

- III. Social Capital Development: The creation of spaces for dialogue and strengthening of support networks is crucial for the sustainability of the programs (Sanchez, 2023).

- IV. Proactive Approach: Prevention should focus on education, awareness and generation of opportunities to prevent the emergence of risk behaviors.<sup>3</sup>

Empirical evidence supports that community-based prevention is effective in addressing mental health and substance use issues. However, cultural adaptability, sustainability and cross-sectoral collaboration are key elements to ensure its success in different sociocultural contexts. It is essential to continue with longitudinal evaluations and to promote comprehensive prevention models that foster community resilience and the active participation of society in its well-being.

## Discussion

Community-based prevention in mental health and substance use is based on an integrative and participatory approach. Community psychology offers the theoretical and methodological bases necessary to structure effective interventions that strengthen community empowerment, social support networks and collective action.<sup>29,3</sup> The literature shows that community-based prevention is effective in other areas of health as well. There are multiple community intervention programs that have been shown to be effective in promoting mental health and reducing psychological disorders.

Other examples of community-based prevention strategies include Community Education Programs (CEP): These types of interventions seek to empower communities through education and awareness about mental health and substance use. These programs have been shown to increase knowledge and reduce stigma around mental disorders.<sup>21</sup>

Another program is the RS (Social Resilience Programs) for depression, whose interventions focus on strengthening coping skills and support networks in people at risk of developing depression. They have been successfully implemented in vulnerable populations and have reduced depressive symptoms by 30% in low-income communities.<sup>27</sup>

A final example of a successful program is the Community Outreach and Referral Program. This is a community outreach and education strategy that has been used to connect people to mental health and social assistance services. These programs include training community leaders to act as liaisons between the community and public health institutions, thereby improving access and continuity of treatment.<sup>26</sup>

The community prevention experiences mentioned above share an approach based on active community participation, education and the strengthening of social support networks and community empowerment. All of these strategies seek to strengthen communities by equipping them with the knowledge and tools to address mental health and substance use problems on their own.

The evidence reviewed confirms that community-based prevention is an effective strategy for promoting mental health and reducing risk factors for substance use. Community interventions stand out for their flexibility and ability to adapt to local needs, which reinforces their effectiveness in different contexts. However, further research is

needed on the long-term sustainability of these programs, as well as on the factors that enhance their success in different communities.

From the literature review, key strategies that have been shown to be effective in community prevention can be identified:

- I. Community empowerment: The capacity of a community to make autonomous decisions and manage its own problems is fundamental for the prevention of psychosocial risks. Programs such as *Communities that Care* have been shown to reduce by 25% the early onset of substance use in adolescents by strengthening community and family networks (Rodríguez, 2021).
- II. Active participation and social capital: The integration of the community in the planning, implementation and evaluation of preventive strategies allows for greater ownership and sustainability of interventions (Sanchez, 2023). Studies have shown that strengthening social capital generates positive effects on mental health and reduces risk factors in vulnerable communities.<sup>22</sup>
- III. Participatory diagnosis and collective action: *Participatory Action Research (PAR)* is a key tool for designing strategies adapted to local realities, which increases their effectiveness and acceptance within the community.<sup>29,3</sup>
- IV. Intersectoriality and articulation of actors: Collaboration between sectors such as health, education and social work optimizes available resources and amplifies the impact of preventive strategies.<sup>7</sup>
- V. Cultural adaptability: Interventions adjusted to the values, beliefs and practices of each community have been shown to be more effective in preventing substance use. A study with Mapuche indigenous communities highlighted that the strengthening of cultural identity and the integration of traditional practices resulted in a lower incidence of problematic alcohol consumption.<sup>20</sup>
- VI. Use of digital technologies: Mobile applications and online platforms have been shown to extend the reach of interventions, especially in young populations and urban settings.<sup>28</sup>
- VII. From a theoretical point of view, community prevention is based on models such as:
- VIII. Bronfenbrenner's ecological model (1979): Emphasizes the interaction of multiple levels of the environment in the configuration of risk behaviors and the effectiveness of preventive strategies.
- IX. Empowerment theory:<sup>11,16</sup> It states that the strengthening of the community and its autonomy in decision-making is key to collective well-being.
- X. Social capital theory:<sup>22</sup> Considers that mutual trust, reciprocity and community networks are fundamental in the prevention of substance use.
- XI. Prevention-promotion model:<sup>30</sup> Emphasizes the importance of addressing the social determinants of health and social equity as an essential part of preventive strategies.

The literature reviewed confirms that these theoretical models are supported by empirical evidence. For example, a study by Garcia et al. (2022) documented that community-based prevention strategies reduced recidivism in drug use by 40%. Similarly, Martinez et al.

(2023) found that programs based on community networks achieved a 30% reduction in the levels of anxiety and depression in rural communities.

Despite the consensus in the literature on the effectiveness of community prevention, differences are identified in its implementation and evaluation. Evidence recognizes that the most effective strategies are those that combine community participation, empowerment and intersectoral articulation.<sup>3,20</sup> There is also ample evidence that strengthening support networks and social cohesion reduces substance use and improves mental health (Rodríguez, 2021). As well as there is also coincidence in highlighting the need to adapt interventions to sociocultural particularities is widely supported in the literature.<sup>2</sup>

Some studies warn that lack of resources and community resistance may limit the sustainability of programs.<sup>27</sup> Also, there are differences in the effectiveness of programs in urban and rural settings, suggesting the need to design differentiated strategies according to the context.<sup>28</sup> Finally, there is a lack of longitudinal evaluations in many studies, which makes it difficult to identify the long-term impact of preventive strategies (Sánchez, 2023).<sup>31–34</sup>

## Conclusion

This article contributes to the scientific literature by updating knowledge on community prevention in mental health and substance use from the perspective of community psychology. Among its key contributions are the integration of participatory methodologies such as *Participatory Action Research*;<sup>29</sup> Evidence on the positive impact of community empowerment on the sustainability of interventions,<sup>3</sup> and the identification of successful strategies in different sociocultural contexts, including indigenous communities and urban and rural settings.<sup>20</sup>

Despite advances in community-based prevention, challenges persist in its implementation and sustainability. More research is needed on the factors that favor long-term community adherence and the integration of new technologies in prevention programs. In this regard, some key questions for future research include: what are the conditions necessary to ensure the sustainability of community interventions over time; how can artificial intelligence and digital platforms be integrated into community prevention strategies; and what impact do public policies have on the viability and success of these programs at the local and national levels?

Finally, the evidence reviewed highlights the importance of community participation, the strengthening of social capital and the adaptation of strategies to specific socio-cultural contexts. The consolidation of community prevention requires an interdisciplinary and collaborative approach to ensure its effectiveness and sustainability over time. Evidence also shows that an important line of work, before including specific evidence-based strategies, is to strengthen the internal capacities of a community to mobilize and implement actions in the medium and long term. This includes addressing the psychosocial dimensions of community dynamics (social capital, leadership, organization, sense of community, among others). Finally, it is important to emphasize that a prevention model based on equity and community participation will make it possible to move towards healthier and more resilient societies in the face of mental health and substance use challenges.

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## Conflicts of interest

The author declares there is no conflict of interest.

## References

- World Health Organization (WHO). *World mental health report: Transforming mental health for all*. 2023.
- Patel V, Saxena S, Lund C, et al. The importance of community prevention in mental health. *The Lancet Psychiatry*. 2022;9(2):125–150.
- Wallerstein N, Duran B, Oetzel J, et al. *Community-based participatory research for health: Advancing social and health equity*. Jossey-Bass. 2017.
- Prilleltensky I. *Empowerment and community well-being*. Springer. 2005.
- United Nations Office on Drugs and Crime (UNODC). *World Drug Report 2022*. 2022.
- Pan American Health Organization (PAHO). *Mental health in Latin America: Situation and future challenges*. 2023.
- Martínez P, González L, Silva C. Therapeutic family interventions in Hispanic communities. *American Journal of Community Psychology*. 2023;61(3):45–62.
- García M, Pérez M, Rodríguez L. Community prevention strategies in drug use: A systematic review. *Journal of Community Health*. 2022;58(2):220–237.
- Economic Commission for Latin America and the Caribbean (ECLAC). *Structural Inequalities and Health in Latin America*. 2022.
- Marmot M. *The health gap: The challenge of an unequal world*. Bloomsbury Publishing. 2020.
- Rappaport J. Terms of empowerment/exemplars of prevention: Toward a theory for community psychology. *American Journal of Community Psychology*. 1987;15(2):121–148.
- Degenhardt L, Hall W, Lynskey M. Substance use and mental health: Intersections and policy implications. *Addiction*, 2021;116(3):569–577.
- European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). *European prevention curriculum: A handbook for decision makers, opinion makers and policy makers on evidence-based substance use prevention*. Publications Office of the European Union. 2020.
- UNIOC. *Intersectoral intervention and equity in community prevention*. United Nations Office on Community Health. 2023.
- UNIOC. *Public policies for substance use prevention and community mental health*. United Nations Office on Community Health. 2022.
- Zimmerman MA. Empowerment theory: Psychological, organizational and community levels of analysis. In: Rappaport J, et al. editors. *Handbook of Community Psychology*. Springer. 2000. p. 43–63.
- Le Blanc M. *Psychosocial perspectives on drug use prevention*. Ediciones Universitarias. 2012.
- Bronfenbrenner U. *The ecology of human development: Experiments by nature and design*. Harvard University Press. 1979.
- National Service for the Prevention and Rehabilitation of Drug and Alcohol Consumption (SENDA). *Model for community prevention of alcohol and other drug use*. Government of Chile. 2022.
- Zambrano C, Garcés L. Community action and social transformation. *Latin American Journal of Social Studies*. 2021;15(2):75–95.
- Jason LA, Glantsman O, O'Brien JF, et al. *Introduction to community psychology: Becoming an agent of change*. American Psychological Association. 2021.
- Putnam RD. *Bowling alone: The collapse and revival of American community*. Simon & Schuster. 2000.
- Solis C. *Social justice and community prevention*. Fondo Editorial Universitario. 2003.
- National Service for the Prevention and Rehabilitation of Drug and Alcohol Consumption (SENDA). *Guide for community prevention of drug use*. Government of Chile. 2019.
- Baum F. *The new public health*. Oxford University Press. 2008.
- Wilson A, Green T. Cultural adaptation in community prevention programs: Evidence from Indigenous communities in Canada. *International Journal of Community Psychology*. 2024;58(2):67–89.
- Nguyen H, Thompson R. Challenges in implementing community-based prevention programs. *Journal of Community Psychology*. 2025;62(1):25–40.
- Lee J, Kim S, Park H. Mobile-based prevention strategies for urban adolescents. *Journal of Substance Use Prevention*. 2025;30(2):90–110.
- Montero M. *Methods of intervention in community psychology*. Paidós. 2009.
- Fréchette J. Prevention-promotion: a social perspective on prevention. *Journal of Public Health*. 2012;15(1):78–95.
- García M, López R. Family and consumption prevention in adolescents. *Journal of Community Psychology*. 2024;52(1):112–130.
- Rodríguez A. Evaluation of prevention programs in Latin America. *Journal of Community Psychology*. 2020;29(1):12–30.
- Rodríguez P. Evaluating the impact of the Communities That Care program in Latin America. *International Journal of Community Psychology*. 2021;27(1):45–63.
- Sánchez A. Community participation and social capital in substance use prevention. *Community Development Journal*. 2023;59(2):98–116.