

# American Indian and Alaska Native Adolescent Protective Factors: A Literature Review

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# Adolescent health behaviors

- Are particularly important because:
  - In the American Indian & Alaska Native (AI/AN) population, many of the leading causes of morbidity and mortality in adults can be traced back to adolescent behaviors
- Health behaviors are influenced by many co-occurring factors existing within an adolescent's environment
  - Including protective factors

# Protective Factors

- Protective factors are **independent variables** capable of having a direct effect on **behavior**
  - Example: If there are **after school activities** available for kids and teens, they may be less likely to **drink alcohol in their free time**
- Protective factors can be strengthened and shaped to promote healthy behaviors
- Exposure to protective factors can increase the chances of an adolescent making healthy behavior choices
  - Even when adolescents experience life challenges or exposures to “risks”
- Protective factors exist at the individual, relationship, community and societal levels

What are some examples of protective factors in your community?

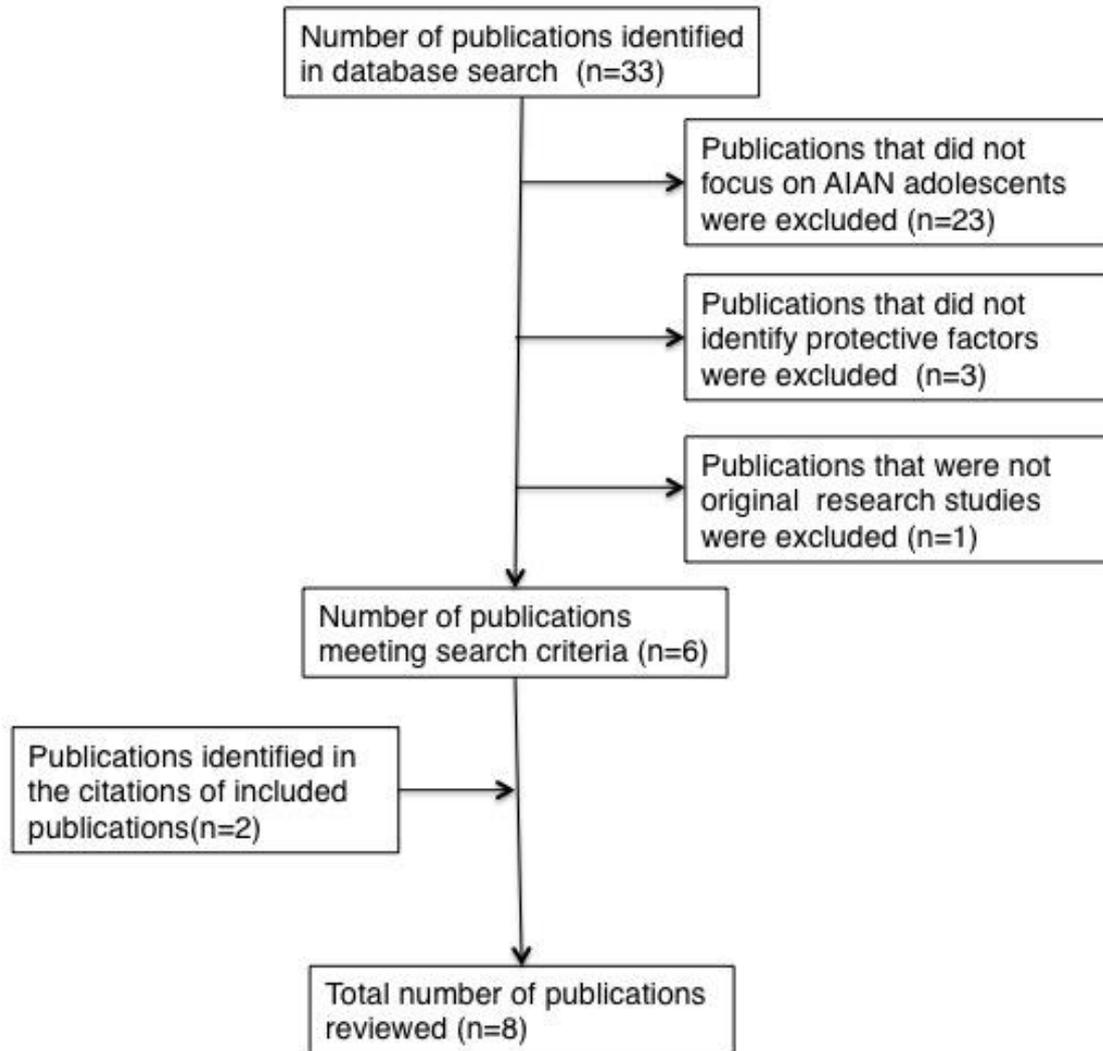
# Purpose of this literature review

- Identify protective factors that promote the health of AI/AN adolescents
- After these protective factors have been identified:
  - Public health professionals can then create programs/policies that utilize these protective factors
  - “Asset-based” program planning- utilizes existing strengths/assets within a community to promote health

# Methods

- PubMed search: “American Indian Alaska Native adolescent protective factors”
- Inclusion criteria
  - (1) written in English
  - (2) identified protective factors
  - (3) primary population was adolescent American Indians and/or Alaska Natives
  - (4) published between January 1, 1970 and January 1, 2015
  - (5) original research studies

# Results



# Publications used:

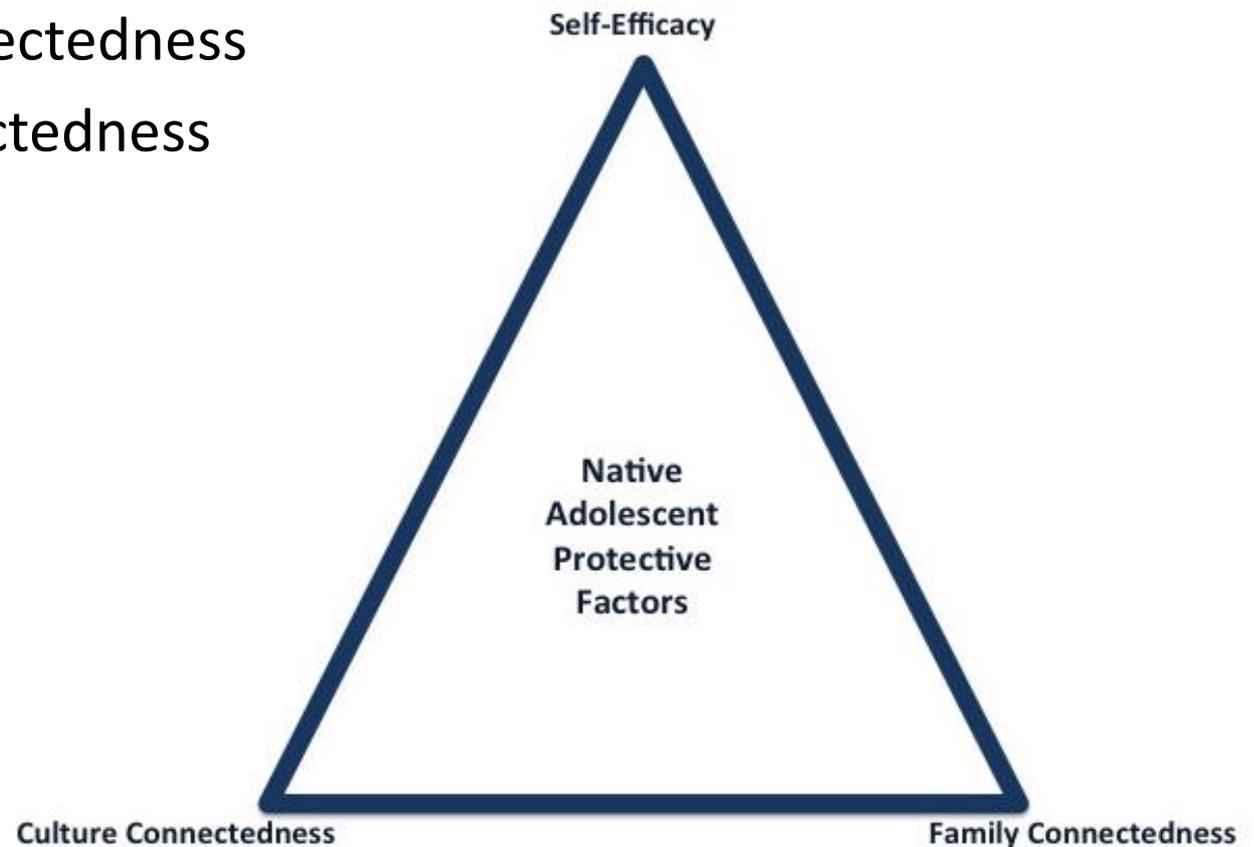
- Allen et al. (2006). The Tools to Understand (The People Awakening Project)
- Borowsky et al. (1999). Suicide Attempts Among American Indian and Alaska Native Youth: Risk and Protective Factors
- Cummins et al. (1998). Correlates of Physical and Emotional Health Among Native American Adolescents
- LaFromboise et al. (2006). Family, Community, and School Influences on Resilience Among American Indian Adolescents in the Upper Midwest
- Mackin et al. (2012). The Power of Protection: A Population-based comparison of Native and non-Native Youth Suicide Attempts.
- Pu et al. (2013). Protective Factors in American Indian Communities and Adolescent Violence
- Whitbeck et al. (2001). Traditional Culture and Academic Success among American Indian Children in the Upper Midwest.
- Whitesell et al. (2014). Trajectories of Substance Use Among Young American Indian Adolescents: Patterns and Predictors

# Results: Identifying Protective Factors

- In only one study did researchers conduct open-ended interviews allowing the participants to identify *any and all* adolescent protective factors
- All the other research used measurement scales designed to measure the relationship between a pre-determined protective factor(s) and a pre-determined outcome(s)
- Subsequently, the protective factors identified in these studies are dependent on the methodology and hypothesis of the researchers
- It is highly likely additional protective factors exist, but were simply not measured in the research studies reviewed here

# Results

- Top 3 protective factors identified from the literature were:
  - Adolescent self-efficacy
  - Cultural connectedness
  - Family connectedness



# Adolescent Self-Efficacy

- Identified as a protective factor in 3 of the 8 studies- the remaining 5 studies did not report measuring self-efficacy
- Definition: “The extent to which people believe they are capable of performing specific behaviors in order to attain certain goals” (U.S. National Library of Medicine)
- Adolescent self-efficacy was found to be protective against:
  - Alcohol use (Allen et al. 2006)
  - Suicide attempt (Mackin et al. 2012)
  - Displaying violent behavior (Pu et al. 2013)

# Cultural Connectedness

- Identified as a protective factor in 4 for the 8 studies- 3 of the studies did not measure culture in their research
- “Enculturation” was found to be correlated with academic success (Whitbeck et al. 2001) & resilience (LaFromboise et al. 2006)
  - Enculturation was defined as: “involvement in traditional activities”, “identification with American Indian culture”, and “involvement and importance of traditional spirituality”

# Cultural Connectedness

- Cultural “rites of passage”, the “transmission of cultural expectations and values”, and the cultural concept of “interconnectedness” was found to be protective against adolescent alcohol abuse (Allen et al. 2006)
- Adolescents who had an “interest in (his or her) tribe’s culture” were less likely to display violent behavior (Pu et al. 2013)

# Family Connectedness

- All 8 studies mentioned family connectedness as having positive effects on AIAN adolescents
- 6 identified family connectedness as being a *highly influential* protective factor for AIAN adolescents
- “Perceived family caring” was associated with adolescent mental health (Cummins et al. 1999)
- “Maternal warmth” was found to be a protective factor in fostering academic success (Whitbeck et al. 2001) and resilience (LaFromboise et al. 2006)

# Family Connectedness

- “Close relationships with parents” was found to be protective against adolescent alcohol use (Allen et al. 2006)
- “Perceived parental monitoring” was found to be protective against adolescent violent behavior (Pu et al. (2013)
- “Parent-child relationships” were found to be protective against adolescent substance use (Whitesell et al. 2014)

# Power of Protective Factors

- Increasing the number of protective factors available to AI/AN adolescents is *as effective or more effective* in promoting healthy behaviors than decreasing risk factors (Borowsky et al.1999; Mackin et al. 2012 )
- Interventions that focus on enhancing protective factors are especially beneficial because the positive health effects affect *all* members of a community (Mackin et al. 2012)

# Recommendations from the literature

- Intervention goals should align with local AI/AN community definitions of wellness and health (Mohatt et al., 2011)
- Identify protective factors within the context of the lives of the specific population targeted for the intervention (Allen et al. 2006)
  - In doing this, the protective factors will be culturally relevant to the target population and **better suited for guiding intervention efforts** as compared to protective factors identified by academic researchers alone.
- Allow the community to define their own personal, familial, environmental, and cultural strengths (Allen et al., 2006; Stiffman et al., 2007)

# Recommendations

- Create environments rich in protective factors
  - Focus on strengthening self-efficacy, cultural connectedness, and family connectedness within *all* adolescent environments (in homes, schools, greater community)
- Leverage *local* cultural strengths in designing interventions
  - Native cultures may be very different from one another- focus on *local* cultural strengths

# Recommendations

- Preserve and revitalize Native culture
  - Given the importance of cultural protective factors, cultural preservation and revitalization efforts are critical to ensure AI/AN adolescents have access to unique protective factors only their cultures can provide.
  - *“Traditional (AI/AN) culture, when allowed to flower, provides an informal, flexible, strength-based, prevention oriented system with long-standing traditions”* (Pavkov et al. 2010)

# Sources for this presentation

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Thank you for  
listening...Questions?