

# Guidebook for the *California Healthy Kids Survey*

## Part I: Administration

2004-2005 Edition

Austin, G., & Duerr, M. (2004).

WestEd



CALIFORNIA  
**Safe and Healthy Kids**  
PROGRAM OFFICE



CENTER  
FOR EVALUATION  
RESOURCES



# PREFACE

## PURPOSE OF THE SURVEY

The California Healthy Kids Survey (CHKS) is a comprehensive youth health risk and resilience data collection service for local education agencies (LEAs) sponsored by the California Department of Education (CDE). It can be easily customized to meet local needs, interests, and standards. Three regional service centers provide low cost, full-service technical assistance to LEAs in conducting the survey and using the results to improve health and prevention programs. The services available are listed following this Preface.

CDE funded this survey in 1997 partly in response to requests from schools for help in assessing student health-related behaviors, particularly in meeting the requirements of the federal Safe and Drug Free Schools and Communities Act (SDFSCA). In compliance with the No Child Left Behind Act of 2001, CDE now requires that all LEAs receiving Title IV funds must administer the survey biennially to assess their needs and demonstrate accountability.

More generally, the CHKS grew out of CDE's commitment to promoting the well-being and positive development of all youth. It is rooted in the recognition that improvements in academic achievement cannot occur without addressing the health and behavioral risks that confront our state's youth and establishing environments that support learning. This is especially reflected in the CHKS Resilience & Youth Development Module.

The survey should be used in conjunction with CDE's Getting Results guidebook for developing prevention programs targeting drug use and violence. From the CHKS, LEAs can identify their program needs; from Getting Results, they can determine helpful strategies to address those needs.

## THE ROLE OF THE DISTRICT COORDINATOR

The CHKS service centers are mandated to work with a single District Coordinator at each LEA. (References to District Coordinators also include coordinators in County Offices of Education.) We recommend that this should be the SDFSCA, TUPE, or Health Program coordinator. To ensure the survey's success, the District Coordinator needs to be thoroughly familiar with the survey's goals, content, and methods.

## PURPOSE OF THE GUIDEBOOK

Every effort has been made to minimize local survey responsibilities and costs, but there are still many steps and details involved in successfully conducting the CHKS. This guidebook, along with the on-call technical assistance and training available through the CHKS service centers, is designed to ensure that the process will go easily.

Step-by-step, this guidebook describes the tasks that need to be performed and offers strategies to help you along the way.

The guidebook is divided into two parts:

- *Part I* provides detailed instruction on all aspects of conducting the survey, along with ready-to-use support materials and tools. These instructions are intended to protect the rights of students and their parents, facilitate easy survey administration, and ensure the collection of high quality, representative data. All materials, including separate instructions for school coordinators, teachers, and proctors, can be viewed and downloaded from the CHKS website.
- *Part II* of the Guidebook includes helpful information on understanding and disseminating your CHKS results. To obtain a copy, contact your CHKS Regional Coordinator or visit the website at [www.wested.org/hks](http://www.wested.org/hks).

The CHKS survey system now includes the Staff School Climate Survey. It gathers information from school staff that, in conjunction with CHKS student data, will enrich a school district's ability to understand and address the impact of substance use and violence on the students and the school. This guidebook is designed to help you administer the student survey; separate instructions for the staff survey should be downloaded from our website at [www.wested.org/hks](http://www.wested.org/hks).

## ACKNOWLEDGMENTS

The survey was developed under contract by WestEd, an educational research and development agency, in collaboration with Duerr Evaluation Resources. Assisting in its development were Dr. Rod Skager and an Advisory Committee of researchers; education and prevention practitioners from schools, districts, and county offices of education; and representatives from state public and private agencies. These agencies include the California PTA and the California School Boards Association, the Office of the Attorney General, the Department of Health Services, and the Department of Alcohol and Drug Programs. The recommendations of this committee were invaluable in guiding this project. CDE extends its appreciation to all its members for their dedication to making this project a success.

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<sup>1</sup> Austin, G. & Duerr, M. (2004). Guidebook for the California Healthy Kids Survey part I: Administration. San Francisco, CA: WestEd. Copyright © 2004 WestEd.

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# TECHNICAL ASSISTANCE SERVICES

**HELPLINE:**  
**888.841.7536**

Survey specialists provide on-call consultation to help in all aspects of survey implementation and use. The technical assistance Helpline provides toll-free connections to the closest of three regional service centers (see below). Supporting this service is a comprehensive database that includes profiles for every LEA in the state, monitors their survey needs and issues, and tracks the services provided.

**WEBSITE:**  
**WWW.WESTED.ORG/HKS**

The website facilitates survey planning and implementation by providing online access to information about the survey, the survey instrument, and all support materials. All documents on it can be downloaded, copied, and even modified if necessary. It contains a historical record of survey administration by district and county.

**TRAINING:**

Regularly scheduled free trainings occur in regionally convenient locations throughout the year. Call the Helpline or consult the website for information. District- and county-level trainings are available onsite for a fee.

**LISTSERV:**

A listserv e-mail group links together county and district survey coordinators, project staff, advisory board members, state agencies, and other individuals interested in health-risk behaviors. It provides information about youth risk behaviors, needs assessment, data use, program development, and other issues related to the survey. To join, simply call the CHKS Helpline or send an e-mail to [klavert@wested.org](mailto:klavert@wested.org) with “**Subscribe CHKS**” in the subject line and your **first & last name, place of employment, phone number, and email address** in the body of the message. If you do not have Internet access, you can receive e-mailed messages by fax.

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# ABBREVIATIONS

## ***Surveys***

CHKS	The California Healthy Kids Survey
CSS	The California Student Survey. Also known as the Biennial Statewide Survey of Drug and Alcohol Use among California Students, or the Attorney General's Survey. First administered in 1985 and mandated by the state legislature in 1991.
CSTS	The California Student Tobacco Survey, part of the state-mandated evaluation of the Tobacco Use Prevention Education program.
MTF	Monitoring the Future Survey, sponsored by the National Institute of Drug Abuse. The oldest national survey of student drug use; conducted annually.
RYDM	The CHKS Resilience and Youth Development Module.
YRBS	Youth Risk Behavior Survey, sponsored by the Centers for Disease Control and Prevention.

## ***Programs and Legislation***

LEAP	Local Education Agency Plan (contains CHKS Performance Indicators).
NCLB	No Child Left Behind Act of 2001, which requires schools that accept Title IV funds to assess student substance use and violence and to evaluate programs that address these problems.
SDFSCA	Safe and Drug Free Schools and Communities Act (Title IV), which authorizes and establishes the requirements for the SDFSC program within the US Department of Education.
Title IV	The section of No Child Left Behind Act authorizing the Safe and Drug Free Schools and Communities program.
TUPE	State Tobacco Use Prevention Education program.

## ***Agencies***

ADP	California Department of Alcohol and Drug Programs
CADPA	County Alcohol and Drug Program Administrator
CDE	California Department of Education
COE	County office of education
LEA	Local Education Agency, such as a school district or county office of education
LLA	Local Lead Agency; for community tobacco programs, usually the county health department
OAG	Office of the Attorney General, within the California Department of Justice

## ***Measures***

AOD (ATODV)	Alcohol (tobacco) and other drugs (and violence).
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# I. WHAT IS THE CHKS?

The California Healthy Kids Survey (CHKS) is an easily customized, comprehensive self-report youth survey for grades 5 –12. It assesses all major areas of health-related risk behavior and resilience (assets), with an emphasis on preventing substance use and violence and on promoting positive youth development and well-being.

***The CHKS is an easily customized self-report youth survey that assesses all major areas of health related risk behavior and resilience and can be configured to meet local needs and standards***

The *secondary school* survey consists of a general Core with a set of five behavior-specific supplementary modules, which an LEA can configure to meet local needs and standards. In addition to substance use and violence, individual modules assess physical activity and general health; sexual behavior and HIV/AIDS risks; and resilience or youth assets.

A single *elementary school* instrument provides comparable, developmentally appropriate data focusing on risk and resilience factors.

This section provides an overview to the survey’s purpose, its content and format, its requirements, the reporting process and fees, and the procedures for maintaining data confidentiality. Subsequent sections provide a step-by-step guide to the tasks that need to be performed by District Survey Coordinators. These tasks are grouped into three areas:

- survey planning (Section II);
- parental consent (Section III); and
- survey training, preparation and administration (Section IV).

## PURPOSE

***Building schools as drug-free, safe havens for healthy, positive human development is central to a school’s ability to promote academic success among all students***

Appendix B elaborates on the many reasons for conducting the CHKS. Perhaps most important, it provides data to guide efforts to reduce student health risk behaviors and build schools that are drug-free, safe, and supportive havens for healthy, positive youth development and achievement. A recent analysis of the relationship between CHKS indicators and state academic performance test scores has shown that these efforts are central to a school’s ability to promote academic success among all students.<sup>1</sup> As stated in CDE’s Health Framework, “Growing numbers of children are coming to school with a variety of health-related problems that make successful learning difficult or

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<sup>1</sup> See CHKS Factsheets 1 & 3, located at [www.wested.org/hks](http://www.wested.org/hks).

impossible.” The CHKS helps schools identify these problems so they can address them programmatically.

Increasingly schools also are required to collect and use data to assess student needs, justify program funding, guide program development, and monitor their progress in achieving program goals. The CHKS supports these efforts across the full range of health-related behaviors.

More specifically, it was developed to help LEAs:

- Meet program requirements of the federal Safe and Drug-Free Schools and Communities Act (SDFSCA), as specified in *No Child Left Behind*, and the state Tobacco Use Prevention Education (TUPE) program (see Exhibits 1.1 and 1.4);
- Provide a thorough understanding of the scope and nature of local youth health-risks and asset-based resilience;
- Develop better comprehensive health programs and send a positive message to youth, schools, and communities about the importance of healthy behavior; and
- Focus their prevention programs on promoting positive youth development and not just on stopping negative behaviors from occurring.<sup>2</sup>

**The Community Context.** Although primarily intended to support school programs, the CHKS also assesses health risks and assets within the community. CDE hopes the survey will promote the school-community collaboration necessary to the success of prevention efforts.

**The State Context.** On the state level, the CHKS is designed to:

- Promote the collection of uniform data across LEAs that are also comparable to existing state and national survey datasets;
- Reduce the number of requests for LEAs to participate in different health-related surveys by creating a single comprehensive survey; and
- Create an aggregated state dataset that will enable statewide assessment and program planning, and guide policy and funding decisions.

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<sup>2</sup> See Appendix B for more thorough discussion of the rationale for conducting the survey. Answers to frequently asked questions about the survey are available on the website at [www.wested.org/hks](http://www.wested.org/hks).

**CSS Integration.** As part of the state’s efforts to reduce survey burdens on the schools, the CHKS has now been fully integrated with the statewide Biennial California Student Survey (CSS), so that districts can combine their participation in the CSS and their own CHKS administration at the same time. This integration further provides state norms from the CSS for all the mandated CHKS items for comparison with local results. (For more on the CSS, see [www.wested.org/cs/we/view/pj/244](http://www.wested.org/cs/we/view/pj/244).)

## SURVEY CONTENT AND FORMAT

The content of the elementary and secondary CHKS is summarized in Exhibit 1.2 (and itemized in detail in Appendix A). The survey is designed to provide data on both negative (risk) and positive health-related behaviors, as it is equally important to highlight what kids do right as to understand their risk behaviors.

### Secondary School Survey

The CHKS secondary school survey is unique in using a set of modules—a general Core and five subject-specific supplements. The modules preserve data standardization and comparability, while providing choices so that an LEA can customize its survey to meet local needs and interests, and to reflect local standards. The middle school modules are shorter and simpler than the high school modules, and have a few different, developmentally appropriate items and response options.

**Required Core Module A.** The Core Module contains items that are considered most valuable for a comprehensive, general assessment of health risks, specifically relating to alcohol, tobacco, and other drug (ATOD) use, school violence, and physical health. It meets all SDFSCA reporting requirements, including data for the state-identified school district Performance Indicators (Exhibit 1.1). CDE requires the Core module to be administered by all participating LEAs with secondary schools.

**Resilience & Youth Development Module B.** This state-of-the-art module assesses developmental assets (protective factors) critical to healthy development and academic success. Used in conjunction with other CHKS modules or as a stand-alone assessment tool, the RYDM fills the need for a comprehensive measure of protective factors and resilience strengths for prevention and youth development programs. It also includes a 5-item School Connectedness scale derived from the National Longitudinal Study of Adolescent Health.

The RYDM school- and community-related items (questions 1-23) are required for California school districts accepting funding from

*The CHKS Resilience & Youth Development Module fulfills the need for a comprehensive measure of assets for youth development programs*

Safe and Drug Free Schools and Communities (SDFSC) under the *No Child Left Behind Act* (NCLB). The rest of the module is optional (questions 24 - 56), but may not be administered independent of the first part.

**Supplementary Modules C-E.** Three supplemental modules provide more detailed information on subjects covered by the Core Module, including factors that may influence these behaviors. They are:

- Module C: Alcohol and other drugs (AOD) and violence (including suicide);
- Module D: Tobacco use and program assessment (required for competitive TUPE grantees; see Exhibit 1.4); and
- Module E: Physical health and nutrition.

**Sexual Behavior Module F.** Provides data not covered in the Core relating to sexual behavior, pregnancy, and HIV/AIDS risk.

**Custom Module G.** As discussed under Task 8, you can also create a Custom Module of items of your own selection to address local program needs. This feature may be especially useful for preserving trend data from other surveys you have used or for integrating the CHKS assessment into an overall program evaluation process.

## Elementary School Survey

The single (nonmodular) elementary school version is built around CHKS Core and Resilience & Youth Development items. It is intended for use in grade 5, but it is also appropriate for grades 4 and 6. Now required under SDFSCA, it provides baseline data to support the implementation of comprehensive K-12 prevention and health programs. It contains many of the same or similar items as the middle school version in order to have cross-survey comparability. It also differs from the secondary version in several respects.

- It is focused less on assessing behavior than on the risk and resilience factors that influence behavior. This is because most risk behaviors are very uncommon among youth under grade 7.
- Item wording is simpler and developmentally appropriate.

The instrument covers:

- Lifetime use of alcohol, tobacco, marijuana, and inhalants, as well as intoxication while at school, perceived harm, and availability (providing data for the state-identified Title-IV Performance Indicators);



- Harassment and bullying at school, carrying weapons on campus, and perceived school safety;
- Physical activity, diet, and body image;
- Health-related out-of-school activities; and
- Developmental assets, using shorter scales than the secondary school Resilience & Youth Development Module.

### **Instrument Development Criteria**

Secondary school survey items were primarily drawn from two existing instruments: (a) the state-mandated, biennial California Student Survey (CSS), sponsored by the Office of the Attorney General; and (b) the Centers for Disease Control and Prevention's Youth Risk Behavior Survey (YRBS). This provided CHKS comparability to state and national data, and advanced survey integration in California. Many of these questions are also comparable to the benchmark national Monitoring the Future Survey, funded by the National Institute on Drug Abuse.

In addition, we included other items recommended by the CHKS advisory committee and a panel of experts. Most significant, staff developed the innovative Resilience & Youth Development Module. Later questions were also added to assess areas required by NCLB.

Three main criteria guided item selection:

- Value for addressing ATOD use and violence, to meet SDFSCA and TUPE reporting requirements including monitoring progress in meeting the CDE-selected Performance Indicators<sup>3</sup>;
- Value for providing a well-balanced set of comprehensive health-risk and resilience data; and
- Value to schools for program development.

### **Instrument Format**

For convenience, and to reduce costs, a single, separate, scannable answer form is used. This format enables an LEA to configure a custom survey by selecting those optional modules that provide the data of greatest concern, as discussed in Section II, Task 8.

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<sup>3</sup> See CDE's Annual Report instructions or the CHKS website for a complete list of these Performance Indicators and corresponding CHKS items.

## SURVEY REQUIREMENTS & OPTIONS

CDE requires that all LEAs administer the CHKS at least once every two years if they accept funds under federal Title IV Safe and Drug Free Schools and Communities (SDFSC) Program or state Tobacco Use Prevention Education (TUPE) competitive grant program.<sup>4</sup> To be in compliance, LEAs must meet the following minimum requirements:

- Conduct a representative **district-level survey** with students in grades 5, 7, 9, and 11 in comprehensive schools, as well as *all* students in non-traditional, alternative, or continuation schools, as determined by the CHKS sampling plan. This includes charter schools that receive SDFSC or TUPE funding through the district (See Task 9);
- Provide the opportunity to participate in the survey to all **private schools** that receive SDFSC services from the district (Task 5);
- For secondary schools, administer the **Core Module A** and the school and community asset questions (items 1-23) in the **Resilience and Youth Development Module B**. Competitive TUPE grantees must also administer the Tobacco Module D; other recipients of categorical program funding from CDE should check with their program monitor to determine other module requirements (Task 8);
- *For grades below seven*, obtain **active consent** from a parent or guardian for each student in the sample (Section III);
- *For grade seven and above*, obtain **active or passive consent** for each student in the sample (Section III);
- Meet all **survey representativeness standards** set forth by CDE (see Exhibit 1.3);
- Follow all survey administration **instructions** and submit **transmittal information** (including the Data Verification Form) with the completed surveys (Section IV); and
- **Provide the results** (completed answer forms) to the state (CDE) for statewide aggregation and analysis (Task 29).

These requirements are designed to ensure that:

- All LEAs administer the survey in a standardized manner;
- There is a common set of items to compare across LEAs;
- All legislative and programmatic regulations are met (e.g., SDFSCA and TUPE); and
- Results are representative, valid, and, therefore, useful.

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<sup>4</sup> The CHKS is also required by schools that have afterschool programs funded under the 21<sup>st</sup> Century Community Learning Centers program, as part of their evaluation efforts.

These requirements are included in a Memorandum of Understanding that the District Coordinator must sign prior to conducting the survey (Task 13, Appendix D). Further details on survey requirements, including the requirements of the Staff School Climate Survey, can be found in the Requirements section or Frequently Asked Questions page of our website: [www.wested.org/hks](http://www.wested.org/hks).

### **Meeting Survey Requirements**

Meeting these criteria is very important. To ensure your investment in the CHKS pays off, you need data that accurately describe the entire student population in your district. This requires that those students participating in the survey be representative of the entire student population for their grade level. Representativeness is threatened whenever schools, classrooms, or students selected to participate in the survey decline to participate. If the results are not representative, they will not be as valid or useful to you.

***Reports will include information reflecting how well an LEA met the survey requirements and the quality of the data***

***In making funding decisions, CDE intends to consider how well your CHKS met survey standards***

To assist in determining how well your district met these requirements, your survey report will include an evaluation of the data's representativeness based on meeting the five sample standards listed in Exhibit 1.3. This evaluation will indicate whether the survey fully met these standards, was borderline, or failed to meet them.

**This information will be provided to CDE for use in making decisions in regard to future program funding and NCLB compliance.** CDE will take into consideration not only that the CHKS was conducted but how well it was conducted. If a district fails to meet one or more of the standards, it should document the reasons in writing for CDE. This should documentation of the following:

- that a good faith effort was made by the district to achieve all of the standards,
- any unusual circumstances that contributed to the failure to meet one or more of the standards, and
- strategies that will be in place for the next survey administration to ensure that all standards are met.

### ***Survey Options***

In addition to the minimum survey requirements, LEAs have several options in designing their survey, described later in this manual. For example, you may:

- survey other grades;
- add your own questions;
- delete questions from supplementary modules (i.e., any module that is not required);

- obtain representative data for each school in order to obtain school-level reports;
- incorporate the survey into an overall program evaluation; and/or
- collaborate in a countywide survey effort.

## SERVICES AVAILABLE AND COSTS

The CHKS is more than just a survey instrument. It is a comprehensive technical assistance and support system with the long-term goal of developing local capacity to not only conduct the CHKS, but also to analyze, report, and use the results. CDE has funded a wide range of free basic technical assistance to every LEA that conducts the survey according to its requirements, as listed at the beginning of this guide.

A few services do involve cost-recovery fees because of the limits of state funding and the need to allocate services equitably across LEAs, regardless of size and variability in service needs. These fees fall into two categories:

- per-student costs for the scannable answer forms and their processing to prepare a report; and
- custom service requests, such as creating a Custom Module, local onsite training, survey administration, preparation of school-level reports, data analysis, or program evaluation assistance.

***The CHKS is not only a survey, but also a comprehensive technical assistance system***

Although these fees are necessary, CHKS services are designed to minimize LEA costs for materials, processing, and report generation. CDE's goal is to enable LEAs to conduct the survey as easily and inexpensively as possible. All fees are based on the real costs of performing each service, and cost estimates will be provided in advance for any custom-service requests. Whenever a fee applies, it is noted in this manual.

## SCANNING AND REPORT PREPARATION

The per-student fee covers the cost of printing, providing, and processing each answer form, and generating the final district-level report. Each participating LEA will receive its student survey results in two documents: a *Key Findings* summary and a full *Technical Report*. Both reports are written so that the results can be clearly and easily communicated to parents and the community. Their content is described in Exhibit 1.5.

### **The Aggregated CHKS Dataset**

One of the participation requirements is that LEAs provide their results to CDE for aggregation into a statewide database. The CHKS data base is primarily used by CDE for:

- Determining categorical program needs (e.g., Title IV).
- Analyzing categorical program differences (i.e., those districts with specially funded programs compared to those without) and other categories of school types;
- Assessing county and regional differences;
- Identifying emerging behaviors at the local level that need to be addressed by state programs and policies; and
- Providing comparison data for each LEA.

An example of how the database may be used is the series of *CHKS Factsheets* that can be downloaded from the Reports & Resources page of the HKS website. They report on analyses of differential changes in tobacco use between TUPE high school grantees vs. nongrantees (*Factsheet 2*), and the relationship of CHKS health indicators to Academic Performance Index scores (*Factsheet 1*) and to changes in SAT-9 scores over time (*Factsheet 3*).

### **Data Confidentiality and Access**

Preserving the confidentiality of the student data is a concern for all districts. Each LEA is required to sign a Memorandum of Understanding that includes an agreement to protect the confidentiality of the data (Appendix D). If the number of respondents is so low that it might be possible to identify individual, classrooms, or groups of students from the results, precautions must be taken to prevent this. It is CHKS policy never to report results that would violate the students' confidentiality.

Your local results are confidential and will be reported only to you. However, NCLB requires that survey results be publicly reported; they are subject to the California Public Records Act and must be made available to the public (if requested). All external requests for data to the CHKS Regional Centers will be referred back to the designated district contact person. The County Offices of Education (COE) must notify districts of requests for county-level data. COEs will not be granted access to district- and school-level data unless permission is obtained from each individual district.

California school districts must also include CHKS data on the state-identified Performance Indicators in their Annual Report, which is posted online and is accessible by the public. In good faith, HKS staff

are required to notify interested parties that some data are available through the Annual Report website.

The aggregated state-level results also will be available to public and research agencies for analyses under strict conditions of confidentiality. No school identification information will be included in a dataset unless a Memorandum of Understanding is signed with CDE agreeing that the results of any analyses will not be released in any way that will enable a school or district to be identified without district approval.

**Exhibit 1.1. SDFSCA "Principles of Effectiveness"**

*No Child Left Behind, Section 4115, Authorized Activities under the Safe and Drug Free Schools and Communities Act*

**TITLE IV—21<sup>ST</sup> CENTURY SCHOOLS**

**PART A—SAFE AND DRUG-FREE SCHOOLS AND COMMUNITIES**

**SEC.4115.AUTHORIZED ACTIVITIES.**

(a) PRINCIPLES OF EFFECTIVENESS.

(1) IN GENERAL. For a program or activity developed pursuant to this subpart to meet the principles of effectiveness, such program or activity shall -

(A) be based on an assessment of objective data regarding the incidence of violence and illegal drug use in the elementary schools and secondary schools and communities to be served, including an objective analysis of the current conditions and consequences regarding violence and illegal drug use, including delinquency and serious discipline problems, among students who attend such schools (including private school students who participate in the drug and violence prevention program) that is based on ongoing local assessment or evaluation activities;

(B) be based on an established set of performance measures aimed at ensuring that the elementary schools and secondary schools and communities to be served by the program have a safe, orderly, and drug-free learning environment;

(C) be based on scientifically based research that provides evidence that the program to be used will reduce violence and illegal drug use;

(D) be based on an analysis of the data reasonably available at the time, of the prevalence and risk factors, including high or increasing rates of reported cases of child abuse and domestic violence; protective factors, buffers, assets; or other variables in schools and communities in the State identified through scientifically based research; and

(E) include meaningful and ongoing consultation with and input from parents in the development of the application and administration of the program or activity.

(2) PERIODIC EVALUATION.

(A) REQUIREMENT. The program or activity shall undergo a periodic evaluation to assess its progress toward reducing violence and illegal drug use in schools to be served based on performance measures described in section 4114(d)(2)(B).

(B) USE OF RESULTS. The results shall be used to refine, improve, and strengthen the program, and to refine the performance measures, and shall also be made available to the public upon request, with public notice of such availability provided.

## Exhibit 1.2. Survey Content

**Elementary Survey.** The single (nonmodular) elementary school survey is built around CHKS Core and Resilience & Youth Development Items. Like the secondary survey, it meets all the requirements of the *No Child Left Behind Act*, including items assessing the CDE-identified SDFSCA Performance Indicators. Topics include harassment and bullying at school, safety issues, physical health, and developmental assets, using shorter scales than the secondary Resilience & Youth Development Module.

**Module A: Core.** The Core module (*required*) collects demographic background data (age, sex, race/ethnicity, height, weight) and covers key questions in five priority areas: alcohol and drug use, tobacco use, violence and school safety, physical activity, and diet. It provides a comprehensive overview to health-related behavior and attitudes, and meets all the requirements of the *No Child Left Behind Act*, including items assessing the CDE-identified SDFSCA Performance Indicators.

**Module B: Resilience & Youth Development.** The growing popularity of resilience- or asset-based prevention and youth development programs created a need for a comprehensive assessment tool that is theoretically sound, developmentally and culturally appropriate, reliable, and valid. The CHKS Resilience & Youth Development Module fills this void. Developed with the assistance of a national panel of experts, it measures 11 external assets and 6 internal assets. The external (or environmental) assets include caring relationships, high expectations, and opportunities for meaningful participation in the school, home, community, and peer group. Internal assets consist of cooperation and communication, empathy, problem-solving, self-efficacy, self-awareness, and goals and aspirations. It also contains a School Connectedness scale derived from the National Longitudinal Study of Adolescent Health. *The school and community asset items (questions 1-23) are required of all LEAs conducting the survey, along with the Core Module.*

**Module C: AOD Use & Safety (Violence & Suicide).** This module consists largely of items from the California Student Survey relating to AOD use and violence that are not included in the Core. Less school-specific than the Core, it includes general questions about frequency of AOD use in the past six months, AOD-related problems, drug sale, perceived use by adults, fighting, bullying, and weapons. It can help you understand the dynamics of these problems and provides greater comparability to state norms. It also includes suicide-related items derived from the YRBS.

**Module D: Tobacco.** This module enhances the survey's value for the state's Tobacco Use Prevention Education (TUPE) program and is *required of all competitive TUPE grantees*. It provides a more comprehensive picture of tobacco use and attitudes. Whereas the Core focuses primarily on cigarette smoking prevalence, perceived harm, and availability, Module D assesses a wider range of tobacco-related behaviors and attitudes in greater depth, and provides program-related data.

**Module E: Physical Health.** This module provides additional information on physical activity in and out of school, body image, behaviors related to weight loss or maintenance, physical risks associated with sports and motor vehicles, and general health, including doctor visits. The majority of the items have been derived from the YRBS. To fully prevent substance use and violence, it is essential to examine how they are related to overall physical and mental health. Many of the behaviors assessed by this module have also been linked to school performance.

**Module F: Sexual Behavior (Pregnancy & HIV/AIDS Risk).** The items in this module, the majority derived from the YRBS, assess sexual experience, patterns, and attitudes, pregnancy history, and HIV-related risk behaviors. They cover number of partners (a main HIV risk factor), perception of peer behavioral norms, use of contraception, AOD use before sexual intercourse, family discussion, and exposure to HIV/AIDS education. Early sexual activity is associated with involuntary first intercourse, sexually transmitted diseases (including HIV infection), and unwanted pregnancy. Teenage parents risk experiencing several social and economic disadvantages, including lower incomes, less formal education, higher rates of unemployment, and marital disruptions.

**Module G: Custom Module.** You can create a module of your own design of up to 60 items with as many as 13 response options. This module is especially useful for LEAs that want to: (a) add items specific to their programs as part of an evaluation effort, (b) integrate the CHKS with other ongoing data collection efforts, or (c) preserve trend data from previous surveys not covered by CHKS items.



### Exhibit 1.3. Survey Representativeness Standards

CDE requires that a survey must meet the following minimum standards to insure that data are representative and valid. Districts that ultimately meet standards 1, 2, and 3, and EITHER standard 4 or 5 will be certified as having collected representative data.

1. 100% of all district schools participated; or 100% of all selected schools participated in an approved sampling plan;
2. An appropriate class subject or class period was identified and used;
3. 100% of selected classrooms participated; and EITHER
4. 70% or more of parents within each grade's selected sample returned signed permission forms (either consenting or not consenting – in the case of active consent); or
5. The number of usable answer forms received per grade was 60% or more of the selected sample.

This information will be available to CDE, which intends to use it in making grant-funding decisions. Those districts that proceed in good faith but nevertheless end up slightly short of meeting these standards will be considered borderline. Borderline is defined as falling short of the standard by no more than 10 percentage points. An example would be that a district only received between 50% and 60% usable answer forms for 7th grade students or that only 90% - 100% of the selected schools in the district participated in the survey.

*Please note that these standards are **minimum** requirements set by CDE. Response rates of 70% or more are strongly recommended in order to obtain valid, representative data.*

### **Exhibit 1.4. TUPE Program Survey Requirements**

#### *TUPE Entitlement Recipients*

Any LEA receiving Tobacco Use Prevention Education (TUPE) entitlement funds from CDE must administer the CHKS every two years and comply with all the minimum survey administration requirements.

#### *TUPE Competitive Grantees*

Any LEA that receives state funding for competitive TUPE middle school or high school grants must include the Tobacco Module D (in addition to the Core and questions 1-23 of the RYDM) in their district administration of the secondary CHKS within one year of program startup and every other year during the period of funding. In the case of overlapping TUPE grants, it is not necessary to administer the survey more often than every two years. Along with this requirement, CDE increased the per-student funding of the grants to cover survey-related expenses.

*For further information about the specific program requirements, contact your district's CDE consultant in the Safe and Healthy Kids Program Office.*

### **Exhibit 1.5. CHKS Report Content**

The results of both the elementary and secondary surveys are provided in two types of reports: the *Key Findings* and the main *Technical Report*. Datasets, containing the raw data for analysis by an evaluator or other statistics-savvy individual, are also available by request.

#### *Key Findings*

This short summary is intended for public dissemination and provides selected results from the required modules (Core & RYDM) in tabular and graphic form, accompanied by brief descriptions of the purpose of the items and their meaning. The text is written from the perspective of the school district so that it can be directly duplicated and disseminated to parents, schools, community, and the media. It includes overhead transparencies of key graphs for presentations, and state and national comparison data.

#### *Technical Report*

The report contains detailed results by grade for each item in the survey, along with a discussion of the meaning and significance of the items, and their program implications (i.e., why the item was asked), as well as suggestions for comparisons across items and further analysis. This is intended to help LEAs better understand their findings and determine what to do about them. The report is organized by module and by subject matter.

## II. PLANNING THE SURVEY

In this section, we outline the tasks involved in the initial planning of the survey. Exhibit 2.1 lists the responsibilities of both the LEA and CHKS staff for the duration of this process. Careful, advanced planning is critical to the survey's success. Ideally, you should allow at least twelve weeks for planning and conducting the survey. It is essential to regularly monitor and make frequent follow-up calls to check on the status of each task at each school.

***Make frequent follow-up calls to check on the status of each task at each school***

To assist in the planning process, Exhibit 2.3 lists several basic planning questions, while Exhibit 2.2 provides a survey checklist for planning and monitoring. Each task on this checklist corresponds to the tasks listed in the remainder of this guidebook; they should be used together to plan and track your progress on CHKS activities. Dates refer to the number of weeks prior to survey administration that each task should be completed, and should be modified to fit local circumstances and resources. A more detailed planning checklist, with spaces for notes and completion dates, is provided in Appendix C.

### TASK 1. ➡ CONTACT YOUR CHKS SERVICE CENTER

The first step in planning is contacting your CHKS regional service center by calling the toll-free number 888.841.7536. A staff technical advisor will help you determine the minimum requirements for your district and start the process of developing your survey plan. Be sure to be ready with the following information:

- Current enrollment in grades 5, 7, 9 and 11 and *all students* in continuation, alternative, or other non-traditional schools;
- Whether you participate in a program that requires specific CHKS modules, such as competitive TUPE grants;
- Any special district interests and needs relevant to selecting survey modules or requiring questions to be added in a Custom Module; and
- Tentative date when you want to administer the survey.

***Stay in regular contact with your CHKS service center***

It is critically important to stay in regular contact with your CHKS service center to avoid problems. All school interactions and survey plans will be documented in the CHKS database to monitor your progress.

**TASK 2. ➡**  
**FORM ADVISORY**  
**COMMITTEE**

An advisory group of influential school and community leaders can be a tremendous advantage in planning and conducting the survey. It may be especially valuable in addressing local concerns that need to be taken into consideration. Obtain support letters from the members that you can show to the district superintendent and school board.

The basis for such a group should already exist in the local SDFSCA Advisory Council. Make sure there is broad representation from stakeholders such as the following:

- students, teachers, principals, School Site Council members, and other individuals who will be involved in the survey process;
- school board members and the district superintendent;
- key district administrators, such as the Title I or other categorical program directors, the director of curriculum and instruction, and the director of pupil support; or
- key religious, medical, and business leaders, law enforcement, and elected public officials.

**TASK 3. ➡**  
**OBTAIN**  
**SUPERINTENDENT AND**  
**SCHOOL BOARD**  
**APPROVAL**

In most districts, the survey will require authorization from the district superintendent and/or the school board. Even if this is not required, keep them informed about the survey and obtain their support--they are often the people who will receive calls from parents and reporters. In particular, this group will need to know the survey content (i.e., sensitive questions), procedures for protecting parents' and pupils' rights, and the costs to the district. Provide them with a copy of the consent forms you will use (see Task 16). The Frequently Asked Questions, available online at [www.wested.org/hks](http://www.wested.org/hks), may help you respond to their likely concerns.

**Superintendent.** The district superintendent can be the survey's best ally. Meet with him/her as early as possible to discuss the importance of the survey and ask for advice and approval. Review your tentative plans and survey date. (Final survey dates will need to be determined with each school, as discussed in Task 12.) Explore strategies for dealing with potential controversies it might create and for obtaining support. Make sure you are thoroughly prepared to answer questions, and bring with you any letters of support. You may want to postpone a detailed briefing until after you have met with your Advisory Committee (Task 2) and have clarified your survey objectives, modules, and sample (Tasks 6, 8 and 9).

**School Board.** After you have the superintendent's clearance--and ideally, a letter of support--take the same steps with the school board. If they require a formal presentation, use it to your advantage. Since

the media cover most meetings, a presentation to the board can result in wider community knowledge and support for the survey.

TASK 4. ➡  
 NOTIFY COUNTY  
 OFFICE OF EDUCATION

We encourage school districts to work with their County Office of Education (COE) in implementing, disseminating, and using the survey. As soon as you start planning, notify the county SDFSCA, TUPE, and/or Health Coordinator of your intent, and keep the COE informed as your plans progress. This is especially important because:

*Keep your County Office  
 of Education  
 informed of your plans*

- COEs need to know which districts are conducting the survey and when, for county planning purposes. Requests to CDE for access to county data also must be made through COEs.
- The COE may be planning to coordinate a countywide survey effort. By collecting data from all districts within a county in a single time period, you have comparable data for county planning and allocation of resources.
- County funds may be available to help cover the costs for conducting the survey. Many county departments of alcohol and drug programs have funded district surveys.

TASK 5. ➡  
 NOTIFY PRIVATE  
 SCHOOLS

Notify any private schools that receive SDFSCA services from the district that they are eligible to participate in the district CHKS. The CHKS should be part of the SDFSCA services that the district is legally required to offer to the private schools in its area. *However, according to the US Department of Education, private schools are not required to participate because they receive only SDFSCA services and not direct funding.* If a private school does want to participate, the district is responsible for coordinating the survey and paying the direct fees involved from their SDFSCA funds. These fees would be part of the calculation for total services the district can make available, based on the private school's per capita share of the LEA's SDFSCA funds.

Because of their independence, private schools are surveyed individually and their data are reported separately. Private schools may order school-level reports or other custom services, but the district is not responsible for these fees.

TASK 6. ➡  
 DETERMINE SURVEY  
 OBJECTIVES

The CHKS is designed to be responsive to local needs and standards. Work with your advisory committee to identify the main survey

objectives and potential data uses, as well as local concerns and issues that need to be taken into consideration. Address such questions as listed in Exhibit 2.3.

You don't have to have immediate answers for every question, issue, or problem surrounding the survey that emerges at this time. But you do need to start thinking about them and formulate tentative answers or recommendations that you can present to, and discuss with, your advisory committee, superintendent, and school board. This process can also help you clarify your program goals, as specified in the second of the SDFSCA Principles of Effectiveness.

## TASK 7.

### DETERMINE PROGRAM EVALUATION NEEDS

*Be sure to take into  
consideration your  
program evaluation needs*

Be sure to take into consideration your program evaluation needs, as required by the SDFSCA Principles of Effectiveness (see Exhibit 1.1). Because it is such a flexible, customizable data collection system, the CHKS can be used to cost-effectively help monitor and evaluate progress in meeting program goals over time. It is not a complete evaluation in itself, but it can be a valuable component of an overall evaluation strategy. Many of the modules have been developed with program evaluation potential in mind, particularly the Tobacco and Sexual Behavior Modules. The benefits of using the CHKS system in a health or prevention program evaluation include coordinating data collection with the district CHKS, cost savings from using the CHKS data processing system, and comparability with local and state norms (e.g., for comparison of program participants versus nonparticipants).

Program evaluation needs will likely require a modification of the CHKS sample or design. For example:

- Large districts that choose to sample (Task 9) may require **expanding the sample** to add schools where programs are administered.
- **Adding questions** to the survey in a Custom Module that related to program participation and experiences (Task 8).
- Among program participants, it may require **more frequent administration** than every two years (e.g., an annual pre/post).
- Evaluations may also require **tracking of students** over time. The CHKS has developed a special answer form that will allow confidential linking of student data from one survey administration to the next.

LEAs should consult their evaluators and CHKS Regional Center (888.841.7536) to determine their evaluation needs, how the CHKS can assist, and the costs involved.

**TASK 8.** ⇨  
**SELECT SURVEY  
 MODULES AND ITEMS**

Exhibit 1.2 summarizes the content of the elementary survey and secondary school modules (see Appendix A for further details). After you have determined your survey purposes, determine what other CHKS modules you want to administer in addition to the elementary, Core, and required RYDM items, and whether you need to add other questions.

### **Administration Time**

Administration times will vary depending on the skill level of your students and the preparedness of the staff and proctors. Good training of survey proctors is important, as you can lose valuable time for survey administration if the proctors are not prepared.

When pilot testing in average classrooms with professional proctors, the elementary survey was administered in about an hour. At the secondary level, Modules A, C, D, E and F were all administered in a single class period (approximately 50 minutes). As a general rule, at least one, and generally two, optional modules in addition to the required Core/RYDM questions can be administered in a classroom period. If you want to administer more modules, but are unsure whether the students can complete the survey in a timely manner, try taking the survey yourself and add 10-20 minutes to your completion time.

### **Deleting Items**

To preserve comparability across LEAs, any module that is required must be administered in its entirety without any changes (e.g., Core Module, first 23 questions in the RYDM, as well as the Tobacco Module for competitive TUPE grantees). For similar reasons, the wording of the individual questions on the other modules cannot be altered. However, individual questions can be deleted from the supplementary modules if necessary. It is the responsibility of the LEA to physically cross out the items from the questionnaires and answer forms. *Do not change the item numbers for the remaining questions!* The CHKS service center must be informed if you make any changes so that the data processing and reporting system can be adjusted.

***Inform your CHKS regional service center if you plan to modify questions in any way!***

### **Adding Items and a Custom Module**

Determine whether you need to develop an additional customized module of items of your choosing. If you have previously conducted another survey, you may want to continue to ask items from it that are not on the CHKS in order to maintain trend data. A Custom Module also facilitates integration of the survey into a program evaluation or combining it with other ongoing data collection efforts.

You can add a Custom Module (Module G) of up to 60 items, with up to 13 response options for each question. Students can only select one response option per question; no "mark all that apply" options are allowed.

**Fees.** Creating a Custom Module involves an additional fee. The cost will depend on how much work will be required by CHKS staff to develop the module, write the coding and data-analysis program, and report the results. CHKS staff will work with you to identify your needs and then provide a cost estimate.

### Determine Translation Needs

Spanish versions of the surveys are available. Past experience has indicated other language translations are generally not needed in secondary school mainstream classrooms (ESL classes are excluded from the sampling plan). If you decide it is necessary to make a translation into another language, we would appreciate receiving a copy so that we could make it available to others. Concerns about the English reading ability of respondents can also be addressed by using bilingual aides in survey administration who can read the questions to the students.

## TASK 9. SELECT THE SAMPLE

A CHKS technical advisor will help you determine your specific sample requirements. As noted in Section I, the minimum requirement for participation in the CHKS is conducting a representative district-wide, grade-level survey of students who are in grades 5, 7, 9, and 11 in comprehensive schools. (Information about continuation schools is found at the end of this section.)

*Charter schools* within the district that receive SDFSCA or TUPE funding must be included in the district sample. Independent Charter schools that receive funding directly from the state should conduct their own CHKS if they receive SDFSCA or TUPE funding.

### School and Classroom Sampling Procedures

Most LEAs will need to survey all students in each required grade in all their schools. For larger districts, CHKS staff will prepare a sampling plan. As illustrated in Exhibit 2.4, two criteria determine the plan:

- **Number of students.** If a district has 900 or fewer regular students per grade level, all students must be surveyed, regardless of the number of schools. (Note: enrollment means



number enrolled, not the number who received parent consent.) If grade-level enrollment is more than 900, the district may choose to sample. CHKS staff will randomly select classrooms across all schools to reach the target sample of 900. *However, we recommend that sampling be done only if the district has 1600 or more per grade.* This is recommended as enrollments below 1600 tend to leave out just a few classes per school, which could lead to possible resentment on the part of teachers, inability to easily schedule a "grade wide" survey day, etc. Your CHKS technical advisor will determine the number of classrooms per school proportionate to enrollment, and then randomly select the required number of classrooms from class lists (see Task 11).

- **Number of schools.** If a district has ten or fewer comprehensive schools at a surveyed grade level, all schools must be surveyed. A random sample of schools can be selected for districts with more than ten schools with the grades involved AND more than 900 students per grade.

These cutoff numbers were selected by the CHKS sampling panel to balance logistical efficiency with adequate precision of results. If 900 students per grade are selected, the minimum recommended sample size of approximately 625 students can be expected to actually participate—after eliminating those students without returned signed consent forms, those with returned negative consent forms, those who individually decline to participate, and those absent on the survey day.

As emphasized in Section I, meeting the minimum sample requirements is absolutely essential for obtaining representative data and attaining success in CDE competitive grants (see Exhibit 1.3).

### ***Determine Additional Sample Needs***

These are the minimum requirements. You may decide local needs warrant surveying more grades, students, or schools, particularly if:

- you have previously collected data from other grades;
- you have special programs targeting other grades;
- you want to assess differences among your schools; and/or
- you are incorporating the CHKS into a program evaluation (Task 7).

### ***Collecting School-level Data***

As *Getting Results* emphasizes, “School-level planning is...strongly encouraged so that the program is owned by and relevant to each unique school site.” For most LEAs, the survey plan will result in representative data from all schools. However, large LEAs that

***Consider obtaining individual school reports if your schools vary in demographics, programs, or service***

choose to sample may want to expand their sample to allow for school-level data and reports. Generally, this involves including all students in the designated grades in each school. It is up to the LEA to request a report on each school before survey administration. There is an additional charge of \$50.00 for each individual school report.

School-level data are especially valuable if schools in a district vary markedly in their student demographics, programs, or services. However, some schools initially may be wary of being compared and stigmatized. A response to this concern is provided in the Frequently Asked Questions available at [www.wested.org/hks](http://www.wested.org/hks).

### Continuation and Other Nontraditional Schools

***Including continuation schools yields a more accurate assessment of all youth***

To be in compliance with NCLB, you must survey your continuation schools. This provides a more comprehensive picture of health risks among all local youth. Research reveals significantly higher rates of drug use and violence among continuation students. Because grade designations are not clear in continuation schools, survey all students regardless of age or grade. *The results are reported separately.*

Because of the difficulty of surveying and obtaining parental consent in other nontraditional school settings such as *independent study* or students *publicly schooled at home*, their inclusion in the survey is optional. Privately home-schooled students are exempt. For students within the criminal justice system (*court schools, community day schools*), consent may be obtained from the head of Probation (see Task 17).

#### TASK 10. ➡ OBTAIN SUPPORT OF PRINCIPALS AND IDENTIFY SCHOOL COORDINATORS

Once you have determined the survey content and sample, send out letters and information packets to the principals. Include the letters of support you obtained from the superintendent and other stakeholders (Task 3).

Meet with all the principals personally to answer their questions and obtain their support. Emphasize how important it is that they strongly communicate the value of the survey and their expectations that teachers will fully support it and comply with all procedures. The most successful surveys have occurred when the school administration has clearly expressed its expectations for success to the staff. Section III provides other strategies to achieve school support.

***Principals must emphatically communicate their expectations for a successful survey to all staff***

For large districts, have each principal identify one person to serve as the School Coordinator. Even in small districts, it is good to have one person at each school to be an onsite survey spokesperson, encouraging support, making sure participating teachers are well-

informed, and monitoring the consent process. *Send each School Coordinator a copy of the CHKS School Instructions and identify a training date.* It's best if these coordinators meet for a brief training about their role in the survey, as is discussed under survey preparation (Task 23).

## TASK 11. ⇨ SELECT CLASSROOMS

Most districts—as they will be attempting to survey all students in the targeted grade-levels--will need to specify a required class subject for surveying that will cover all enrolled students in each grade in each school. This method also enables LEAs to reuse the survey instruments from one class period to the next, reducing labor and costs. Experience shows that the best required class subjects are English or Health for 7th and 9th grades, and English or History for 11th grade.

As discussed in Task 9, some large districts may need the CHKS to randomly select a sample of classrooms and/or schools to survey. Once the sample has been identified by CHKS staff, the sampling plan must be fully implemented by the district. The selection procedure is as follows:

- The District Coordinator must obtain from each School Coordinator and provide to the CHKS service center numbered lists of all grade-level classrooms in each school, with each class numbered and identified by teacher last name. For example: Washington School: 1) Mr. Perez, 23 students; 2) Mrs. Smith, 30 students; 3) Ms. Yu, 28 students. Martin Luther King School: 1) Mr. Aaron, 28 students; etc. This class list can include either the entire school or just the required classes, whichever is most convenient.
- CHKS staff will randomly select the classrooms and send the list back to the District Coordinator.

## TASK 12. ⇨ SELECT SURVEY DATES

When you initially contact the CHKS center (Task 1), establish a general time period in which you will administer the survey. Then work with the School Coordinators to set up a specific, convenient date for each school. If for any reason you have to change your scheduled date, keep the CHKS service center informed, as well as your COE.

It is not necessary that the survey be administered at all sites to all students on the same day. Surveying across days may enable you to use staff and materials more efficiently, by moving them from

classroom to classroom, school to school. However, the CHKS should be administered over as short a time period as possible.

In general, select dates that do not conflict with other school activities, particularly testing and field-trips. Use the following guidelines:

- **Spring Surveys.** Administer the survey no later than April to avoid busy school schedules and decreased attendance rates, particularly by 12th-grade students, at the end of the school year.
- **Fall Surveys.** October through December is a good time because parent consent can be more easily obtained by sending forms out with registration materials (Task 17). These are also usually months in which other testing is low.
- **Holiday Periods.** Avoid administration after a long school break—particularly right after the Winter holiday—because students may increase their drug use and other health-risk behaviors during these periods. This particularly will affect thirty-day prevalence rates.
- **Special Events.** Do **not** administer the survey during a special event. For example, do not schedule the CHKS for Red Ribbon Week.
- **Poor Attendance Days.** Avoid administering the survey on the following days because attendance may be unusually low: any *Monday or Friday* (especially a Friday before a Monday holiday); the day right before or after *spring break*; and the *last month* of school.

The dates selected can affect not only student participation but also survey results. For example, a survey in the spring may have slightly higher rates than one conducted in the start of the school year, especially in the case of 9<sup>th</sup> graders.

### TASK 13. ⇨ SUBMIT MEMORANDUM OF UNDERSTANDING

The Memorandum of Understanding (Appendix D) outlines the responsibilities of both the LEA and the CHKS Regional Center, and the conditions that must be met in administering the survey. It is your contract with the CHKS team, acknowledging that you will do your part to follow all survey administration requirements. It must be signed and returned to the CHKS before services can be continued.

**Exhibit 2.1. Survey Responsibilities**

<b>ACTIVITY</b>	<b>WHAT LEAs DO</b>	<b>WHAT CHKS STAFF DO</b>
COORDINATION	Select District Coordinator, Advisory Committee, and School Coordinators.	Provide technical assistance to District Coordinator.
MEMORANDUM OF UNDERSTANDING	Sign MOU and send to CHKS office for signature.	Sign MOU and send to LEA.
PLANNING	Determine survey objectives and potential uses of the data.	Provide guidelines for planning & answering questions.
SUPPORT & CLEARANCE	Obtain required approvals, publicize survey, answer questions.	Provide survey rationale and support materials.
MODULE CONFIGURATION	Select modules. Reproduce questionnaires.	Provide master of questionnaire modules for local duplication. Provide all answer forms.
SAMPLING	Provide CHKS with school data for drawing the sample. Review sampling plan.	Prepare sampling plan.
PARENT CONSENT	Modify consent forms, distribute to parents, collect, follow up, & document returns/refusals.	Provide sample consent forms & strategies for obtaining high return rates.
DATA COLLECTION	Select & train survey administrators; administer surveys.	Provide training materials, procedures, & scripts for survey administration.
PROCESSING & REPORTING	Prepare answer forms for scanning. Complete transmittal information and Data Verification Form.	Scan questionnaires. Provide LEA report.
ANALYSIS	Review reports. Assess data implications for LEA.	Provide information on purpose and meaning of items in LEA report.
DISSEMINATION	Release findings to schools, community, and COE.	Provide guidelines & materials for dealing with the media/community.

**Exhibit 2.2. Survey Planning Checklist**

CHKS Checklist			
Date Survey Scheduled: _____			
√	Task	Planning the Survey	Before Survey
		1. Contact Your CHKS Service Center	12 weeks
		2. Form Advisory Committee	12 weeks
		3. Obtain Superintendent and School Board Approval	12 weeks
		4. Notify County Office of Education	12 weeks
		5. Notify Private Schools	12 weeks
		6. Determine Survey Objectives	11 weeks
		7. Determine Program Evaluation Needs	11 weeks
		8. Select Survey Modules and Items	11 weeks
		9. Select the Sample	10 weeks
		10. Obtain Support of Principals and Identify School Coordinators	10 weeks
		11. Select Classrooms	9 weeks
		12. Select Survey Dates	8 weeks
		13. Submit Memorandum of Understanding	7 weeks
		<b>Parental Consent</b>	
		14. Choose a Consent Option: Passive or Active	Before school year
		15. Confirm School Board Consent Policy	Before school year
		16. Develop Parent Consent Letters	Before school year
		17. Distribute Letters to Parents	Before school year and as needed
		18. Monitor Consent Form Returns	Ongoing
		19. Make the Survey Available to the Public	At least 4 weeks
		<b>Survey Training, Preparation, and Administration</b>	
		20. Place Scantron Order	At least 4 weeks
		21. Distribute Survey Materials with Transmittals	4 weeks
		22. Select Survey Administrators (Proctors)	4 weeks
		23. Train School Coordinators, Teachers, and Proctors	Ongoing
		24. Collect Signed Confidentiality Assurances	Ongoing
		25. Prepare to Answer Student Concerns	3 weeks
		26. Confirm Consent and Survey Arrangements	Ongoing
		27. Conduct Survey and Make-Ups	*
		28. Prepare Transmittal Envelopes	*
		29. Mail Materials to CHKS	ASAP after survey

**Exhibit 2.3. Planning Questions**

- What do you hope to learn from the CHKS?
- What information is most important to the district and to different groups in the community?
- What health-related programs do you have in the district that might benefit from CHKS assessment data (e.g., TUPE.)? How might you use the survey results to improve these programs?
- What funding opportunities exist for which you need data?
- How will interest in, or reactions to, the survey vary among groups in your school and community?
- Do you need to expand the survey sample beyond the minimum requirements (Tasks 8 & 9)? For example, if you're sampling, do you need representative data from individual schools?
- Have you used another survey in the past? Are there items from this survey that you might want to add to your CHKS in a Custom Module (Task 8)?

**Exhibit 2.4. Grade Sampling Categories**

Grade Enrollment	10 or fewer schools	More than 10 schools
< 900 students	All schools	All schools
	All classrooms	All classrooms
> 900 students	All schools	Schools randomly selected
	Classrooms randomly selected	Classrooms randomly selected





### III. PARENTAL CONSENT

This section provides guidelines for choosing between two parental consent options (passive or active), consent procedures that must be followed for compliance with state and federal regulations, and tips for ensuring a high response rate.

***The consent process is the most labor-intensive task that a district has to accomplish***

The consent process is the most labor-intensive task that a school district has to accomplish, but also one of the most important. Before any student can take the survey, both parents and students have to be thoroughly informed about the survey following standard guidelines for the protection of human subjects and given the opportunity to decline survey participation.

This task requires care and attention. If you don't reach your minimum student participation rate, you will not have valid, useful results and you won't meet CDE survey requirements (see Section I). Low consent rates can result in nonrepresentative samples and incomplete, inaccurate, or biased data.

If you survey a child whose parents or guardians have not been fully notified about the survey or who can claim that they did not give their permission, they may complain to the U.S. Department of Education Family Policy Compliance Office (FPCO). The FPCO has the authority to investigate complaints of violations of the Protection of Pupil Rights Amendment and the Family Educational Rights and Privacy Act.

#### TASK 14. ⇨

#### CHOOSE A CONSENT OPTION: PASSIVE OR ACTIVE

Based on new state law, CDE has determined that LEAs conducting the CHKS now have the option in grades 7 and above (including alternative schools) of using either passive consent or active consent.<sup>6</sup> In grades below 7, active consent is still required. Each approach is defined below.

- *Passive Consent:* Written notice is sent to parents/guardians about the survey, who in turn notify the school ONLY if they do not want their child to participate in the survey. The challenge with passive consent is ensuring that parents are fully notified.

<sup>6</sup> The Pupil Protection Rights Amendment of 1994 to the federal Goals 2000: Educate America Act requires that any school using US Department of Education Funds to conduct a survey must obtain active consent if collecting information on sensitive areas, including three addressed in this survey: sexual behavior; illegal, antisocial, self-incriminating and demeaning behavior; and mental and psychological problems (see Federal Register, August 28, 1995). California law SB56 requires active parental consent when asking questions relating to sex, religion, morality, or parental beliefs and practices.

- *Active Consent:* No child can be surveyed until a parent/guardian has provided written permission. If a permission form is not returned, it must be assumed that parental permission has not been granted. The challenge with active consent is making sure that parents receive and return the forms to the school.

An overview of each type consent option is provided below. Consider the pros and cons of each option before deciding which to use.

### **Overview of Passive Consent**

The following conditions must be met to use passive consent:

- Passive consent is limited to grades 7 through 12. Passive consent cannot be used below grade 7.<sup>7</sup>
- The survey must be anonymous, confidential, and voluntary.
- The school board formally adopts, in consultation with parents, a passive consent policy for the administration of the CHKS.
- Parents/guardians are notified in writing at the beginning of the school year about the survey, the approximate administration date, and given a reasonable opportunity to review the survey and to decline their child's participation.
- Questions are not added to the survey that elicit reports of parental attitudes or behaviors or any other category that requires active consent under Ed Code 51513 and is not exempted under Ed Code 51938. This includes questions about the pupil's personal beliefs or practices in sex, family life, morality, and religion, or any questions about the pupil's parents' or guardians' beliefs and practices in sex, family life, morality, and religion.

The chief benefits of passive consent are:

- It involves less cost and labor, particularly for the classroom teacher.
- It will almost certainly result in higher response rates.
- Passive consent will probably result in a more representative sample, as many hard-to-reach subgroups, including groups at high-risk of substance use and other problem behaviors, may be underrepresented in active consent surveys.
- One drawback of passive consent is that your district's CHKS trend data may be affected. If AOD use increases, for example, it will be difficult to say that whether this was due to changes in

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<sup>7</sup> Education Code 51938(b) authorizes passive consent only for grades 7 through 12 (see note 1).

students' behaviors or a change in the students being surveyed. WestEd will provide talking points to address this issue.

### Overview of Active Consent

- Active consent may be used at all grade levels. It MUST be used below grade 7.
- The survey must be anonymous, confidential, and voluntary.
- The school board formally adopts, in consultation with parents, an active consent policy for the administration of the CHKS.
- Parents/guardians are notified in writing at the beginning of the school year about the survey, the approximate administration date, and given a reasonable opportunity to review the survey.

The chief benefits of active consent are:

- Districts who survey both 5<sup>th</sup> grade and older students may find it easier to use active consent for all grade levels, rather than using two consent models.
- The primary benefit of active consent is the extra protection against surveying a student whose parent/guardian claims not to have received notification, or who did not approve of participation but failed to inform the school. This extra protection may be important if risk behavior surveys are a sensitive issue in your community.

## TASK 15. ➡ CONFIRM SCHOOL BOARD CONSENT POLICY

Regardless of which consent option is selected, the school board must formally adopt, in consultation with parents, a consent policy for the administration of the CHKS (and any other survey or test) consistent with California Education Code sections 51513 and 51938(b) and the federal Protection of Pupil Rights Act (PPRA), 20 USC 1232h. The school board policy must match the type of consent (whether passive or active) chosen by your district. You will need both policies if you choose to use passive consent for grade 7 or above but must use active consent for 5th grade.

The California School Boards Association (CSBA) has offered, free of charge, sample board policies for passive consent on their website. To view the CSBA samples, visit: <http://www.csba.org/ps/samintro.htm> and scroll down to BP 5022 and AR 5022 under "Parent consent for surveys."

If you have questions about these policies, contact CSBA Policy Services directly. Their services are designed to "help your school

district achieve its educational and governance objectives." Contact Pat Mortensen at [pmortensen@csba.org](mailto:pmortensen@csba.org) or 800.266.3382.

TASK 16. ⇨  
DEVELOP PARENT  
CONSENT LETTERS

After your school board policy is in place, prepare the consent letter/notification form (referred to as “consent letter” for the purposes of this document). Modifiable forms for both active and passive consent can be downloaded from the HKS website at [http://www.wested.org/pub/docs/chks\\_consent.html](http://www.wested.org/pub/docs/chks_consent.html). Translations are available in Spanish. If you make another language translation, we would appreciate receiving a copy so that we can make it available to others.

***You must send a notification letter home to parents before or at the beginning of the school year.***

Current law<sup>8</sup> requires that a letter must be sent out before or at the beginning of the school year on *school letterhead* that fully informs each student’s parents and guardians about the survey. **In most cases, this letter will be the active or passive consent letter described below.** However, for ease in monitoring consent returns, districts using active consent have the option of sending an informative letter before or at the beginning of the school year, and distributing the actual active consent form closer to the survey date.

### **Minimum Requirements for Consent Letters**

Parents must feel confident that every reasonable effort has been made to protect their privacy and that they have been fully informed about the survey. Below is a list of minimum requirements for consent letters, with specific requirements for passive and active consent:

*Passive consent letters* must include the location or person where parents can decline their child’s participation, with instructions on how to do so.

*Active consent letters* must give parents the opportunity to grant or decline their child’s participation, with instructions on how to do so.

Regardless of consent type, letters must contain:

- the survey’s purpose, content, and methods;
- student rights to privacy and confidentiality, and procedures for protecting these rights;
- any potential harm from participation;

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<sup>8</sup> The federal Protection of Pupil Rights Act (PPRA), 20 USC 1232h.

***Remember! Passive consent can only be used for grades 7 and above.***

- the names and telephone numbers *of school or district personnel* to contact for additional information; and
- the location where they can review the instrument (see Task 19).

The following statements must also be added to the letter if administering the specific module, as follows:

- RYDM Questions About the Home Environment, add “To further assess resilience and healthy development, there are questions about adult relationships, expectations, and participation in the home.”
- AOD Use & Safety Module C, add that it includes items on “considering, planning, or attempting to commit suicide.”
- Sexual Behavior Module F, add that it includes questions about “sexual behavior and practices leading to HIV/AIDS, sexually transmitted diseases, and pregnancy.”

**TASK 17. ⇨  
DISTRIBUTE LETTERS  
TO PARENTS**

Although the details surrounding form distribution vary for passive versus active consent, the basic issues are the same. You’ll need to distribute the forms, implement strategies to increase participation, and motivate your school staff. It’s also important to make special considerations when working with non-traditional schools.

**Form Distribution**

***For Passive Consent***

Current law requires the passive consent letter to be sent out before or at the beginning of the school year. *Research and experience show that most parents do not object to student participation. The challenge is making sure that they are fully notified.* Send all consent letters and information via a method that guarantees receipt.

Classroom distribution is not recommended for passive consent because of the risk that students will never give the forms to their parents and will thus be surveyed without permission. Home mailing is strongly recommended for the distribution of passive consent letters, especially options that verify your efforts to inform parents (e.g., those that require a signature from the recipient).

***For Active Consent***

Current law requires that a letter must be sent out before or at the beginning of the school year that fully informs each student’s parents and guardians about the survey. For ease in monitoring consent

returns, districts using active consent have the option of sending an informative letter before or at the beginning of the school year, and distributing the actual active consent form at least two weeks before the survey date. Nevertheless, sending the actual consent letter before the start of school and again closer to the survey may allow time to implement a more aggressive outreach effort if the initial return rate is low.

*Research and experience show that most parents do not object to student participation. The challenge is making sure they return the signed forms.* If a signed consent form is not returned, approval has not been granted.

### ***Tips for Form Distribution***

Consider using the following strategies to help insure that parents receive and return the forms. They are part of the *School Instructions* that we include in each packet of classroom materials you distribute.

- **Combine with other important material** requiring signatures. When possible, send the letter to parents along with other important materials that they have to sign and return. This will increase the chances that the letter will not be overlooked or ignored. For example, it could be included in the registration or enrollment materials sent to all parents in the beginning of the school year, or with the school emergency cards.
- **Use multiple contact techniques.** This is particularly important when employing passive consent, to avoid any parent complaint that their child took the survey without parent awareness. Be sure to document your efforts.
- **Home mailing.** In addition to being the recommended strategy to use for passive consent, home mailing may be useful for active consent when used in combination with other techniques, such as classroom distribution.
- **Announce survey to parents.** Before or while sending out the forms, alert parents through the school newsletter or other communication method when they will be receiving them.
- **Give parents a deadline date.** Give parents a deadline for returning the letter or informing the school that they do or do not want their child to participate.
- **Include letters of support.** Include a letter of support from the superintendent, principal, or other official (see Task 3.)
- **Send all consent information and forms via a method that guarantees receipt.** Preferably, use a method that documents receipt. For example, put the letter into a parent handbook that

the parent signs for, or send via a mailing method that requires a signature from the recipient.

### Motivating School Staff

*Teachers are arguably the most important group that affects the success of the survey*

It is essential that you fully inform and motivate all school staff to support the survey and work to make sure the consent process goes smoothly.

When using *passive consent*, school staff may not be directly involved in the distribution of consent letters or collection of refusals; however, they may be asked to respond to questions by parents or students.

When using *active consent*, staff motivation is especially important; it is the teacher who has to take on the primary responsibilities for obtaining consent and tracking which parents have returned the forms and which have not. The teacher also is the survey representative to parents, the person parents turn to for survey information. Their role in making sure you achieve your targeted response rate—or making sure that you don't survey a student by accident—is absolutely critical. The CHKS website includes a handout of *Teacher Instructions* to assist in this effort.

Regardless of which type of consent you use, it is important to:

- **Motivate the Whole School.** Don't limit your efforts to just the selected classrooms. A supportive environment throughout the school helps overcome pockets of resistance.
- **Involve School Leaders.** Schools that have been most successful in obtaining high student participation rates are schools where there is strong administrative support of the survey. Make sure that the school principal strongly communicates this to the teachers.
- **Promote Awareness.** Make sure all school staff understand the importance of the survey and the critical role that the process plays in making sure results are representative and useful. Teachers who have been involved all along are more likely to be enthusiastic supporters.
- **Express Appreciation.** Send letters thanking the School Coordinator and teachers in advance for their cooperation.

### **Responding to Teacher Concerns**

Some teachers may be resistant to the survey for personal reasons, or because it takes away instruction time, complicates scheduled lesson

plans, or requires more work on their part. These concerns must be overcome. For this audience, emphasize:

- There are links between health and academic achievement that must be taken into consideration in any school improvement effort (for useful information, refer to the Reports & Resources section of the HKS website under Health & Achievement).
- Measures have been taken to make their CHKS tasks as easy as possible, such as model consent forms and procedures, detailed instructions, and scripted administration.
- Though the survey process is challenging, it also offers opportunities to better inform parents about the school prevention and health programs. It can be a positive opportunity for outreach.

### **Working with Continuation and other Nontraditional Schools**

Obtaining consent for continuation and other alternative school students is especially challenging. Not only are they older, but many of the characteristics of these schools and students make obtaining active parent consent very difficult. It is necessary that you double your efforts to make sure that the parents receive and return the forms.

If court or community day schools are included in the sample, a universal consent from the head of Probation can be obtained for all students within the criminal justice system, if judged appropriate under Ed Code Section 51513. Be sure to carefully evaluate your county's guardianship arrangements before surveying.

## **TASK 18. ⇨ MONITOR CONSENT FORM RETURNS**

A critical step in the consent process is monitoring the return of the forms. The method you choose for monitoring returns may vary depending on a school's structure and the method of consent you use. Carefully track the distribution and return of forms so you can identify students whose parents never returned the consent form or declined participation.

*For passive consent*, it may be better to have a single person or office, identified in district policies and communications, responsible for monitoring and recording refusals. This will help avoid parent refusals from slipping through the cracks.



*For active consent*, it is usually most convenient for the classroom teacher to monitor returns. If you have enough advance time, you can mail the consent forms to nonresponding parents. Research shows telephone reminders to nonresponding parents are very effective. If your school has an automated phone calling system, it can be used to send out messages. Incentives for students and teachers may also be effective (see Exhibit 3.1).

If one week before the survey the targeted parent return rates are not being reached in any classroom or school (see Task 26), contact your CHKS service center immediately. It is best to postpone the survey if you cannot meet sample standards.

TASK 19. ⇨  
MAKE THE SURVEY  
AVAILABLE TO THE  
PUBLIC

As a requirement of informed consent (whether active or passive) and of the Protection of Pupil Rights Act, the survey must be *conveniently* available for staff and parents to review. This also helps allay concerns about the survey content, because people will see that this is a general health survey that is not just focused on “problems” and is not invasive. Also, the questions are written with an “assumed negative” response in mind; the first response option for each question allows students to report “no,” they have not engaged in this behavior.

*This survey must be the actual version that is being administered by your district, including all the modules that the district has selected and any additional questions that it has included.* If the content changes after parental notification, parents must be informed of this.

All survey modules can be viewed and downloaded at the CHKS website. However, you should post your survey version on your own district website, rather than the CHKS site, to avoid parents viewing modules with sensitive questions (such as sexual behavior) that you are not administering.

However, because many people don’t have Internet access you must also make it conveniently available at a school site. Public review should occur under supervised conditions to avoid copies being distributed among the students in advance, which might affect the honesty of responses.

### Exhibit 3.1. Active Consent Incentives

Because the biggest challenge in using active consent is making sure the forms are returned, you should consider using financial or other types of incentives for students and/or teachers for enhancing consent form return. Any incentive needs to be tied to the number of forms returned *regardless of whether permission is granted*, in order to avoid the appearance that you are pressuring students to participate.

Local businesses may gladly donate gift certificates or services to demonstrate their support of schools and the well-being of youth in the community. Incentives do not have to be financial, however. Homework credit or other forms of extra classroom credit have been effective. Small incentives tend to be effective with younger students; motivating older students is more difficult. Here are some examples:

- For younger students, give them a special pencil.
- Purchase needed books or supplies for teachers.
- Offer a prize to the school or class with the highest rate of returned consent forms.
- Give extra credit to each student who returns the form (can be very effective at all grade levels).
- Give every student who returns a consent form a free raffle ticket for a valued prize, such as a store gift certificate donated by a local business. This strategy may be especially effective for motivating older students.

If obtaining active parental consent is particularly challenging for your district, download *What Works, Issue 1: Parent Consent Strategies* from the Parent Consent page of the CHKS website ([www.wested.org/hks](http://www.wested.org/hks)). This five-page document explores a multitude of parent consent strategies recommended by California school districts that administered the survey in recent years.

## IV. SURVEY TRAINING, PREPARATION, AND ADMINISTRATION

### TASK 20. ⇨ PLACE SCANTRON ORDER

If you have not already done so, place your scantron order with your CHKS Regional Center. You must visit the Sign-Up page on our website ([www.wested.org/pub/docs/hks\\_signup.html](http://www.wested.org/pub/docs/hks_signup.html)) to make sure you have all of the appropriate numbers and paperwork (e.g., enrollment numbers, MOU, which type of consent you are using); then call the toll-free number 888.841.7536 to speak to a staff technical advisor.

At this point, you may also be required to send a purchase order (P.O.) covering the basic cost of the survey to your CHKS Regional Center. Payment procedures vary slightly by region, so call the CHKS Helpline (888.841.7536) for instructions or visit our Sign-Up page on the web at [www.wested.org/pub/docs/hks\\_signup.html](http://www.wested.org/pub/docs/hks_signup.html).

### TASK 21. ⇨ DISTRIBUTE SURVEY MATERIALS WITH TRANSMITTALS

Upon receipt of your order, the CHKS center will send the District Coordinator a packet of survey materials containing:

- The appropriate number of scantrons for each classroom;
- Transmittal Envelopes, which are used for returning the completed surveys; and
- Instructions for School Coordinators, Teachers, and Proctors, which are tailored to fit the type(s) of consent you are using.
- You may also receive additional paperwork specific to your region –hold on to this information!

As described in Exhibit 2.1, the district is responsible for duplicating the surveys.

#### **Transmittal Envelopes**

It is very important that each teacher keep track of the information required on the Transmittal Envelopes. After survey administration they must be filled out and used to return the completed answer forms. CHKS staff cannot process your answer sheets if there is missing information on the Transmittal Envelopes. It is a good idea to distribute the Transmittal Envelopes at your training meeting (Task 23), and go over the proper way to fill out the envelopes.

## Survey Modules

***Make sure you have the latest version of the survey before duplication and administration!***

The CHKS staff will provide you with a master copy of the modules you select for duplication. You may also download the modules from the our website. It is absolutely critical that you have the latest version when you administer the survey. Each module has a version number indicated on the footer of each page. *Before duplication, contact your CHKS technical advisor and confirm you have the latest version number.*

Because the CHKS uses separate answer forms, you should not have to duplicate a copy of the survey for every student in the sample. With careful scheduling, you can reuse the modules from classroom to classroom, and even school to school. We recommend that you provide each school with enough instruments for two classrooms at each grade level (or about 60 per grade level).

### TASK 22. ⇨ SELECT SURVEY ADMINISTRATORS (PROCTORS)

Survey administrators, or proctors, must be chosen carefully. It may be most convenient to use teachers to administer the survey. However, students feel more comfortable—and will be more likely to provide honest and complete responses—if their own teacher is not the proctor. One option is for teachers in the selected classrooms to administer the survey to each other’s students (i.e., in a classroom other than their own). Persons other than teachers who may be appropriate survey administrators include: (a) staff of your comprehensive school health education program, (b) school administrators; (c) school counselors; (d) school nurses; (e) teacher aides; (f) PTA members, and (g) graduate students from local colleges. You can also train older students to proctor the surveys.

### TASK 23. ⇨ TRAIN SCHOOL COORDINATORS, TEACHERS, AND PROCTORS

As Section II emphasized, it is very important that all people involved in the survey—School Coordinators, teachers, proctors—thoroughly understand its importance and the tasks for which they are responsible. The best way to assure this is through training. Your goal should be to not only inform them but to garner their enthusiastic support. Everyone can be trained at once, or you can train groups at different times. For large districts, you may want to train only the School Coordinators--and have them hold training meetings with the teachers and proctors at their individual schools. The survey instructions and materials are designed to make this easy. You will receive with your survey materials copies of the instructions for all three groups. They are also available on the Tools page of the CHKS website. *Different instructions must be used depending on which type(s) of consent you are using*, so be sure you are using the correct materials. Make sure the instructions and materials are

## IV. SURVEY TRAINING, PREPARATION, AND ADMINISTRATION

distributed well in advance of the training so staff have time to review them. This will reduce the time needed for training.

### ***Workshop Availability***

In addition, you can send School Coordinators to the free survey workshops conducted each month during the school year by the CHKS Regional Centers. These workshops focus on survey content, requirements, and methods, and can help staff understand the actual mechanics of survey administration. CHKS staff can conduct district-, county-, or regional-level workshops onsite for a fee. For further information, call the CHKS Helpline.

### **School Coordinators**

Ideally, training for School Coordinators should occur prior to the beginning of the consent process. This should be a general training touching upon all aspects of the survey, but focusing on the responsibilities detailed in the *School Instructions*.

Topics should include:

- an overview of the district's comprehensive school health education program;
- the purpose, value, and requirements of the CHKS;
- a description of the parent consent process, highlighting special concerns for the type of consent you are using (such as high consent rates for active and the withdrawal process for passive);
- the importance of maintaining standard survey administration procedures;
- ways to motivate and monitor teachers;
- confidentiality and privacy issues;
- the survey administration schedule; and
- their role in documenting school, class, and student participation, including how to fill out the transmittal form (see Task 28).

The most important topics, arguably, are the value of the CHKS, the importance of the parent consent process, and the need for School Coordinators to motivate and monitor teachers.

### **Teachers**

The teacher training should cover the same areas as that for School Coordinators, although not necessarily with the same focus. What is most important is motivating them to support the survey and

communicate this enthusiasm to the students. Go over the *Teacher Instructions* with them, emphasizing the important role that teachers play in the consent process and in providing correct information on the Transmittal Envelopes (see Task 28). For tips on motivating school staff, see Task 17. If teaching staff will also be proctoring the survey, go over the proctor information as well.

### Proctors

For proctors, the mechanics of the survey administration day are most important, as itemized in the *Proctor Instructions*. It is most important that proctors uniformly follow the outlined procedures. If proctors are not fully informed and prepared, students may not take the survey seriously, may incorrectly fill out the answer forms, or may not be able to complete the survey within the period. Review the following topics:

- room setup;
- confidentiality and privacy issues, including what to do with the Assurance of Confidentiality Agreement;
- where students can go if they have questions or concerns arising from survey participation (Task 25);
- the survey administration schedule;
- how to present and administer the questionnaire to students, including reading the Introductory Script; and
- how to correctly document student participation on the transmittal form.

#### TASK 24. ⇨ COLLECT SIGNED CONFIDENTIALITY ASSURANCES

All staff involved in administering the survey must sign the CHKS Assurance of Confidentiality, included in the *Proctor Instructions*. You can do this on the day of the survey, or ask staff to fill them out during the training sessions. This communicates that the commitment to confidentiality is a serious one and reinforces the survey administrator's obligation to protect student privacy. These assurances can be made available for parents to view along with the survey instrument (see Task 19).

#### TASK 25. ⇨ PREPARE TO ANSWER STUDENT CONCERNS

Make arrangements at the district or school level for someone, such as a counselor or health/prevention specialist, to be available to students who have questions or concerns as a result of their participation in the survey. Be sure your staff know who this person is, and know where

to send the students. This is one of the necessary procedures to reduce any potential risks to students from taking the survey, as stated in the consent form.

TASK 26. ⇨  
CONFIRM CONSENT  
AND SURVEY  
ARRANGEMENTS

About **three weeks prior** to the scheduled survey administration, start checking with each School Coordinator and:

- *For active consent*, make sure forms have been sent to parents or guardians and reemphasize the importance of a high return rate;
- *For passive consent*, make sure withdrawals are being carefully tracked;
- Confirm the time and place of the survey administration;
- Confirm the classes to be surveyed and the number of surveys needed;
- Make sure Spanish surveys, other translations, or a bilingual aide are available, if needed; and
- Review the procedures that will occur during administration.

Follow-up with a printed reminder to all School Coordinators and teachers.

**One week before the survey**, contact each School Coordinator and ensure that:

- *For active consent*, enough parent consent forms have been received to assure that each school and grade will reach the 70% return rate (either consenting or not consenting). If not, contact the CHKS center immediately to discuss delaying the survey.
- *For passive consent*, lists of non-participants are being prepared for the teachers.

**Two or three days before the survey**, review with the School Coordinator and, if possible, the proctors themselves, the procedures for the survey day at the school, including room setup, and arrangements for students who do not have consent and are not taking the survey. Make sure each School Coordinator has contacted the proctors and distributed the needed survey materials to each classroom. These include:

- surveys and answer forms for each student;
- *for passive consent*, a list of students whose parents denied participation;
- *Teacher Instructions*;

***If you don't think you'll reach your target sample, consider postponing the survey. Call your CHKS center!***

- *Proctor Instructions*, including the Assurance of Confidentiality and Introductory Script;
- Transmittal Envelope for each class the proctor will survey; and
- #2 pencils with erasers.

Emphasize that they should contact you immediately on the day of the survey if any problems materialize.

**One day before the survey**, recontact each School Coordinator to see if they need any help and remind them to: (a) contact you if any problems materialize on the day of the survey; and (b) make sure that the Transmittal Envelopes are filled out correctly.

TASK 27. ⇨  
CONDUCT SURVEY AND  
MAKE-UPS

Specific tasks for conducting the survey are contained in the *Proctor Instructions*. At the end of the survey day, contact the School Coordinators and determine if a make-up survey day should be held. If the number of students who completed the survey is substantially low (or – in the case of active consent - below the number who received permission to take it), a make-up survey may make the difference between whether or not you have valid results. Make-ups may be especially important for small districts, because of the greater impact on data representativeness and confidentiality when they lose any proportion of their sample.

*Makeup dates may be especially needed in small districts*

Instructions for conducting make-ups are in the *School Instructions*. If you are conducting a make-up survey, a good strategy is to pull-out the missed students from each classroom and survey them all at one time in the library, cafeteria, or other convenient location. As with the typical classroom, have students place their answer sheets in a separate transmittal envelope marked Make-Ups. (If you are out of envelopes, simply copy the front of another transmittal envelope to the front of a regular envelope.) Return them with the rest of the answer forms.

TASK 28. ⇨  
PREPARE TRANSMITTAL  
ENVELOPES

At the end of the survey, each proctor will place all completed answer forms for each classroom in its Transmittal Envelope. Each teacher must make sure all the information needed on the Transmittal Envelope has been filled out and given to the School Coordinator, along with any unused answer forms. *Consent forms should be kept at the school.*



#### IV. SURVEY TRAINING, PREPARATION, AND ADMINISTRATION

The School Coordinator should:

- Verify that all the transmittal information has been provided and contact the teachers for any missing information.
- Send the envelopes, a sample survey, and a copy of the consent letter that was used to the District Coordinator.

The District Coordinator should:

- confirm that all information on the Transmittal Envelopes has been provided;
- confirm that all of the envelopes, used & unused scantrons, and materials (such as the Assurance of Confidentiality Agreements) have been received;
- bundle everything together, along with a copy of the survey instrument and the consent forms used; and
- send them to the district's CHKS regional service center for processing.

***An LEA's results cannot be processed if the transmittal information is missing***

These steps are very important. The CHKS service center cannot process your surveys until we have received all the above information. If any of it is missing, you will be contacted to provide it, *which may result in a substantial delay in receiving your report.*

#### TASK 29. ⇨ MAIL MATERIALS TO CHKS

Check over the paperwork you received with your initial scantron order to be sure you have filled out and are returning all of the appropriate forms. Return these and all materials to your CHKS service center by a traceable method (e.g., UPS or Priority Mail) to minimize the possibility of answer sheets being lost. Please keep a copy of all written documentation until you receive notification from the CHKS center acknowledging the receipt of the survey.

As mentioned in Section I, your scantrons will be scanned by the CHKS Regional Centers, automatically inputted into the aggregate California database, and used to generate your *Key Findings* and *Technical Reports*.

#### SEE *PART II: DATA USE* OF THE CHKS GUIDEBOOK

This concludes *Part I: Administration* of the CHKS Guidebook. You will receive *Part II: Data Use and Dissemination* with your CHKS report. This useful addition will help you understand, evaluate, and disseminate your CHKS results.

A major reason for conducting the CHKS is to raise local awareness of adolescent risk behaviors and public support of your programs. Reviewing, disseminating and sharing the results are critical. This part of the guidebook was designed to assist local coordinators in: (a) understanding their results, (b) assessing their results, and (c) deriving the maximum benefit from their data. *Part II: Data Use* contains a basic road-map that can lead you from beginning to end of the “data use” process—from critically reviewing your report to ensuring that the release of your findings will have the positive results you desire.

Please call the CHKS Helpline at 888.841.7536 for more information.

# APPENDIX A. SURVEY CONTENT OUTLINE

## Module A: Core

Topic	Related Survey Items
Demographics	School, Age, Sex, Grade Ethnicity, Asian/Hispanic subgroups Number of times moved (past 12 months) School Variables <ul style="list-style-type: none"> <li>• Grade</li> <li>• Truancy</li> </ul>
Alcohol, Tobacco, and Other Drug Use	Lifetime use (Frequency) <ul style="list-style-type: none"> <li>• Cigarettes and smokeless tobacco*</li> <li>• Alcohol</li> <li>• Marijuana and seven other illegal drugs*</li> <li>• Times very drunk/sick from alcohol</li> <li>• Times high from using drugs</li> </ul> Current use <ul style="list-style-type: none"> <li>• Cigarettes and smokeless tobacco*</li> <li>• Alcohol</li> <li>• Marijuana and four other illegal drugs*</li> <li>• Binge drinking (5+ drinks within a couple of hours)</li> </ul> Use at school (Frequency past 30 days) <ul style="list-style-type: none"> <li>• Alcohol, cigarettes, and marijuana frequency past 30 days*</li> <li>• Time ever drunk/high at school</li> </ul>
ATOD Use Correlates	Perceived use harm (Frequent, regular use)* Perceived availability, social disapproval Difficulty of obtaining cigarettes, alcohol, marijuana Drinking and driving (lifetime) Offered drugs at school (past 12 months)
Violence, Harassment, Safety & Crime	Violence and victimization at school (past 12 months) <ul style="list-style-type: none"> <li>• Been injured/threatened</li> <li>• Been harassed (race/ethnicity, religion, gender, sexual orientation, disability)</li> <li>• Had property stolen or damaged</li> <li>• Damaged school property</li> <li>• Been in physical fight*</li> </ul> Social disapproval of carrying a weapon to school Perceived safety at school Gang membership Dating-related violence Feelings of sadness and loneliness
Physical Health	Foods eaten yesterday; breakfast eaten today Physical education at school (average week) Physical activities (past week) Asthma Height, weight
Reliability Question	Answered honestly

\* CDE Performance Indicator

**Module B: Resilience and Youth Development**

<b>Topic</b>	<b>Survey Items</b>
External Assets	In the School*, Community, Home, & Peer Group: <ul style="list-style-type: none"> <li>• Caring relationships</li> <li>• High expectations</li> <li>• Meaningful participation</li> </ul>
Internal Assets	AdHealth School Connectedness Scale Cooperation and communication Empathy Problem-solving and self-efficacy Self-awareness Goals and aspirations

**Module C: AOD Use and Safety**

<b>Topic</b>	<b>Survey Items</b>
Alcohol and Other Drug Use	Six-Month Use Frequency <ul style="list-style-type: none"> <li>• Alcohol and seven drug categories, plus two or more at same time</li> </ul> Lifetime Use <ul style="list-style-type: none"> <li>• Needles</li> <li>• Steroids</li> </ul> Social Influences <ul style="list-style-type: none"> <li>• Perceived use by peers (other students)</li> <li>• Perceived use by adults</li> <li>• Friends' attitudes toward use</li> <li>• How obtain alcohol</li> </ul> Use Problems & Cessation <ul style="list-style-type: none"> <li>• Problems from alcohol and/or drug use</li> <li>• How high get when using drugs</li> <li>• Drinking and driving (past 30 days)</li> <li>• Ever try quitting drinking or using marijuana (frequency)</li> <li>• Ever feel need for help (counseling/treatment)</li> </ul> Intent to smoke marijuana Prevention <ul style="list-style-type: none"> <li>• School policies</li> </ul>
Violence	Frequency, past 12 months <ul style="list-style-type: none"> <li>• Been in physical fight</li> <li>• Used weapon to threaten</li> <li>• Carried gun or other weapon, or any at school (frequency past 30 days)</li> </ul>
Safety	Ever forced to have sex Neighborhood safety School absences due to safety concerns
Suicide	Considered/planned/attempted suicide Injured from attempting suicide
Other Risks	Frequency, past 12 months <ul style="list-style-type: none"> <li>• Sold drugs (HS only)</li> <li>• Gambling</li> </ul>

\*CDE Performance Indicator

**Module D: Tobacco**

<b>Topic</b>	<b>Survey Items</b>
Use	Ever smoked regularly Cigar smoking (past 30 days) Number of cigarettes smoked per day Ever smoked to control weight Ever smoked 100 cigarettes in life
Social Influences	Perceived use by adults Perception of peer approval How cigarettes obtained
Cessation	Ever try quitting smoking (frequency) Interest in quitting smoking
Prevention	Intent to smoke cigarettes Prevention exposure (past 12 months) School lessons Special group or class Talk to adult/peer about quitting Likelihood of refusal/ever practiced refusal
Attitudes	Attitudes toward smoking

**Module E: Physical Health**

<b>Topic</b>	<b>Survey Items</b>
Weight	Weight control/loss efforts Description of own weight
Activity	Minutes exercising during PE class Participation in sports team in and out of school TV watching/video games
Health (general)	Vitamin use Doctor/dentist visits (past 12 months) Asthma symptoms
Safety	Use of seatbelts, bicycle helmets
Health Ed	AIDS/HIV education exposure

**Module F: Sexual Behavior**

<b>Topic</b>	<b>Survey Items</b>
Social Influences	Perceived peer sexual activity Talked with parents about sex, contraception, HIV infection
Attitudes	Attitudes toward intercourse Attitudes toward teen pregnancy Behavioral intent
Experiences	Ever had sexual intercourse Age of first intercourse Number of partners AOD use last intercourse Frequency of pregnancy or impregnating Ever been forced to have sex
Contraception	Condom use last intercourse Contraceptive method last intercourse

### Elementary Survey

Topic	Related Survey Items
Demographics	School, Age, Sex, Grade, Number of times moved (past year)
Alcohol, Tobacco, and Other Drug Use	Lifetime use (Ever) <ul style="list-style-type: none"> <li>• Cigarettes*, smokeless tobacco*</li> <li>• Alcohol</li> <li>• Marijuana*, inhalants*</li> <li>• AOD use at school*</li> </ul> 30-day use (past month) <ul style="list-style-type: none"> <li>• Cigarettes*</li> <li>• Alcohol*</li> </ul>
ATOD Use Correlates	Perceived harm of Cigarettes*, Marijuana*, Alcohol
Violence & Safety	Violence and victimization at school <ul style="list-style-type: none"> <li>• Been pushed or hit*</li> <li>• Pushed or hit someone (past year)</li> <li>• Been teased about body</li> <li>• Spread rumors about someone (past year)</li> <li>• Had rumors spread about you</li> </ul> Carried gun or other weapon at school (past year) Seen someone carry gun or other weapon at school (past year) Home alone Feel safe at school, outside of school Wear seat belt in car Wear helmet on bike
Physical Health	Breakfast eaten today Physical activities (per week) Asthma Body image Doing anything to lose weight TV watching/Video game playing (yesterday)
Resilience & Youth Development	External assets: Caring relationships, High expectations, Meaningful participation Internal assets: Empathy, Problem-solving, Goals and Aspirations
Reliability Question	Understand questions, Answered honestly and truthfully

\* CDE Performance Indicator

## APPENDIX B. RATIONALE FOR CONDUCTING THE CHKS

Guidebook Section I described many of the unique features of the CHKS that make it especially useful to LEAs. These include providing standard, uniform data comparable across LEAs and at the state level. This section summarizes in more detail the benefits that can be derived from conducting the CHKS. It is designed to help you in your efforts to obtain local support. These local benefits include:

- Assessing, understanding, and responding to youth health risks and their influences;
- Laying the foundation for student success;
- Complying with categorical program requirements, and obtaining new funding;
- Identifying prevention and health program goals;
- Evaluating program success in meeting goals;
- Fostering a comprehensive health program;
- Fostering parent-community awareness and collaboration; and
- Asset/resilience assessment and promotion of positive youth development.

### **A. Identify, Understand, and Respond to Health Risks**

The CHKS will help you identify and understand the health risks that local youth currently face and the factors that contribute to them. A limited number of health-risk behaviors among youth contribute directly to the leading causes of mortality, morbidity, and social problems in the United States. Without a thorough understanding of the scope and nature of these problems within their own student population—and how they change over time—LEAs will be unprepared to address them. The CHKS will help determine:

- the overall level of health-risk behaviors among local youth;
- how these behaviors are interrelated;
- the factors that influence these behaviors; and
- how groups of students may vary in their involvement, so that you can target programs to youth at greatest need.

Without such data, support for prevention and health programs is difficult to achieve and schools will struggle to make sound decisions about allocation of resources, programming, and the effectiveness of their efforts.

### **B. Promote Student Achievement and Lay the Foundation for School Reform**

The CHKS will help you lay the foundation for student success. Schools are often reluctant to conduct a health survey because it takes up instructional time. Underlying this concern is a lack of understanding of the link between health-risk behavior and poor school achievement. Reducing student health-risk behaviors—and rebuilding schools as drug-free, safe havens for healthy human development—is central

to a school's ability to promote academic success among all students. As stated in CDE's Health Framework, "Growing numbers of children are coming to school with a variety of health-related problems that make successful learning difficult or impossible."

Just as promoting healthy behavior is linked to school success, so is the assessment of academic performance linked to assessment of health-risks. The CHKS is an important component of California's new school accountability system, which requires that LEAs objectively measure pupil knowledge and skills, and that LEAs set concrete and measurable goals for making improvement. Essential to this effort is gathering credible information on the scope and nature of health-risk behaviors that impede school success and positive youth development. Recognizing this, SDFSCA is intended to create a school environment supportive of high achievement.

As such, the CHKS can be an important tool in developing **Local Education Agency Plans (LEAP)**. The Improving America's Schools Act requires that each LEA develop a multi-year Local Education Agency Plan based on student achievement and *well-being* assessment data, including SDFSCA. The LEAP must also include a method for evaluating and updating the plan.

### **C. Meet Program Requirements and Obtain Funding**

The CHKS enables LEAs to meet categorical program requirements for needs assessment data collection and use, including SDFSCA and TUPE.

*Safe and Drug-Free Schools and Communities (SDFSC)*. The CHKS is designed to help LEAs meet federal SDFSC needs assessment and reporting requirements as specified in *No Child Left Behind*. The act requires each LEA receiving SDFSCA funds to:

- establish "measurable goals and objectives for drug and violence prevention;"
- assess progress toward meeting these goals and objectives;
- publicly report such progress;
- integrate SDFSCA with health education and other programs; and
- collaborate with community programs.

CDE funded the CHKS to meet these objectives. It also identified Performance Indicators for districts to use for monitoring their progress in meeting the act's objectives. The CHKS provides data on these state-identified Performance Indicators and meets SDFSCA assessment and reporting requirements.

*Tobacco Use Prevention Education (TUPE) Program*. Any LEA receiving state TUPE funds must administer the basic, required CHKS, on a biennial basis. Grantees and new applications for state funding of competitive TUPE grants (grades 6-8 Promising grants and grades 9-12 High School grants) must also administer the Tobacco Module D to secondary students.

*Justify and Obtain Program Funding*. Increasingly public agencies and private foundations require that schools seeking program funding demonstrate their need through credible data, as demonstrated by the SDFSC and TUPE requirements. The CHKS can provide data to justify funding need, guide proposal development, and objectively demonstrate how the proposed workplan addresses student needs.



### **D. Identify Prevention and Health Program Goals**

CHKS results can give meaning and direction to the planning of local prevention and health programs. They can establish a course of action—program priorities and goals—and provide guidance for decision-making. Programs need to be developed and implemented to address the local situation. The CHKS can help you make informed choices about programs and strategies based on your own student population and identified needs. By identifying those problems that are most acute at the local level, you can target your resources where they will be most beneficial. For example, research has shown that prevention efforts are most effective when administered just before the peak period of onset of a behavior. The CHKS will enable you to determine when this occurs. As such, the survey is a companion to CDE’s guidebook for SDFSC prevention program development: *Getting Results: Developing Safe and Healthy Kids*. From the CHKS, LEAs can identify program needs; from *Getting Results*, they can determine helpful strategies to address those needs.

### **E. Evaluate Program Success in Meeting Goals**

Having used the CHKS to demonstrate funding need and guide program development, regular administration of it provides a means to monitor and evaluate progress in meeting program goals over time. Increasingly, schools are required to demonstrate that they are using data to monitor progress in achieving program goals for their funding agencies.

The CHKS is not a complete evaluation tool in itself. However, it can be a valuable component of an overall evaluation strategy, particularly with the addition of a Custom Module of questions specific to a local program. LEAs should consult their evaluators or CHKS project staff to determine their evaluation needs and how the general CHKS can assist. In some cases, especially large school districts, program evaluation needs may require a modification of the CHKS sample size or design. It also may require administration more regularly than would be required for monitoring behavior, including before and after participation in a prevention program. For these reasons, the Core module includes items assessing attitudes and behavior within the past 30 days that are sensitive to detecting short-term changes.

### **F. Foster Comprehensive Health Programs**

Research demonstrates that prevention programming is most effective when integrated into a comprehensive school-health framework. Reflecting this, IASA requires that SDFSCA funded programs and projects must be coordinated “with other federal, state, and local programs, including health programs.” This is especially true in regard to three areas:

- *Program Effectiveness and Cost*. The effectiveness of all health programs is enhanced, and their costs reduced, when common components are integrated and used to support each other.
- *Positive Framework*. Embedding prevention around positive messages about building a healthy lifestyle is more effective than any negative “say no” message.
- *Addressing Behavioral Relationships*. Many health-compromising behaviors are interrelated, such as drug use, violence, delinquency, teen pregnancy and risky sexual behavior, driving under the influence, and eating disorders.

The CHKS effectively helps in accomplishing these goals by providing data across a comprehensive range of health behaviors and influences, and by assessing both risk and resilience factors.

## **G. Encourage Parent and Community Collaboration.**

Drug use, violence, and other health-risk behaviors are the concern and responsibility of the entire community. Involving parents and the community is essential to program success.<sup>9</sup> Schools can't do it alone. Support for school programs is often undermined by a lack of local awareness, even denial, of the extent of youth risk behaviors. Many factors that support health-risk behaviors by youth are also found outside the school setting. Prevention researchers have long recognized the importance of changing the general social environment and norms in order to sustain the impact of school-based programs. The reductions in ATOD use found with school-based programs have been most promising and maintained best within a community-wide prevention effort that reinforces messages and norms established through school-based programs. Thus the SDFSCA stipulates that prevention programs “include activities to promote the involvement of parents and coordination with community groups and agencies, including the distribution of information about the needs, goals, and programs.”

The CHKS is designed to foster this collaboration and meet this SDFSCA requirement in several ways.

- *Planning.* Survey planning should involve parents and community members. This process can and should be the first step in fostering broad-based awareness and collaboration in program development.
- *Awareness.* The results will raise awareness of youth needs among parents and the general community, fostering a stronger school-parent-community relationship. The process of analyzing and disseminating the survey results provides a means to highlight existing programs and involve the community in future program planning.
- *Community Context.* While the CHKS is primarily a tool for schools, it also assesses behaviors and influences that occur in the community. This makes the results even more relevant to the needs and interests of the broader community. This also helps refute the idea that the school is the sole locus of problem behaviors.

## **H. Assess Resilience/Assets and Promote Positive Youth Development.**

A growing body of research provides evidence of external and internal factors that protect some adolescents from engagement in a variety of risk behaviors and foster positive developmental outcomes. There is also some evidence that these protective factors, alternately referred to as assets, are significant predictors of change in adolescents' risk behavior over time. The precise nature of the relationships between risk factors and protective factors, and the conditions under which protective factors moderate risk and foster resilience, are presently the topic of numerous investigations. However, given the strength of the available evidence, many youth development and risk-behavior prevention programs already employ a protective-factors approach, seeking to foster these assets and resilience strengths.

The CHKS Resilience & Youth Development Module is designed to assist the development of these programs and provide a means to assess school connectedness. Developed with the assistance of a national panel of experts, it measures 11 external assets and 6 internal assets. The external (environmental) assets include caring relationships, high expectations, and opportunities for meaningful participation in the school, home, community, and peer group. Internal assets consist of cooperation and communication, empathy, problem-solving, self-efficacy, self-awareness, and goals and aspirations. *The school and community asset scales (questions 1-23) are required.*

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<sup>9</sup> See Getting Results and CDE's 1991 guidance document, Not Schools Alone.

## APPENDIX B. RATIONALE FOR CONDUCTING THE CHKS

The module reflects the goal of the CHKS to provide data not only on the problems and risks that affect youth, but also on the positive behaviors and strengths that they, their schools, and their communities demonstrate. It is essential that we acknowledge and foster these assets.



## APPENDIX C. SURVEY PLANNING CHECKLIST

<b>Date Survey Scheduled:</b> _____					
<i><b>Before Survey</b></i>	<i><b>Due Date</b></i>	<i><b>Person Responsible</b></i>	√	<i><b>Task</b></i>	<i><b>Planning the Survey</b></i>
12 wks				1.	Contact Your CHKS Service Center
12 wks				2.	Form Advisory Committee
12 wks				3.	Obtain Superintendent and School Board Approval
12 wks				4.	Notify County Office of Education
12 wks				5.	Notify Private Schools
11 wks				6.	Determine Survey Objectives
11 wks				7.	Determine Program Evaluation Needs
11 wks				8.	Select Survey Modules and Items
10 wks				9.	Select the Sample
10 wks				10.	Obtain Support of Principals and Identify School Coordinators
9 wks				11.	Select Classrooms
8 wks				12.	Select Survey Dates
7 wks				13.	Submit Memorandum of Understanding
					<i><b>Parental Consent</b></i>
Before school				14.	Choose a Consent Option: Passive or Active
Before school				15.	Confirm School Board Consent Policy
Before school				16.	Develop Parent Consent Letters
Before school & as needed				17.	Distribute Letters to Parents
Ongoing				18.	Monitor Consent Form Returns
At least 4 wks				19.	Make the Survey Available to the Public
					<i><b>Survey Training, Preparation, and Administration</b></i>
At least 4 wks				20.	Place Scantron Order
4 wks				21.	Distribute Survey Materials with Transmittals
4 wks				22.	Select Survey Administrators (Proctors)
Ongoing				23.	Train School Coordinators, Teachers, and Proctors
Ongoing				24.	Collect Signed Confidentiality Assurances
3 wks				25.	Prepare to Answer Student Concerns
Ongoing				26.	Confirm Consent and Survey Arrangements
*				27.	Conduct Survey and Make-Ups
*				28.	Prepare Transmittal Envelopes
ASAP				29.	Mail Materials to CHKS





*Memorandum  
Of  
Understanding*

**2004-2005 School Year**

**District Name:** \_\_\_\_\_

This agreement outlines conditions to be met by the above named district and the CHKS Regional Center as they relate to the administration of the California Healthy Kids Survey (CHKS). *The answer sheets will not be sent until a signed copy (or fax) of this MOU is received.*

*District agrees to the following conditions:*

**SURVEY ADMINISTRATION**

- Survey grades 5, 7, 9 and 11 if all exist within the district, as well as all continuation, alternative, or other non-traditional school students, regardless of grade. This includes charter schools that receive SDFSC or TUPE funding through the district. Districts may stagger administration of the 5th grade and survey this grade at a different time than the middle/high schools.
- Administer the Core Module A and the school and community asset questions in the Resilience & Youth Development Module B to secondary students.
- If the district has competitive TUPE funds, administer the Tobacco Module D to secondary students.
- Use the active consent process with grades below seven, and either active or passive consent with grade seven and above (model consent forms will be provided).
- Provide one, district-level contact person.
- Use only the most recent, current version of the survey and the scantron. This is H7 & M7 for High School and Middle School, E7 for Elementary, and their bilingual counterparts. Elementary scantrons are brown, and secondary scantrons are green.
- Use of incorrect version of the survey or answer sheet will result in a substantial delay and increased cost of report production. If students use a photocopy of a scantron or answer on the questionnaire, the district is responsible for transferring the data to an appropriate CHKS scantron.
- Provide private schools that choose to receive SDFSC services from the district with the opportunity to participate in the survey.

## SAMPLING

- For larger districts, CHKS staff can develop a sampling plan. Should the district choose to sample, the CHKS sampling plan must be fully implemented. Two criteria determine the CHKS sampling plan:
  - **Number of students.** If a district has 900 or fewer regular students per grade level, all students must be surveyed, regardless of the number of schools. (Note: enrollment means number enrolled, not the number who received parent consent.) If grade-level enrollment is more than 900, the district may choose to sample. CHKS staff will randomly select classrooms across all schools to reach the target sample of 900. *However, we recommend that sampling be done only if the district has 1600 or more students per grade.* This is recommended as enrollments below 1600 tend to leave out just a few classes per school, which could lead to possible resentment on the part of teachers, inability to easily schedule a "grade wide" survey day, etc.
  - **Number of schools.** If a district has ten or fewer schools at a surveyed grade level, all schools must be surveyed. A random sample of schools can be selected for districts with more than ten schools with the grades involved AND more than 900 students per grade.
- These are **minimum** requirements; districts can always survey more students, grade levels, and schools.
- *Note: Districts that sample are not eligible for school-level reports.*

## PAYMENT

- Pay the 25 cents per student Basic Fee based on the approved sampling plan as outlined above.
- CHKS will not refund money for unused answer sheets.
- Postage and handling will be added to the total amount charged.
- Additional fees apply for scantron rush orders.
- Cost-recovery fees apply for special orders such as school-level reports, electronic reports, and raw datasets.
- Any custom service requests (such as adding questions, evaluation assistance) will be charged at \$75 per hour.
- The district must provide a purchase order or check prior to receipt of report.
- *Note: Fees above apply to on-cycle, biennial surveys. Please see [www.wested.org/hks](http://www.wested.org/hks) for off-cycle fees.*

## REPORT PREPARATION

*If the following conditions are not met, there will be a delay in data processing and report generation.*

- Provide complete information on the transmittal envelopes.
- Complete and return the Data Verification Form, without which reports cannot be generated.



**RESPONSE RATES**

In order for the CHKS data to be representative of the students in your district, minimally meet standards A through C and either standard D or E as listed below.

*Standards*

- A) 100% of all district schools participated, or 100% of all selected schools participated in an approved sampling plan.
- B) An appropriate class subject or class period was identified and used.
- C) 100% of selected classrooms participated.
- D) 70% or more parents within the selected sample returned signed permission forms (either consenting or not consenting – in the case of active consent).
- E) or – the number of completed, usable answer forms obtained was 60% or more of the selected sample, in either active or passive consent procedures.

Note: If the active consent rate is lower than 60 percent two days before the scheduled administration date, the survey should be postponed until either condition D or E can be met.

**STAFF SURVEY**

- To insure representative results, districts must conduct the **online** Staff School Climate Survey at each school participating in the district's CHKS. To facilitate planning and administration, this should be done around the same time the students are taking the CHKS.
- The survey must be anonymous and should minimally be given to all certificated staff working with grades five through twelve (not just 5, 7, 9, and 11), as well as by all staff involved in health, safety, and prevention. It may also be completed by other school staff at the district's discretion.
- Staff participation is voluntary. Staff who do not wish to participate must not be required to do so.
- There are no additional fees for the *basic* administration of the staff survey. As with the student survey, custom fees will be charged for special requests and custom work.

**OTHER MISCELLANEOUS CONDITIONS:**

- Read the Guidebook for the California Healthy Kids Survey, Part I: Administration, paying special attention to the section on active and passive consent procedures. In BOTH cases, specific tasks MUST be completed to insure that the rights of parents and pupils are protected.
- Provide current student enrollment figures (or target sample if you are sampling) for all schools by grade level, and provide accurate staff counts by school.
- Contribute district's data to the aggregated CHKS dataset for statewide analysis.
- Produce from the master copy the number of questionnaires needed.
- Provide survey proctors for each classroom.

## CHKS GUIDEBOOK: ADMINISTRATION

- Have all surveyors (teachers or proctors) sign the Assurance of Confidentiality Agreement.
- Notify the County Office of Education of intent to administer the survey.
- District should send a copy of the district-level *Key Findings* report to the County Office of Education.

*The CHKS Regional Center agrees to the following conditions:*

### **CHKS AGREES TO PROVIDE FOR THE BASIC FEE:**

- On-going technical assistance including phone consultation on module selection, sampling, and parent consent strategies.
- Master copy of elementary, middle & high school surveys (all modules).
- One CHKS Guidebook for the district coordinator and stand-alone instructions for school-level contact, classroom teacher and proctor. Additional copies can be downloaded from the website.
- Access to the CHKS Website and Listserv.
- Answer sheets and transmittal envelopes.
- Instructions and information on how to conduct the School Climate Survey.
- Scanning services.
- District-level report (Includes CHKS *Technical Report* and *Key Findings* summary, and the results of the Staff School Climate Survey).

### **UPON REQUEST, THE FOLLOWING CUSTOM SERVICES ARE AVAILABLE FOR AN ADDITIONAL FEE:**

- School-level reports, if a district has surveyed enough students at their school.
- School level breakdowns for the staff survey, if enough staff took the survey.
- Adding custom questions.
- Providing district-level training.
- Other special services.

*Assurance of Confidentiality*

CDE and CHKS will not publish district- or school-level CHKS reports, with the exception of the district-selected Performance Indicators that the district provides in their Annual Report. However, under the Public Records Act, any outside agency (for example, the media) can request district reports from CDE. Staff will recommend to the requesting party that they contact the district representative directly. CHKS staff will inform the district representative in a timely manner of any such request. The aggregated state-level results also will be available to public and research agencies for analyses under conditions of strict confidentiality. No school identification information will be included in a dataset unless a Memorandum of Understanding is signed with CDE that the results of any analyses will not be released in any way that will enable a school or district to be identified without district approval.

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*By signing this document the LEA and CHKS Regional Center staff signify that each party understands and will comply with the conditions stated above.*

LEA REPRESENTATIVE:

CHKS REGIONAL CENTER STAFF:

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Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed name

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Printed Name

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