Brighter Days

SUPER: Substance Use Prevention Evidence-Based Resource, UCLA ISAP
Developer website: https://brighterdaystx.org/our-services/cbsg-program/
Practice record last updated September 9, 2026

Cost	Prevention Category	Practice Focus	Practice Focus
Over $500	**Selective, Indicated**	**SU**	**MH**

Practice Summary

Brighter Days (formerly known as “Rainbow Days”) is a multi-cultural preventive intervention designed for children and youth ages 4-17 who are at high risk for substance use and other socio-behavioral problems. The program brings participants together in small group settings, where they develop skills related to handling difficult family situations, resisting negative peer pressure, setting and achieving goals, making healthy choices, and refusing alcohol, tobacco, and drugs. Brighter Days offers one curriculum for 4-12 year-olds and another for 10-17 year-olds.

Practice Details

Substance Use Prevention Category	• Selective • Indicated
Practice Level	• Individual • Relationship • Community or Society
Substance Use Prevention Strategy	• Education
Practice Components	**Individual** • Connection to More Services • Cultural/Religious Focus • Pro-Social Connections and Activities **Relationship** • Parenting Education/Skills • Peer Norm Development **Community/Society** • Community-Based Processes
Population Age	• Age 6-12 • Age 13-17
Populations of Focus	• Black or African American • General Population • Hispanic or Latino • Persons Experiencing Homelessness
Settings	• School (K-12)
Parent/Caregiver Involvement	• Required
Recommended Staffing	• Prevention staff • Teachers or educators

Prevention Focus	**Substance Use Prevention Focus** • Alcohol • Cannabis • Substance Use - General • Tobacco **Mental Health Wellness and Promotion Focus** • Mental Health - General
Training and Technical Assistance	Brighter Days requires facilitator training, which is available both in-person and online. For further information on training opportunities and requirements, visit the Brighter Days website listed above.
Program Costs	Over $500. Please visit the developer's website listed above for updated information about implementation costs.
Adaptations	The program has been adapted for use in Christian faith-based settings and in homeless and domestic violence shelters, group homes, and other transitional settings.

Risk and Protective Factors

Youth Substance Use Risk and Protective Factors

Level	Risk Factors	Protective Factors
Individual	• Conduct Disorder • Early and persistent antisocial behavior • Early initiation of substance use • Favorable attitudes towards substance use • Rebelliousness • Negative emotional state • Poor coping skills and behaviors	• Ability to adapt to change and the belief in one's ability to control what happens • Positive social orientation (e.g. engaging in healthy activities, accepting rules and community values, positive social engagement) • Positive temperament • Emotional self-regulation • High self-esteem • Personal engagement in two or more of the following: school, peers, athletics, employment, religion/spirituality, culture • Strong coping skills (e.g., problem-solving skills, ability to stand up for beliefs and values)
Family and Relationships	• History of family substance misuse • Lack of adult supervision • Family conflict • Family experiences of poverty • Family management problems • Substance use among caregivers	• Communication and contact between caregivers and youth • Clear expectations for behaviors and values • Family environment with structure, rules, predictability, and parental supervision • Supportive relationships with family

Level	Risk Factors	Protective Factors
School, Peer, and Community	• Lack of plans or ambitions for the future • Academic failure • Low commitment to school • Norms favorable towards substance use • Substance use among peers	• Community norms, beliefs, and standards against substance use • Opportunities for the development of skills and interests • Schools and student bodies with strong academic commitment • Opportunities for prosocial engagement in the school and community • Physical and psychological safety • Positive social norms • Presence of mentors and healthy adults for positive emotional support

Youth Mental Health Risk and Protective Factors

Level	Risk Factors	Protective Factors
Individual	• Conflicting thoughts around religious/ spiritual beliefs • Exposure to stressful and/or traumatic life situations • Low self-esteem • Negative emotional state • Poor coping skills and behaviors	• Subjective sense of self-sufficiency • Emotional self-regulation • High self-esteem • Personal engagement in two or more of the following: school, peers, athletics, employment, religion/spirituality, culture • Strong coping skills (e.g., problem-solving skills, ability to stand up for beliefs and values)
Family and Relationships	• Experiences of child abuse/maltreatment • Family history of mental health problems • Family conflict • Family experiences of poverty • Family management problems • Substance use among caregivers	• Communication and contact between caregivers and youth • Clear expectations for behaviors and values • Family environment with structure, rules, predictability, and parental supervision • Supportive relationships with family
School, Peer, and Community	• Academic failure • Low commitment to school • Norms favorable towards substance use • Substance use among peers	• Opportunities for prosocial engagement in the school and community • Physical and psychological safety • Positive social norms • Presence of mentors and healthy adults for positive emotional support

Shared Substance Use and Mental Health Risk and Protective Factors

Level	Risk Factors	Protective Factors
Individual	• Negative emotional state • Poor coping skills and behaviors	• Emotional self-regulation • High self-esteem • Personal engagement in two or more of the following: school, peers, athletics, employment, religion/spirituality, culture • Strong coping skills (e.g., problem-solving skills, ability to stand up for beliefs and values)

Level	Risk Factors	Protective Factors
Family and Relationships	• Family conflict • Family experiences of poverty • Family management problems • Substance use among caregivers	• Communication and contact between caregivers and youth • Clear expectations for behaviors and values • Family environment with structure, rules, predictability, and parental supervision • Supportive relationships with family
School, Peer, and Community	• Academic failure • Low commitment to school • Norms favorable towards substance use • Substance use among peers	• Opportunities for prosocial engagement in the school and community • Physical and psychological safety • Positive social norms • Presence of mentors and healthy adults for positive emotional support

Empirical Evidence of Impact

Prevention Focus	Outcome	Population Age	Evidence Strength and Study Populations of Focus
Inhalants	Reduced Use or Delayed Initiation	Elementary School	Promising (General Population) [References 1]
Substance Use (General)	Changes in Knowledge, Attitudes, or Beliefs	Elementary School	Promising (General Population) [References 1-2]
Substance Use (General)	Changes in Knowledge, Attitudes, or Beliefs	Middle and High School	Practice-Based Evidence (General Population) [References 2]
Behavioral or Conduct Disorder	Symptom Prevention or Improvement	Elementary School	Promising (General Population) [References 1]
Mental Health (General)	Behavior, Attitudes, and Functioning	Elementary School	Promising (General Population) [References 1]

References

[1] Hedl Jr, J. J. (2009) Reducing interrelated risks for substance abuse, delinquency, and violence. Effects of the Rainbow Days Curriculum-Based Support Group Program. Nonequivalent control group study—Study conducted in 2003; analysis conducted in 2007. Final Report: January 2008. Retrieved from https://brighterdaystx.org/wp-content/uploads/2026/07/cbsg-control-group-study.pdf
[2] Arocena, M. (2006). 2004-2005 State Outcome Evaluation Report: Rainbow Days Curriculum-Based Support Group (CBSG) Program. Report prepared for Texas Department of State Health Services. Retrieved from https://brighterdaystx.org/wp-content/uploads/2026/07/cbsg-statewide-evaluation.pdf

What California Providers Are Saying

What They Like About Brighter Days:

- Only the first lesson focuses directly on substance use; the remainder centers on life skills and emotional growth.
- Non-stigmatizing approach — no fear tactics or punishment-based messaging.
- Skills taught are broadly relevant to all youth, not just those exposed to substances.
- Supports mental health, resilience, peer-pressure refusal, relationships, and self-development.
- Strong observed growth in participants over time — increased confidence, sociability, teamwork, and ability to handle setbacks.
- Creates a safe, supportive environment where children interact organically.
- Many participants go on to extracurricular activities, college prep, and student leadership opportunities.
- Acknowledges that addiction can involve social media and behaviors beyond drugs and alcohol.
- Parents can learn alongside children during Zoom sessions.

Tips and Recommendations for Implementing Brighter Days:

- Plan for 2 years of participation to see the program's full effect on a child's development.
- Be intentional about the "SUD program" label — facilitators report it can create unnecessary stigma in some communities.
- Use games, worksheets, music, and interactive activities to maintain engagement.
- For Zoom delivery, vary websites and activities to avoid repetitive routines.
- Allow students to participate from comfortable environments — some open up more online than in person.
- Expect technology and engagement challenges in virtual sessions; have backup activities ready.
- Translation and cultural-diversity supports are built in — leverage them.
- Emphasize self-control, communication, decision-making, and healthy-boundary skills, not just substance use-related content.